

Submission of Surgical Specimens v1.6

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Printed By Brittany Houghton-Depietro
Technical Assistant (M07740)

Organization Bassett Medical Center Lab

Approval and Periodic Review Signatures

Type	Description	Date	Version	Performed By	Notes
Approval	Lab Director	4/6/2022	1.6	Timothy Chapman MD Clinical Laboratory Director (M11669)	
Approval	Lab Director	4/6/2022	1.6	Simha Sastry MD Clinical Laboratory Director (M06625)	
Approval	Lab Director	4/6/2022	1.6	Ghazala Nathu MD Clinical Laboratory Director (S00134)	
Approval	Lab Director	4/6/2022	1.6	John Fisk MD Clinical Laboratory Director (M08480)	
Approval	Lab Director	4/6/2022	1.6	Valerie Bush PhD Clinical Laboratory Director (M05512)	

Version History

Version	Status	Type	Date Added	Date Effective	Date Retired
1.6	Approved and Current	Initial version	3/31/2022	4/14/2022	Indefinite

SUBMISSION OF SURGICAL PATHOLOGY SPECIMENS

All specimens removed during a surgical procedure shall be sent to the Laboratory for gross and/or microscopic examination, except those listed below or those as determined by the pathologist in consultation with the clinical staff.

- A) Exceptions include the following routine specimens, which have been determined not to compromise the quality of care. Official documentation of the removal in the patient medical record is required. However, the provider may elect to send or not send any of the following specimens to Pathology for evaluation.
- 1) Specimens that do not permit productive examination: cataract, portion of rib removed in approach to the chest for non-malignant disease, orthopedic hardware, intrauterine devices without attached soft tissue, medical devices such as catheters, tubes, stents and sutures that have not contributed to the patient illness, injury or death.
 - 2) Therapeutic radioactive sources, the removal of which is guided by radiation safety monitoring requirements.
 - 3) Traumatically injured members that have been amputated and for which examination for either medical or legal reasons is deemed not necessary.
 - 4) Foreign bodies (e.g., bullets) that, for legal reasons, are given directly to law enforcement representatives in a chain of custody.
 - 5) Foreskin from the circumcision of a newborn infant.
 - 6) Fat removed by liposuction.
 - 7) Teeth, provided the anatomic name or anatomic number of each tooth, or fragment of each tooth, is recorded in the medical record.
 - 8) Placentas
Note: placentas should be submitted for examination in all patients who experience complications during pregnancy and/or childbirth.
Refer to Indications for Placental Pathology Requests (Addendum #1)
 - 9) Specimens from elective abortions (abortions performed for non-medical reasons).
 - 10) Thrombus
 - 11) Vascular graft material
 - 12) Myocardium
 - 13) Skin, scar or subcutaneous tissue, excess removed incidental to surgical approach

- 14) Small or large bowel fragments trimmed in the process of performing stapled anastomoses for benign pathology only.
- 15) Skin or other normal tissue removed during a cosmetic or reconstructive procedure that is not contiguous with a lesion and the patient does not have a history of malignancy. (i.e. blepharoplasty, cleft palate repair, abdominoplasty, rhytidectomy, syndactyly repair.)
- 16) Routine disc debris
- 17) Vas Deferens – post vasectomy semen count determines the success of the procedure

B) The following specimens must be submitted to Pathology but will be processed as a gross only unless otherwise directed by the clinician or the pathologist.

- 1) Calculi
- 2) Inorganic foreign body
- 3) Bunions and hammertoes
- 4) Nasal bone and cartilage submitted for deviated septum or sleep apnea (soft tissue will be submitted for microscopic review)

C) The lab does not offer services to dispose of specimens or weigh and dispose of specimens. All specimens received in pathology will be processed at the pathologist discretion.

References: College of American Pathologists Policy on Surgical Specimens to be submitted to pathology for examination. Appendix M; 8/99.

Indications for Placental Pathology Addendum #1

Maternal

- Severe preeclampsia
- Eclampsia
- Rh isoimmunization
- Rubella
- Insulin-dependent diabetes
- Stillbirth
- Prematurity (less than 34 weeks)
- Substance Abuse
- Chorioamnionitis
- Severe oligohydramnios
- Hx of active herpes during preg.

Fetal

- Multiple gestation
- Congenital anomalies
- Fetal distress
- Erthroblastosis fetalis
- Meconium staining
- Low Apgar score (<6 at 5 mins.)
- Suspected sepsis
- IUGR-BW <10th centile
- Neurologic signs
- Seizures
- Hypotonia

Placental

- Abruptio
- Infarcts
- Vasa previa
- Amnion nodosum
- Chorioangioma
- Masses
- True knot in cord
- Abnormal prenatal sono
- Circumvallate

PLUS- Any case with unusual or abnormal clinical circumstances, or with an abnormal appearance of the placenta or cord.

Source- The Arizona placenta project