

Anatomic Pathology Consultation, Wet Tissue

**Reporting Title:** Wet Tissue Pathology Consult

Performing Location: Rochester

#### Ordering Guidance:

For a pathology consultation on paraffin embedded tissue and slides only (ie, no wet tissue being sent to be processed), order PATHC / Pathology Consultation.

## **Shipping Instructions:**

Vitreous fluid/aqueous humor specimens: ship overnight; Attention: Ophthalmic Pathology Working Group. Call 800-533-1710 to request an Expedite on this order since vitreous fluid will have no fixative and needs to reach the laboratory as quickly as possible.

Attach the green "Attention Pathology" address label (T498) to the outside of the transport container before putting into the courier mailer.

# **Necessary Information:**

All requisition and supporting information must be submitted in English.

Each of the following items is required:

- 1. All requisitions must be labeled with:
- -Patient name, date of birth and medical record number
- -Name and phone number of the referring pathologist or ordering provider
- -Anatomic site and collection date
- 2. A preliminary or final pathology report and brief patient history are essential to achieve a consultation fully relevant to the ordering provider's needs.
- 3. Additional information by case type

Cardiac explant: Include the last pretransplantation echocardiogram with report and images as well as all other relevant clinical documents (eg, family history of cardiac events, cardiac laboratory testing results)

Iris, conjunctiva, cornea, and other small biopsies from eye: Clinical/surgical notes should be included if available.

#### **Specimen Requirements:**

Submit 1 of the following specimens:

Specimen Type: Lung biopsy

Supplies:

- -Pathology Packaging Kit (T554)
- -Formalin, 10% Buffered Neutral for Tissue (T118)
- -Michel's Transport Media for Immunofluorescent Testing on Tissue (T321)

Specimen Volume: Biopsy specimens as delineated below

Collection Instructions:

For testing to be performed, both of the following must be submitted:

a. For light microscopy:

Preferred: A portion of lung tissue in 10% neutral buffered formalin



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Acceptable: A representative hematoxylin and eosin (H and E)-stained slide

b. For immunofluorescence, a portion of the unfixed lung tissue in Michel's transport media

Specimen Type: Cardiac biopsy

Supplies:

-Pathology Packaging Kit (T554)

-Formalin, 10% Buffered Neutral for Tissue (T118)

-Gluta (Trumps) (T130)

Specimen Volume: Biopsy specimens as delineated below

Collection Instructions:

- 1. Collect 4 to 6 biopsy specimens and submit all in 10% neutral buffered formalin. If formalin biopsy specimens are not available, light microscopy slides would also be acceptable.
- 2. If electron microscopy (EM) is also requested, submit at least 1 biopsy into 2.5% to 3% buffered glutaraldehyde preservative (Trumps) along with the formalin biopsy specimens.

Additional Information: If the question is drug toxicity, storage disease, or if the patient is younger than 25 years old, send at least 1 biopsy specimen in 2.5% to 3% buffered glutaraldehyde (Trumps) in case EM is needed for diagnosis.

Specimen Type: Cardiac explant

Supplies: Pathology Packaging Kit (T554) Specimen Volume: Entire explant specimen

Collection Instructions:

- 1. Fix entire explant specimen in formalin for a minimum of 24 hours.
- 2. Following fixation, lightly wrap specimen in formalin-soaked paper towel, place in a biohazard bag with a small amount of formalin, seal, place in another biohazard bag, and seal.

Specimen Type: Enucleated eye

Supplies:

- -Pathology Packaging Kit (T554)
- -Formalin 10% Histo Prep, 45 mL (T117) Specimen Volume: Entire eye specimen

Collection Instructions:

- 1. Immediately after removal, place specimen in approximately 300 mL of 10% neutral buffered formalin and fix for 48 hours.
- 2. Enucleated eye should not be opened or punctured.
- 3. After the 48-hour fixation, the specimen should be transferred from the larger, 300 mL container to a smaller container with fixative (Formalin 10% Histo Prep, 45 mL) for shipping.

Specimen Type: Iris, conjunctiva, cornea, and other small biopsies from eye

Supplies:

- -Pathology Packaging Kit (T554)
- -Formalin 10% Histo Prep, 45 mL (T117)

Specimen Volume: Entire biopsy specimen

Collection Instructions:

- 1. Place iris, conjunctiva, cornea, and other small biopsies on a paper mount (a piece of filter paper or other porous paper). This helps to keep the specimen from curling when it is fixed.
- 2. Immediately, gently place paper-mounted specimen into 10% formalin (Formalin 10% Histo Prep, 45 mL).
- 3. In cases where margins are important, placing sutures at the margins of resection with accompanying explanatory draft will help orientation of the specimen in the lab.

Specimen Type: Vitreous fluid/Aqueous humor

Supplies:



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-Pathology Packaging Kit (T554)

-Sarstedt Aliquot Tube, 5 mL (T914) Container/Tube: Plastic screw-top vial Specimen Volume: Entire specimen

Collection Instructions:

1. Place the liquid (vitreous or aqueous) concentrate (preferred) or washing (diluted, acceptable) into a small tube with a screw-top cap.

2. Refrigerate the specimen immediately (do not freeze).

Specimen Stability Information: Refrigerated

## **Specimen Minimum Volume:**

See Specimen Required

Specimen Type	Temperature	Time	Special Container
Varies	Ambient (preferred)		
	Frozen		
	Refrigerated		

#### **Result Codes:**

Result ID	Reporting Name	Туре	Unit	LOINC®
71043	Interpretation	Alphanumeric		60570-9
71044	Participated in the Interpretation	Alphanumeric		No LOINC Needed
71045	Report Electronically signed by	Alphanumeric		19139-5
71046	Addendum	Alphanumeric		35265-8
71047	Gross Description	Alphanumeric		22634-0
71048	Material Received	Alphanumeric		22633-2
71584	Disclaimer	Alphanumeric		62364-5
71790	Case Number	Alphanumeric		80398-1

LOINC and CPT codes are provided by the performing laboratory.

## **Supplemental Report:**

Supplemental

#### **CPT Code Information:**

88300 (if appropriate)



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88302 (if appropriate)

88304 (if appropriate)

88305 (if appropriate)

88307 (if appropriate)

88309 (if appropriate)

#### **Reflex Tests:**

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
LEV1P	Level 1 Gross only			No	No (Bill Only)
LEV2P	Level 2 Gross and microscopic			No	No (Bill Only)
LEV3P	Level 3 Gross and microscopic			No	No (Bill Only)
LEV4P	Level 4 Gross and microscopic			No	No (Bill Only)
LEV5P	Level 5 Gross and microscopic			No	No (Bill Only)
LEV6P	Level 6 Gross and microscopic			No	No (Bill Only)

## **Reference Values:**

An interpretive report will be provided.