Title Histopathology Laboratory User Guide

Doc Type	Histopathology\General Document	**Doc Number**	HIST-GD-014
Revision No	1		
Department	**Histopathology**		
Author	Weston, Grace		
Doc. Owner	Arshad, Aneela		
Active Date	07 May 2025		
Last Review	<QPulse_DocLastReviewDate>		
Review Date	07 May 2027		

Histopathology User guide

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Introduction

The Histopathology Laboratory at Queen Victoria Hospital NHS Foundation Trust plays a crucial role in analysing over 17,000 specimens annually from patients in Sussex, Surrey, and Kent. Our expert team specialises in head and neck pathology, as well as breast and skin pathology, ensuring high diagnostic quality and timely results.

Clinical relevance

Histopathology plays a vital role in diagnosing medical conditions, especially in identifying various types of cancer through biopsy samples. It involves carefully examining tissue samples under a microscope to help diagnose diseases. Our consultant Histopathologists examine stained tissue slides or digital images of these samples to make a diagnosis and guide treatment decisions. They will review the case and provide their findings in a detailed report.

Our quality values

The department holds UKAS ISO 15189:2022 accreditation and is proud to be the first histopathology laboratory in the country to achieve it. ISO 15189 is an internationally recognised standard that sets out the specific requirements for quality and competence in medical laboratories. This accreditation ensures that our laboratory meets the highest standards of care in the testing, analysis, and reporting of medical results.

Since receiving this prestigious accreditation, we have continued to uphold these rigorous quality standards, successfully passing every UKAS assessment. We have also been recognised during accreditation visits as a ‘centre of excellence’ with a ‘superior technical’ team.

The department values that underpin our quality assurance processes are essential principles that guide our laboratory's work. They ensure we provide reliable, accurate, and timely results for every patient. These values are critical in maintaining high levels of patient care and safety, helping us to deliver the very best service. Below are some of the key quality values we prioritise in our laboratory to ensure high standards of patient care and safety:

- Accuracy
- Precision
- Excellent Turnaround Times
- Reliability
- Integrity
- Competence
- Continued Professional Development
- Compliance to high quality standards
- User and patient focus
- Safety
- Turnaround times.

Laboratory location, operating times and contact information

Laboratory location

The laboratory can be found in Location 33 within the main building of Queen Victoria Hospital.

Department opening times

Laboratory operating hours: **Monday to Friday**, **9:00am** to **5:00pm**

Histopathology office operating hours: **Monday** to **Friday 8:00am** to **5.00pm**

For general queries or report enquiries please contact the Histopathology office.

- Phone: 01342 414270
- Email: Qvh.histopathology@nhs.net

Contact	Role	Telephone	Email
Aneela Arshad	Laboratory Manager	01342 306634	Aneela.arshad@nhs.net
Rachael Liebmann	Director of Service	01342 414270	rachael.liebmann@nhs.net
Suzanne Hatter	Consultant Biomedical Scientist	01342 414270	suzanne.hatter@nhs.net
Grace Weston	Quality Manager	01342 306634	grace.weston@nhs.net

Clinical advice

Consultant advice is available during normal working hours. For clinical advice on the interpretation of results, please contact the relevant Consultant Pathologist.

Histological services provided by the department

- Routine processing of tissue
- Special staining
- Immunohistochemical staining
- Frozen sections
- Provision of material for molecular tests
- Support trust R&D team with research studies

The full range of tests provided by the department can be found here:

8238 Medical Single 004

Specimen handling and collection

Specimens for histopathology are received in a variety of ways:

- By collection from our onsite theatre department
- By retrieval from our ‘drop box’ outside the laboratory
- Delivery of specimens into the lab by QVH theatre/clinic staff (essential for frozen sections).
- By collection from the McIndoe Centre
- Delivered by Courier from local GP surgeries/clinics
- Delivered by post from other hospitals/dental surgeries.

Routine specimens (where fresh tissue is not required) should be placed in 10% neutral buffered formalin in an appropriate container. Please choose a container of sufficient size for the specimen with an adequate amount of formalin, ideally at least 3x volume of the specimen, and ensure lid is securely fastened.

Suitable containers/carriers include:

Large samples: rigid, leak-proof and sealed containers used for sending large samples or samples in bulk.

Small samples: Small plastic leak-proof and sealed storage boxes (sealable 'lunch' boxes) for small numbers or single samples.

These must be appropriately labelled:

- Specimens for Histopathology
- Details of the department of origin for returning

Staff need to ensure that the carriers are:

- Not used for any other purpose
- Not overfilled.

All samples MUST be accompanied by a fully completed Request Form or ICE request. Details of information required for requests to be processed can be found in the 'Ordering of Requests and Specimen Identification' section of this guide.

Health and Safety

If in doubt about the spillage protocol contact the laboratory for advice

Standard accidental release procedure - minor spills

Absorbent material and any necessary neutraliser (referring to COSHH or individual Safety Data Sheet) are used to combat a minor incident.

Areas affected must be thoroughly cleaned once spill has been removed.

Standard accidental release procedure - other spills

Clean up spillages promptly, including contamination on the outside of the container.

Be careful when handling 'empty' containers - residues can be dangerous and should be washed out before discarding containers.

In general;

- Confine spill
- Absorb using paper roll or other absorbent material e.g. Spill Kit agent used as directed by the 'Spill Kit' instruction sheet.
- Once area is cleared, wash thoroughly with water and detergent.
- Dispose of contaminated material in double yellow bags.

Sample transport and delivery

All sample containers for transport to our laboratory must be sealed in a plastic specimen bag and the corresponding request form placed in the outside plastic pouch.

For larger samples requiring larger specimen pots, the form must be placed in the plastic bag and attached securely to the specimen pot.

Internal Sites (QVH and McIndoe Centre)

All clinics, wards/ departments and theatres are responsible for their samples until they are received and signed into the laboratory. Please bring a specimen logbook from your department for us to sign on receipt or alternatively place the specimen in the drop box outside the department and sign them into the Histopathology specimen reception log sheet. Please ensure the patient's hospital number, requesting department/theatre and name of person delivering the sample are clearly printed on the sheet.

For Health and Safety reasons all samples should be sent in suitable containers to Histopathology. It is not acceptable to send any samples 'by hand' unless the sample and form are in a suitable carrier.

In case of a spillage within the box, put the lid on and bring the container to the Histopathology department and a member of laboratory staff will deal with it.

Do not attempt to clean a large spill without appropriate equipment.

Please call the Histopathology department on x4270 with any questions or concerns.

External sites (West Kent Dermatology Clinic, Medway Maritime Hospital and Darent Valley Hospital)

Samples should be delivered to our Histopathology laboratory reception via a designated secure courier service and handed to a member of the histopathology team.

Ordering of requests and specimen identification

Essential processing requirements

All specimens sent to the laboratory for processing require:

- Completed specimen request form
- Adequately labelled specimen container
- Relevant clinical details on request form.

ICE Order Comms/patient request forms

Internal departments (including spoke sites)

QVH has a single Order Comms (ICE) system across the Trust, including some spoke sites, where clinicians must make Histopathology (and Radiology) requests electronically rather than using handwritten requests. ICE also allows for all results to be viewed and acknowledged electronically.

All Histopathology requests from departments in QVH including spoke sites must be made electronically via QVH ICE.

External departments (West Kent Dermatology Clinic, Medway Maritime Hospital, Darent Valley Hospital and McIndoe Centre)

For non QVH departments an electronic request must be accompanied by a completed request form.

To adhere to good clinical practice, it is essential to have a separate request form for each patient. The specimens and form must be correctly matched, fully labelled, and include three unique patient identifiers along with relevant clinical information.

Specimen request forms are completed and printed from ICE Order Comms system. If this is not available, then a handwritten request form is acceptable IF the following information is included:

PLEASE USE PRE-PRINTED HOSPITAL LABELS otherwise please ensure this information is present:	Hospital number (V number or other) Surname First name Date of Birth
Other ESSENTIAL Information Required:	Location (where taken/ where report to be sent) Consultant in charge Date of specimen collection Relevant clinical information (see below)Sa Specimen type / site of biopsy

	Signature, printed name and contact number of individual taking the specimen

Clinical history information

Specimens will not be reported without an adequate clinical history. To ensure specimens are handled correctly the following must be included where relevant:

1. **Type of specimen:** incisional or punch biopsy, (excision, re-excision, clearance).
2. **Cancer history**
3. **Previous surgical history**: particularly for wider excisions or re-excisions.
4. **Sub-type from prior histopathology reports:** especially for conditions like desmoplastic melanomas or squamous cell carcinoma
5. **Relevant radiological findings** (if there is no previous histopathology or if it is inconclusive).

Rejection criteria

Where the essential processing requirements have not been met the request form and specimen will be returned to the source for correction. The details of this correction will be recorded by the laboratory.

QVH (internal) samples:

- The theatre floor walker or MaxFacs/operating department practitioner lead nurse will be contacted by laboratory staff.

External sites

- The requesting clinic/clinician will be contacted via email and clarification sought.

If insufficient clinical information is provided a final report will be not be released by the reporting Histopathologist.

Specimen classification

High-risk specimens:

Samples from patients known or suspected to be infected with certain pathogens must be labelled “danger of infection”.

This can include but not limited to:

- HIV
- TB - Mycobacterium tuberculosis

These samples will be fixed for 48 hours before processing.

Urgent specimens:

The laboratory operates 'First In, First Out' processing system with samples being processed in order of being received into the laboratory. Where a result is required urgently e.g. risk of waiting time breach please contact the laboratory to discuss.

Frozen Sections

Late frozen sections up to 18:00 on weekdays can be accommodated but MUST be agreed with the laboratory prior to booking.

ALL frozen sections must be booked with the laboratory at least 48 hours in advance and the need should be determined by a Consultant Surgeon or Senior Trainee. However, any member of the clinical or admin team may book the frozen section.

Frozen sections will be accepted on a first come, first served basis, as the Histopathology Department cannot be responsible for determining clinical priority. The patient should preferably be first on the list. The specimen must be delivered immediately to Histopathology with a completed ICE request form including telephone contact details for delivery of the frozen section report. The specimen MUST be handed to a member of the laboratory staff.

Frozen sections are only suitable for invasive epithelial tumours.

Frozen Sections CANNOT be performed on known High Risk samples.

Communication of results

Turnaround times

The Histopathology Department works to the Royal College of Pathologists recommended turnaround times of 90% of specimens being processing and reported within 10 days of receipt.

Reporting of results

- The department aims to report 90% of results within 10 days of receipt of the sample. In 2024 92% of specimens were reported within 10 days.
- All reports are released onto the Laboratory Information System (LIMS) and are available to view on the ICE system.
- The requesting surgeon receives a copy of the final report either via email or as a printed copy.
- If a sample requires additional testing or is sent away to a referral laboratory an interim report is generated. The name of the referral laboratory and test conducted will be recorded on the final report.

The department does not give out verbal results.

Quality control and quality assurance

The Histopathology Department works hard to provide quality assurance for its services. To support this regular in-house quality control checks are undertaken, and the department participates in external quality assurance schemes.

All Cancer specimens, biopsies and resections, are dissected and prepared according to the Royal College of Pathologists (RCPath) guidelines and are reported in accordance with the RCPath Minimum Datasets. Data are submitted to relevant Cancer Registries.

All staining methods (morphology and histochemistry tests) are performed alongside known Internal Quality Control material confirmed as positive.

Slides are subjected to a microscopical quality control check prior to submission for reporting.

The department participates in the following national Medical and Technical External Quality Assurance Schemes:

National Dermatopathology EQA

National Breast NHSBSP Pathology EQA

Cellular Pathology Technique (CPT) modules:

- Tissue Diagnostics
- Specialist Techniques (including mega-block and frozen section)

The team regularly review and develop our key quality indicators and objectives to evaluate performance.

User feedback and complaints

We are committed to providing the best possible service which meets the needs and requirements of all our service users and patients. We welcome feedback on how to improve our service and there are several ways to raise a concern, make a complaint or send a compliment:

- Via email at: gvh.histopathology@nhs.net
- Through the QVH website: How to feed back - Queen Victoria Hospital
- Patient feedback can be made to the test-requesting clinician or the QVH Patient Advice and Liaison Service (PALS)
- Through completion of the annual User Survey sent directly to all service users.

The monitoring of user and patient feedback is overseen by the department Quality Manager and is utilised to support the continuous quality improvement of the department.

Complaints are documented and recorded and records of investigations, outcomes and resolutions are extracted and reported upon by the Quality Manager. Each episode of non-conformity is recorded within the established Trust incident reporting system (Datix).

Any complaints should in the first instance be formally addressed to the Laboratory Manager.

Data Protection and patient consent

Confidentially

Confidentiality of patient information and data is a high priority within the Histopathology laboratory at QVH. Sufficiently robust controls are in place designed to be to protect patient data and confidentiality. The department compiles with QVH Trust guidelines around the protection of personal information. All patient information is managed in accordance with the requirements of the Data Protection Act 2018, Information Governance standards and Trust policies.

Consent

All procedures carried out on a patient need the informed consent of the patient. The responsibility for obtaining informed consent for the tests(s) resides with the individual ordering the test. Provision of a request form and an associated sample to the Histopathology Department is taken as consent to testing.

Referral laboratories

The QVH Histopathology department routinely seeks expert consultant opinion on complex cases and will refer samples to other laboratories for testing or reporting.

In addition, the histopathology department regularly receives requests from external sources to review our material. These are mostly from Multi-disciplinary team meetings (MDTs) to assist with the NHS approach to collaborative patient care or occasionally if a patient's care has transferred to another hospital, our cases may be requested for review by pathologists at these hospitals.

Procedure for selecting expert opinion / referral laboratories

Given the nature of Consultant expertise, the laboratory is guided in selecting the source of external opinion or laboratory services primarily by the knowledge and experience of the resident QVH Consultant Histopathologists who personally attest to the competence of the external Consultant(s) and laboratories selected.

The Laboratory Director has stated that we infer expertise in all of external referral Consultants we use (regular use or ad hoc) from our experience of their work as below:

- Widely recognised and invited to lecture in the field
- Peer reviewed publications in the field
- Author of standards and guidelines in the field
- Personal recommendation from other Consultants with experience in the field
- Accreditation of referral laboratories to ISO 15189 2022 (or equivalent).