Review process in histopathology has become a routine, be it for multi-disciplinary meetings, clinician queries or direct patient complaints. This has become a daily business in every histopathology institution in our country as well as abroad. Various institutional guidelines and recommendations from bodies like College of American Pathologists (CAP) and Royal College of Pathologists, United Kingdom exist, but none is available in our country.

Every institution has its own mechanism for reviewing cases in the department. Some institutions with massive workload, depute managerial staff to receive the queries and send them to the signing out pathologists. The pathologist pulls out the slides, reviews the case, and issues an addendum. Copy of the addendum report and the pathologist’s communication with the patient or the clinician is also maintained. Every quarter, this record is reviewed by the departmental head, and any irregularity is noted. Medical director of the hospital also reviews this record at the time of appraisal of individual consultants. This process is acceptable to the individual consultants in that particular department and has very few limitations. In some institutions, all queries are handled by the head of pathology, which leads to unnecessary stress among pathologists.

Thus, this has become the need of the day to develop departmental review process guidelines in this era of medical litigation.

Guidelines for general queries in histopathology such as grading of tumor, number of lymph nodes, typographical error etc. need not be presented to the head of department; rather, these should be addressed to reporting pathologist via managerial route, as in the above example. If the pathologist is unable to solve the matter himself/herself then he/she can approach the designated specialty expert in the department.1,2

When a disciplinary body wishes to seek an independent second opinion on an anatomical pathology diagnosis in circumstances where the initial reporting pathologist’s professional conduct/competence is being questioned, an independent/blind review from a sister institution should be sought rather than pathologists within the department trying to resolve the issue. In complicated or challenging cases, review from international experts can be taken.

Anatomical pathology diagnoses are not always black and white, and there is frequent variation in opinion. Furthermore, it must be acknowledged that in anatomical pathology, as in every other field of human endeavor, there is a small but finite expected error rate. It also must be acknowledged that it is almost impossible to remove hindsight bias associated with the provision of a second opinion, in that the very necessity for a second opinion flags a case as worthy of special attention.3,4

All training programs in the country and abroad train the postgraduates to become safe pathologists, and become an efficient member in this era of team play. The above mentioned guidelines will help to minimize friction in the department and develop trust on one another and will bring more harmony to the department.

REFERENCES