Neuropathology Quality Assurance/Patient Safety/Risk Management Weekly Conference

5. Brief description of program

This collegial series provides a multi-disciplinary forum to discuss opportunities for improving the diagnosis and management of patients with neurologic disorders, including malignancy. Each session is run by the attending neuropathologist, fellow and/or resident on service the previous week and attended by all clinical faculty in the Division of Neuropathology, neuropathology fellows, as well as rotating medical students and residents in surgical pathology, neurosurgery, neuroradiology, and neurology. The weekly sessions consist of 5 to 7 current cases, each presented as a real-time, virtual case, using the following format:


b. Presentation of photomicrographs of diagnostic fields of intra-operative preparations and intra-operative diagnosis followed by peer discussion of key diagnostic points and a statement of agree/disagree by each faculty participant.

c. Presentation of photomicrographs of diagnostic fields of permanent slides and results of any ancillary studies (additional sections, special stains, immunohistochemistry, molecular studies) and final diagnosis (if rendered) followed by peer discussion of key diagnostic points, most appropriate clinical approaches, and pertinent literature as well as a statement of agree/disagree by each faculty participant.

Case inclusion criteria are deliberately varied and include interesting/rare cases as well as those which pose a particular diagnostic challenge, either at the time of intra-op or permanent assessment. Division members are particularly encouraged to present cases where they suspect an error may have been made (or narrowly avoided) at any point during the work-up. Cases are also presented prospectively if it is thought prudent to finalize with a consensus statement or for management purposes such as performance of additional biopsies, special studies etc. or request on the part of clinician or patient. In these instances, the glass slides are studied as a group or individually after conference. Cases may be shown once or, in case of lack of consensus or difficulty in diagnosis, more than once after additional work-up suggested by the conference. In summary, the cases chosen for this activity are particularly conducive to self-assessment as they are real life problem examples instead of classic, “text book” presentations.