Neuropathology Rotation ~ Expectations for Anatomic Pathology Residents

Be present. Any absences should be communicated to the neuropathology staff in a timely fashion.

Expectations will be assigned and assessed based on the resident's level of training and performance.

Maintain a log of cases encountered during your rotation. Include a summary of clinical and pathological case data with clinic-pathological correlation, as well as recording any questions or learning points that arose, to act as guides for further study.

Attend frozen sections. Prior to the frozen sections, residents are expected to review the daily O.R schedules each morning, anticipate which neurosurgical cases will likely require frozen sections and obtain relevant history and imaging for those cases. Observe and subsequently assist (when appropriate) the preparations of smears and frozen sections, and participate in the process of formulation of intra-operative consultative diagnoses.

Gross select neuropathology cases, so as to become familiar with general grossing principles as they relate to common neuropathological specimens (such as brain biopsies of neoplastic and non-neoplastic entities; resections of gliomas, meningiomas, metastases, peripheral nerve sheath tumours, vascular malformations)

Attend daily signout with the neuropathologist on service.

In discussion with the neuropathologist on service, take responsibility for assigned cases; this will be based on the resident's level of training and performance. Assigned tasks may include obtaining relevant history and imaging, reviewing slides prior to attending signout, presenting case at signout with a prepared description of the findings and provisional diagnosis / differential diagnosis +/- planning and ordering ancillary workups, showing cases to off-service residents and medical students, triaging cases, writing up reports (including synoptic reporting when appropriate), and obtaining intra-departmental consultations*.

(* Always check with the neuropathologist on service prior to performing this task independently)

Attend weekly Neuropathology QA rounds (Tuesday mornings 9 am)

If unknown cases provided in advance of a teaching session, preview the cases.

Attend brain cutting sessions. This can include hospital autopsy brains (at TOH and CHEO) and forensic autopsy brains. For TOH cases, the resident will be responsible for reviewing and documenting the clinical history, including brain/spine imaging as well as for preparing the materials for the brain cutting session in collaboration with the Pathology Assistant.

Attend multidisciplinary neuro-oncology rounds at TOH and CHEO, when feasible. If provided with the list of cases to be discussed, review the pathology reports for these patients ahead of time.

Attend conferences involving neuropathologists as opportunities arise. Examples could include Muscle Biopsy rounds, select Neuroscience rounds, Neuropathology rounds for Pediatric Neurology Academic Half-Day.

Present select cases encountered during your rotation at academic half-day (Black Box rounds)

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