EDUCATIONAL OBJECTIVES
At the completion of this activity, participants should be able to:

- Understand the recent standardized terminology system: The International System for Reporting Serous Fluid Cytopathology
- Recognize urinary tract cytopathology specimens that are a challenge to The Paris System
- Review cytomorphologic features of salivary gland tumors
- Understand HPV testing and quality assurance in GYN cytology
- Evaluate and assess small samples of the lung and mediastinum
- Review the new ASCCP risk-based consensus guidelines for cervical cancer
- Discuss the role of the cytopathologist in the genomics laboratory
- Understand the importance of Quality Assurance (QA) and Quality Control (QC) in a cytopathology laboratory through validation, billing and coding
- Recognize common and uncommon tumors of the kidney
- Understand the application of ROSE in the bronchoscopy suite

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Strictly applied. Challenging cases will be difficult to classify when TPS criteria are result in unusual morphologies that can be degeneration and reactive changes often best way to interpret and implement TPS. While many pathologists are familiar with The Paris System for Reporting Urinary Cytology (TPS), questions often arise regarding the Paris System for Reporting Serous Fluid Cytopathology (TIS) for Reporting Serous Fluid Cytopathology is a newly proposed terminology intended to provide consistent, understandable reporting of body fluids. Serous fluids are challenging because of the diversity of entities that may occur in fluids, especially in peritoneal fluids. This webinar addresses some of the diagnostic (such as mesothelioma) and reporting (such as ovarian borderline tumor) challenges and how to resolve them, as well as how to leverage laboratory statistics once implementing reporting to improve patient care.

The International System (TIS) for Reporting Urinary Tract Specimens that Challenge The (Paris) System may occur in fluids, especially in peritoneal fluids. This webinar addresses some of the diagnostic (such as mesothelioma) and reporting (such as ovarian borderline tumor) challenges and how to resolve them, as well as how to leverage laboratory statistics once implementing reporting to improve patient care.

While many pathologists are familiar with The Paris System for Reporting Urinary Cytology (TPS), questions often arise regarding the best way to interpret and implement TPS. Degeneration and reactive changes often result in unusual morphologies that can be difficult to classify when TPS criteria are strictly applied. Challenging cases will be presented to allow for a practical assessment and discussion of each case.

The 2020 Risk-Based Management Consensus Guidelines have several important differences from the 2012 Guidelines, while retaining many of its principles, such as the principle of equal management for equal risk. Rather than consider test results in isolation, the new guidelines use current and past results to create individualized assessments of a patient’s risk of progressing to precancer or cancer. The body of research informing these guidelines demonstrated differences in risk of pre-cancer based on prior screening history, and specific screening results. Using this research, the guidelines Working Groups developed risk assessments to allow clinicians to better triage those likely to develop pre-cancer in the next five years. The risk assessments and resulting Clinical Action Thresholds recommend which patients require expedited treatment, further workup, or surveillance, as well as those who may return safely to routine screening. The goals of the ASCCP Risk-Based Management Consensus Guidelines are to increase accuracy and reduce complexity for providers and patients. Because the new Risk-Based Management Guidelines will be electronic, updates and new technologies will be incorporated at a much faster rate than in previous iterations of guidelines.

The International System for Reporting Serous Fluid cytopathology is a five tier system that helps categorize these specimens into clinically
distinct groups requiring particular actions by the lab and by the clinicians. The diagnostic criteria and risk of malignancy for each group will be discussed based on existing evidence.

**OCTOBER 27, 2020**

**The Role of the Cytopathologist in the Frontline of Genomics Laboratory**

Fernando Schmitt, MD, PhD, FLAC
Professor of Pathology
IPATIMUP and Medical Faculty of Porto University
Porto, Portugal

The main role of the cytopathologist is to provide an accurate diagnosis and to report the baseline expression of prognostic and predictive biomarkers to guide clinicians for optimal therapeutic strategies. The incorporation of molecular techniques to refine diagnosis and specially to detect molecular alterations related to the therapy are reality in most laboratories. These alterations are important not only in the moment of the diagnosis but also in the progression of disease. Pre-analytical factors can affect the quality of these tests, and the involvement of the cytopathologist in the acquisition of the specimen is essential and related to better quality of the material analysed. This webinar will address the role of the cytopathologist in all major steps in the management of cancer patients, from the sample of the material in the FNA clinic to the final interpretation of the molecular tests in the context of the morphology in a multidisciplinary approach.

**NOVEMBER 24, 2020**

**A Cornucopia of Cytology: Analyzing Morphology, Coding and Billing**

Michele Smith, MS, SCT(ASCP)
Program Manager
University of Wisconsin–Madison
Madison, Wisconsin

A day in the life of a cytologist is often a mix of moving quickly between procedures and the microscope. As patient specimens wind through pre-analytic, analytic, and post-analytic testing phases, it is the documentation along the way that ensures proper and accurate follow-up, treatment, and payment for services rendered. This session walks through a variety of cases to see if our work is paid or denied. We will focus on our morphologic and ancillary testing skills, and how our testing phases fit within the revenue cycle. Additionally, coding changes for 2020 and 2021 will be discussed.

**DECEMBER 8, 2020**

**Immunohistochemistry in Cytology - Validation Before Frustration**

Lynnette Savoljo Pineault, MBA, SCT(ASCP)
Anatomic Pathology Operations Supervisor
Regions Hospital
St. Paul, Minnesota

Demand continues to increase for immunohistochemistry (IHC) and other ancillary studies to be performed on cytology samples. Current accreditation requirements and guidelines for validating IHC studies are focused on formalin fixed paraffin embedded (FFPE) samples collected for histology processing. It cannot be assumed that IHC stains validated on FFPE tissue will have the same performance outcome when used on samples collected and processed in a different manner. This webinar will provide an overview of IHC validation regulations and guidelines, address cytology fixation and processing variables that must be considered when using cytology samples for IHC, and how these variables may be addressed in a validation study to prevent frustrating cytology IHC results.

**FEBRUARY 23, 2021**

**Kidney: Recognizing the Common and Not So Common Entities**

Bonnie Choy, MD
Assistant Professor
Northwestern University Feinberg School of Medicine
Chicago, Illinois

This case-based webinar will explore the common and unexpected entities that are received by the cytology laboratory as kidney masses. Cytomorphologic features on fine needle aspiration smears and touch preparations, differential diagnoses, as well as diagnostic pitfalls will be emphasized to help participants formulate a reliable diagnostic approach. A review of current ancillary studies will also be discussed.

**MARCH 23, 2021**

**Optimizing Rapid On-site Evaluations in the Bronchoscopy Suite: The Basics and Beyond**

Christine N. Booth, MD
Co-Section Head, Cytopathology
Cleveland Clinic
Cleveland, Ohio

Do you find rapid on-site evaluation using modified Giemsa stains difficult? Are rapid on-site evaluations in the bronchoscopy suite a new or continuing part of your practice? This webinar will provide participants an opportunity to understand issues surrounding appropriate specimen triage, and highlight some of the pitfalls on EBUS rapid on-site evaluations. EBUS-guided FNA cases will be reviewed with audience polling during the webinar, with each case demonstrating a particular focus in regard to optimizing patient care.
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