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# **QMP-LS Histotechnology On-Site Consultation Pro Forma**

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**QUALITY MANAGEMENT PROGRAM - LABORATORY SERVICES**

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Lab. Name: \_\_\_\_\_  
 Lab. Code: \_\_\_\_\_  
 Lab. Licence No: \_\_\_\_\_

Name of person completing  
 this Pro Forma: \_\_\_\_\_

Lynn Wade, RT, B.Tech

Title: Program Manager, Safety & Quality Management

Date: Dec 4 /07

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 Consultant's Comments

Type of Laboratory (Community, Hospital, PHL, etc.): Hospital

Owner of Laboratory: Eastern Health

# 1. CLINICAL LABORATORY SERVICE

Is the laboratory part of a regional program or community laboratory network?

☒ Yes ☐ No ☐ N/A

If yes, give names and administrative address of program/network  
 (Attach separate sheet, if necessary.)

Eastern Health

300 Prince Philip Drive, St. John's NL A1B 3X6

Does the laboratory provide services for other laboratories/facilities?

Yes No N/A

If yes, give names of laboratories/facilities and services provided.  
 (Attach separate sheet, if necessary.)

The IHC lab is the only one of its kind in the province and thus provides services to all the regional health authorities.

## 1.1 General Information

Area served (sq. km)

Population served (# people)

Is area served mostly urban?

Number of general practitioners served by the laboratory

Number of specialists served by the laboratory

List these specialties: \_\_\_\_\_

provides IHC services for the Province

Yes No N/A

## 1.2 Extent of Histotechnology Services Provided

Is a range of histotechnology services (EM, immunohistochemistry, molecular testing)

provided to the full extent required to support histopathological diagnosis and

therapeutic decision making?

☒ Yes ☐ No ☐ N/A

Is a limited range of histotechnology services provided with referral to a reference laboratory for further ancillary techniques to assist in diagnostic and therapeutic decision making?

Yes No N/A

Lab. Name: \_\_\_\_\_  
 Lab. Code: \_\_\_\_\_  
 Lab. Licence No: \_\_\_\_\_

If yes, which ancillary techniques are referred out?

- a) EM to Memorial University ☒ Yes ☐ No ☐ N/A  
 b) Immunohistochemistry Some ☒ Yes ☐ No ☐ N/A  
 c) Molecular testing Some ☒ Yes ☐ No ☐ N/A

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 Consultant's Comments

What percentage of the histotechnology workload is:

- Inpatient? ~80%
- Outpatient? ~10%
- Referred in? ~10%

What are the routine hours of service? 0800-1700hr Mon-Fri

Describe your arrangements for off-hour coverage

1700-0800hr General Lab Call List plus on  
Weekends - assigned pager 0800-1600hr  
Pathologist + Technologist Assigned on-call  
 What tests are available off hours?

full menu

If immunohistochemistry (IHC) techniques are performed on-site;

Is a range of primary antibodies available to the full extent

required to assist in diagnostic and therapeutic decision making? ☒ Yes ☐ No ☐ N/A

Is a limited range of primary antibodies available with referral to a reference laboratory for further assistance in diagnostic and therapeutic decision making?

Yes No N/A

List the primary antibodies available on-site (Attach separate sheet, if necessary.)

see attached sheet

1.3 Hospital Information (for hospital laboratory only, complete Section 1.3)

St. John's only

Total number of beds 979 Occupancy rate 88%

How many beds are assigned to each of the following:

- Acute medical 167
- Acute surgical 385
- Obstetrical/gynecological 53
- Pediatric (excluding neonatal) 71
- Neonatal 30
- Chronic care 152
- Critical care 92

Lab. Name: \_\_\_\_\_  
 Lab. Code: \_\_\_\_\_  
 Lab. Licence No: \_\_\_\_\_

- Other, (please specify): \_\_\_\_\_

Does your hospital provide services to specialized care units such as:

- ICU (adult) ☒ Yes ☐ No ☐ N/A
- CCU ☒ Yes ☐ No ☐ N/A
- Oncology ☒ Yes ☐ No ☐ N/A
- Transplant ☒ Yes ☐ No ☐ N/A
- Other, (please specify): \_\_\_\_\_

Is your hospital a university-affiliated teaching hospital? ☒ Yes ☐ No ☐ N/A

Is there an emergency service? ☒ Yes ☐ No ☐ N/A

Do you provide service to outpatient clinics? ☒ Yes ☐ No ☐ N/A

If 'yes', name and describe the service:

Day Surgery  
Various Ambulatory Clinics

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 Consultant's Comments

## 2. LABORATORY WORKLOAD

Specify the average number of histology cases per month done on-site or referred in/out.

Type of case	No. per Month Performed On-site	No. per Month Referred In	No. per Month Referred Out
Surgical pathology	2,500	100	
Autopsy	20		
Other (Please specify)			

Indicate number of WMS units per year: 2,734,530 units / 427,414 exams

Does the laboratory have a protocol or referral pathway for proper utilization of reference laboratory services? ☒ Yes ☐ No ☐ N/A

Is there a referred in test log? assigned RI# in the LIS ☒ Yes ☐ No ☐ N/A

Is there a referred out test log? all are documented in LIS as well as a logbook ☒ Yes ☐ No ☐ N/A

List reference laboratories used: Dynacare, Mayo Clinic, AFIP,  
BC Cancer Agency, Calgary Health Services

Specify the average number of histology blocks per month done on-site or referred in/out.

10,000 blocks/month



Lab. Name: \_\_\_\_\_

Lab. Code: \_\_\_\_\_

Lab. Licence No: \_\_\_\_\_

Type of case	Blocks per Month Performed On-site	Blocks per Month Referred In	Blocks per month Referred Out
Surgical pathology	9,500		
Autopsy	500		
Other (Please specify)			

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Consultant's CommentsDoes the histotechnology staff perform duties other than histology testing? ☒ Yes ☐ No ☐ N/AIf yes, what other duties? Assist pathologist with frozen sections

- Retrieve biopsies from DT for kidney
- Prepare biopsies (muscle, kidney) for immunofluorescence stains
- Assist physician with fine needle aspirations
- Grossing all specimens

If immunohistochemistry is performed on-site;

Specify the average number of IHC slides per month done on-site or referred in/out.

Type of case	Slides per Month Performed On-site	Slides per Month Referred In	Slides per month Referred Out
General pathology	1200	250	
Lymphoid pathology	200		
Breast pathology (ER, PR)	32		
Breast pathology (HER2)			32
Breast pathology (FISH)			20% of Her 2
Cytopathology	60		
Autopsy	40		
Other (Please specify)			

Is the immunohistochemistry staff specifically trained in these techniques? ☒ Yes ☐ No ☐ N/ADoes the immunohistochemistry staff perform duties other than IHC testing? ☒ Yes ☐ No ☐ N/AIf yes, what other duties? as noted above.

Lab. Name: \_\_\_\_\_  
 Lab. Code: \_\_\_\_\_  
 Lab. Licence No: \_\_\_\_\_

## 2.1 LABORATORY SPACE/DESIGN

Does the histology laboratory have sufficient bench space /person? ☒ Yes /No N/A

Is the design of the histology laboratory appropriate for the safe handling of specimens and effective operation of equipment? ☒ Yes /No N/A

Comments:

- fume hoods, air purifiers in use  
 - air quality checks performed

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 Consultant's Comments

## 3. LABORATORY ORGANIZATION STRUCTURE

Is there a laboratory management committee with responsibility for Histotechnology? ☒ Yes No N/A

Are there meetings of the histotechnology staff to make recommendations regarding the service? ☒ Yes No N/A

## 4. PERSONNEL *see attached*

### 4.1 Staff List (Appendix A)

List the histology staff on Appendix A attached, including consultants (indicating qualifications, positions, number of years' experience, working hours, full-time, part-time or casual, and total FTE).

### 4.2 Laboratory Director

*Manager*  
 Director of Laboratory: *Mr. Barry Dyer*

Is the Laboratory *Manager* Director full-time? ☒ Yes No N/A

If not, how much time does the Laboratory *Manager* Director spend in the laboratory per week for histotechnology? *35* hours/week

List other laboratories to which the *Manager* Director is appointed:

*Regional Manager, includes responsibilities for laboratories in Clareville and Carleton Place*

In addition to the Laboratory Director, does the laboratory have a physician or allied health professional specializing in immunohistochemistry available as an employee or consultant? ☒ Yes No N/A

If yes, give name and qualifications:

*Dr. Ford Elms, Pathologist, FRCP*

Is there a mechanism by which the consultant's recommendations are received, reviewed and implemented as appropriate? ☒ Yes No N/A

## 5. STAFF CONTINUING EDUCATION

Are employees encouraged to participate in continuing education (CE) programs? ☒ Yes No N/A

Lab. Name: \_\_\_\_\_  
 Lab. Code: \_\_\_\_\_  
 Lab. Licence No: \_\_\_\_\_

If 'yes', list CE courses taken by your staff over the last three years in Appendix B attached.

Do you subscribe to any laboratory medicine or histotechnology journals?

☒ Yes ☐ No ☐ N/A

List, on Appendix C attached, the learning resources (journals, textbooks, etc.), available to the staff.

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 Consultant's Comments

## 6. MANUALS

### 6.1 User Manual

Is there a manual regarding specimen collection and handling instructions available in all specimen collecting areas within the institution (patient care units, operating rooms, emergency room, outpatient areas) and referring physicians' offices? ☐ Yes ☐ No ☐ N/A

Does the manual include instructions for: Nursing Manual Protocols.

• Patient and sample identification? Lab is developing a User Guide ☐ Yes ☐ No ☐ N/A

• The method of proper collection of specimens from different sites? ☐ Yes ☐ No ☐ N/A

• Instructions for proper labelling and fixation of specimens? ☐ Yes ☐ No ☐ N/A

• Procedures for safe handling and transportation of specimens (e.g., tightly sealed containers, no external spillage)? ☐ Yes ☐ No ☐ N/A

• Specimen acceptance and rejection (if sub-optimal)? ☐ Yes ☐ No ☐ N/A

### 6.2 Procedure Manual (for histotechnology)

Are all tests and procedures performed within histology documented in the manual? ☐ Yes ☐ No ☐ N/A

Is there a procedure for validating new methods, reagents and instruments? ☒ Yes ☐ No ☐ N/A

Are all procedures based on published referenced methods? ☒ Yes ☐ No ☐ N/A

If no, please comment: \_\_\_\_\_

The lab program is currently developing quality management program, reviewing P & P

## 7. LABORATORY PROCEDURES

### 7.1 Specimen Receipt Procedures

Is an appropriate specimen identification and accessioning system in use and consistently applied? ☐ Yes ☐ No ☐ N/A

Are specimens accepted only from authorized sources (i.e. persons authorised by law to collect specimens and use medical information)? ☐ Yes ☐ No ☐ N/A

### 7.2 Specimen processing

Is the tissue preparation done on site? ☐ Yes ☐ No ☐ N/A



Lab. Name: \_\_\_\_\_  
 Lab. Code: \_\_\_\_\_  
 Lab. Licence No: \_\_\_\_\_

Is there a written policy designating minimum fixation duration requirements for specimens requiring IHC testing e.g. breast tumours, lymphomas etc?

☒ Yes ☐ No ☐ N/A

Are tissue processing reagents replenished or changed on a regular basis?

☒ Yes ☐ No ☐ N/A

Are tissue processor logs detailing these steps maintained?

☒ Yes ☐ No ☐ N/A

Are daily embedding logs provided and maintained? *Worksheets*

☒ Yes ☐ No ☐ N/A

Are daily technologist cutting logs maintained? *at each cutting sta.*

☒ Yes ☐ No ☐ N/A

Are the routinely stained slides checked against the embedding log?

☒ Yes ☐ No ☐ N/A

### 7.3 Staining Methods

Is all of the staining done on site?

☒ Yes ☐ No ☐ N/A

Are all working solutions & stains properly labeled & dated?

☐ Yes ☐ No ☐ N/A

Are storage requirements & expiry dates indicated on stains & solutions?

☐ Yes ☐ No ☐ N/A

Are staining methods available at the work bench?

☒ Yes ☐ No ☐ N/A

Are staining dishes clean?

☒ Yes ☐ No ☐ N/A

Are staining solutions covered when not in use?

☒ Yes ☐ No ☐ N/A

Are stained slides satisfactorily mounted?

☒ Yes ☐ No ☐ N/A

Is the staining of good quality (good cellular and nuclear detail)?

☒ Yes ☐ No ☐ N/A

Is the stain checked regularly and results documented? *H+E control slides daily*

☒ Yes ☐ No ☐ N/A

### 8. LABORATORY EQUIPMENT AND PERFORMANCE VALIDATION

Please provide a list of equipment used in histology and immunohistochemistry

Instrument Name, Model Manufacturer	Age in Years	Yearly Preventive Maintenance (Y/N)
Benchmark XT Ventana	2	Y
OHI 1101 - Tissue Processing	10	
VIP Tissue-Tek E 300	15	

Is there documentation to indicate automated instruments were evaluated and validated prior to being placed into use?

☒ Yes ☐ No ☐ N/A

Does the laboratory have sufficient and appropriately maintained equipment (e.g. incubators, microscopes) to provide the expected level of histology and immunohistochemistry service (workload and test menu)?

☒ Yes ☐ No ☐ N/A

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 Consultant's Comments



Lab. Name: \_\_\_\_\_  
 Lab. Code: \_\_\_\_\_  
 Lab. Licence No: \_\_\_\_\_

If not, what type of equipment does your laboratory require?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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#### 9. RECORD KEEPING

Is a patient index maintained for easy retrieval of information? LIS ☒ Yes ☐ No ☐ N/A

Does the laboratory comply with the Provincial and/or National Guidelines with regard to the storage of specimens, blocks, slides and reports? ☒ Yes ☐ No ☐ N/A

Are control slides retained as long as the patient test slides? ☒ Yes ☐ No ☐ N/A

Are control slides retained in a separate file? IHC control is on patient slide ☒ Yes ☐ No ☐ N/A

Are IHC evaluation records and validation slides retained for at least 20 years? ☒ Yes ☐ No ☐ N/A

- currently lab is 10 yrs old  
- retaining records.

#### 10. QUALITY ASSURANCE

Is the Director of the laboratory responsible for assuring that a program for monitoring and evaluating patient care services is implemented in the laboratory? ☒ Yes ☐ No ☐ N/A

Are there procedures for the processing of External Quality Assessment (EQA) samples and the review of EQA reports? ☒ Yes ☐ No ☐ N/A

Does the Laboratory Director and/or designated responsible person monitor results of QC and EQA and participate in implementation and documentation of corrective actions? ☒ Yes ☐ No ☐ N/A

Is there documentation of corrective action of QC records and EQA reviews? ☒ Yes ☐ No ☐ N/A

Does the laboratory participate in EQA schemes other than QMP-LS? ☒ Yes ☐ No ☐ N/A

If yes, please list:

UK NEQAS  
CAP

#### 11. QUALITY CONTROL

Are the results of tests run by the night and weekend personnel, in the absence of on-site supervisors, reviewed using the same criteria applied during routine working hours by the Laboratory Director, Supervisor or Chief Technologist? same documentation and follow up processes. ☒ Yes ☐ No ☐ N/A

##### 10.1 Internal Quality Control

Is there a written system in operation to routinely detect clerical errors, significant analytical errors and unusual laboratory results? ☐ Yes ☐ No ☐ N/A

Are written criteria available for the acceptance and rejection of QC results? ☒ Yes ☐ No ☐ N/A

Comments: Corrective Actions procedure

Lab. Name: \_\_\_\_\_  
 Lab. Code: \_\_\_\_\_  
 Lab. Licence No: \_\_\_\_\_

## 10.2 Histotechnology Quality Control

- Are tested and approved tissue blocks maintained as control material? ☒ Yes ☐ No ☐ N/A
- Are records of appropriate histological control materials maintained? ☒ Yes ☐ No ☐ N/A
- Are appropriate procedural staining controls used for every staining run? ☒ Yes ☐ No ☐ N/A
- Are records of the results on these staining controls maintained? ☒ Yes ☐ No ☐ N/A
- Are these logs reviewed by a supervisor? ☒ Yes ☐ No ☐ N/A
- Are test and control slides reviewed by a senior technologist before being sent to the pathologist? ☒ Yes ☐ No ☐ N/A
- Are new lots of all IHC reagents tested in parallel with the existing reagents on validated control material before being put into use? ☒ Yes ☐ No ☐ N/A
- Are records of these parallel tests maintained? ☐ Yes ☐ No ☐ N/A
- Are positivity/negativity rates for ER/PR and HER2 tests maintained? ☒ Yes ☐ No ☐ N/A

## 11. ADDITIONAL INFORMATION AND COMMENTS

Please provide any additional information and/or comments in the space provided.

- There is a "Breast Group" which oversees quality & documentation for that tissue type including +ve/-ve rates.
- Positive external controls are run on each antibody slide
- Refrigerator temperature checks performed daily
- Water bath temperature checks performed daily
- Slide oven temperature checks performed daily
- Antibody technical Information Log maintained
- Ancillary Products Log maintained
- Daily Maintenance Log maintained
- IHC Equipment is under Service Contract and preventative maintenance performed annually

For QMP-LS use only  
 Consultant's Comments

Lab. Name: \_\_\_\_\_  
 Lab. Code: \_\_\_\_\_  
 Lab. Licence No: \_\_\_\_\_

Appendix A  
 QMP-LS Histotechnology On-site Consultation Pro Forma

For QMP-LS use only  
 Consultant's Comments

List laboratory staff (physicians, MLTs, and laboratory assistants) having any responsibility in histotechnology. Include name, qualifications, position, CMLTO Registration Number, number of years of histotechnology experience, total hours worked per week and if full-time, part-time and/or casual.

Ken Green, RT CSMUS, PFT-35h/wk  
 Les Simms, RT CSMUS, PFT-35h/wk  
 Beverly Rowe, RT CSMUS, PFT-35h/wk  
 Kim Voisey, RT CSMUS, PFT-35h/wk  
 Dr. Ford Elms, FRCP, PPT

\*NOTE - Currently recruiting a IHC lab Technical Director with Masters or PhD qualifications.

Clerical—Number of staff that assist in <sup>IHC</sup> histotechnology: 5  
 Number of full-time equivalent (FTE) staff working in <sup>IHC</sup> histotechnology: 4  
 Number of full-time equivalent (FTE) staff working in histotechnology: \_\_\_\_\_  
 Number of part-time equivalent (FTE) staff working in <sup>IHC</sup> histotechnology: 2  
 Number of casual equivalent (FTE) staff working in <sup>IHC</sup> histotechnology: 0

\*Please place an asterisk beside staff that rotate through other disciplines



Immunoperoxidase Stains

Antibody List

Date: \_\_\_\_\_

Surgical/Cytology #: \_\_\_\_\_ Block I.D. \_\_\_\_\_

Referring Hospital #: \_\_\_\_\_

Name: \_\_\_\_\_

Pathologist/Resident: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

**Undifferentiated Malignancy**

☐ AE1/AE3      ☐ HMB-45      ☐ Pankeratin (AE1/AE3/PCK26)      ☐ Vimentin

☐ EMA      ☐ LCA (CD45RO)      ☐ S-100

Epithelial	Mesenchymal	Lymphoid		Virus
<input type="checkbox"/> α-1AT <input type="checkbox"/> α-Fetoprot. <input type="checkbox"/> CA 125 <input type="checkbox"/> CEA Monoclonal <input type="checkbox"/> Chromogranin <input type="checkbox"/> CK 7 <input type="checkbox"/> CK 20 <input type="checkbox"/> Cytoker (CK19/BA17) <input type="checkbox"/> Cytokeratin 34βE12 <input type="checkbox"/> Est. & Prog. Rec. <input type="checkbox"/> Her2neu <input type="checkbox"/> PLAP <input type="checkbox"/> PSA	<input type="checkbox"/> Desmin <input type="checkbox"/> Factor VIII <input type="checkbox"/> Muscle Actin <input type="checkbox"/> Myogenin <input type="checkbox"/> Myoglobin <input type="checkbox"/> Smooth Muscle Actin	<input type="checkbox"/> BCL 2 <input type="checkbox"/> BCL 6 <input type="checkbox"/> BCL xL <input type="checkbox"/> C3 Comp <input type="checkbox"/> CD 1a <input type="checkbox"/> CD 3 <input type="checkbox"/> CD 4 <input type="checkbox"/> CD 5 <input type="checkbox"/> CD 8 <input type="checkbox"/> CD 10 <input type="checkbox"/> CD 15 (Leu M1) <input type="checkbox"/> CD 20 (L26) <input type="checkbox"/> CD 21 <input type="checkbox"/> CD 23	<input type="checkbox"/> CD 30 (BerH2) <input type="checkbox"/> CD 35 <input type="checkbox"/> CD 43 (MT-1) <input type="checkbox"/> CD 45 RA (MT-2) <input type="checkbox"/> CD 68 <input type="checkbox"/> CD 79a <input type="checkbox"/> Cyclin D1 <input type="checkbox"/> Kappa <input type="checkbox"/> Lambda <input type="checkbox"/> IgA <input type="checkbox"/> IgG <input type="checkbox"/> IgM <input type="checkbox"/> TdT <input type="checkbox"/> UCHL 1	<input type="checkbox"/> CMV <input type="checkbox"/> EBV <input type="checkbox"/> HBV (Core) <input type="checkbox"/> HBV-s <input type="checkbox"/> HPV <input type="checkbox"/> HSV-I <input type="checkbox"/> HSV-II <input type="checkbox"/> VZV
	Neuroendocrine			
	<input type="checkbox"/> Chromogranin <input type="checkbox"/> NSE <input type="checkbox"/> Synaptophysin			

Endocrine/Hormonal	Neural & Special Muscle	Others
<input type="checkbox"/> ACTH <input type="checkbox"/> FSH <input type="checkbox"/> GH <input type="checkbox"/> LH <input type="checkbox"/> Prolactin <input type="checkbox"/> TSH  <input type="checkbox"/> Calcitonin <input type="checkbox"/> Gastrin <input type="checkbox"/> GCDPF <input type="checkbox"/> Glucagon <input type="checkbox"/> HCG <input type="checkbox"/> Insulin <input type="checkbox"/> Somatostatin <input type="checkbox"/> Thyroglobulin <input type="checkbox"/> VIP	<input type="checkbox"/> α Synuclein <input type="checkbox"/> GFAP <input type="checkbox"/> NeuN <input type="checkbox"/> Neurofilament <input type="checkbox"/> Spectrin <input type="checkbox"/> Tau-2 <input type="checkbox"/> Ubiquitin  <input type="checkbox"/> Alpha Sacroglycan <input type="checkbox"/> Beta Sacroglycan <input type="checkbox"/> Delta Sacroglycan <input type="checkbox"/> Gamma Sacroglycan <input type="checkbox"/> B Dystroglycan <input type="checkbox"/> DYS 1 (Rod) <input type="checkbox"/> DYS 2 (c) <input type="checkbox"/> DYS 3 (N) <input type="checkbox"/> Dysferlin <input type="checkbox"/> Emerin <input type="checkbox"/> Merosin <input type="checkbox"/> Myosin Heavy Chain Fast <input type="checkbox"/> Myosin Heavy Chain Slow	<input type="checkbox"/> Alk-1 <input type="checkbox"/> B2 Microglobulin <input type="checkbox"/> B72.3 <input type="checkbox"/> Calponin <input type="checkbox"/> Calretinin <input type="checkbox"/> CD 7 <input type="checkbox"/> CD 31 <input type="checkbox"/> CD 34 <input type="checkbox"/> CD 99 (MK-2) <input type="checkbox"/> CD 117 (C kit) <input type="checkbox"/> Chromogranin <input type="checkbox"/> C-MYC <input type="checkbox"/> Factor XIIIa <input type="checkbox"/> Fascin <input type="checkbox"/> HBME-1 <input type="checkbox"/> Hepatocyte <input type="checkbox"/> Inhibin <input type="checkbox"/> Ki 67 <input type="checkbox"/> Leu 7 <input type="checkbox"/> FISH (Her2neu)  <input type="checkbox"/> Lysozyme <input type="checkbox"/> Melanin A <input type="checkbox"/> Myeloperoxidase <input type="checkbox"/> MYO D1 <input type="checkbox"/> NSE <input type="checkbox"/> P-53 <input type="checkbox"/> P-63 <input type="checkbox"/> PCNA <input type="checkbox"/> PNL-2C <input type="checkbox"/> Synaptophysin <input type="checkbox"/> Toxoplasma <input type="checkbox"/> TTF-1 <input type="checkbox"/> Ubiquitin <input type="checkbox"/> Ulex Europaeus <input type="checkbox"/> Others: _____ _____ _____ _____

**Lab Technologists Only**

Blocks Cut \_\_\_\_\_ Slides Labelled \_\_\_\_\_ Units Taken \_\_\_\_\_

Technologist/Date Completed \_\_\_\_\_



Lab. Name: Ken Green  
 Lab. Code: \_\_\_\_\_  
 Lab. Licence No: \_\_\_\_\_

## Appendix B

## QMP-LS Histotechnology On-site Consultation Pro Forma

For QMP-LS use only  
 Consultant's Comments

List the continuing education (CE) courses taken by your staff over the last three years:

Course, Workshop Teleconference, etc.	No. Staff Attending	Sponsor	Date
Training Benchmark	1	IHC Ventana	Feb -04
NSH Florida	3	Eastern Health	Sep -05
Jewish General	1	IHC Training	Jan -06
NSH Phoenix	3	IHC Eastern Health	Sep -06
Her 2 New Update	1	B. Carter APUM	Mar -06
Forensic Lecture	2	Denic Forensic	Mar -06
Forensic Lecture	2		
IHC Conference Update	3	K. Green	Mar -06
Program Update	2	Denic / Pirzada	Mar -06
Prostate Lecture	1	Afrouzian	Apr -06
Pathology Update	1	D. Cook	Apr -06
Seattle Exp	2	F. Elms	Apr -06
Alberta Exp	2	Dr. S. Pari	May -06
Cytology Update	2	B. Naghibi	May -06
Laboratory Med Update	2	T. Gulliver	Jun -06
Cytology Update	2	D. Fontaine	Jun -06
Principles of IHC	4	K. Green	Sept -07
Liver Bx Update	5	B. Carter	Nov -07

Lab. Name: Ben Howe  
Lab. Code: \_\_\_\_\_  
Lab. Licence No: \_\_\_\_\_

## Appendix B

## QMP-LS Histotechnology On-site Consultation Pro Forma

For QMP-LS use only  
Consultant's Comments

List the continuing education (CE) courses taken by your staff over the last three years:

[illegible]

Lab. Licence No:

For QMP-LS use only  
Consultant's Comments

[illegible]







Lab. Name: Pathology  
 Lab. Code: \_\_\_\_\_  
 Lab. Licence No: \_\_\_\_\_

Appendix C  
 QMP-LS Histotechnology On-site Consultation Pro Forma

For QMP-LS use only  
 Consultant's Comments

List the learning resources (textbooks, etc.) available to the staff

Authors	Editor(s)	Title	Edition	Publisher	Year
	CAP	CAP Today			
Leong, Cooper, Leong,		Manual of Diagnostic Antibodies for Immunohistology		GMM	1999
Dabbs, David		Diagnostic IHC		Churchill / Livingstone	2002
AFIP	Prophet Mills, Arrington Sobin	Laboratory Methods in Histotechnology		ARP	1992
Leeson & Leeson		Histology		Saunders	1976
Nadji, Nassari, Morales		Efficient Tumor IHC		ASCP	2006
Cell Marque	Ardi Williams Lacey	Cell Marque Reference Guide	Vol 7		2003