

Policy

Subject: **Examination of Non-Gynaecological Cytology Specimens**
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INTRODUCTION

The purpose of this statement is to provide guidelines for the reporting of non-gynaecological cytology specimens by cytology scientists.

There is considerable variation in the experience and expertise of cytology scientific staff within laboratories. Reporting of negative gynaecological cytology specimens by scientists under supervision is well established in Australasia. Reporting of some non-gynaecological cytology specimens by scientists may also be appropriate in some laboratories. The scope of reporting requires consideration of the scientist's experience, competency and qualifications. Adequate ongoing supervision, education and support by pathologists is also required. As is the case for pathologists, no cytology scientist should be working in isolation and should have access to colleagues for case discussion.

There should be formal documentation in the training record of each cytology scientist regarding their competency to report on specific types of specimens. Cytology scientists should be involved in appropriate internal and external quality assurance activities relevant to the types of specimen that they report.

The reporting of fine needle aspiration specimens is considered beyond the scope of reporting by cytology scientific staff.

The final decision regarding the scope of reporting of cytology specimens by cytology scientists is at the discretion of the Medical Head of Department who is ultimately responsible for the issue of all diagnostic cytology reports.

DEFINITIONS

Non-gynaecological specimen types

- Voided urine
- Urine collected by catheter or bladder puncture or from ileal conduits
- Bladder, ureteric and renal pelvic washings
- Sputum
- Bronchial washings/brushings by endoscopy
- Broncho-alveolar lavage
- Gastric washings
- Peritoneal washings
- Joint fluid
- Smears of nipple discharge or from skin or mucosae
- Cerebrospinal fluid

- Effusions into any serous cavity
- Fine needle aspiration of any solid, superficial or deep tissue.
- Other non-gynaecological samples.
- Samples assessed for adequacy for reporting (ROSE)

Experience and training

Cytology scientist

A relevant degree in science or applied science with a minimum of 2 years full-time experience/training in a laboratory accredited by NATA/RCPA for general cytology and holding the CT(ASC) in non-gynaecological cytology alone or both gynaecological and non-gynaecological cytology.

Senior cytology scientist

A cytology scientist with a minimum of 5 years full time experience in non-gynaecological cytology and holding a qualification which designates competence in cytology i.e. the CT(ASC) in non-gynaecological cytology alone or both gynaecological cytology and non-gynaecological cytology.

Scientist with a Fellowship in Cytology (FASC ,FAIMS or FFSC RCPA)

A cytology scientist holding the CT(ASC) with a minimum of 10 years experience and an additional minimum of 3 years study and relevant publications.

Screening outcomes

- Non diagnostic/unsatisfactory
- Negative – no “atypical”, abnormal or malignant cells.
- Abnormal – any significant abnormality including but not limited to “atypical”, suspicious or malignant cells

RECOMMENDATIONS

Cytology scientist

A report may be issued by a cytology scientist, who is appropriately trained and has demonstrated competence, under the supervision of an appropriately trained pathologist for the following types of non-gynaecological cytology specimen where the screening outcome is either negative or non-diagnostic/unsatisfactory:

- Voided urine
- Sputum

Senior cytology scientist

Senior cytology scientists, who are appropriately trained and have demonstrated competence, under the supervision of an appropriately trained pathologist, may issue a report for the following additional types of specimen where the screening outcome is either negative or non-diagnostic/unsatisfactory:

- Urine collected by catheter or bladder puncture or from ileal conduits
- Bladder, ureteric and renal pelvic washings
- Bronchial washings/brushings by endoscopy
- Broncho-alveolar lavage
- Gastric washings
- Peritoneal washings
- Joint fluid

Scientist with a Fellowship in Cytology

In addition to the above specimens, cytology scientists with a Fellowship in cytology, may issue a report on the following types of specimen where the screening outcome is either negative or non-diagnostic/unsatisfactory:

- Cerebrospinal fluid
- Effusions into any serous cavity

ROSE (Rapid on site evaluation)

Cytology scientists may attend fine needle aspiration biopsies for rapid on site evaluation of specimens for adequacy and primary triage for ancillary testing, but should not proffer a diagnosis.

It should be noted that, due to variable exposure and experience, scientists may have expertise in only a selection of these specimen types.

In all other circumstances, the specimen together with a copy of the request including the clinical notes and the opinion(s) of the cytology scientists must be submitted to an appropriately trained pathologist who will examine the case and issue a final report.