



ACCREDITATION SCHEME FOR LABORATORIES

Technical Note MED 002
Specific Criteria for Histopathology
Section

Technical Note MED 002- Histopathology, 26 November 2021
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1. **Introduction & Scope**

- 1.1 a) This document describes the specific requirements to be complied by histopathology section to be accredited.
- b) The International Standard 'ISO 15189 Medical laboratories – Particular requirements for quality and competence', other MEDICAL Series Technical Notes published by SAC-SINGLAS shall be studied in conjunction with this document.

2. **Accommodation and Environmental Conditions**

2.1 Safety

- 2.1.1 The Laboratory shall maintain the quantity of flammable and dangerous chemicals within the allowable limit, as stipulated in its SCDF license and NEA certification.
- 2.1.2 Appropriate extraction systems shall be in place to minimize the levels of noxious vapours.
- 2.1.3 The Laboratory should measure the level of formalin vapour annually, to ensure the environment is maintained within the recommended safe level.

3 **Pre-examination Procedures**

- 3.1 For specimen transportation, the laboratory should have a documented contingency protocol to handle formalin leakage.

4 **Examination Procedures**

- 4.1 If digital pathology is used, the laboratory shall have evidence of validation.

5 **Assuring Quality of Examination Procedures – Quality Control and Proficiency Testing**

- 5.1 Quality control measures must be in place and documented to ensure good technical quality of slides produced.
- 5.2 If the laboratory is performing immunohistochemical stains, it shall be enrolled in a quality assurance programme for immunohistochemistry.

5.3 Workload statistics, audit activities and work improvement activities shall be documented and monitored regularly.

6 Post-examination Procedures

6.1 The table below refers to the minimum retention period for materials and records. Laboratories are to retain records and materials for a longer period of time than specified, especially when patient care needs so warrant it.

6.2

| MATERIALS | SURGICAL PATHOLOGY | POST MORTEM | CYTOLOGY |
|---------------------------------------|----------------------------|-----------------------------|-----------------|
| Wet Tissue | 4 weeks after final report | 3 months after final report | - |
| Cytologic material e.g. sputum, fluid | - | - | 7 days |
| Paraffin blocks (include E/M blocks) | 10 years | 10 years | - |
| Slides | 10 years | 10 years | 5 years |
| IMF Slides | 7 days | 7 days | 7 days |
| Records & Reports | 15 years | 15 years | 15 years |

7 Reporting of Results

7.1 All reports must be documented in writing. This includes intraoperative consultation.

7.2 A Pathologist or a designated qualified physician must verify all reports.

7.3 The reports must be timely and relevant to the medical management of the patients.

7.4 All intra-departmental and extra-departmental consultation of cases shall be recorded. All reports shall be easily retrievable by name or identification number or accession number.