QMP–LS/OLA Recognized Internationally as an ISO 15189 Accreditation Body

Posted @ 2013-01-14T15:20:19 By Editor
Posted in [Accreditation], [OLA] | 0 Comments

The Asia Pacific Laboratory Accreditation Cooperation (APLAC) is a regional body of the International Laboratory Accreditation Cooperation (ILAC) and it fosters the harmonization of accreditation practices to ISO standards. On December 5, 2012, Quality Management Program – Laboratory Services (QMP–LS) was recognized by APLAC as a competent provider of accreditation to medical laboratories against ISO 15189, and was admitted into its mutual recognition arrangement (MRA). The MRA facilitates the acceptance of laboratory test results around the globe. QMP–LS is the 35th signatory to the APLAC MRA. Linda Crawford, Director, OLA participated in a signing ceremony at the APLAC MRA Council meeting in Sydney, Australia.

QMP–LS joins two other Canadian laboratory accreditation bodies as signatories to the APLAC MRA: Canadian Association for Laboratory Accreditation (CALA) and Standards Council of Canada (SCC). CALA is a signatory for ISO/IEC 17025 accreditation and SCC is a signatory for ISO/IEC 17025 accreditation as well as ISO 15189. As a member of the APLAC MRA, QMP–LS may automatically apply for full membership in ILAC and admittance to its MRA.

Accreditations granted by accreditation bodies that are signatories to the MRA are recognized world-wide. QMP–LS has begun to issue accreditation certificates within the MRA under its “OLA 15189Plus™” banner. “OLA 15189Plus™” accreditation requires the on-site assessment of laboratories once every two years, and an annual fee will be charged to maintain the certificate. OLA-accredited laboratories that are eligible for the “OLA 15189Plus™” certificates have previously been accredited by Standards Council of Canada (SCC) under a partnership arrangement. Ontario licensed laboratories holding SCC certificates will be issued replacement “OLA 15189Plus™” certificates. Other laboratories holding SCC certificates on the recommendation of OLA will be offered the choice of retaining their SCC certificates or replacing them with “OLA 15189Plus™” certificates.

QMP–LS has been working towards this goal since its inception in 2000, and is pleased to now offer accreditation that is recognized around the world. Signing the APLAC MRA was contingent on the results of an intensive evaluation done in accordance with documented procedures. Each APLAC MRA signatory must demonstrate compliance with the
international standard ISO/IEC 17011 and for QMP–LS that its accredited laboratories are in compliance with ISO 15189. QMP–LS will be re-evaluated in four years. QMP–LS staff found the evaluation process to be rigorous, fair and similar to OLA’s own process for laboratory assessment visits.

QMP–LS Announces its 2013–14 External Quality Assessment Program

The External Quality Assessment (EQA) division of QMP–LS has planned 107 challenge surveys and 5 dry/web-based challenges associated with red cell disorders, coagulation, bone marrow examination, morphology and transfusion medicine for Ontario participants for the year April 1, 2013 to March 31, 2014. There are 2 patterns-of-practice surveys associated with the following:

- Verification of antimicrobial susceptibility testing methods
- Trends in cytology

There will also be one questionnaire regarding the status of antimicrobial resistance in common hospital pathogens in Ontario.

Changes to the EQA Program

There will be some changes to various EQA surveys in 2013–14. Selected surveys in most disciplines will include pre- or post-analytical questions to gain an understanding of performance in these areas. The responses will be summarized as part of the committee comment, but performance will not be evaluated. The changes include the following:

Chemistry, Endocrinology and Immunology

Pilot imprecision studies will be incorporated into selected surveys this year. Other changes associated with these surveys include:

- Osmolality has been added to the CHEM survey as a pilot analyte. The ENZY CM (Cardiac Marker) survey will be discontinued. However, Troponin I and T will be added to the ENZY (routine enzymes) survey. Lactate has been added to the ENZY survey as a pilot analyte.

- For the CHEM HB survey (HbA1c), participants will now be required to report HbA1c in three formats: NGSP (decimal fraction), NGSP (%) and IFCC (mmol/mol).

- The DRUG DA (Drugs of Abuse) survey will include alcohol.

- The ENDO (Endocrinology) survey will include aldosterone, androstenedione, folate, 17 OH Progesterone and SHBG.

Pathology

There will be a second pilot assessment of in situ hybridization incorporated into the PATH HER2 survey in March 2013.
HEMATOLOGY

Pilot imprecision studies will be incorporated into selected surveys this year. Other changes associated with these surveys include:

• An educational web-based survey focused on an inherited bleeding disorder.

OTHER

In addition to these programs, QMP–LS is also distributing the following programs through the Institute for Quality Management in Healthcare (IQMH) to participants/jurisdictions not funded directly through the Ontario Ministry of Health and Long-Term Care:

• POCT HIV

CYTOLOGY AND PATHOLOGY

Please note that Flow Cytometry for PNH (Paroxysmal nocturnal hemoglobinuria) will not be offered through IQMH this year.

TESTING SCHEDULES

For participants’ convenience, the 2013–14 testing schedules are available by discipline on the QMP–LS website (http://www.qmpls.org/ExternalQualityAssessment/TestingProgram.aspx) as well as on QView™ in the General – EQA folder. These schedules indicate the actual date of the survey distribution. They are valid from April 1, 2013. Please ensure that you note all changes to the schedule as of that date. Additional changes may occur during the year. It is the participant’s responsibility to check the schedule periodically.

NEW INFORMATION ON THE QMP-LS WEBSITE

A complete listing of parameters monitored by EQA for 2013–14, EQA Testing Schedules for all disciplines and publishing schedules for EQA Reports are now online.

• Parameters Monitored
• Print-friendly PDF, Parameters Monitored
• EQA Testing Schedule (all disciplines)
• EQA Reports Publication Dates

Each discipline page contains complete information on the EQA survey challenges, staff contact information, a link to the scientific committee membership, and parameters monitored. The testing schedules for 2013–14 for each discipline are posted with shipping and due dates. A new feature has been added – EQA Report pages with a list of all the program reports with dates published. This may be used by laboratories to track receipt of all survey-related reports and Committee Comments. Testing schedules and Report Listings are now dynamically updated from the project management software used by our program consultant and consultant technologists. Integration with QView™ collections and QProject ensures that information about the program is accurate and up-to-date. Hover over red text to view comment and changes to the survey ship and due dates.
Call for QMP–LS Committee Nominations 2013

QMP–LS is seeking volunteers to sit on its External Quality Assessment (EQA) Scientific Committee(s) and Ontario Laboratory Accreditation (OLA) Advisory Panel, effective April 1, 2013. Membership on committees consists of a three-year term of office, renewable once. Committees meet an average of four times a year for half-day or full-day meetings.

- QMP–LS considers the following criteria for membership:
  - Membership will reflect geography and the laboratory community, including hospital- and community-based representation.
  - Members shall be laboratory professionals of stature who have a broad knowledge of laboratory operations, quality assurance practices and their chosen laboratory medicine discipline.

Responsibilities of EQA Scientific Committees include:

- Advising on the design and content of EQA surveys.
- Reviewing EQA survey results and evaluation of laboratory performance.
- Preparing educational committee comments for each EQA survey, including a review of the medical and scientific literature, commentary on discordant results, and recommendations for improved practice.
- Reviewing standards of practice in laboratory medicine and recommending guidelines to the OLA accreditation program.

Responsibilities of the OLA Advisory Panel include:

- Reviewing, recommending and approving accreditation policies and processes.
- Reviewing and approving accreditation requirements.
- Reviewing and approving assessment visit follow-up corrective action.
- Recommending the issue of accreditation certificates.
- Reviewing surveillance reports and determining appropriate courses of action.

Expectations of committee members are that they are able to:

- Regularly attend committee meetings and important related activities.
- Make a serious commitment to participate actively in committee work.
- Volunteer for and willingly accept assignments and complete them thoroughly and on time.
- Stay informed about committee matters and prepare well for meetings and review and comment on minutes and reports.
- Build a collegial working relationship with other committee members that contributes to consensus.
- Actively participate in the committees’ annual evaluation and planning efforts.
We are seeking the following member(s) at this time:

<table>
<thead>
<tr>
<th>Committee</th>
<th>Member</th>
<th>Expertise</th>
<th>Facility Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>OLA Advisory Panel</td>
<td>Technologist (2)</td>
<td>Any of: microbiology, pathology, cytology, genetics, cytogenetics, molecular, flow cytometry</td>
<td>Hospital or community laboratory</td>
</tr>
<tr>
<td></td>
<td>Laboratory Physician (1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chemistry Scientific Committee</td>
<td>Clinical Chemist (1)</td>
<td>Broad experience in routine Chemistry</td>
<td>Hospital or community laboratory</td>
</tr>
<tr>
<td></td>
<td>Clinical Chemist (1)</td>
<td></td>
<td>Hospital or community laboratory</td>
</tr>
<tr>
<td>Cytology Committee</td>
<td>Cytopathologist (2)</td>
<td>Broad expertise in gynecologic and non-gynecologic cytology</td>
<td>Hospital or community laboratory</td>
</tr>
<tr>
<td>Mycology Committee</td>
<td>Medical Microbiologist (1)</td>
<td>Mycology</td>
<td>Hospital, community or public health laboratory</td>
</tr>
</tbody>
</table>

Interested parties should complete the nomination form(s) by clicking on the link(s) below:

- **OLA Advisory Panel**
  [https://home.qmpls.org/qview/DataCollection/Public/PublicFormManager.aspx?proc=k34p+4DCbzs=](https://home.qmpls.org/qview/DataCollection/Public/PublicFormManager.aspx?proc=k34p+4DCbzs=)

- **Chemistry Scientific Committee**
  [https://home.qmpls.org/qview/DataCollection/Public/PublicFormManager.aspx?proc=YisECXm9aMy=](https://home.qmpls.org/qview/DataCollection/Public/PublicFormManager.aspx?proc=YisECXm9aMy=)

- **Cytology Scientific Committee**
  [https://home.qmpls.org/qview/DataCollection/Public/PublicFormManager.aspx?proc=9hBjIn7Ui4g=](https://home.qmpls.org/qview/DataCollection/Public/PublicFormManager.aspx?proc=9hBjIn7Ui4g=)

- **Mycology Scientific Committee**
  [https://home.qmpls.org/qview/DataCollection/Public/PublicFormManager.aspx?proc=jpc3J0u2qMs=](https://home.qmpls.org/qview/DataCollection/Public/PublicFormManager.aspx?proc=jpc3J0u2qMs=)

You must also forward the résumé/curriculum vitae, by February 15, 2013, to [nominations@qmpls.org](mailto:nominations@qmpls.org).

For more information, please email [nominations@qmpls.org](mailto:nominations@qmpls.org).
Eye on OLA: Review of OLA References Completed in 2012

QMP–LS/OLA conducts an annual review of each supporting reference for its accreditation requirements. In 2012, this process commenced in April. The purpose of this review is to ensure that references are up to date and that the current versions support what is required by OLA.

Updated reference lists are available on QView™, our password-protected Web portal.

- E. Supporting Reference for Requirements
  [https://home.qmls.org/qview/MainForm.aspx?dl=449500]
- F. Supporting References for Guidance Information
  [https://home.qmls.org/qview/MainForm.aspx?dl=449501]

Key changes resulting from this year’s review are:

- 10 new references added
- 23 references updated and/or revised
- 11 references deleted

This review did not result in a need to release a new sub-version of the requirements. However, in 2013 a full review of all requirements, guidance information and reference sources will take place.

Thank you to Angela Situ and Tammy Ashfield for their hard work on this review. They consulted with scientific advisors and studied countless references during the process.
QMP–LS Announces Changes to EQA Material Replacement Requests

Posted @ 2013-01-11T11:07:56 By Editor
Posted in [EQA], [EQA Surveys], [QView] | 0 Comments

The External Quality Assessment (EQA) division of QMP–LS has revised the process for participants to request replacement and retest testing material. The changes are in accordance with the QMP–LS lean initiative and were proposed to expedite customer service. Going forward, participants will complete and submit an online EQA Material Replacement Request form that will streamline the current process for both the participant and QMP–LS staff. Single samples or sets from a particular survey are usually available at no charge to participants who may wish to check aberrant results. We reserve the right to ask why repeat samples are needed and limit supply if this would compromise the service to other participants. **Beginning January 14, 2013 participants should only request EQA testing material using the online form and not by email or telephone.**

**Replacement sample.** Defined as a sample requested **during** the survey and must be requested by the participant as soon as possible. Reasons for replacement may include a reconstitution error, contamination, spillage, samples not received, sample received damaged, or insufficient material. Sample replacement will be shipped to the requesting facility the following day. Please note: Testing material (with the exception of slides) will not be shipped on a Friday.

In Ontario, the survey package is delivered to each licensed site to the attention of the Laboratory Director or Discipline Director. In other jurisdictions, it is delivered to the named contact. On receipt of testing material, participants should examine the vials/slides for leakage, breakage and temperature, etc. and inform QMP–LS if replacement material is required. If the testing material does not arrive in the laboratory within the expected time after the date of shipment, participants are able to track delivery through online information provided on their laboratory’s home page in QView™ or contact QMP–LS (416-323-9540) directly. It is the participating laboratory's responsibility to advise QMP–LS of non-receipt of testing material in sufficient time to allow replacement material to be sent.

**Retest sample.** Defined as a sample requested **following** the due date of the survey and is required for a discordant findings investigation or for further laboratory investigation. Shipping will take place once per week. Electronic requests must be submitted to QMP–LS by noon on the 1st or 2nd Tuesday following the posting of the provisional report, the survey report or the discordant findings investigation form. Retest samples will only be shipped on the 1st or 2nd Wednesday after reports are posted. Sample availability is limited and requests are processed on a first request basis. **Requesting a retest sample is not a requirement when investigating a discordant finding unless the sample has been compromised or considered suspect.**

A single EQA Material Replacement Request form is required for each survey; however, multiple samples (vials/slides) may be requested on the single form. Only on form completion can the participant submit their request.

Once QMP–LS receives the submitted form an automatic HelpDesk Case will be generated and that will be directed to the QMP–LS staff responsible for the survey. The HelpDesk Case will be reviewed to confirm testing material is available and the request is reasonable and complete. The participant will receive confirmation, either by email or telephone, indicating if the request has been approved. The scheduled shipping date will be provided at that time. Replacement material instructions, printed on white paper, will be included with the testing material. The instructions will no longer be enclosed in a labelled envelope.

To locate and open the online EQA Material Replacement form, the participant must ensure they are logged into QView™, the site name is displayed at the top of the page. If you are not logged in to the correct site, change your site by clicking on the radio button corresponding to the site requesting testing material under “Sites,” located on the top toolbar. Click on “Forms” on the left toolbar of the Home Screen to access the EQA Material Replacement form.
Under “Continuous Data Collection Forms” open the pdf file named “EQA Material Replacement Request.”

Data Collection

Complete the survey identification indicating the survey information as shown on the analysis worksheet. The first four characters define the discipline (COAG), the next four digits identify the survey number (YYMM) and the last digit(s) denotes the test(s) if applicable, e.g. COAG-1209-DD is a Coagulation D-dimer survey conducted in 2012 – September – D-dimer. The first four characters defining the discipline have been provided. Click on the appropriate radio button corresponding to the testing material requested and add the four numerical digits and the last digits denoting the test, if applicable.
Indicate the sample(s) required and the reason for the request.

2. **Samples Required (e.g., vial #2, slide #1):** DD-2
   - For Transfusion Medicine please indicate: 
     - Serum only
     - Serum & Cells
     - Cells Only

3. **Reason for request:**
   - Sample(s) not received
   - Sample(s) received damaged
   - Retest
   - Retest for Discordant Finding Investigation
   - Sample(s) misplaced, dropped, spilled
   - Error in reconstitution
   - Insufficient material
   - Other (provide details)

Enter any additional details or comments.

Ensure all contact information is accurate prior to submitting the request form.

4. **Additional Details or Comments:**

Once the form is complete, use the Submit button to conclude the online data entry process. Notification indicating the submission was successful will be provided.
Inquiries

Questions or concerns regarding the form and changes to the process for requesting replacement and retest material should be directed to:

Lesley Callaghan, Customer Relations Officer  
Email: callaghan@qmpls.org  
Telephone: 416-323-9540 ext. 241

EQA Quantitative Survey Reports – Description of the New EQA Survey Reports

As reported in the December 2012 QMP–LS News, quantitative survey reports have a new look. Changes were made to enhance review and to provide additional information. The Comprehensive and the Concise Survey reports have been combined and new statistical parameters added. Changes to the reports and details on how to use the supplementary information can be found in the document:

Description of New EQA Survey Reports
Becoming a lean organization – Identifying the seven wastes

BY ANDREA PARK AND MARITESS KOERNER

In the December issue of QMP–LS News, we highlighted the process improvements and gains from our lean project pertaining to mailing assessor letters. This project was completed last month. We are happy to report that bottlenecks (wastes) were eliminated from the current state process and now we have implemented a new streamlined process, therefore increasing efficiencies in the method in which we communicate with assessors (customers).

Our top priority at QMP–LS is the customer. By guaranteeing high quality products and services, we have committed to a process of continual improvement. Adopting lean into our corporate culture means that we are open to innovation and growth. Thus far, we have taken the lean methodologies we have learned and are applying them to the defects identified by staff members. Lean complements our well-established quality management system by encouraging change at the worker level and promoting an organizational culture where its staff members take pride and ownership of their work; developing a work force that is team work driven and motivated.

Importance of identifying process wastes

The different types of waste have to be discussed, understood and agreed upon by all project team members, before they are identified along the value stream map (read more about value stream mapping in the October issue of QMP–LS News). Delivering value is the reason for support from customer and other stakeholders, and ultimately a measure of how much they will be willing to pay. Waste, on the other hand, is all elements...that only increase cost without adding value.1

In a medical laboratory setting, it is important to remember that your laboratory and the departments within it are your internal customers, together with external customers (e.g. the public).

Seven types of wastes2

<table>
<thead>
<tr>
<th>Type of Waste</th>
<th>Definition</th>
<th>Examples in Healthcare Setting</th>
</tr>
</thead>
</table>
| Transportation| Unnecessary movement of products/material/documents from one place to another | • Moving documents/specimens/supplies from room to room  
• Moving equipment for testing to and from for treatment |
| Inventory     | Excessive stock or stock runs out when needed | • Over stocking office supplies/reagents/medication on units due to standing orders, or stock runs out due to expiry dates/back orders |
| Motion        | Unnecessary movement of people/patient/staff from one service to another | • Staff walking to printers/fax machines  
• Staff walking to get inventory that is kept far away  
• Patient services/departments far away from each other or different buildings |
| Waiting       | Idle time created when information, equipment or material is not at hand to perform task or creating downstream inactivity | • Missing information on documentation/prescriptions/lab requisitions/physician note, etc.  
• Delays – bed assignment, ER/clinic admission, test result  
• Patient backup due to equipment downtime or failure |
| Over-production| Producing more than what is required for next step | • Printing/emailing/faxing the same document multiple times  
• Duplicate charting by different staff  
• Preparation exceeding schedules for the day/shift |
<p>| Over-processing| Performing repeated (rework) or | • Ordering more diagnostic tests than the diagnosis |</p>
<table>
<thead>
<tr>
<th>Redundant work that does not add value to the customer</th>
<th>Warrants</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Re-checking or re-testing just to be sure</td>
<td>• Wrong patient demographic labels attached to incorrect specimen containers – mismatches</td>
</tr>
<tr>
<td>• Duplication of paper trails</td>
<td>• Specimen collected in incorrect containers/ tubes</td>
</tr>
<tr>
<td>• Excessive charting</td>
<td>• Incorrect billing/no billing</td>
</tr>
</tbody>
</table>

Defects (process mistakes)

Any activity that does not conform to customers’ expectations/specifications

Identifying wastes in any process requires ongoing effort and is not a trivial step. Diagnosing and eliminating wastes is not a one-time project. To ensure sustainable changes to processes a periodic review needs to be put in place to achieve continual improvement.

**QMP-LS’ lean journey**

To date, QMP-LS staff members have identified and eliminated over a total of 15 wastes throughout their completed projects, therefore improving employee work efficiency.

Continue to follow us on our journey to becoming lean and learn how we have tackled roadblocks and successes.

Your comments are welcome! Share examples on how you applied lean to improve your work processes. We would love to hear from you.

**References**


Andrea Park, is the QMP-LS Quality Manager, a Lean enthusiast and chair of the Quality Improvement Committee (QIC). She is passionate about process improvement initiatives, Quality Management Systems and Quality Tools. You can contact Andrea at park@qmpls.org.

Maritess Koerner is the Communications Coordinator at QMP-LS and a member of its Quality Improvement Committee (QIC). She holds a certificate in ISO 9001:2000 Fundamentals and Internal Auditing from the Canadian Standards Association Learning Centre, and has recently received Lean Training for Healthcare from the Henry Ford Center. You can contact Maritess at koerner@qmpls.org.
Maintain your 2013 OLA Assessor Certification

In early 2013, OLA will offer four one-day refresher workshops to certified assessors. For your convenience, these will be held around the province of Ontario (see table below). Workshops will provide a new insight into the assessment process, enable assessors to learn from other assessors and practice an approach to assessing.

Enjoy a fun-filled day with six hours of situational-based studies

<table>
<thead>
<tr>
<th>Where?</th>
<th>Dates</th>
<th>Reply Deadline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cambridge Memorial Hospital</td>
<td>Friday, January 25, 2013</td>
<td>January 4, 2013</td>
</tr>
<tr>
<td>Ottawa – Hôpital Montfort Hospital</td>
<td>Friday, February 22, 2013</td>
<td>January 21, 2013</td>
</tr>
<tr>
<td>Barrie – Royal Victoria Regional Health Care Centre</td>
<td>Friday, March 22, 2013</td>
<td>February 22, 2013</td>
</tr>
<tr>
<td>QMP-LS - Toronto</td>
<td>Thursday, March 21, 2013</td>
<td>February 21, 2013</td>
</tr>
</tbody>
</table>

Workshop runs 8:30 a.m. to 4:30 p.m.
Registration Confirmation will be sent by email to those attending.

- Lunch provided
- No tuition cost to participants

Register by sending an email to:
rotstain@qmpls.org
Subject: "OLA FTF Refresher March 2013"
Indicate your available dates.
Employment Opportunities in the Medical Laboratories

Posted @ 2013-01-11T10:36:32 By Editor
Posted in | 0 Comments

Are you looking for employment in a medical laboratory? Did you know that the QMP-LS website has a job posting service and sends email notifications whenever a new posting is listed?


Subscribe to our job posting notification service. Subscribe now

http://www.qmpls.org/ProductsServices/JobPostings.aspx

Employers

Post your employment opportunities on our site and target a highly qualified group of medical laboratory professionals who are engaged in quality improvement, external quality assessment and laboratory accreditation.

The price for each posting is $250 (plus applicable taxes). Limit of 500 words per ad. Posting will remain on the website for two months unless specified otherwise. Extend your posting for an additional two months for a fee of $100 (plus applicable taxes). Fees are in Canadian dollars. All postings are billed for a minimum period of two months (60 days).

If you would like to post information about an employment opportunity on our site, download this form.

Job Posting Form
CLMA Webinar with QMP–LS: Keeping good company — Meeting the Toughest Laboratory Accreditation Requirements

For managers, front line staff, and others participating in the laboratory QMS.

**Keeping Good Company: Meeting the Toughest Laboratory Accreditation Requirements**

Thursday, February 7, 2012 at 1300 EST

Do you struggle to meet particular medical laboratory accreditation requirements and would you like to know if you are in good company? If yes, this session is for you!

Julie Coffey, Carol Julian and Terri Molloy are OLA Staff Technologists with a combined 16 years of experience in over 200 accreditation assessment visits. They have literally "seen it all."

In this one-hour webinar, they will discuss the toughest requirements to meet, share pitfalls and suggest how to avoid them.

**CLMA Members:** $129  
**Non-members:** $159

Registration is now open at [https://www.regonline.ca/accreditation070213](https://www.regonline.ca/accreditation070213)

**Deadline to register:** Friday, February 1, 2013  
Weblink and connection details will be provided with your confirmation.

[Download the flyer.](#)
Save the Date: Practice of Cytopathology – Recent Advances

Practice of Cytopathology – Recent Advances
London Health Sciences Centre
University Hospital, 3rd Floor, Auditorium B
339 Windermere Road, London, Ontario

Saturday, April 6, 2013
8:15 a.m. – 3:30 p.m.

Meeting Description

This meeting, in an interactive educational format, will provide the audience an excellent opportunity to learn and share ideas with our faculty members and cytotechnologists. We have emphasized a patient-centered approach to practice of cytopathology incorporating current ancillary studies as they apply to cytopathology. We will discuss advances in cytology practice patterns and new developments in image guided cytopathology.

The format includes morning lectures and large group interactive afternoon workshops using a High-Definition Digital Microscope Imaging system.

Target Audience

Pathologists, Pathology Residents, Cytotechnologists and Cytotechnology Students.

Planning Committee

Dr. Aaron Haig (CME Director), Dr. Mariamma Joseph, Susan McRae and Donna Murphy. Department of Pathology, Western University and London Health Sciences Centre.

Accreditation

This program will be accredited by the Royal College of Physicians and Surgeons of Canada and the College of Medical Laboratory Technologists of Ontario.

Brochure

https://www.schulich.uwo.ca/continuingprofessionaldevelopment/cmeprograms/files/Brochures/PracticeCytopathology6April2013Brochure.pdf

Registration

On-line registration will be available in January 2013. Visit https://cpdreg.adt.its.uwo.ca/Default.aspx?functionType=displayCMEEventsSelectForm&sort=alpha

For further information contact: Susan Stewart, Department of Pathology, Western University, London, Ontario, Canada N6A 5C1. Email: susan.stewart@schulich.uwo.ca Telephone: (519) 661-2030 ext. 86388.