

PRACTICE ASSESSMENT REPORT

Pathology Peer and Practice Assessment Handbook

Physician Demographic & Practice Information

Physician Name:

Physician CPSO Number:

Type of Practice Assessed (Clinical Practice Area)

Assessment Information:

Assessor Name:

Assessment Date:

Address of Assessment

To be completed by the assessor upon completion of the assessment:

Total time to complete case review (hr):

Total time to complete SP discussion (hr):

Relevant Background Information

Provide a brief description of pertinent contextual information about the physician's practice (e.g. clinical environment, relevant training and experience, type and scope of practice, key patient population characteristics, recent and/or and planned changes to practice)

Ratings and Comments

- 1** **LITTLE TO NO IMPROVEMENT** is needed when the trend shows that most elements of quality were evident and deficiencies, if any, were minor
- 2** **MODERATE IMPROVEMENT** is needed when the trend shows some elements of quality were lacking but the likelihood of adverse patient outcomes were low.
- 3** **SIGNIFICANT IMPROVEMENT** is needed when the trend shows that many elements of quality were lacking, or when patient outcomes could be adversely affected.

Pre-Interpretive Access to Clinical Information demonstrated by ability to navigate the hospital information system to find relevant information for the case. Communication/collaboration between the pathologist, other team members, and referring physicians and access to clinical information

Rating: 1 2 3

Areas of Quality Care and Suggestions for Quality Improvement

Specific Concerns Requiring Attention and Recommendations for Practice Change:

Pre-Interpretive Effective Consultant and Team Member on the Clinical Team – Effective participation of the pathologist on the clinical team is demonstrated by timely reports and personal communication that address the clinical question completely and clearly. Regularly participation in multidisciplinary care conferences. Direct communication on issues and concerns to the clinical team when needed.

Rating: 1 2 3

Areas of Quality Care and Suggestions for Quality Improvement

Specific Concerns Requiring Attention and Recommendations for Practice Change:

Pre-Interpretive Effective Team Member, Communication/Collaboration on the Laboratory Team – Effective participation of the pathology on the laboratory team is demonstrated by adhering to departmental policies and protocols; participates in departmental meetings and processes; shares workload appropriately; directly communicates issues and concerns to the team when needed.

Rating: 1 2 3

Areas of Quality Care and Suggestions for Quality Improvement

Specific Concerns Requiring Attention and Recommendations for Practice Change:

Interpretive -Routine Processing: A high quality pathologic assessment begins with an accurate “gross description” and appropriate sampling for microscope examination of the material received in surgical pathology. The pathologist assigned to the case is responsible for the completeness of the pathology report including adequate description and sampling the surgical specimen.

Rating: **1** **2** **3**

Areas of Quality Care and Suggestions for Quality Improvement

Specific Concerns Requiring Attention and Recommendations for Practice Change:

Interpretive – Consultation – Internal (Intradepartmental) an External: Use of consultations to ensure accuracy of diagnosis or findings

Rating: **1** **2** **3**

Areas of Quality Care and Suggestions for Quality Improvement

Specific Concerns Requiring Attention and Recommendations for Practice Change:

Interpretive – Intra-Operative Consultation (Frozen Section): Pathologist provision of information to surgeons during an operation to assist intraoperative clinical decision-making and surgical management.

Rating: **1** **2** **3**

Areas of Quality Care and Suggestions for Quality Improvement

Specific Concerns Requiring Attention and Recommendations for Practice Change:

Interpretive –Critical Diagnosis: Critical values, alert values, significant pathologic findings, or critical pathologic findings in surgical pathology which require expedited notification of the most responsible physician or delegate since urgent patient management may be needed to prevent morbidity or mortality. Critical diagnosis/result reporting can impact clinical decision-making, patient safety and operational efficiency.

Rating: **1** **2** **3**

Areas of Quality Care and Suggestions for Quality Improvement

Specific Concerns Requiring Attention and Recommendations for Practice Change:

Post-Interpretive – Routine and Preliminary Reporting: Reporting uncomplicated cases or cases which require an initial preliminary report followed with an addendum report.

Rating: **1** **2** **3**

Areas of Quality Care and Suggestions for Quality Improvement

Specific Concerns Requiring Attention and Recommendations for Practice Change:

Ratings Summary	Access to Clinical Information	Effective Consultant and Team Member on Clinical Team	Effective Team Member, Communication/ Collaboration on the Laboratory Team	Routine Processing	Consultation Intra-departmental /External	Intra-operative Consultation (Frozen Section)	Critical Diagnosis	Post-Interpretive
1. Little to no improvement								
2. Moderate Improvement								
3. Significant Improvement								

SUMMATIVE COMMENTS

Provided a summary of your overall assessment of the physician's practice. Briefly **list all concerns** identified during the assessment, recommendations to deal with those concerns, as well as your perceptions regarding the physician's responsiveness to feedback and potential for self-directed improvement. Any issues or concerns not addressed by the above scoring domains can be added here.

PATHOLOGY CASE REVIEW

Case/Lab Number	Tissue Type	Presenting Problem of Case/Clinical Issue	Assessor Comments

PATHOLOGY CASE REVIEW

Case/Lab Number	Tissue Type	Presenting Problem of Case/Clinical Issue	Assessor Comments