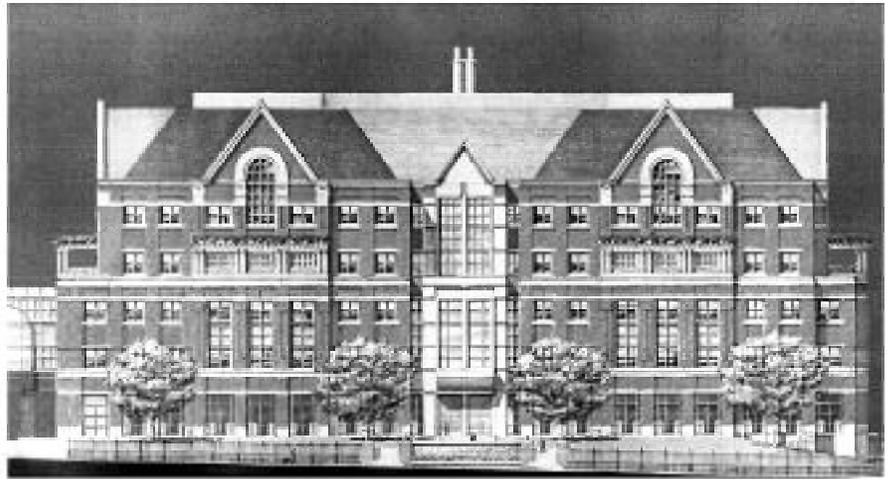




## The Harry and Jeanette Weinberg Cancer Center Opens in November, 1999

The scheduled opening of The Harry and Jeanette Weinberg Building, which will house the Comprehensive Cancer Center, is on track for November, 1999, according to Sally McConnell, VP for Facilities, JHHS. The first stages of the move-in process will commence in late July. Pathology is one of the departments that will have a major presence in the new building, and we have been actively involved in planning for those services that we will operate there.

The Weinberg Building stands on the northeast corner of Broadway and Orleans, and is connected to the main



The Comprehensive Cancer Center

*Continued on page 2*

### Division in Highlight: Autopsy Pathology

*Barbara Crain, M.D., Ph.D.*

*Director, Division of Autopsy Pathology*

The Hopkins Autopsy Service is alive and well. Our division, including a picture, was included in a recent front-page article in the Baltimore *Sun* on the general importance of the post-mortem examination. The article was inspired by an article last fall in the *Journal of the American Medical Association*, which reported that nearly half of all cases of cancer diagnosed at autopsy (excluding incidental prostate carcinomas) had been misdiagnosed or not diagnosed at all prior to death (*JAMA* 1998;280:1245). Such a statistic comes as no particular surprise to autopsy pathologists: in spite of major advances in diagnostic procedures, about 25-30% of all autopsies continue to reveal undiagnosed diseases for which treatment might have prolonged the patient's life. Nonetheless, the *JAMA* article led to numerous editorials in national publications, an appearance by former *JAMA* editor Dr. George Lundberg on *60 Minutes*, and the local *Sun* article.

Although the national autopsy rate for patients dying in hospitals is well below 10%, the Hopkins rate is much higher, at about 21%. The number of cases has increased slightly over the past 5 years, with 395 autopsies performed in 1998. However, inpatient deaths account for only about half of these cases. The rest are performed on fetuses, stillborn infants, and patients dying elsewhere. The latter "outside" autopsies include primarily patients followed by Hopkins physicians and dying at home, in a nursing home, or in hospice care. Many of these patients are enrolled in research studies, particularly studies of neurodegenerative diseases, prostate cancer, and AIDS. There are currently six federally funded protocols with autopsy components. In addition, Hopkins has a contract to do autopsies for Howard County General Hospital and also accepts outside cases at the family's request.

An autopsy begins with a chart

*Continued on page 9*

### Director's Corner



## The Added Value of our Education Programs

Fred Sanfilippo, MD, PhD

In reflecting on the tremendous achievements of our faculty and staff over the past six years, I believe nothing has been more striking, or as important to the department, as the successful growth in size, diversity, and quality of our education programs. Indeed, the creation of our new Ph.D. program in Pathobiology (see article on page 5) is the latest milestone in a series of remarkable accomplishments. The establishment of this graduate program is certainly a major step in reaching the full potential of our diverse educational mission, which spans basic research in pathobiology as well as the clinical

*Continued on page 2*

## Weinberg Cancer Center

*Continued from page 1*

hospital building by a glass-enclosed walkway and a below ground tunnel. Planning for the transportation of material and patients between sites is a major task. Pathology will be heavily reliant on the pneumatic tube that will connect us to the cancer center, as well as to many sites in the main hospital. We have been successful in getting the capacity of the planned system significantly upgraded to handle our expected volume and to provide redundancy from the blood bank and core lab to the cancer center.

The new cancer center will contain 350,000 net square feet on nine floors, three of which are underground. Its capital cost is projected to be \$125 million, which is heavily funded through several sources including the state of Maryland, private donations and the National Cancer Institute. The annual operating expense impact on JHH is expected to be over \$11 million, including depreciation.

The main occupants of the Weinberg Building will be Oncology and Surgery, and the "Activation" team has been headed by the Administrators of those two departments. Oncology clinical services will include outpatient care with 24 private exam rooms, 11 consultation rooms, and radiation oncology with the latest equipment. Surgical care will include 16 operating suites, a 20 bed intensive care unit and a same day surgical center. There will be 2 floors of inpatient surgical, hematological and medical oncology beds.

The Pathology divisions that will be either moving existing functions or setting up new ones in the Cancer Center include Surgical Pathology, the Core Lab, Flow Cytometry, and Transfusion Medicine. Our activities will be located together on Level 2, one floor below the ORs. Flow Cytometry will move completely over from Pathology 3, as will the Oncology clinical Lab now housed in the existing Oncology Center building.

A new Critical Care Lab will be established to support the ORs and the intensive care beds. It will be staffed 24 hours, 7 days per week. The decision to do this was based on the turn-around time for blood gas results required for these patients. Staffing this lab will be the Weinberg Building's most significant budgetary impact on Pathology. Funding for this has been committed by JHH at this point.

Transfusion Medicine has scaled back its on-site operation from the originally planned satellite transfusion service to only a product dispensing site. Expansion of the pneumatic tube capacity permitted this change, which will save nearly \$200,000 per year in staff costs. The estimate is that over 19,000 blood products will be transfused to Weinberg Building patients. Many of these products will be delivered overnight from Carnegie 6, but a large volume will be tubed during the day.

Surgical Pathology will move to the new building, almost in its entirety. GOR specimens will continue to be accessioned and grossed on Pathology 7, and then tubed or walked to the Weinberg Building. Frozen section services will continue to be provided to the GOR from Pathology 7 by a Pathology Assistant or Resident, with diagnoses rendered by pathologists in both locations. SP faculty in Renal Pathology, Neuropathology, and Pediatric Pathology will be located on Pathology 6 and 7.

Space planning for our areas affected by the new building has started in earnest with the appointment of several committees by Dr. Sanfilippo. Look for more information in future editions of *Path-Ways*.§

---

## Director's Corner

*Continued from page 1*

practice of diagnostic pathology. It also provides a stimulus to reflect on the challenges facing each of our undergraduate, graduate, and postgraduate education programs, and to consider other opportunities yet ahead.

The most fundamental educational activity in our department is graduate medical education in pathology, which involves both the preclinical second-year course and clinical electives. The second-year pathology course continues to receive accolades as the most popular in the medical school curriculum, and our faculty are frequent recipients of teaching awards from the students (see page 3). The course represents a concerted effort by the course director, the six lab group leaders, as well as a majority of the faculty and almost all the residents. The past few years have brought numerous enhancements to the course, including revised lecture notes, upgrades of gross and microscopic specimens, and development of computer and web-based teaching aids. This year, for the first time, second-year medical students have

been given a firsthand experience in seeing the diagnostic clinical specialty of pathology. Students have been assigned a pathology resident preceptor, and with that preceptor participate in a variety of tutorials in areas such as surgical pathology, microbiology, and transfusion medicine. Improvements and expansion of our clinical elective courses in diagnostic pathology for third-year students have also led to their increased interest and popularity since 1993 when less than 10% of the class participated, compared to almost a quarter of the class now.

The newly created Ph.D. training program in pathobiology represents the culmination of several years work and planning by many, especially the program directors. The growth in our primary pathology faculty with Ph.D. or Ph.D.-M.D. degrees from 13 to over 40 since 1993, has presented a tremendous opportunity for us to create a new Ph.D. program at Hopkins. Although more than 20 of our faculty currently participate in 10 different graduate programs at Hopkins, fewer than 10 graduate students have been in training in the department. This number will more than double within the next two years as the pathobiology program becomes fully established. Moreover, several of the novel courses created for the pathobiology curriculum will be used by graduate students in other programs. In fact, the pathobiology program is viewed by the M.A./Ph.D. committee and the Advisory Board of the School of Medicine as a model for other programs to emulate in both structure and curriculum. Creation of this program is a timely development, as there is a significant increase in demand for scientists trained in disease pathogenesis.

Perhaps the greatest changes among our education programs continue to take place in residency training under the leadership of the program directors and chief residents. Residents selecting combined training in anatomic and clinical pathology now experience a curriculum fully integrated in content and scheduling, instead of the separate and sequential one of the past. This change is timely since the anachronistic separation and artificial distinctions of AP and CP will hopefully disappear as greater emphasis is placed on the molecular characterization of disease and integrated diagnostic consultations by pathologists. Fundamental improve-

---

*Continued on page 5*

## Faculty Activities

David R. Borchelt, Ph.D., was promoted to Associate Professor effective January 1, 1999.

Daniel W. Chan, Ph.D., was promoted to Professor in Pathology, Radiology, and Urology effective January 1, 1999. He has joined the editorial board of *Clinica Chimica Acta*. Dr. Chan was invited speaker at the Tumors Markers at the Millennium Conference in Santa Barbara, California, held February 26-March 2, 1999, sponsored by M.D. Anderson Cancer Center.

Patricia Charache, M.D., has been named chair of the Microbiology Advisory Panel for the Food and Drug Administration.

Angelo M. De Marzo, M.D., Ph.D., was promoted to Assistant Professor, effective March 1, 1999.

Edward Gabrielson, M.D., served on the USARMC study section for the review of ovarian cancer program project grants in January 1999. He has also been invited to present a talk on "Gene Expression and Clinical Features of Small Cell Lung Cancer" at the International Association for the Study of Lung Cancer to be held in Aspen, Colorado, in August 1999.

John W. Griffin, M.D., Professor and Director of the Department of Neurology has received a secondary appointment as Professor in the Department of Pathology.

Ralph H. Hruban, M.D., was awarded the 1998 Excellence in Teaching Award by Hopkins medical students on February 18, 1999.

Dai (Dave) Li, Ph.D., has joined the faculty as Instructor, effective January 1, 1999. In March 1999 he will be going to Singapore to set up a research lab in Clinical Chemistry for the Johns Hopkins Singapore Initiative.

Peter R. Mouton, Ph.D., has been named to the Expert Steering Committee, the Aluminum Neurotoxicity Study for Health Canada. Dr. Mouton gave an invited lecture, "What's in a Number: Unbiased Studies of Aging and Alzheimer's Disease," at the University of South Florida Fall Lecture Series in Tampa in October 1998 and also served as course director for the department's fourth annual workshop, "Applications of Unbiased Stereology to Neural Systems," held in November 1998 outside Los Angeles.

Tibor Nadasdy, M.D., Ph.D., has accepted the position as Director of the Electron Microscopy Service, effective January 1, 1999. He has also been appointed to the Committee on Training Programs of the Renal Pathology Society.

Trish M. Perl, M.D., Assistant Professor in the Division of Infectious Disease, Department of Medicine, has received a secondary appointment as Assistant Professor in the Department of Pathology.

Donald L. Price, M.D., is co-director of the Center for Parkinson's Disease and was selected as principal convener of the international meeting "Alzheimer's Disease Washington 2000."

Lorraine Racusen, M.D., will serve as Co-Director of Research for the Johns Hopkins Comprehensive Transplant Center. She has also been appointed to the Committee on Training Programs of the Renal Pathology Society. In April 1999 she will present the invited lecture, "The pathophysiology of Acute Renal Failure," at the meeting of the Danish Society of Nephrology to be held in Arhus, Denmark. Dr. Racusen is also the co-organizer for the Fifth Banff Conference on Allograft Pathology, an international conference to be held in Banff, Alberta, Canada, in June 1999.

Ariella M. Rosengard, M.D., has accepted a full-time position in the Department of Pathology at the University of Pennsylvania, effective January 1, 1999. She will continue her affiliation with Johns Hopkins as a Visiting Assistant Professor of Pathology.

Mark A. Silberman, M.D., has accepted a position with the Clinical Pathology Laboratories, Inc., in Austin, Texas, effective February 1999.

Gopal Thinakaran, Ph.D., has accepted an appointment at the University Chicago with Dr. Sangram Sisodia.

## Recent Grants Awarded to Faculty

FACULTY	AWARD TYPE	AGENCY	DATES	TOTAL AMOUNT
Borchelt, D.	Grant	HDSA	09/01/98 – 08/31/99	\$ 40,000
Bova, S.	Grant	CapCure	12/01/98 – 11/30/99	\$ 75,000
Chan, D.	Contract	Bayer Diagnostics	08/01/98 – 07/31/99	\$ 62,500
Clark, D.	Institutional Award	JHU/IRGP	11/01/98 – 10/31/99	\$ 20,000
Goggins, M.	Grant	Lustgarten Foundation	03/01/99 – 02/28/01	\$ 200,000
Jackson, B.	Contract	Abbott Labs	12/07/98 – 02/06/99	\$ 55,000
Kurman, R.	Contract	SmithKline Beecham	12/23/98 – 12/22/99	\$ 14,600
Lee, M.	Grant	NIH, R01	12/01/98 – 11/30/02	\$1,336,738
Pasternack, G.	Grant	U.S. Army	03/01/99 – 09/30/01	\$ 430,786
Price, D.	Award	Bristol-Myers Squibb	05/01/99 – 04/30/04	\$ 500,000
Racke, F.	Institutional Award	JHU/CSA	01/01/99 – 12/31/99	\$ 65,000
Roden, R.	Institutional Award	JHU/IRGP	11/01/98 – 10/31/99	\$ 16,310
Rose, N.	Institutional Award	JHU/IRGP	11/01/98 – 10/31/99	\$ 22,000
Schneck, J.	Contract	Pharmingen/BD	11/24/98 – 11/23/01	\$ 240,000
Wong, P.	Grant	ALS Assn	02/01/99 – 01/31/00	\$ 50,000
Wu, T.C.	Grant	Cancer Research Institute	12/15/98 – 12/14/01	\$ 299,552

## Residents Present Research at IAP Conference, San Francisco

**F**ourteen residents in Pathology will present their research at the 88th Annual Meeting of the United States and Canadian Academy of Pathology in San Francisco in late March 1999.

**EA Allen, JD Kronz, and DL Rosenthal.** Second opinion cytopathology at a large referral center.

**BL Baisden, DJ Brat, B Fuerstein, and PC Burger.** Low grade, anterior septal neoplasms: Relation to dysembryoplastic neuroepithelial tumors.

**BL Baisden and WH Westra.** HMB-45 staining of sentinel lymph nodes (Lns): A sensitive and specific method for the detection of micrometastases in patients with malignant melanoma (MM).

**DJ Brat, BW Scheithauer, SM Staugaitis, S Morgello, and PC Burger.** Pituicytoma: A distinctive low grade glioma of the neurohypophysis.

**TY Chan, SZ Ali, SR Mandavilli, RW Cartun, and ME Sherman.** Immunohistochemical analysis of Paget's disease of the vulva: Implications for histogenesis and diagnosis.

**M Dardik and JI Epstein.** Efficacy of restraining prostate needle biopsies with high molecular weight cytokeratin.

**J Dodge and T Nadasdy.** Intraglomerular "Tubular Epithelial Cell Emboli" (ITECE) in Renal Transplants.

**GF Holmes, WG Merz, JD Kronz, and WH Westra.** The selective use of special stains in the evaluation of fungal sinusitis.

**JD Kronz, MA Silberman, WC Allsbrook, S Bastasky, RT Burks, SJ Cina, SE Mills, JS Ross, WA Sakr, JE Tomaszewski, LD True, TM Ulbright, MW Weinstein, RK Yantiss, RH Yong, and JI Epstein.** Pathology residents using a web-based tutorial improve Gleason grading of prostate carcinoma in needle biopsies.

**S Schreiner and G Hutchins.** May 7, 1889 - May 7, 1998: 50,000 Autopsies in 109 Years at The Johns Hopkins Hospital

**M Viglione, PC Burger, and T Tihan.** Solitary fibrous tumor of the central nervous system and its relation to hemangiopericytoma.

**RE Wilentz, MA Talamini, J Albores-Saavedra, and RH Hruban.** Morphology accurately predicts behavior of mucinous cystic neoplasms of the pancreas.

**RE Wilentz, RH Hruban, and J Albores-Saavedra.** Prognosis of invasive mucinous cystadenocarcinomas of the pancreas: A study of over 29,000 patients from the SEER database.

**RE Wilentz, JP Alsrue, and ES Pizer.** Co-expression of SREBP, FAS, and Ki-67 in fetal tissues.

**AN Wolf and JI Epstein.** Pseudohyperplastic prostatic adenocarcinoma on needle biopsy and simple prostatectomy.

**AN Wolf, RH Burroughs, and ES Pizer.** Pap smear detection of uterine serous carcinoma.

## Research &amp; Clinical Fellows Complete Training at Johns Hopkins Pathology

**Sally Campbell-Lee, M.D.,** clinical and research fellow in the transfusion medicine division, has accepted a position in the Department of Hematology at Johns Hopkins and will maintain an academic appointment in the Department of Pathology.

**Marcela Echavarría,** biochemist in the Division of Medical Microbiology, will be returning to her home town of Buenos Aires, Argentina, to accept a position in the Molecular Virology Section of the Center for Medical Education and Clinical Investigations.

**David Brinker, M.D.,** fellow in genitourinary pathology (1998-99), has accepted a position at St. Joseph's Medical Center in Baltimore.

**Douglas Charney, M.D.,** fellow in renal and immunopathology (1997-99), has accepted a faculty position in renal and surgical pathology at St. Luke's-Roosevelt Hospital Center with an additional appointment as Assistant Professor at Columbia in New York City.

**Carlos Saura, Ph.D.,** research fellow in neuropathology, will transfer to the University of Chicago to continue his research with Dr. Gopal Thinakaran.

**David Taylor, M.D.,** faculty assistant in surgical pathology, has taken a position with a pathology group at St. Mary's Hospital in Grand Rapids, Michigan.

**Darren Wheeler, M.D.,** research and clinical fellow in gynecologic pathology, will become an attending pathologist in the U.S. Army.



88th Annual Meeting  
U.S. and Canadian  
Academy of Pathology,  
San Francisco

March 20-26, 1999  
San Francisco Hilton

## Director's Corner

*Continued from page 2*

ments in the program reflect added strength in essentially every rotation, new and planned rotations and electives that reflect future directions of the discipline, practical experience in teaching, and substantive exposure to research.

The increased strength of our residency program has been timely, since the last few years have seen a precipitous drop in the number of U.S. medical school graduates applying to pathology. As a result, many programs have closed, while even the most prestigious university hospitals have been unable to fill their positions in the "match" and have reduced their number of residency positions. In contrast, since 1993 we have increased our program size from 30 to 32, and seen significant increases in the number, quality, and diversity of applicants (especially M.D.-Ph.D. graduates); over the past two years we have had to turn away many strong applicants who wished to train with us. The strength of our residency program has been also reflected in the recent review and approval of the Hospital and Medical School allowing an increase in four additional training positions. Attracting the best residents has also benefited our clinical fellowship and postdoctoral research programs by providing an outstanding pool of internal candidates. In many cases these outstanding residents are now physician-scientists and clinical scholars on our junior faculty.

Our postgraduate research training programs and clinical fellowships have seen similar success in quality and astounding growth in size and diversity. Since 1993 the number of clinical fellows has doubled from 7 to 14, while the number of research fellows and postdocs has grown from 25 to over 70! Correspondingly, the number of extramural

funded fellowship programs has grown from 1 to 8, and every subspecialty area of pathology in the department now sponsors postdoctoral training. The excellent opportunities available for postgraduate training also play a significant role in attracting outstanding residents and students into the department.

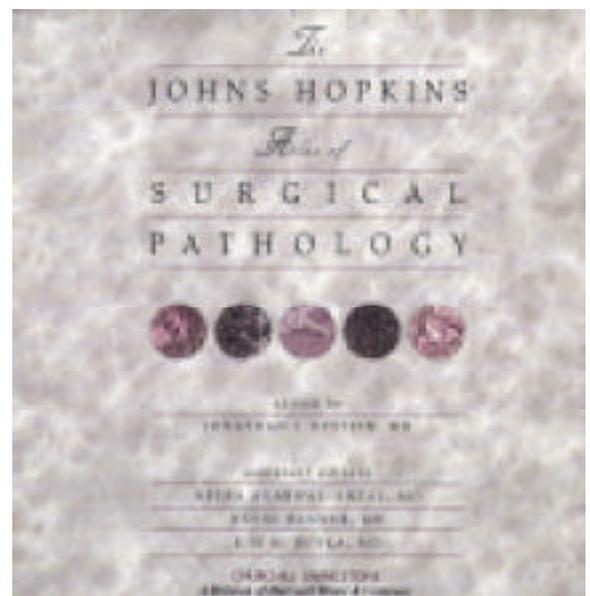
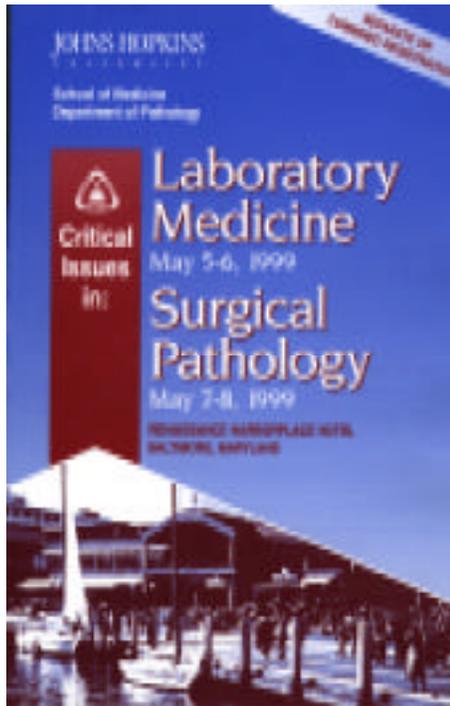
Though the primary focus of our educational mission continues to be on the next generation of research and service pathologists, we have recently expanded our efforts in Continuing Medical Education (CME) to target current practitioners. Compared to 1993 when we had only one CME program (the Cytopathology Institute, now in its 40th year), this year will see 11 different CME programs sponsored by the department and our faculty. The courses range from broad areas such as surgical pathology and lab medicine, to courses focused in

subspecialty areas of diagnostic pathology, new technology, and practice management. While the majority are national in scope involving mostly North Americans, three will have predominantly international participants: in Berlin with the Humboldt University (second year); in Beijing with the Beijing Medical University; and in Singapore with the National University Hospital of Singapore. Again, it is timely that as Hopkins establishes itself as a global institution of higher learning, we have expanded the content and outreach of our educational activities both locally and abroad.

Perhaps the most striking aspect of the innovation of our faculty in education has been the development of new and outstanding teaching materials, including books, CD-ROMs, and internet programs, as well

as real and virtual study sets of gross and microscopic material. Many of the books are award winning, while several of the computer-based tools are already of substantial impact, based on their distribution and demand for access. Certainly, this is just a taste of things to come as the technology for creating educational material improves, and the number of computer-sophisticated learners increases.

It has now been some six years since we stated that the departmental value for achievement in education was equivalent to that of our other three missions of research, clinical service, and citizenship/program building. Contributions to this mission have been used for faculty promotions and incentive-based salary distributions. In hindsight, I think it is no accident that removing perceived disincentives and providing actual incentives for educational achievement helped to stimulate the outstanding progress outlined above. The synergistic relationship between our education mission and the other three cannot be overstated: that without the dissemination of knowledge (i.e., education), the creation of new knowledge (i.e., research) is of little value; that the challenge of students adds value to clinical excellence; and that teaching and mentoring not only enhances good citizenship but also is fundamental to building successful academic and clinical programs. Clearly, the emphasis on education is a defining reason why Hopkins in general, and Hopkins Pathology in particular, enjoy such success in all our missions. §



## New Directors of Development Named

Ralph H. Hruban, M.D., and Deborah Day Barbara have been named the Directors of Development in the Department of Pathology. Dr. Hruban and Ms. Barbara will be leading a variety of development efforts, which we hope will provide much needed funds to support faculty, fellowships, teaching and research activities in the Department.

Already a number of you have asked about alternative ways of supporting the Department. Some of you may not be aware of it, but you may support the Department by securities, real estate and other tangible properties (i.e. artwork, antiques, etc.) and even life insurance policies. Considering the Department of Pathology in your estate and tax planning can provide tremendous current and future financial advantages. In addition to personal donations, our supporters often find that their spouse's company will match the value of their private gift. A simple inquiry can potentially double the value of your gift !!

We welcome your questions and ideas for future campaigns!! Please feel free to contact either Ralph or Deb at:

Ralph H. Hruban, M.D.  
410-955-9132  
rhruban@jhmi.edu

Deborah Day Barbara  
410-955-9485  
dbarbara@pathlan.path.jhu.edu



*Deborah Day Barbara and Dr. Michael Goggins at the "Evening with the Stars," a benefit for Johns Hopkins Pancreas Cancer Research, Los Angeles, November 8, 1998.*

---

## Campaign to Endow the John H. Yardley Fellowship in Gastrointestinal Pathology

We are pleased to announce plans to endow a fellowship in Gastrointestinal Pathology in honor of John H. Yardley, M.D. A highly regarded teacher, mentor, diagnostician, scientist, and administrator, Dr. Yardley is also a friend to many in the Hopkins family.

There is perhaps no better way to honor Dr. Yardley than by establishing a fellowship in his name. Dr. Yardley created one of the first Gastrointestinal Pathology Fellowships in the country in 1984. This highly successful fellowship program has emphasized the diagnostic, teaching, and basic science research activities of Gastrointestinal Pathology, and it has stood as a model for other Gastrointestinal Pathology Fellowship programs throughout the country.

Clearly, Dr. Yardley's legacy is best expressed in his teaching of fellows. Over



the years he has instilled in his fellows a lifetime love of research, patient care, and teaching. Even more importantly, his fellowship program fosters intellectual curiosity, creating leaders who have pushed the specialty of gastrointestinal pathology to new heights. It is not surprising that Dr. Yardley's fellows have gone on to make significant discoveries and to establish fellowship training programs of their own. Endowing a fellowship training program is a huge undertaking, but we cannot think of a more appropriate cause than to honor Dr. Yardley with the John H. Yardley Fellowship in Gastrointestinal Pathology.

Please help make this fellowship a reality!

Please send your tax-deductible donation to:

The John H. Yardley Fellowship  
Department of Pathology  
Johns Hopkins Hospital  
600 N. Wolfe St., Carnegie 469  
Baltimore, MD 21287

Phone: (410) 955-9485  
Fax: (410) 955-0115  
e-mail: dbarbara@pathlan.path.jhu.edu

---

## Department News

**P**ath Photo is pleased to announce their new system, E-Photo which will allow users to transmit their digital file to be processed. This new system is based on Beehive ftp forms and ftp manager and is becoming the industry standard for internet file transfers and workflow for the prepress industry.

You can retrieve your copy of E-Photo at our web site:

<http://photography.jhu.edu>.



We hope to allow non-savvy computer users an easy to use method of doing ftp (file transfer protocol) without all of the usual hassle. E-Photo provides a simple drag and drop interface for both Macintosh and PC users. The forms on E-Photo will allow you to have 35mm color slides, color Canon prints, color dyesubs, and large-format posters imaged by Path Photo. By selecting the appropriate form and files you can have your file transferred quickly to us.

Jerry R. Arnold, Manager  
Computer Graphics & Digital Imaging  
Pathology Photography  
Johns Hopkins University  
School of Medicine  
410/955-3843

<http://photography.jhu.edu>

**S**urgical Pathology Director, Fred Askin, M.D., and his wife Duffy pose with their three-year old finished champion West Highland White Terrier, Ch. Donnybrook's Connor, who was awarded the Certificate of Merit at the National Specialty Show presented by the Montgomery County Kennel Club. Connor also won Best of Breed at the West Friendship, Maryland Dog Show and recently returned from his debut performance at the prestigious Westminster Kennel Club Show at Madison Square Garden, New York City, where he made many new friends, much to the joy of his ecstatic "father" Fred.



## New Ph.D. Students Expected in September

**T**he first graduate students in the new Graduate Program in Pathobiology will start next September, and the Department is busily preparing for their arrival. The new program, directed by Drs. Gary Pasternack and William Merz, marks an important step in the growth of the Department.

The Department of Pathology has a long history of training leaders in the clinical side of the discipline through its residency and clinical fellowship programs. Until this program was created, the Department could only offer postdoctoral fellowship training in the experimental side of the discipline. Although many Pathology faculty already participate in other University graduate programs, students from those programs do not receive comprehensive training in pathobiology. This left a gap that wasn't easy to fill. Designing the program was only the first step. Drs. Pasternack and Merz then had to take the proposal through a four-stage approval process that included the Committee on the M.A. and Ph.D. programs of the

School of Medicine, the Advisory Board of the Medical Faculty, the Graduate Board, and the Academic Council, a University-wide committee. Twenty-one faculty members currently participate in the program, but the number should grow to around thirty-five by the time the students arrive.

The six students who will start in September will take approximately five years to earn their Ph.D. degrees. Their program will focus upon systems biology and disease mechanisms, beginning with the initial two years of course work, and continuing with the thesis research. In a unique aspect of the program, the students will be exposed to clinical aspects of the Department and the discipline of Pathology to provide perspective and relevance. For the same reasons, the Ph.D. students will be integrated with our clinical trainees to encourage the free exchange of ideas.

To find out more about the Graduate Program in Pathology, please visit our new website at: <http://pathology.jhu.edu/education/pathobiology>

## Marketing Pathology Services

The resource manual describing the referral and consultation services of The Johns Hopkins Medical Laboratories is completed. The manual describes each service division, referral services available, key faculty persons for consultation, telephone numbers, web site addresses and E-mail addresses. It is a communication tool of which we can be proud. In December the notebook was mailed to approximately 1250 pathologists, clinical laboratory directors and administrators in the United States. If there are divisions in Pathology whose directors and administrators would like to keep a copy of the notebook for reference inquiries or to give to potential referral customers, you may call 410-955-2661 to obtain them. In addition, the Johns Hopkins Medical Laboratories' detailed test list is available on the web at [www.pathology.jhu.edu/jhml](http://www.pathology.jhu.edu/jhml). Here, under the Laboratory Services Directory, information describing test method, specimen requirements, turnaround times, reference ranges, etc. is available for inquiry by the test name. Under development at the jhml web site is the information about each laboratory division that is contained in the Johns Hopkins Medical Laboratories resource manual. §

## Integration Announced between Howard County and Hopkins Medicine

On January 1, 1999, the first major integration of services between Howard County General Hospital and Johns Hopkins Medicine occurred. On this date, Howard Home Health (HHH) transferred its operations to the Johns Hopkins Home Care Group (JHHCG). Patients currently under the care of HHH will now have access to the expanded array of service offered by the JHHCG. The consolidation of HHH and JHHCG will provide 170,000 home health visits annually.

A courier network for laboratory services provided by the Johns Hopkins Department of Pathology was established on February 1, 1999. Pick up sites include, Columbia-Trellis Center, West Friendship, Ellicott City, and Odenton-Meade Health Center. All Home Health specimens including the Howard County sites will be routed through Pathology Customer Service. The new PDS location for laboratory specimens from these sites will be HHHOW. §

## New Hematology Instrumentation

By the end of March Johns Hopkins Medical Laboratories will have standardized on Sysmex Corporation's automated hematology cell counters. Most of the laboratories will employ the NE 9500 product line, which includes a basic CBC with platelets and a five-part electronic differential. In the larger laboratories there will also be an automated slide stainer and reticulocyte counter incorporated in a track system that moves specimens independently from station to station. Technologists will oversee the technical processes and review all information before it is released to the physicians.

The staff is very enthused with the new instrumentation. Besides increased automation and efficiency, the new cell counters have a wider range of linearity and specificity, which should reduce the number of repeat specimens and manual differentials. JHOC, which has used the instrument for only a month, has already noticed a reduction in the number manual differentials. In addition, the rules governing the reporting of results and interfaces between the Sysmex and PDS have been standardized across the Core Lab, Bayview, JHOC, and Green Spring. Customers will get high quality and consistent results at all JHML sites. §

## What is to come!...JCAHO 99

The Department is gearing up preparations for our survey scheduled to occur sometime between June and September 1999. Our survey is the accreditation survey conducted biennially on all the laboratory testing performed for patient care within Johns Hopkins Medicine. The Department receives its HCFA Certification and State of Maryland licensure through this survey. Subsequent to the JCAHO Laboratory review in 1993, the Department of Pathology was charged with regulatory compliance and quality assurance oversight of all areas performing laboratory testing for patient care. At present, there are 70+ areas that have been identified as performing moderate or high complexity testing and another 75+ areas that perform waived testing at the point of care.

The Office of CQI Programs has recently christened its ongoing quality oversight program, the Johns Hopkins Medical Laboratories Laboratory

Certification Program. Key components of this Program include mock inspections conducted in all laboratory areas, credentialing of laboratory directors, training sessions for performance improvement, safety, and infection control; and ongoing review of new assays and equipment. The Office of CQI Programs will conduct mock surveys from November 15, 1998- May 14, 1999. This year's process should be streamlined due to the use of lap top computers and customized checklists that will aid in documentation. In an effort to include regulatory review and continuous quality improvement in our various educational programs, residents as well as fellows rotating in the Department will be asked to get involved as part of their rotation with some self assessments of the laboratories. An elective has been established within the CQI Office for a senior resident to assist in the certification program. Anyone interested should contact Dr. Charache or Carolann

Liszewski (4-4958).

It is important to remember that the JCAHO as an accrediting agency looks at the entire system across the Institution. The review that we expect next summer will most likely be conducted by 3-4 surveyors over a period of 5 days and include all areas of the Department : technical, administrative, educational, and clinical. Remember the key is patient care. The CQI Office is sending out a plea to all Department PIs: if you are involved in any laboratory testing in which a result can be associated with a patient identifier, you will want to be included in the program. Please call Carolann Liszewski (4-4958) to discuss how this can be accomplished. The Department of Pathology has prided itself on its laboratory services. The JCAHO review is an opportunity for us all to showcase the dedication and quality of our Department. §

## Autopsy Pathology

*Continued from page 1*

review, a conversation with the referring clinician, and an external examination. The next steps are the removal, examination, and initial dissection of the internal organs; these are performed by the prosector, who is generally a first-year pathology resident. The prosector works under the supervision of a more senior charge resident and a faculty member. Additional faculty members are consulted as necessary for a particular case.

Although the organ removal and dissection are the parts generally thought of as “the autopsy” by the general public, they account for only a small fraction of the total professional, technical, and administrative effort expended. Preparation of



*Mr. Vander McBride and Mr. Raymond Johnson assist on the Service.*



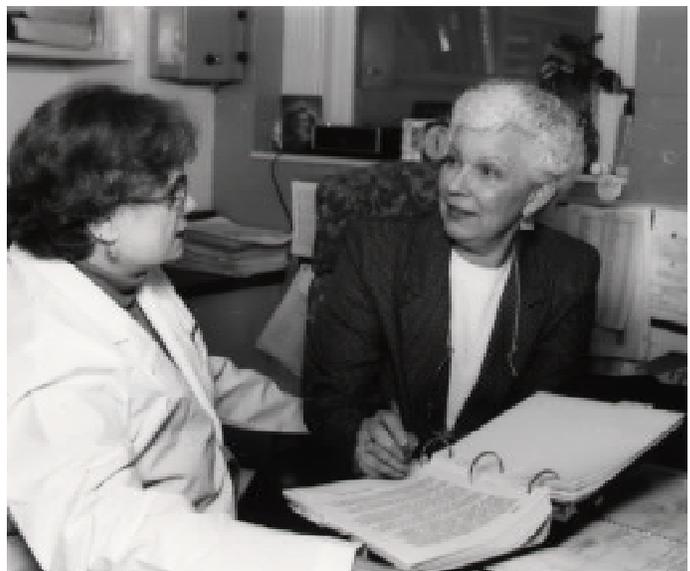
*Dr. Barbara Crain works with resident Dr. Jeffrey Seibel*

histologic sections, study of the sections, and writing up the multiple components of the autopsy report take much more time. In order to streamline the paperwork, all portions of the autopsy report were placed in PDS several years ago. Corrections are now made directly into the hospital computer system, and copies of all components of the report are backed up automatically. Turn-around times for final reports are well under the CAP deadline of 30 workdays, as we strive for the departmental goal of 14 workdays.

In the last few months, computerization of tissue tracking and histology requests has been initiated in conjunction with Mike Keevican and the Division of Informatics. Web-based etching of cassettes is reasonably well established. The custom programming to support Web-based ordering of special stains is nearly complete and the residents are beginning to use the system, which will also soon be available in Surgical Pathology.

The Autopsy Service could not function without a very

dedicated work force. Four hospital employees are assigned to the Autopsy Service. Vander McBride and Raymond Johnson are the autopsy technicians. Their duties include assisting with the autopsy dissection and performing special studies such as post-mortem coronary artery angiography, lung inflation, and X-ray. They also organize the tissue storeroom, archive tissues and slides, order supplies, and interface with the funeral homes. Stephanie Nicora is the transcriptionist with primary responsibility for autopsy reports. Joanna Dondero serves as staff assistant for the autopsy service and as secretary for Dr. Grover Hutchins. Dr. Hutchins, the longtime chief of the Autopsy Service, stepped down from this administrative role last July, although he still attends on a high proportion of adult and pediatric cases. Dr. Barbara Crain is his successor as service chief. §



*Ms. Stephanie Nicora and Ms. Joanna Dondero confer on a report.*

## Calendar

April 6	Young Investigators' Day for Housestaff and Fellows Turner Concourse
April 26-May 7	Postgraduate Institute for Pathologists in Clinical Cytopathology, Johns Hopkins University School of Medicine
May 5-8	CME course in Laboratory Medicine and Surgical Pathology Renaissance Harborplace Hotel, Baltimore
May 14	Awards Dinner for Housestaff and Fellows The Belvedere, Baltimore
June 20-21	The Pathology of Bone and Joint Disorders Marriott Inner Harbor Hotel, Baltimore
June 20-27	Orthopedic Review Course Marriott Inner Harbor Hotel, Baltimore
August 9-12	Johns Hopkins - China Clinical Laboratory Medicine, Beijing, China
August 14-15	Johns Hopkins - Singapore Clinical Laboratory Medicine, Singapore

## Grand Rounds

March 4 <sup>th</sup>	Richard Roden, Ph.D. Assistant Professor, Division of Gynecologic Pathology, Hopkins
March 11 <sup>th</sup>	Distinguished Visiting Professor Mary F. Lipscomb, M.D., Professor and Chair Dept. of Pathology, University of New Mexico
March 18 <sup>th</sup>	Patrick C. Walsh, M.D. David Hall McConnell Professor & Director Department of Urology, Hopkins
March 25 <sup>th</sup>	Rounds cancelled – USCAP meetings
April 1 <sup>st</sup>	Michael Goggins, MBBCh Instructor, Division of Gastrointestinal/Liver Pathology, Hopkins
April 8 <sup>th</sup>	William Gerald, M.D., Ph.D. Associate Attending Pathologist Memorial Sloan Kettering Cancer Center
April 15 <sup>th</sup>	Distinguished Visiting Professor TBA
April 22 <sup>nd</sup>	Robert Udelsman, M.D., F.A.C.S. Richard Bennett Darnall Professor of Surgery Director, Department of Endocrine and Oncologic Surgery, Hopkins <i>And</i> Lori Sokoll, Ph.D. Instructor, Division of Clinical Chemistry, Hopkin

Department of Pathology  
Johns Hopkins Medical Institutions  
600 N. Wolfe Street, Carnegie 417  
Baltimore, MD 21287-6417  
(410) 955-9790

Fred Sanfilippo, M.D., Ph.D.  
Baxley Professor and Director

**Editorial Committee:**

Diane Booton  
Jeannette Castronova  
Carolyn Hill

**Technical Advisor:**

Jerry Arnold

**Photographer:**

Jim Durham

Department of Pathology Web Site:  
[www.pathology.jhu.edu](http://www.pathology.jhu.edu)