

The Role of Biomedical Scientists in Histopathology Reporting A Joint Statement from the Royal College of Pathologists and Institute of Biomedical Science

Introduction

The on-going pathology workforce transformation has presented both a need and an opportunity to consider the development of biomedical scientist roles. This is not a new notion, but an initiative that has been taking place throughout healthcare for more than ten years and which has particularly taken root in cellular pathology. Biomedical scientist reporting of abnormal cervical cytology screening cases has been accepted practice for 15 years and was followed by the reporting by biomedical scientists of selected ophthalmic pathology samples.

The involvement of biomedical scientists in the dissection of Category B and C tissue pathology samples, followed by the more complex D and E cases is now an accepted area of specialism for qualified biomedical scientists. The extension of opportunity and training to include the histopathological reporting of cases from pre-determined body systems (gynaecological and gastrointestinal tracts) is a new development and represents a major and significant new role for those biomedical scientist that are able to undertake and successfully complete the rigorous training course.

Professional support

The success of all these training programmes and role developments has been dependent on the strength of the collaborative relationship between the Royal College of Pathologists and the Institute of Biomedical Science that have worked together through the establishment of conjoint examination boards. This is the joint professional model that has been used to supports a standardised and structured approach do the delivery of the training and assessment of biomedical scientists wishing to undertake histopathological reporting.

Eligibility

The training programme is open to biomedical and clinical scientist Members or Fellows of the Institute who meet the eligibility requirements and who have the support of their employer and medical head of department. All prospective candidates must first attend an interview before acceptance on to the programme can be confirmed. The training is available to all pathology departments that are able to support training, either wholly in-house or with periods of secondment if considered necessary.

Training programme and qualification

The training is a rigorous four stage process that requires significant commitment from the candidate, the pathologist mentor(s) and the employer. The pilot project demonstrated that it is essential for individuals accepted on to the training programme to be released from a proportion of their duties to permit the accommodation of sufficient reporting training time. It is important to appreciate that the time commitment for stages B and C is significantly greater than that for Stage A. To attempt to combine the necessary training for histopathology reporting without any change to an existing job role is highly discouraged and likely to compromise the likelihood of a successful outcome. Success in the final examination at the end of Stage C leads to the award of the RCPATH/IBMS Advanced Specialist Diploma in Histopathology Reporting (Gynaecological/Gastro-intestinal pathology).

Stage D is a post qualification 'preceptorship' stage that involves the development of a supervised specific independent reporting plan. The purpose of this is to support the individual to achieve a level of post qualification competence and confidence consistent with that of a qualified medical consultant histopathologist to independently report defined specimen types.

Successful completion of the training and examination does not confer automatic eligibility to practice as this remains the decision of the employer and the medical head of department.

The scientist reporting role

The successful candidate will work alongside medically qualified pathologists as part of an integrated reporting team and be able to dissect, independently report and present cases at multi-disciplinary team meetings in their specialism of gynaecological and/or gastro-intestinal histopathology. Additionally, these individuals will be expected to play an integral part in teaching and clinical audit as part of an overall service improvement strategy.

Individuals appointed to a reporting role would be clinically responsible to the medical head of department and would be expected to participate in relevant reporting EQA schemes as required for staff undertaking histopathology reporting. This role is not a replacement for medically qualified pathologists but a key part of an integrated clinical pathology team that is able to deliver a flexible and efficient service. The role title would usually be expected to be that of Consultant Biomedical Scientist and carry an employment grade of commensurate with the level of responsibility. The decision on title and grade must be a local employment issue.



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