Volume 58 / April 16th, 2022

# TISSUEPAPER

## Histotechnology Group of Queensland

**President's Report- Mark Bromley**

As the middle of autumn approaches, I welcome you to our first 2022 edition of TissuePaper.

So, in the President's Report in the December edition towards the end of last year, I mentioned how we were once again feeling that the soon to be new year can't possibly be as bad as the last one. We did it in 2020, and along came 2021 and proved that it was entirely capable of biting us on the proverbial. I should have learned then! Sure, as double vaccinations sailed over 90% and restrictions started falling away, everything was looking rosy. And then came the rain. And the rain. And the rain! So first of all, may I, on behalf of the whole HGQ committee, offer our heartfelt condolences for all those in histoland affected by the extraordinary rain events during the last few months. I know that people we work with have houses that were flooded, and possessions lost. Labs we work in were also affected, not to mention the logistic disruptions to the transport networks. And yet, we all carried on, gallbladders were grossed, prostates were processed, ears were embedded and skins were sectioned. Patients still got the care they are used to, and every one of us can be proud of that.

I would also like to take a moment to reflect on the awful situation in Ukraine. Quite apart from the violence and brutality of war, which has already had a huge effect on so many lives, one can only imagine the microtomes sitting idle in labs all over the country, abandoned by people fleeing for their lives. We spare a thought for all in Ukraine, and those mercifully outside of it but still affected by the hostilities, but we spare a special thought for Ukrainian histologists, histotechnologists and pathologists, as well as all of the patients whose prognoses will unfortunately be worse off when they do eventually get the medical care we in Australia are so lucky to expect every day.

2022 has had a few highlights, however. The Normanby Hotel hosted our first scientific meeting. Dr Luke Vasanthakumar gave us a great presentation entitled Molecular Involvement in Lung Cancers, followed up excellently by Dr Jack Garland and his insights into the world of Forensic Pathology.

For the diary is the upcoming scientific meeting and lab tour of the Mater Hospital histology lab on May 19th, where Dr Rohan Lourie will talk to us about p53. And June 24th is the date for the trivia night, again at the Normanby Hotel. Also a big one for you diaries- The Cairns conference is on! Save the date 7th- 9th October 2022.

So until the next edition, stay dry and keep the 'tomes turning!

## In This Top Issue :

# Committee Members

| *Role* | *Name* | *Company* |
|---|---|---|
| *President* | Mark Bromley | SNP |
| *Secretary* | Amanda Marsden | PQ-PAH |
| *Trade* | Samantha Arandelovic | MATER |
| *Treasurer* | Samantha Arandelovic | MATER |
| *Newsletter* | Sharee Durdin | QML |
| *Newsletter* | Courtney Colless | TAFE QLD |
| *Newsletter* | Christopher Boyle | PQ-RBH |
| *Social Events* | Emma Hughes | SNP |
| *Workshops* | Chris Cazier | QUT |
| *Workshops* | Maddison Burrowes | QUT |
| *Scientific Meetings* | Brett Harrison | TRADE |
| *Website* | Jerres Alcober | PQ-TPCH |
| *Social Media* | Sara Konwisarz | PQ-TPCH |

Follow Histotechnology Group of Queensland:
https://www.facebook.com/histo.group.qld
https://www.instagram.com/histogrpqld/
https://www.linkedin.com/company/histotechnology-group-of-queensland/

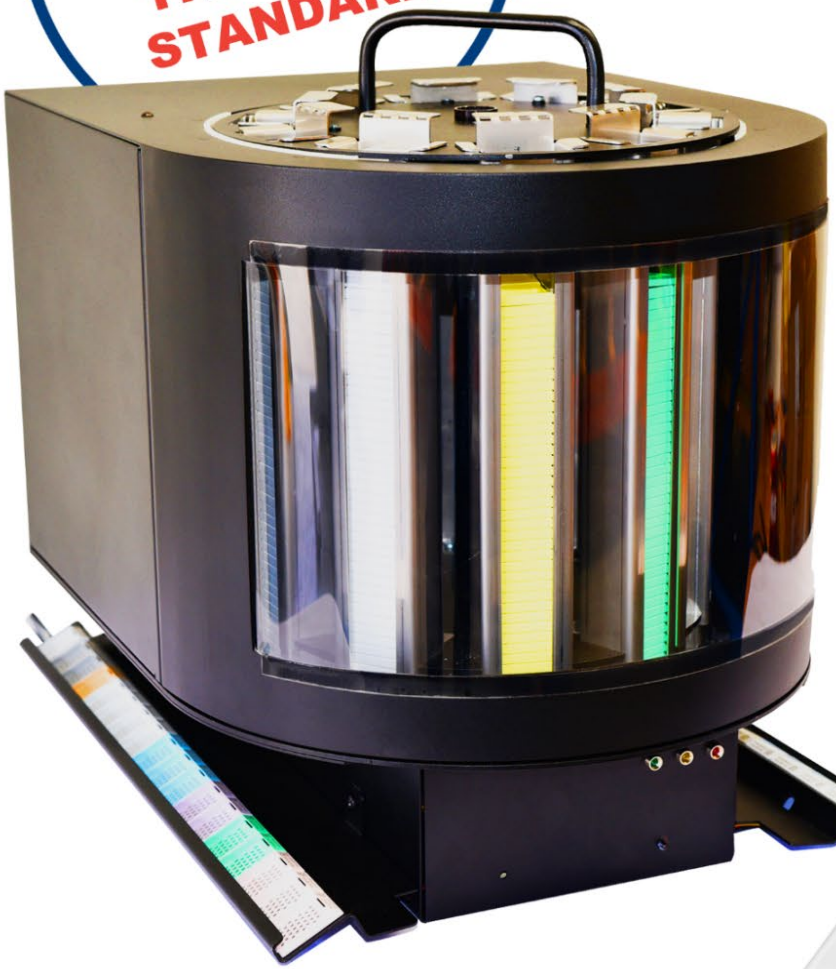
Contact us at:
General: https://www.hgq.org.au/
Newsletter: newsletter@hgq.org.au
Trade: trade@hgq.org.au

InstrumeC
www.instrumec.com.au

# Laser Scrittore

Designed and manufactured by InstrumeC in Australia

LASER CASSETTE MARKING TECHNOLOGY **THE GOLD STANDARD**



**COMPACT SIMPLE DESIGN**
For increased reliability

**BULLET PROOF PRINT**
Acid, alkaline and heat resistant

**NO CONSUMABLE COST**
Ink, ribbon, cleaning kits etc.

**CAPACITY LIKE NO OTHER**
10 hoppers x 52 cassettes per hopper

**SHARP & FAST PRINTING**
600 DPI resolution for text and barcodes

**OUTPUT PRINTED CASSETTES**
Right or left to adapt to your requirements

**INTEGRATES WITH ALL LAB INFO SYSTEMS**
No extra vendor PCs required to save bench space

**MADE IN AUSTRALIA**

Laser Scrittore designed, manufactured and serviced in Australia and New Zealand by InstrumeC Pty Ltd.

**CONTACT US FOR A DEMONSTRATION**
**www.instrumec.com.au**

**Publication Guidelines**



**Newsletter correspondence**
For all newsletter correspondence please email: newsletter@hgq.org.au

**Guidelines to Contributors**
Please forward submissions in .docx or .pdf via email to: newsletter@hgq.org.au. For any attached photos, please also include these in a separate file. Include your name and address if required.
Submissions can be in the form of a brief note, letter, or as a complete article.

**Advertisement rates**
Single A4 page - $200

Please provide a copy of advertisement(s) in digital formats (as prescribed above) only.
All monies payable to: HISTOTECHNOLOGY GROUP OF QUEENSLAND

# Freida Carson
# 2/12/1926 – 11/1/2022

Frieda Carson, author of Histology: A Self-Instructional Text, died this year on the 11th of January.

Dr Freida Carson was born Texas on December 2, 1926 to J.A. and Erna J. Carson.

She graduated from Hearne High School and received her B.S. from TSCW. She became Director of the Histopathology Laboratory at Baylor Hospital and earned her MS and PhD from Baylor University.

Her career advanced histology in innumerable ways.

Dr Carson was Director of one of the first eleven Schools of Histologic Technique to receive national accreditation, and she continued to teach histology for entire career.

In addition to her excellent book, she authored numerous articles in histologic methods.

She served with the American Society for Clinical Pathology, was part of those who began the Histology Quality Improvement Program and lectured in her field all across the world

Dr Carson was recognized as a Distinguished Alumnae by TWU, earned various awards including (but not limited to):

- The JB McCormick, MD award in 1983
- Technologists of the year in 1991 by the American Society of Clinical Pathologists
- The Histotechnologists of the Decade award in 2000
- The ASCP Mastership Award in 2010.
- The histology department at Baylor University Medical Center, part of Baylor Scott & White Health, was dedicated to her at the end of 2021.
- A memorial service was held on Thursday, January 20th at Our Redeemer Lutheran Church in Texas and she was interned at Norwood Cemetery in Hearne, Texas.

Histology: A Self Instructional Text was first published in 1980 and is now in its 5th edition (ISBN: 978-0891895817). It is recommended reading for anyone in our profession.

VETO MEDICAL TECHNOLOGY

When you need to know

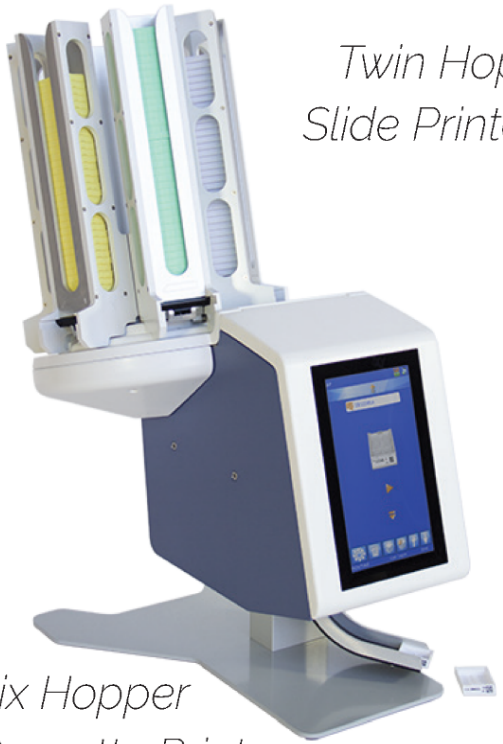
**0400 289 318**

SALES @ VETOMEDTECH.COM.AU

## Pyramid Innovation's **Smart Printer Range**


*Scan & Print with ease*

*Track & Trace your lab workflow in real time*



*Six Hopper Cassette Printer*

*Twin Hopper Slide Printer*

Print standard slides, IHC charged, specials like ThinPrep or control slides in the same print job in the right order!

## *Pedigree*

Built by the team that invented the industry standard Microwriters.

## *Performance*

Fast - 4 second thermal labelling for cassettes & microscope slides.

## *Future-proof*

Not 'just a printer' - Full Track & Trace suite to digitise your workflow with lifetime warranty options available.

## *Thin & LEAN*

Perfect for labs starved of bench space.

## *Touchscreen*

Quality of life features at your fingertips.

## *Tracking*

Complete chain of custody handling. Rapidly search and report on your lab in real time - live as you work.

## *Scanner*

Scans all forms of barcodes including 2D, linear and QR code.

## *LIS / On Demand*

Compatible with all LIS / LIMS as well as offering true 'On Demand' LEAN.

## *Stellar Service*

Included preventative maintenance & lifetime product support with additional training, customisation and live support when you and your staff need it. Find out why our clients love us.

To find out more or arrange a demonstration.

SCAN ME

2022

HISTOTECHNOLOGY
GROUP OF QUEENSLAND

# QUEENSLAND STATE HISTOLOGY CONFERENCE & HGQ AGM

**Friday 7 - Sunday 9 October 2022**

Pullman Reef Hotel Casino, Cairns

www.histologyconferenceqld.com.au

MILESTONE
HELPING
PATIENTS

# UltraGROSS

**The new benchmark in grossing**

- Discover next generation grossing
- You dreamt it, we built it

### ENHANCED USER SAFETY

Sliding safety shield, backdraft and downdraft ventilation. Bio-decontamination system to disinfect all the surfaces.

### TAILOR-MADE MODULARITY

UltraGROSS counts on stainless-steel AISI 316 modules to be placed across the large basin, to match any working set-up, even with two-operators.

### MACRO DIGITAL DOCUMENTATION

Built-in MacroPATH system for documenting the dissection procedure and creating image-enhance reports.

### SMART USER INTERFACE

8" touchscreen terminal with all functions at reach. Capability to upload external files, like AAPA guidelines and training videos.

### OPTIMAL ERGONOMICS

Adjustable working height. Mobility through sturdy industry casters. Compliance to anthropometric requirements (EN ISO 14738).


**Distributed by Abacus dx** - Contact Sue for a quote

**Sue Moon**

Territory Manager - QLD, NSW & NT

**0400 047 618** | **s.moon@abacusdx.com** | **www.abacusdx.com**


abacus dx
a partner you can count on

# Future events:

**Date**: 19th May, 6.30pm
Scientific Meeting, Laboratory tour and presentation
Topic: You, me and P53!
**Venue**: Mater Pathology
RSVP: www.hgq.org.au

**Date**: 24th June
Trivia
Venue: The Normanby Hotel, 1 Musgrave Road, Red Hill

**Date**: 18th August
AIMS Joint Meeting
**Venue**: TBA

**Date:** 7th – 9th Oct
Queensland State Histology Conference and HGQ AGM
**Venue:** Pullman Reef Hotel Casino, Cairns

L E I C A  B I O S Y S T E M S

# INTRODUCING HISTOCORE PEGASUS


## All Good Things Come in Pairs

Biopsies, large, or fatty specimens; different tissues need different treatments. The HistoCore PEGASUS tissue processor gives you the flexibility to run parallel protocols on a single instrument.

## Why Choose a Dual-Retort Processor?

**Save valuable lab space by reducing footprint with a single instrument**

**Reduce tissue processing hands-on time**

**Optimize reagent consumption**

**LEARN MORE**

**Scan the QR Code to Learn More**
leicabiosystems.com/pegasus-iscan

*For in-vitro diagnostic use*

Advancing Cancer Diagnostics
Improving Lives

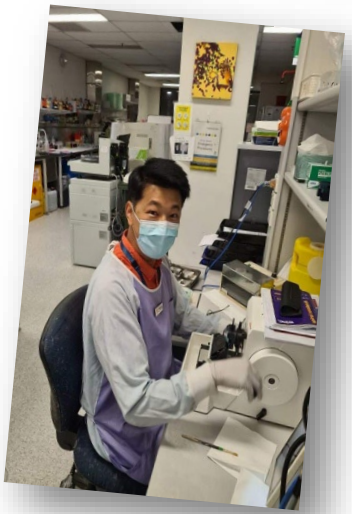
Leica BIOSYSTEMS



211830 Rev B · 12/2021

**March 10th** is an important day in the pathology calendar being Histotechnology Professionals Day. This day is an annual awareness day aimed at raising awareness of the wonderful world of Histotechnology – the creation of a slide from a tissue sample received in the laboratory. A world involving many people from doctors, surgeons, pathologists and of course, those in the laboratory involved in all facets of Histotechnology.

Do not forgot to mark it in your calendar for next year. Host a morning tea and take some photos in your laboratory and share with the HGQ and remember we are all part of a unique and crucial department within pathology. The photos below feature professionals from Royal Brisbane Hospital in what can only be described as living their best life at work in histology. Get in touch with the HGQ if you would like to feature your team in the next issue.

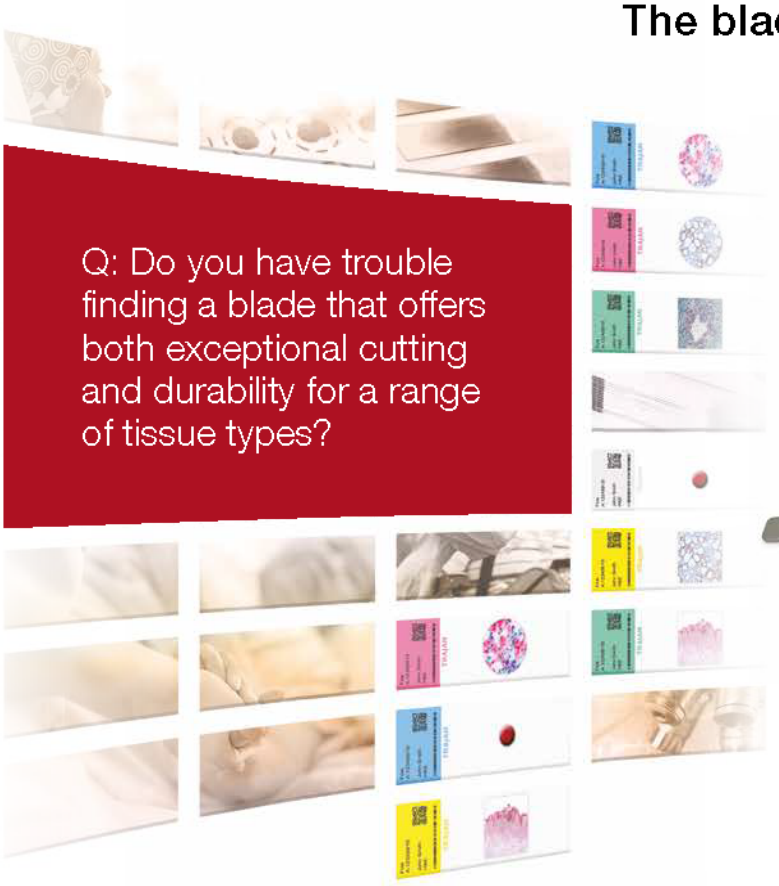


TRAJAN

# Trajan microtome blades

## The blade of choice for any tissue type

Q: Do you have trouble finding a blade that offers both exceptional cutting and durability for a range of tissue types?




With a NEW and improved dispenser for greater ease of use

A: Designed for durability and precision, Trajan microtome blades are the blade of choice for any type of tissue.

Trajan microtome blades offer exceptional cutting and longevity for a range of tissue specimens.

A unique coating offers exceptional durability while enabling smooth and precise tissue sectioning for both hard tissue and bone samples in general paraffin.

They are compatible for use with most microtomes and cryostats, and are available in low and high profile.

| | |
|---|---|
| 4810050 | Low profile: 80 mm x 8 mm x 0.25 mm |
| 4810051 | High profile: 80 mm x 14 mm x 0.30 mm |

*Showing the right path*



Contact us on 1800 257 213 for advice on workflow solutions specific to you.

**www.trajanscimed.com**

# Fibromuscular Dysplasia

**By Tania Chiesa**

Fibromuscular Dysplasia (FMD) is a non-atherosclerotic, non-inflammatory arterial disease[3] that causes stenosis and dilation of the arterial walls of small and medium sized arteries. This occurs as a result of dysplasia, abnormal changes of fibrous tissue within the layers of the arterial wall. Renal and cerebrovascular arteries are the most commonly affected[1]. FMD has only recently been categorised a separate disease due to the similar clinical presentation to atherosclerosis.

FMD can be categorised by the radiographic and histological appearance. Traditionally, FMD was characterised based on the histological appearance of the arterial wall and which layer was affected. However, this method is invasive and is only utilised after surgical intervention.

*Radiographic Appearance*

Modalities such as Duplex Ultrasonography, Computer Tomography Angiography, Magnetic Resonance Angiography and Arteriography are routinely used to form a diagnosis[4]. Radiographic appearance provides a rapid diagnosis due to its non-invasive nature and the benefit of providing high quality images to visualise the effected vessel. These modalities can also identify areas of turbulence and calculate the pressure gradient across lesions.

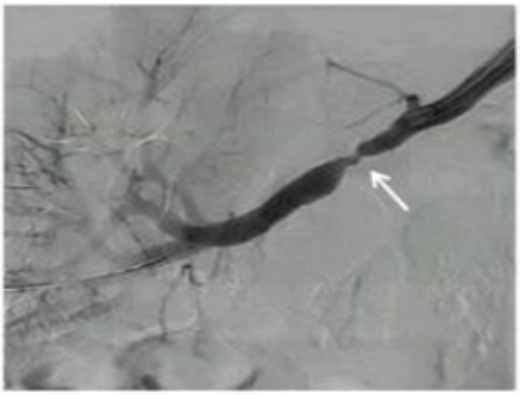


*Figure 1.* Angiogram of focal FMD in the right renal artery[5].

Once the possibility of atherosclerosis and inflammatory vascular diseases (e.g. Vasculitis) are eliminated, FMD can be classified into two categories: focal and multifocal. In this example CT arteriogram with contrast dye is used to detect the angiographic appearance. FMD can present as either focal *(Figure 1)* or multifocal *(Figure 2).* Focal FMD as the name suggests, occurs in one segment (arrow) of the affected artery. The typical appearance of a multifocal FMD is described as a "string of beads" due to arterial stenosis followed by arterial dilation in an alternating pattern[4].

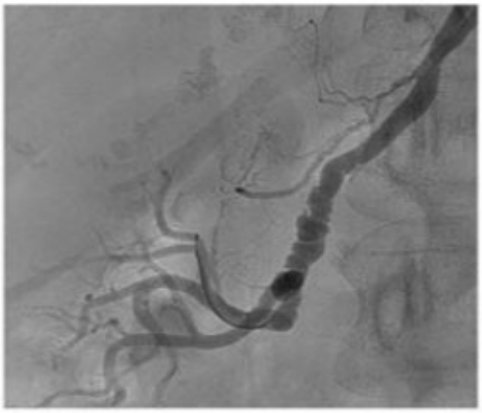


*Figure 2.* Angiogram of multifocal FMD in the right renal artery[5].

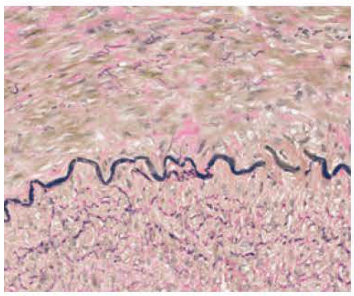
*Histological Appearance*

Traditionally, FMD can be categorised into three subtypes Medial FMD, Intimal FMD and Adventitial FMD[6] based on the arterial wall most effected. Although it is important to note that any layer within the arterial wall can be affected and the different subtypes can exist at the same time.

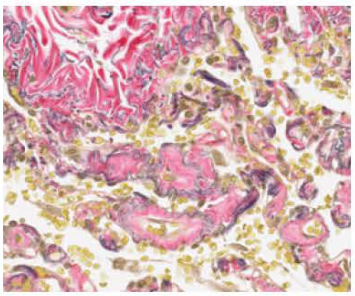
*Medial FMD*

Is the most common presentation identified by alternating ridges of collagen and loss of elastic membrane with preserved internal elastic lamina[6] as seen in Figure 3. Medial FMD presents as multifocal FMD radiographical

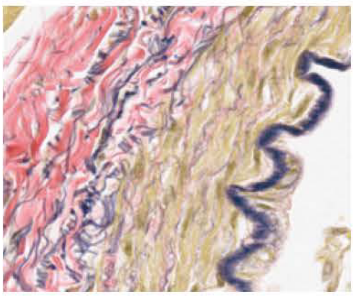
# Elastic Verhoeff Van Gieson Assay



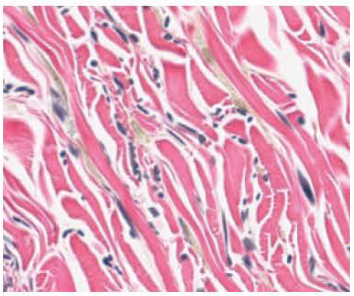
Temporal artery



Lung



Heart



Skin

*The **Elastic Stain Core Kit** used in conjunction with **Special Stains Van Gieson CS** is a modification of the Verhoeff's Van Gieson method to demonstrate elastic fibers within tissues.*

**Optimised reagents**
**Ready-to-use reagents**
Reduces hands-on time and exposure to harmful chemicals. 50 tests allow full use of the kit until expiry date

**Flexible protocols**
**Meet your clinical needs**
Offers step-by-step customisable parameters to support staining preferences

**Consistent results**
**For each validated tissue***
Provides standardisation and reproducible elastic stain results with the automated BenchMark Special Stains system

* For the entire list of tissue validated, refer to the method sheet.

**To place an order, contact your local Roche Diagnostics Account Manager**

| Product name | Ordering code | Storage temperature | Quantity |
|---|---|---|---|
| **Elastic Stain Core Kit*** | 860-047 | 2-8°C | 50 tests |
| **Special Stains Van Gieson CS*** | 860-073 | 15-30°C | 50 tests |

Roche Diagnostics Pty. Limited
2 Julius Avenue North Ryde NSW 2113
Tel: +61 2 9860 2222
ABN 29 003 001 205

**roche.com**
**rochediagnosticsaustralia.com**

*Intimal FMD*

Appears histologically as irregular deposits of collagen within the intima causing a fragmented internal elastic lamina[6]. This appears radiographically as concentric smooth stenosis.

Adventitial FMD

Is caused by dense deposits of collagen within the adventitia which appears as a smooth stenosis radiographically[6].

*Aetiology*

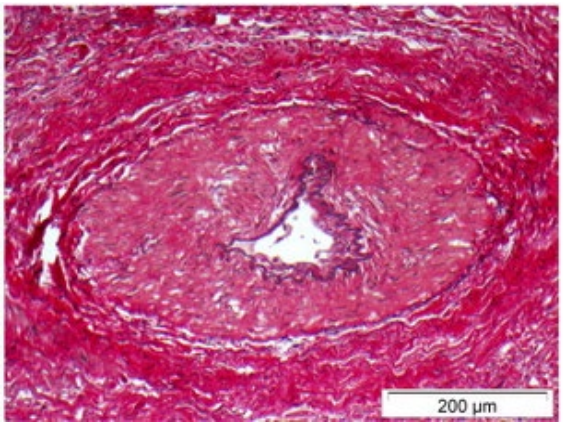



*Figure 3*. Severe thickening of the tunica media of the sinus node artery (elastica–Domagk stain)[9].

It is still unknown as to what triggers the irregular growth of cells to initiate the onset of FMD[8]. Although it is believed to have both a genetic and environmental component. Multiple studies (REF) have proven smoking tobacco is associated with renal FMD. However, this has not been replicated for cerebrovascular FMD. Due to cerebrovascular FMD typically being asymptomatic and therefore remaining undiagnosed it is difficult to repeat studies with current data in both FMD presentations.

A genetic association study conducted by Di Monaco et al. in 1154 patients with (predominantly renal artery) FMD and 3895 controls of European ancestry identified that the phosphatase and actin regulator 1 gene (PHACTR1) present in approximately 60% of the population was associated with a 40% increase in risk of FMD[2]. Results indicated that PHACTR1 may influence the transcription factor of endothelin-1 gene which encodes for a potent vasoconstrictor.

*Clinical Manifestations*

Clinical manifestations in a patient may differ depending on the vasculature affected. FMD can also remain asymptomatic and often undiagnosed. Most undiagnosed cases experience headaches and no further exacerbations. Typical symptoms experienced are dizziness, headache, pulsatile tinnitus, cervical bruit and neck pain due to hypertension[7]. More severe consequences that may develop include; aneurysm, arterial dissections, subarachnoid haemorrhage, ischaemic stroke, haemorrhagic stroke, mesenteric ischemia, renal infarction and renal atrophy.

FMD has only recently been classified as a cardiovascular disease. More investigation is needed to understand genetic factors associated with the development of FMD and possible methods of inheritance in order to calculate risk of development in patients and assess preventative measures.

*References*

1. Bolen M, Brinza E, Renapurkar R, Kim E, Gornik H. 2017, Screening CT Angiography of the Aorta, Visceral Branch Vessels, and Pelvic Arteries in Fibromuscular Dysplasia, JACC: Cardiovascular Imaging, vol. 10, no.5, 554-561, viewed 12 March 2022. DOI: https://doi.org/10.1016/j.jcmg.2016.04.010

2. Di Monaco S, Georges A, Lengelé J, Vikkula M, Persu A. 2018, Genomics of Fibromuscular Dysplasia, International Journal of Molecular Sciences, vol. 19, no. 5, 1526, viewed 13 March 2022. DOI: doi.org/10.3390/ijms19051526
3. Gornik H, Persu A, Adlam D, Aparicio L, Azizi M, Boulanger M et al. 2019, First International Consensus on the diagnosis and management of fibromuscular dysplasia, Vascular Medicine, vol. 24, no. 2, 164-189, viewed 11 March 2022, DOI: 10.1177/1358863X18821816
4. Khoury M, Gornik H. 2017, Fibromuscular dysplasia (FMD), Vascular Medicine, vol. 22, no. 3, 248-252, viewed 11 March 2022. DOI:https://doi.org/10.1177%2F1358863X17700716
5. Narula N, Kadian-Dodov D, Olin J. 2018, Fibromuscular Dysplasia: Contemporary Concepts and Future Directions, Progress in Cardiovascular Diseases, vol. 60, no. 6, 580-585, viewed 12 March 2022. DOI: 10.1016/j.pcad.2018.03.001.
6. Olin J, Froehlich J, Gu X, Bacharach J, Eagle K, Gray B et al. 2012, The United States Registry for Fibromuscular Dysplasia, Circulation, vol. 125, no. 25, 3182-3190, viewed 13March 2022. DOI: 10.1161/CIRCULATIONAHA.112.091223
7. Touzé E, Southerland A, Boulanger M, Labeyrie P, Azizi M, Bouatia-Naji N et al. 2019, Fibromuscular Dysplasia and Its Neurologic Manifestations, JAMA Neurology, vol. 76, no. 2, 217, viewed 12 March 2022, DOI: doi:10.1001/jamaneurol.2018.2848.
8. Warchol-Celinska E, Prejbisz A, Dobrowolski P, Klisiewicz A, Kadziela J, Florczak E et al. 2020, Systematic and Multidisciplinary Evaluation of Fibromuscular Dysplasia Patients Reveals High Prevalence of Previously Undetected Fibromuscular Dysplasia Lesions and Affects Clinical Decisions, Hypertension, vol. 75, no.4,1102-1109, viewed 12 March 2022. DOI: https://doi.org/10.1161/HYPERTENSIONAHA.119.13239
9. Zack F, Kutter G, Blaas V, Rodewald A, Büttner A. Fibromuscular dysplasia of cardiac conduction system arteries in traumatic and nonnatural sudden death victims aged 0 to 40 years: a histological analysis of 100 cases. Cardiovascular Pathology. 2014;23(1):12-16.

# TekEquipment

## ErgoTekMed 80/180 Microtome Benchtop

**TekEquipment has designed an extremely stable, chemical resistant bench top supported by a four leg, electronically adjustable hydraulic system.**

ErgoTek

### Designed to improve the workplace ergonomics for your staff!

- 70-120cm height range
- 400kg maximum load
- 40mm tabletop thickness
- Range of colours available
- 80 x 180cm benchtop, customised sizes available
- Dedicated height control panel
- Hidden cable tray with optional powerboard
- Made in Australia
- **Excellent stability for microtome use**

### Down-Draft GrossPath GP Workstations

- Integrated active carbon air recirculation filter (+ HEPA option)
- No ducted ventilation system needed
- Height adjustable
- Simple installation
- Full range of accessories
- Widths available: 125cm, 150cm, 175cm, 200cm

### Cut Grinder Diamond Pathology Saw

- Water cooling of blade eliminates aerosol material
- Safe to touch blade
- Quick tensioning saw band
- Perfect cut surface
- 22 or 31cm cutting height models available

bsi. ISO 9001:2015 Quality Management
FS 521104

## Contact Us today to learn more!

**1300 368 138 | tekequipment.com.au | info@tekequipment.com.au**

# Fibromuscular Dysplasia Word Search


Pathology
Fibromuscular Dysplasia
Dilation
Angiography
Medial FMD
Collagen
Cervical Bruit
Renal Infarction
Intimal FMD
Stenosis
Arterial Wall
Atherosclerosis
Adventitial FMD
Pulsatile Tinnitus
Ischaemic stroke
Renal Atrophy

# Dynamic Duo

## Dual hoppers. Singular solution.



## SlideMate™ AS

On-Demand Microscope Slide Printer

- Enhance Lean Workflow: compact footprint to fit next to a microtome
- Integrated color touch screen
- Intuitive interface, and easily adjustable print optimization settings for different slide types

## SlideMate™ Pro

Thermal Transfer Microscope Slide Printer

- Efficient performance: dual-hopper design with intelligent slide selection
- High throughput: 4-5 seconds per slide
- Simple integration: Windows based driver and Gateway functions

epredia

Enhancing precision cancer diagnostics

POWERED BY SHANDON MICRON MENZEL-GLÄSER Richard-Allan Scientific

## Slides from Epredia

Clean printing | Clear results

SlideMate™ and Superfrost microscope slides

Validated for use with
Epredia SlideMate Pro and SlideMate AS


Bio-Strategy PTY Limited

T 1800 00 84 53 | sales.au@bio-strategy.com

www.bio-strategy.com | shop.bio-strategy.com

bio-strategy
delivering technology

News from TAFE Queensland

# Promising Histotechnician Award 2021

**Following on from the success of the alliance between the HGQ and TAFE Queensland, the second annual award for the 'Promising Histotechnican Award' was awarded to a Diploma student graduating mid-year.**

In 2021 student Ken Law won the coveted prize, with Sharee Durdin presenting the award at graduation on behalf of the HGQ. Ken stepped away from the bench at the Mater to answer a few questions:


*Figure 1: Ken Law and Sharee Durdin at the Applied Science graduation - yes notice the masks.*

**When did you start at TAFE Queensland?**

I started TAFE in 2020 completing the Certificate IV in Laboratory Techniques and continuing in 2021 completed a Diploma of Laboratory Technology.

**Your favourite thing/s about the histology unit?**

My favourite thing about the histology unit isn't a specific aspect, but rather I am appreciative of learning all the histological procedures. This provided greater context and understanding of the diagnostic process. Apart from the typical histological processes, I am most appreciative in learning the maintenance aspect of the tissue processor, autostainer and embedder, as this would otherwise be an overlooked aspect of real-world duties in a histological role.

**Most challenging (this could be of the entire course and or histology)**

Besides studying in the backdrop of a pandemic, studying microbiology, or biology in general, was the most challenging. The subject has a very large knowledge base, but there is so much that is still not understood or discovered. I think this this duality exemplifies the sheer complexity of life sciences.

**Where are you working now?**

I'm currently working as a clinical assistant for Central Specimen Reception at the Princess Alexandra Hospital. As part of Central Specimen Reception, I am responsible for the receipting and processing of specimens from within the hospital and from external sites, such as collection centres and government facilities, and distributing the specimens to the appropriate laboratory department within the hospital. I am also responsible for sending and receiving specimens to and from other testing laboratories.

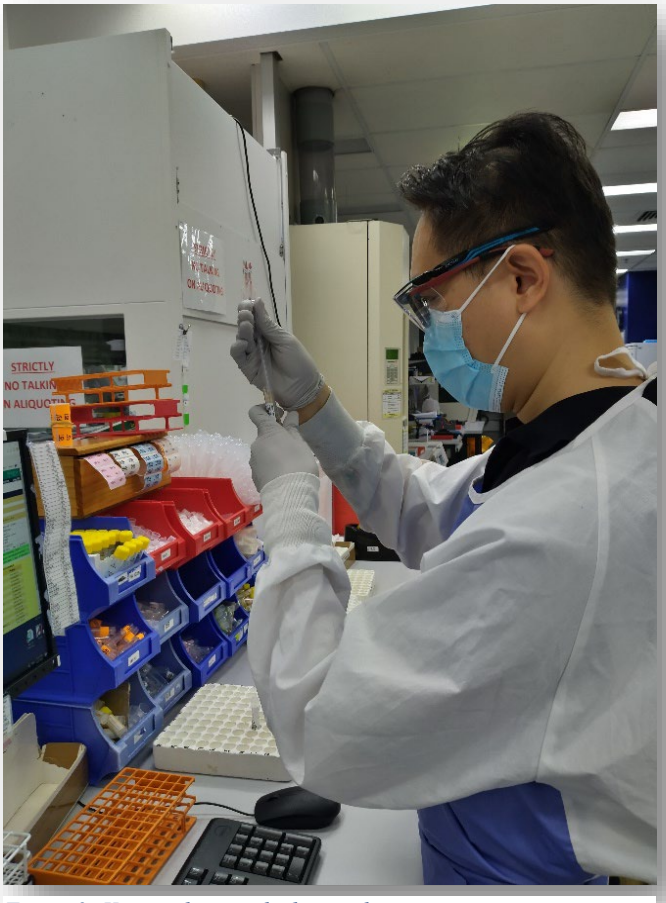



*Figure 2: Ken working at the hospital*

**Any plans or future study you wish to share**

I don't currently have any plans for future study. However, with the dynamic nature of many workplace environments and implementation of emergent technologies there is always a need for continual development.

# Pathology Students

In other news the HLT37415 Certificate III in Pathology Assistance course now includes the histology unit (MSL973020 Perform histological procedures). In this unit students are introduced to the multistep process of creating slides. The unit of competency focuses on embedding, microtomy staining and cover-slipping and to be satisfactory, students must complete all practicals to a standard provided by www.training.gov.au with at least three different tissue types.

Keep an eye out for these students in the future as they may be in a laboratory near you during their vocational placements and employment.

# *Contributions Welcomed!*

Journal, scientific article and antibody reviews all accepted!

Know someone who should be featured?

Something exciting happening in your lab?

Want to do a birthday shout out?

Have a photo you want to share?

Let us know!

**We are always looking for contributions of scientific articles and news, or if you have improvements and techniques that make a difference in your lab!**

**Submissions can be sent to HGQ Tissue Paper in digital format**