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Oral Presentation

A Descriptive study on Turnaround Times of Surgical Pathology Cases with Immunohistochemistry Studies in a Tertiary Hospital

Miguel Angelo D. Dimacali and Ricardo Victorio S. Quimbo

Department of Pathology and Laboratory Medicine, National Kidney and Transplant Institute



ABSTRACT

Background. Histopathology has been a standard in achieving and confirming a diagnosis by offering tissue-based findings as guidance in making clinical decisions. As it is reported within a standard timeframe, ancillary testing with immunohistochemistry studies can extend turnaround time (TAT), a quality indicator in surgical pathology. This study aims to benchmark the laboratory's current practices and quantify the impact of IHCs on reporting definitive diagnoses.

Objective. To compare turnaround times of surgical pathology specimens with and without additional immunohistochemistry testing.

Methodology. In-house histopathology cases processed in 2024 at the Anatomic Pathology Division of NTKI were evaluated. Specimen receipt dates, report verification dates, and IHC usage are data extracted from logbooks. Cases were categorized into one of three groups depending on the need for IHCs and whether these IHCs are done after releasing an initial histopathology report or if with IHCs altogether releasing an already definitive diagnosis.

Results. A total of 5,006 specimen cases were evaluated. Each category has a distinct turnaround time with 5.27 (A), 10.03 (B), and 36.01 (C) days. The medians for each category are 5, 9, and 23 days, while the most common turnaround times were 4, 6, and 15 days, respectively. A Kruskal-Wallis test indicated significant differences among the three groups ($p < 0.001$), while a post hoc pairwise comparison using Dunn's test also showed significant differences (A vs B: $p < 0.001$; A vs C: $p < 0.001$; B vs C: $p < 0.001$).

Conclusion. The use of IHCs extends the TAT of cases. The interval time between sign out of routine histopathology and request for IHCs may be eliminated with pre-charged reflective testing. Further studies on TATs with implemented reflective testing may be performed to determine efficiency of this service.

Key words. *surgical pathology, immunohistochemistry, medical records, time factors*