British Columbia Children's & Women's Hospitals Pediatric and Perinatal Pathology Area of Focused Competence Clinical Fellowship Program

Program Overview

BC Children's & Women's Hospitals are providers of top tier health care to children and women across British Columbia. There are approximately 5000 surgical specimens, 2,000 placentas, and 400 autopsies each year. The staff of 8 Anatomical Pathologists (Diagnostic and Molecular Pathologists) and neuropathologists provides expertise in all aspects of pediatric and perinatal pathology and many have active research programs in related areas of interest. The Fellowship program is accredited as an Area of Focused Competence (AFC) in Pediatric and Perinatal Pathology by the Royal College of Physicians and Surgeons of Canada (RCPSC). The AFC training period is 12 months in duration and provides a supportive and practical learning environment covering all aspects of pediatric and perinatal pathology with opportunities for the Fellow to pursue one or more areas of specific interest. The Fellow is expected to supervise learners rotating in this division and participate in educational and quality assurance activities. At the end of the training period, the Fellow will be prepared to practice as a pediatric and/or perinatal pathologist, and is eligible to apply for the RCPSC AFC diploma in Pediatric and Perinatal Pathology.

AFC Program Application and Requirements

Applications from Canadian citizens and permanent residents (PR) of Canada are taken until January 15 of the year that the Fellowship program is to begin. Applications form non-Canadian citizens/non-PR are taken up to November 15 of the year prior to the start of the Fellowship program.

Applicants should submit the following documents to the Fellowship Program Director by email:

- 1. A cover letter outlining their interest in this Fellowship Program
- 2. A recent curriculum vitae
- 3. Contact information for 3 referees, one of which must be the applicant's residency program director

Visa trainees whose tuition and salary are funded by a sponsoring agency in their home country are also eligible to apply but need to initiate the application directly with UBC PGME Visa Trainee Office (<u>https://postgrad.med.ubc.ca/prospective-trainees/international-sponsored-visa-trainee/</u>) at least 9 months prior to the start of training and ideally 12 months prior.

The Fellowship program will generally train one Fellow per academic year. Fellowship candidates will be assessed and interviewed either in person or by teleconference on a rolling basis until the position is filled. If the applicant has not previously rotated in our Division, we may request them to do a virtual mini-elective in addition to formal interviews.

Prior to starting the Fellowship program, successful applicants will be required to:

- 1. Have successfully completed training in an approved Anatomical Pathology (Diagnostic and Molecular Pathology), General Pathology (Diagnostic and Clinical Pathology), or equivalent residency program.
- 2. Hold an educational or unrestricted license to practice medicine as an Anatomical Pathologist (Diagnostic and Molecular Pathologist) or General Pathologist (Diagnostic and Clinical Pathologist) in the province of British Columbia.
- 3. Have malpractice insurance through the Canadian Medical Protective Association.

Term of Appointment and Remuneration

The Fellow's appointment is for a 12-month academic year from July 1 to June 30 of the following calendar year. For Canadian citizens, Canadian permanent residents, and non-sponsored/non-Canadian citizens/non-Canadian permanent residents, the salary, benefits, and terms and conditions of employment are based on the Collective Agreement with the Professional Association of Residents of British Columbia (PAR-BC) in accordance to the level of post-graduate medical education training, although the Fellow is not an official member of PAR-BC. For visa trainees, all salary and benefits are provided by their sponsoring agency. All Fellows must abide by UBC and PHSA workplace policies.

Learning Goals and Objectives

The goal of the program is to provide the Fellow with clinical exposure to develop the diagnostic skills and resources to function as a junior pediatric and perinatal pathologist in an academic setting. To accomplish this, the Fellow is required to rotate through all of the clinical services (surgical pathology, placental pathology, autopsy, embryofetal pathology, and neuropathology) within the Division in order to meet the competency requirements of the AFC in Pediatric and Perinatal Pathology. Time is also reserved for additional elective experience and/or to pursue a specific research project. The general allocation of experience, which will be distributed over alternating weeks, is as follows (the number of weeks subject to change during the training year to optimize the number of cases seen in each topic):

- Surgical pathology 16 weeks
- Autopsy pathology 8 weeks
- Embryofetal pathology 8 weeks
- Placental Pathology 8 weeks
- Neuropathology 4 weeks
- Elective/Research 4 weeks
- Vacation 4 weeks

To develop case management and communication skills, the Fellow will act as the primary contact for each service while assigned to that service under the supervision of the staff pathologist. The Fellow will be responsible for managing caseload distribution to, and teaching of, any residents assigned to the service under the supervision of the staff pathologist. The Fellow will be expected to direct and collaborate with the laboratory technical staff. The attending staff pathologist will be ultimately responsible for all cases and will provide guidance, teaching, and graduated responsibility to the Fellow.

Surgical Pathology

While on the surgical service, the Fellow will be directly involved in all cases assigned to the service to maximize exposure to the breadth of specimens received in the pediatric setting. The Fellow will become efficient at examination of common specimens and develop a safe and evidence-based approach to management of complex cases. It is expected that by the end of the 16 weeks of surgical pathology experience, the Fellow will be familiar with the gross dissection of surgical specimens from pediatric patients, know the histologic features of common and uncommon pediatric diseases, understand the pathophysiology of these diseases, and be able to offer an appropriate differential diagnosis where applicable. The Fellow will also develop and demonstrate recognition of the limits of their expertise and a strategy to safely manage cases where the diagnosis is unclear or requires additional studies or consultation.

Autopsy and Embryofetal Pathology

The autopsy and embryofetal pathology services function similarly. The Fellow will become familiar with the consent procedure for both medical and coronial autopsies and examination of products of conception, dissection techniques, histological examination, and ancillary investigations. The Fellow will be given graded responsibility to perform autopsy dissection, histological examination, and generate reports under the supervision of a staff pathologist. At the end of 16 weeks of autopsy experience, the Fellow should be able to independently conduct an autopsy and products of conception examination from receipt of paperwork to final report signout.

Placental Pathology

The placental pathology service will give the Fellow exposure to non-autopsy related placental pathology in the setting of a quaternary care women's hospital with high-risk obstetrical services. The Fellow will be directly involved in all cases assigned to the placental pathology service and will participate in gross and histological examinations and report generation with graduated responsibility under the supervision of the attending staff pathologist. After 8 weeks of experience on the placental pathology service, the Fellow should be able to identify and clearly report common patterns of placental pathology.

Neuropathology

During the rotation in Pediatric Neuropathology, which takes place over 4 consecutive weeks, the fellow will be intimately involved in surgical neuropathology and autopsy neuropathology. Exposure to both aspects of service will occur simultaneously. On the surgical service, the Fellow will be exposed to intraoperative consults, surgical gross examination, and histologic workup and reporting of all central nervous system (CNS) cases. Common neurosurgical specimens include posterior fossa tumors, epilepsy resections, brain biopsies (for diagnosis of vasculitis or encephalitis), muscle biopsies and CSF cytology. Exposure to common entities will be facilitated through review of the Division of Anatomical Pathology archives. Autopsy work will involve procurement (including special dissections) of tissues (brain, spinal cord, muscle, nerve, cerebrospinal fluid, etc.) at autopsy, brain cutting post-fixation, histologic workup and reporting. Focus will be on common pathologies, including hypoxic-ischemic injury and CNS malformations. Communication skills will be honed by presenting at a multitude of interdisciplinary rounds, including multidisciplinary tumor board, autopsy rounds and NICU/PICU rounds.

Academic Enrichment

BC Children's and Women's Hospitals are academic teaching hospitals associated with the University of British Columbia (UBC) and the BC Children's Hospital and Women's Hospital Research Institutes (BCCHRI + WHRI). The Division of Anatomical Pathology has extensive involvement in teaching and research within the Division, the Hospitals, and affiliated institutions.

The Fellow is expected to participate in all Divisional teaching and learning activities. Prior to the start of the Fellowship program, the Fellow will apply for an unpaid clinical faculty appointment in the UBC Department of Pathology and Laboratory Medicine at the Clinical Instructor level. This appointment allows the Fellow to formally supervise rotating Anatomical Pathology residents and other learners and receive teaching evaluations, which in turn enables the Fellow to further their teaching skills and solidify their own learning. The Fellowship program provides ample opportunities for the Fellow to interact with and educate clinical colleagues at BC Children's and Women's Hospitals at formal rounds and informal multidisciplinary meetings.

The Division of Anatomical Pathology is involved in collaborative research within the Hospital, with affiliated research centers such as UBC, BCCHRI, and WHRI, and outside institutions. Many of the staff

pathologists are directly involved in multiple research programs and there is wide access to a variety of research projects. The Fellow will be expected to conduct a research or quality assurance project in a subject germane to pediatric or perinatal pathology, under the supervision of a staff pathologist, with the aim to publish a manuscript in a peer-reviewed journal. The Fellow may tailor the project to their area of interest and is welcome to explore possibilities at the affiliated research centers. Depending on the project, the Fellow may be required to apply for additional research funding available through local or national initiatives.

Evaluation

The goal of Fellow evaluation is to document the Fellow's progress within the program, identify areas for improvement, and facilitate the Fellow's successful transition to independent practice. Evaluations are based on approved AFC Competency Training Requirements of this discipline which abide by the General Standards for Accreditation for Areas of Focused Competence Programs (documents are downloadable on the RCPSC website). The methods by which the Fellow is evaluated reflect the content of these documents. Evaluations are both formative and summative. Formative assessments include real-time (ad hoc) feedback given by the supervising pathologist, technical staff, or administrative staff. Summative assessments are given quarterly, with the final summative assessment (FSA) given approximately 4 weeks prior to the completion of the Fellowship program. Summative assessments are based on review of in-training evaluation reports (ITERs), the Fellow's portfolio and case log, and results of written/practical exams. The intent of summative assessments is to provide both the Fellow and the Program Committee with a clearly documented evaluation of the Fellow's strengths, weaknesses, and areas requiring improvement. With these assessments in mind, the Competence Committee and Program Committee meet quarterly to review the Fellow's progress and to discuss promotion. Near the end of the Fellow's training period, the Program Committee, on recommendation of the Competence Committee, will make a final decision on whether the Fellow is ready for independent practice. Appeals of Program Committee decisions will be handled according to the UBC PGME Resident Appeal Policy.

The Fellow is also requested to provide feedback on the Fellowship Program and the teaching faculty, either by submitting online evaluations which will be de-identified and aggregated with feedback from other learners, or by discussing matters with the Program Director at any time.

Safety and Wellness

The Division of Anatomical Pathology is committed to promoting a culture of safety and wellness for its members. At the start of the Fellowship program, the Fellow will undertake site-specific safety training and will be acquainted with the Safety and Wellness Advisor (SWA), a member of Fellowship Program Committee who is not directly involved in the Fellow's evaluation. The SWA keeps up to date on institutional safety and wellness policies and resources, and is a designated person for the Fellow to discuss and seek advice on any safety and/or wellness issues encountered in the Fellowship.

Staff Pathologists

All staff pathologists are certified in Anatomical Pathology or Neuropathology by the Royal College of Physicians and Surgeons of Canada or American Board of Pathology, have additional specialty training in pediatric and perinatal pathology, and have Clinical Faculty appointments in the UBC Department of Pathology and Laboratory Medicine, Faculty of Medicine.

Jon Bush	surgical, ocular, placental, and autopsy pathology
Chris Dunham	neuropathology
Anastasia Drobysheva	surgical, placental, autopsy, and forensic pathology

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Glenda Hendson	neuropathology, autopsy, and placental pathology
Anna Lee	surgical, placental, and autopsy pathology
Jessica Saunders	surgical, ocular, placental, and autopsy pathology
Christof Senger	surgical and placental pathology
Jeff Terry	surgical, placental, and autopsy pathology

Questions?

Please direct questions regarding this program to the AFC Fellowship Program Director, Dr. Anna Lee (<u>anna.lee@cw.bc.ca</u>)