



## CONSULTATION POLICY AND PROCEDURES : HISTIOCYTOSES

The Hematopathology Section provides consultation in selected cases of diagnostic difficulty, is pleased to assist patients with the diagnosis of histiocytosis, or suspected histiocytosis. Relevant diagnoses include Erdheim-Chester disease, Langerhans cell histiocytosis, Juvenile Xanthogranuloma, ALK-positive histiocytosis, Rosai-Dorfman disease, and Indeterminate cell histiocytosis. Other histiocytic neoplasms, histiocytic sarcoma, are accepted. The following is a list of instructions regarding cases to be submitted in consultation.

1. Each case must be accompanied by a cover letter from a physician involved in the patient's care (Pathologist or Clinician). The cover letter should provide:
  - Patient Full Name, Age, Date of Birth (**MO/DAY/YR**)
  - Pertinent clinical information (Brief clinical history)
  - Copies of radiology reports may be submitted, but are not required.
  - The referring pathologists working diagnosis or differential diagnosis
  - Contact information for the referring physicians with an email address or FAX number.
2. Provide a copy or copies of the outside pathology report(s), even if preliminary, e.g. gross description only. *Translation of key information is requested for reports not written in English.*
3. Submit representative H&E stained slides and existing immunohistochemistry stains, along with the formalin-fixed paraffin block. If a paraffin block cannot be submitted, please submit at least 15 formalin-fixed paraffin-embedded (FFPE) unstained sections on charged slides. For needle core biopsies or punch biopsies of skin, additional sections (25) are preferred.
4. Outside special stains and immunohistochemical slides will be returned to the contributing laboratory after review.
5. The Hematopathology Section would like to retain representative H&E stained slides on all cases submitted in consultation. In the instance of limited tissue, slides will be electronically scanned for further reference and review, as needed, for our archive.
6. To assist in arriving at an accurate diagnosis, specialized genomic studies will be performed on DNA and RNA extracted from FFPE sections to investigate mutations and gene fusions of target genes known to be involved in histiocytoses, and related myeloid or lymphoid neoplasms. Identification of genomic aberrations can provide key information helpful to arrive at the correct diagnosis, and in many instances can guide therapy with approved drugs known to target these pathways.
7. A diagnostic pathology report will be provided upon review of H&E stained sections and special stains (SJ report), generally within one to two-weeks. Results of genomic studies will be provided in a separate molecular report, or supplemental report upon completion, generally 4 to 6 weeks. Reports will be sent to the submitting physicians (pathologist and clinician). Copies can be provided to patients upon request. Please provide contact information (Phone, FAX and Email) for 1) submitting pathologist; 2) clinician primarily responsible for the patient's care; and 3) patient or approved family member with patient consent.

8. ***As a division of the federal government, there is no charge for diagnostic consultations performed by the Laboratory of Pathology.*** No charges are incurred by the patient, and no filing with insurance carriers is performed.

**Do not use postal services, but ship through overnight shipping such as Fed Ex, UPS.**

**Please direct all required items to:**

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**Further inquiries may be directed to:**

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