



MICROTIME

The Georgia Society for Histotechnology

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"THE WAVE OF THE FUTURE"

40th Anniversary for GSH At Jekyll Island

Page 12-15 for Complete Program Details



BY THE GOVERNOR OF THE STATE OF GEORGIA

**A PROCLAMATION
HISTOTECHNOLOGY PROFESSIONALS DAY**

WHEREAS: The health and well-being of Georgia's residents is a major concern and responsibility for the health professionals serving them; and

WHEREAS: Histotechnologists are formally educated to perform cutting edge procedures to enhance that quality of care. Through skillful application of sophisticated laboratory techniques, professionals in clinical histotechnology enable the seemingly invisible world of tissue structures to become visible under the microscope; and

WHEREAS: The search to unlock the secrets held by tissue structures reaches into many fields. Histotechnologists work as medical and veterinary professionals, pharmaceutical and industry research scientists, anatomists, and chemists; and

WHEREAS: Professionals in histotechnological sciences are dedicated to the highest standards of professionalism and are committed to maintaining and improving this through education, lifelong learning, credentialing, and personal commitment; now

THEREFORE: I, NATHAN DEAL, Governor of the State of Georgia, do hereby proclaim March 10, 2013, as HISTOTECHNOLOGY PROFESSIONALS DAY in Georgia.

In witness thereof, I have hereunto set my hand and caused the Seal of the Executive Department to be affixed this 5th day of March in the year of our Lord two thousand thirteen.



Nathan Deal

GOVERNOR

ATTEST

Cl. R.

CHIEF OF STAFF

President's Letter....

Happy HistoProfessionals Day!

I hope you found a way to recognize the day set aside for HistoProfessionals. If you missed making this year "special" start plans for next year, March 10, 2014. Find a way to share with others what makes your career so incredible. By now most of you have renewed your FREE membership. But, if you have not, please go to our website to renew online and share with your coworkers.

We have planned an educational opportunity for you to earn up to 15 CEU's through NSH on beautiful Jekyll Island. Jekyll is one of 14 Georgia barrier islands and a historic state park with bicycle trails, horseback riding, and golf. Plans are being finalized and we filled our first block of rooms, but there is still time to register and secure a room on the beach. Where else can you network, continue your education, and see the latest technology from vendors at the all-inclusive price of \$135 dollars?

We look forward to hosting nationally known speakers from our Region, and giving you an opportunity to be featured on HistoTalk with Dave Kemler. Watch on HistoNet daily as we feature "things to see and do on Jekyll Island" and if you have a suggestion please share with any of your officers.

I look forward to celebrating 40 years of excellence with you this April,

Wanda K Simons, HT (ASCP)
GSH President



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Books & Articles:

"A Perfect Red; Empire, Espionage, and the Quest for the Color of Desire" by Amy Butler Greenfield— Great read regarding one of the most precious commodities-Cochineal Beetle. Copyrighted 2005.

**Georgia Society
for Histotechnology**



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Histology Openings!

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wonder...

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Validation Values :

A New Twist to Past Histotechnology Practices

*M. Lamar Jones, BS, HT(ASCP), Carolinas College for Health Sciences, Charlotte, NC
and Davidson County Community College, Lexington, NC*

The practice of Histotechnology has progressed from methods of well over a century ago to a sophisticated medical science of automation and molecular assays. The art and science has evolved into a truly advanced science with more focus on patient care. Histotechnologists are truly on the healthcare team to serve in a more direct role of patient care than in the past. And with newer advanced technology also comes new demands, responsibility and testing. One of these new responsibilities is validation. The methodologies and assays in our practice must now go through stringent testing known as validation. Earlier in our careers we simply did “testing” but today we must do validation. Quite a difference!

Histopathology laboratories are continuing to undergo many changes today. Encouraged rapid TAT, standardization, streamlined workflow, advanced automation and validation of assays and methodology. Validation has become quite vital in Histotechnology from the Gross Room to the final microscopic slide, allowing better standards of quality, precision and accuracy. It also allows consistent demonstration that an assay performs as designed.

Validate comes from the Latin word *validus* meaning strong and *ātus* meaning ate which leads to the meaning of legalize or confirm proof. The first known use of validation was the Treaty of Westphalia, which was to legalize peace and to make an authentic proof of peace. For methodology validate means to perform trustworthy results, reduce variation and reproducibility. Validation also allows testing and troubleshooting problems before actual patient testing to prevent erroneous results and false positives. Regulatory agencies such as CLIA, JCAHO and CAP to name a few require validation on many assays, procedures and methodologies. Documentation is crucial and must be maintained. There are many areas where validation plays a major role for quality standards all leading to better patient care. A few of these areas will be discussed below.

GROSS ROOM: The Gross Room is essentially where the tissue specimens are received and accessioned for dissection. As the specimens come into the Reception Area, careful attention must be paid to the proper patient labeling and tissue origin. Handling one specimen at a time and maintaining complete specimen handling throughout the accessioning process, one piece flow. Barcoding has proven to be an advantageous tool for accuracy. There still can be flaws but overall barcoding has significantly reduced labeling errors. If a tissue specimen is properly matched, labeled and accessioned correctly from the beginning then it should maintain accuracy throughout the entire process. Another area to validate in the Gross Room is the size and thickness of tissue sections for fixation and processing. A standard thickness may be 2 mm in thickness and tools are now available to help set this standard. Fixation times can be standardized with “time cassettes” in the processing rack placed after the last cassette is grossed for a given period of time until taken and submitted for tissue processing.

TISSUE PROCESSING: The tissue processors must be maintained with detail and accuracy from the actual processing reagents to the complete changing and rotation of the reagents. Checking the alcohol strength with a hydrometer helps to assure correct dilution. Documenting the changes and replacement of the reagents using a chart should be established, maintained and reagent lot numbers recorded. When the tissue processors have annual preventive maintenance (PM) performed test tissue sections should be processed to validate the accuracy of the tissue processor before processing actual patient tissue for diagnosis. Proper tissue processing provides a standard and accuracy for the next technical preparation. The tissue processor platform, conventional or rapid tissue processor must be validated as there can be differences in the processing cycles and even the reagents.

EMBEDDING: The embedding process is not only critical but also must be performed in organized methodology. Proper orientation will provide ease in sectioning and aid in the accuracy of the pathologist's diagnosis for the patient. Surgical worksheets prepared at the time of both accessioning and grossing provide documentation of what exactly was submitted in the grossing process. Specific embedding instructions can be included along with the number of pieces of tissue per cassette. Barcoding can help in this process along with computer monitors so when the processing cassettes are scanned the actual tissue requisition, surgical worksheet information and other patient information can be displayed on the screen during the embedding process.

MICROTOMY: The microtomy process requires not only the visual aspect but also the science of both the skill and physics of the cutting process. A well fixed, processed embedded tissue specimen that has endured the precise processes of validated tissue processing cycles will provide quality results both in sectioning and staining. One important factor to standardize proper sectioning is the daily alignment of the block holder to the knife holder. This process will insure a smooth even section. Many new microtomes come with this feature built into the microtome. Older microtomes can be properly aligned with an aligning device that can be purchased to help zero the right clearance into the block holder to the knife blade.

H AND E STAINING: The H and E stain is best validated with an appropriate control, preferably a multi-tissue control block with different types of tissues. This block can have representative tissue sections to include kidney, liver, prostate, skin, brain, spleen, GI tract, lung, breast, and pancreas. These tissues all stain differently and can provide a valid result for an H and E control, including a *standard*. The specific staining characteristics of the hematoxylin and eosin will be demonstrated in this type of control slide. A daily H and E control sheet should be documented as to have a result of the validated stain quality and signed off by a pathologist. The H and E control documentation has become a requirement of the CAP inspection process. Lot numbers of the stain solutions including the xylene and alcohols should be recorded on the daily control sheet. Daily changes or reagent rotations should be recorded on a Quality Control / Quality Assurance log. H and E control slides should be filed daily and kept for at least 2 years. The H and E stain should be validated whether it is performed manually or automated with all types of tissue samples, then recorded and records maintained for at least 2 years.

SPECIAL STAINS: Special stains should follow similar validation procedures as the H and E stain. Again the multi-tissue control blocks will serve as a great standard to evaluate how the special stain may stain certain tissue structures and entities. Microorganisms are best validated by using the appropriate microorganism. If possible validate fungal, acid fast, bacterial, virus special stains with "like" controls. Always try to use surgical tissues for controls and autopsy tissues are not suitable and can provide poor and inconsistent staining. Special stains must be validated whether performed manually or automated. If manual staining is performed are the dye powders certified by the Biological Stain Commission? The certification numbers and lot number of the dye powder should be recorded. Lot numbers of commercially prepared stain reagents must be recorded and validating methods and results kept for at least 2 years. The staining results must be viewed by the pathologist and his/her approval that the results are valid and meet criteria for patient diagnosis.

IMMUNOHISTOCHEMISTRY(IHC): IHC requires more time, quality control and expertise to validate. IHC is difficult to standardize as there are many variables such as fixation, type of fixative, fixation time, tissue processing embedding, microtomy, antigen retrieval, antibody, staining platform (manual or automated), detection, chromogen, buffers, water and controls to name a few. IHC controls require the same fixation as the patient and any variance from this standard can alter the results. Positive controls should contain high, medium and low expressing levels of antigenicity. The multi-tissue controls also work well with IHC antibodies. These controls can be prepared from surgical tissue specimens usually within a 24 hour fixation time period. A cytokeratin multi-tissue control block may contain both normal and tumor tissue sections of skin, bladder, GI tract, lung, cervix and a few tumor tissues. A melanoma multi-tissue block may contain 2-3 different skin melanomas and 2-3 normal skins, perhaps a piece of GI tract or brain. A prostate multi-tissue control block may contain at least 3 different prostate cancers and at least 2 normal prostate cases. A general IHC multi-tissue block can contain about 4 different tumors, normal or abnormal tissues such as liver, pancreas, spleen,

tonsil, GI tract, skin, thyroid, breast, brain and lung. Breast multi-tissue control blocks may contain 2-3 different breast cancers exhibiting high, medium and low expressions, 1-2 normal breast cases and a negative breast tissue. All IHC controls must be fixed the same, preferably 10% neutral buffered formalin unless validated with a different fixative. Antibodies must be validated before use. New antibody lots must be validated with old lots. Other IHC reagents such as detection reagents must also be validated with old lots. After IHC validations are performed then the slides should be viewed and have a consensus correlation by more than one pathologist. All validation data must include the assay's accuracy, sensitivity, specificity, precision and reportable range. These validation processes are only a few of the many processes to properly and effectively validate IHC procedures and methodologies.

SUMMARY: The techniques and methodologies of Histotechnology have become more sophisticated and require more than just "testing". Our profession has become a more detailed, precision science and in many cases more molecularly challenged. Standards of quality including validation has become more critical and demanding. Continuous workflow and rapid TAT with lean and six sigma processes are providing better methods for helping to eliminate error defects and batch production. And our focus is still providing the best patient care possible in the shortest amount of time with accurate standards of quality and care.

REFERENCES:

1. *Validation Values*, Jones, ML, Sakura Webinar, May, 2011.
2. *Pathology Automation: Managing the Revolution and Moving to Innovation*, DeSalvo, W., Sakura Webinar, November, 2011.
3. *Histology Process Improvement: From Concept to Reality*, DeSalvo, W, Jones, ML, NSH Workshop, Seattle, WA 2010.

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The Microtime is published quarterly by the Georgia Society for Histotechnology for its members. Contributions, suggestions and advertisements are welcome. Please visit the GSH website for submission information and guidance. Permission to reprint is granted as long as source and author are acknowledged and a copy of the reprint is sent to the editors. Articles without bylines are written by the editors. Please submit manuscripts to the editor.

Deadlines for Submission are:

September 1 - Fall

December 1 – Winter

March 1 - Spring

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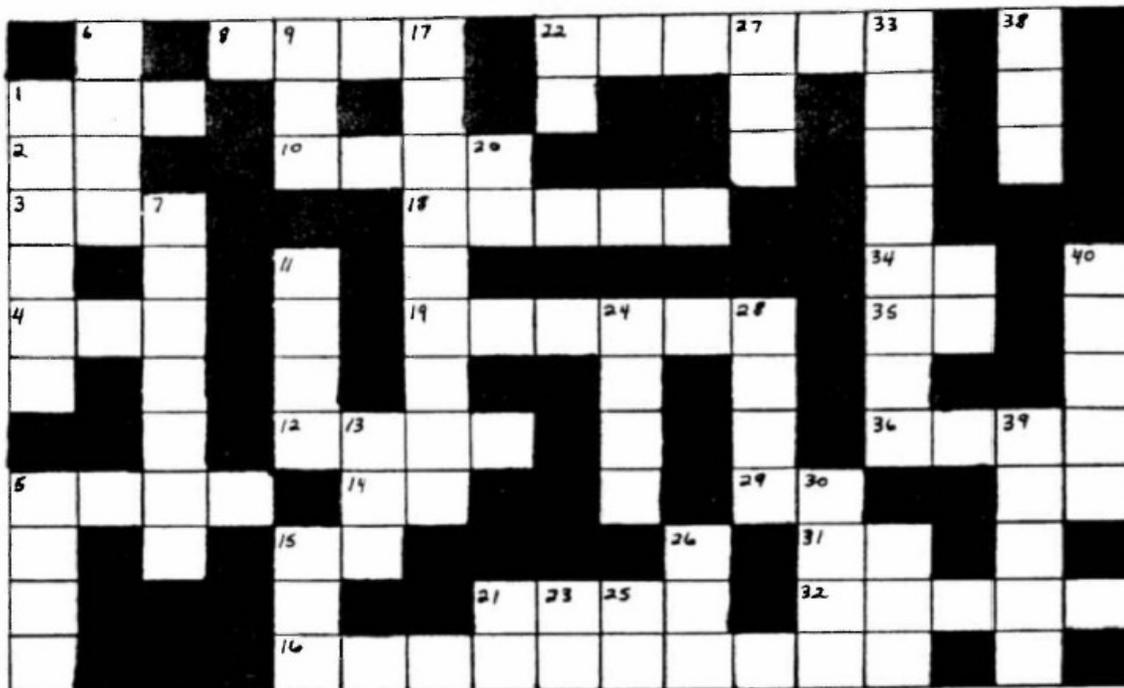
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CROSSWORD-CROSSOVER

Play your hand at this crossword puzzle. Answer key is on page 17.

FIXATION



ACROSS

1. Good fixative for silver and gold techniques.
2. Place tissue in samples in a basket _____ the Technicon.
3. Carnoy's preserves.
4. Part of the ratio formula used to make formalin.
5. Shape of cervix.
8. First 4 letters introduce the name of the product of polymerization.
10. "The specimen is submitted in _____".
12. Sections must be cut _____ in order to fix well.
14. Term used in gross description of uterus.
15. 3rd and 4th letters of dichromate fixative.
16. Used in Smith's fixative.
18. Used for diagnosis of pheochromocytoma.
19. Color of tissue sections after fixation with Bouin's.
21. Must be controlled on many fixatives.
22. Something done to formalin to avoid pigment formation.
29. Element shorthand for one component used in Zenker's.
31. Good general fixative, Hol_nda.
32. Absolute alcohol is fixative for this pigment crystal.
34. Without buffers, formation oxidizes to for ___c acid.
35. This fixative is good for Golgi Apparatus, Daf_o.
36. Substitute fixative for Zenker's.

Crossword puzzle Submitted By:

M. Lamar Jones BS, HT (ASCP)

DOWN

1. Another word for formalin.
5. Basic unit of life.
6. Osmic acid fixative.
7. Fixative for enzymes.
9. Histotechnology is an _____.
11. Accelerator in fixation.
13. Alco___ is used in some fixative solutions.
15. Used to cover fumes.
17. Removal of tissue by operative procedure initiates.
20. ___ganic compounds are used for fixation.
21. First 2 letters of a universal solvent.
22. Fixative for bone marrows or lymph nodes.
23. In making up many fixatives you must st___ and mix well.
24. Fixative for connective tissue mucins and umbilical cord.
25. Am___ium bromide is used in CNS fixatives.
26. Good fixation of tissue is a _____ of Histotechnology.
27. Formalin preserves this.
28. You must _____ tissues after Bouin fixation.
30. Electron microscopy fixative.
33. Fixative containing picric acid, good for glycogen.
37. Zenker's and Helly's _____ fixatives for blood forming organs.
38. Used for both electron microscopy and light microscopy fixation.
39. _____ of the Art.
40. Good fixative for tissues from CNS.

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In loving Memory

Emilye Jo Spires

October 22, 1945 - March 1, 2013

Many of our older members remember Ms. Emilye Jo Spires. You could hardly forget her, she was the most humble, unassuming, kind and generous person you could meet. She was so friendly, you could never not have a conversation with her. Her smile lit up the room and she made you feel like one of the family even if you had just met her 2 minutes ago. Emilye died Friday, March 1, 2013 after a long battle with lung disease. Her funeral services were held Monday, March 4, 2013. Emilye was born October 22, 1945, in Jacksonville, Georgia. Her sons, Joseph R. Spires and Andrew Scott (Andy) Spires and her grandchild, Amber Leigh Spires preceded her in death. She had retired from Macon Northside Hospital Histology Lab because of health reasons. She dearly loved her profession in histology. I had the pleasure of training her at the Macon Hospital, now the Medical Center of Central Georgia. Emilye was a lifetime student, she never stopped studying, no matter what the subject. She was tireless and always happy to help in any way that she could. When GSH was formed, she dove in head first and served as treasurer, president and Microtime Editor. It was under her editorship that the Microtime won the Newsletter award given by Hacker. Emilye was unable to attend NSH that year and I was fortunate to be able to accept the award for her from Mr. Hacker himself. Emilye is survived by her husband, Larry Spires, Sr., children, Larry (Brenda) Spires, Jr. and Randy (Christy) Spires, all of Macon, sisters, Vera Thomas of Macon and Carol Strom of McRae, ten grandchildren and fourteen great grandchildren. Larry Jr. must have the most extensive T-Shirt collection from all of the GSH, NSH and many other societies that his mom could acquire for him. GSH has lost a great supporter and wonderful friend and I am happy to have been one of her closest.

Shirley Powell



Georgia Society for Histotechnology Symposium

April 12 – 14, 2013

Oceanside Inn and Suites
Jekyll Island, GA

The Wave of the Future

Key Speakers and topics:

Vinnie Della Speranza - Advanced Breast Pathology
 Jeff Gordon - Cancer in Hollywood
 Lamar Jones/William DeSalvo - Quality Management
 Wanda Jones - Microtomy
 Ely Klar - Histological tissue identification
 Robert Lott - HT Certification Readiness
 Tom Peters - "Leadership Pickles"
 Jack Ratliff - Laser Microtomy



40th Anniversary Celebration

Representatives from leading manufacturers will be demonstrating and explaining the newest technology/equipment of our field.

Families can enjoy a beachfront pool, hot tub, and children's playground.

Local attractions include: the Georgia Sea Turtle Center, Millionaire Village, the Fishing Pier, and beautiful beaches.



Visit <http://www.histosearch.com/esh/symposium.html> for reservation forms.



2013

Schedule at a Glance

Room A

Room B

Friday April 12, 2013

8:00-5:00 **WS #1: HT (ASCP) Certification
Readiness Workshop**
-Robert Lott, HTL (ASCP)

1:30-5:00 **WS#2: Laser Microtomy: The Future
of Soft and Hard Tissue Histology**
-Jack Ratliff, B.A

Vendor Reception 7:00-9:00

Saturday April 13, 2013

8:30-12 **WS#3: Quality Management Process
in Histology.**
-Lamar Jones, BS, HT (ASCP)
-William DeSalvo, BS, HTL (ASCP)

8:30-12:00 **WS#4: Microtomy: What is Beneath
the Sections?**
-Wanda Grace – Jones, HT (ASCP)

Awards Luncheon 12:00-1:30

1:30-5:00 **WS#5: Breast Cancer Overview: A
Discussion of the Epidemiology,
Diagnosis, and Technical Challenges
of Breast Tissue Workups in the
Histology Laboratory**
-Vinnie Della Speranza, MS, HTL (ASCP), MT

2:00-4:00 **WS#6: Values Based Leadership with
"The Leadership Pickles"**
- Tom Peters, MT (ASCP)

**GSH Membership Meeting 5:15
Campfire on the Beach 9:00**

Sunday April 14, 2013

8:30-12:00 **WS#7: Human Tissues: Histological
Identification of the Major Tissue
Types**
-Elizabeth (Ely) Klar, MS

8:30-12:00 **WS#8: Cancer in Hollywood**
-Jeff Gordon, BS of microbiology

**Vendor representatives will be available in
the Vendor Room throughout the weekend.**

Friday April 12, 2013

WS#1 *HT(ASCP) Certification Readiness Workshop - The CAT Exam* CEU: 6 Hours Workshop Instruction Level I
 This workshop is designed to help the certification eligible candidate organize and study for the ASCP Board Of Certification Histotechnician (HT) exam. A thorough overview/explanation of the Computer Adaptive Testing (CAT) exam process and a review of the subject matter along with many sample questions will be presented. A study outline, which uses subject matter criteria published by the Board of Certification, as well as study hints will be shared. Extensive handout materials are included for each attendee. This workshop is designed to be most helpful to the student in an OJT (On-the-Job Training) setting or in a self-study situation. Students that are currently enrolled in or have recently completed a directed curriculum based training program will also benefit from this presentation. In addition, those preparing for the Histotechnologist (HTL) exam will also find this workshop useful.

-Robert Lott, HTL (ASCP)

WS#2 *Laser Microtomy: The Future of Soft and Hard Tissue Histology* CEU: 3 Hours Workshop Instruction Level I-II
 Join us as we take a look at the evolution of microtomy from a simple razor blade, where the first histological sections were produced as part of the development of the light microscope; to the present day and not so distant future where non-contact infra-red lasers represent the next and possible final frontier of histology! Our journey begins with the creation of the earliest microtomy devices and their evolution to the present day. We will identify current methods and equipment used to section a wide variety of soft and hard tissue histology specimens in support of undemineralized bone, biomaterials and medical device implants. We will then turn our focus to compare and contrast current conventional methods and equipment with that of non-contact infra-red lasers that have been designed for sectioning, micro-structuring and imaging of biological tissue and various materials. Specific tissue preparation techniques for both hard and soft tissue types will be discussed and attendees will also learn of Optical Coherence Tomography (OCT) and how this three-dimensional imaging technology, combined with laser micro-sectioning, provides both the flexibility of 2-D and 3-D cutting and making laser microtomy highly suitable for a wide range of applications in life sciences and materials research. It has taken over 300 years of research, development, and technological innovation, but the future of soft and hard tissue histology IS finally here!

-Jack Ratliff, B.A.

Saturday April 13, 2013

WS#3 *Quality Management Process in Histology - Creating a Quality Chain in Histology* CEU: 3 Hours WS Instruction Level II
 Creating and Implementing a Quality Process can be overwhelming and often difficult. There are several critical steps that need to be addressed and understood to create consistent and reliable results. Implementing a Quality Management Process is very much like creating a strong chain and the chain is only as strong as the individual links. Discussion will concentrate on Pre-Analytical Process (fixation, dissection and processing), Method Validation (process and staining) and Process Improvement (defect reduction). Learn how to set up the proper Quality Control and Quality Assurance check points to maintain improvement gained. There will be time for open discussion of participants' issues.

-Lamar Jones, BS, HT (ASCP)
 -William DeSalvo, BS, HTL (ASCP)

WS#4 *Microtomy: What is Beneath the Sections?* CEU: 3 Hours Workshop Instruction Level I-II
 Microtomy is a highly skilled level of expertise for every histotechnician and histotechnologist. The proper tissue section preparation can affect the final outcome for a diagnosis of a patient's tissue specimen both in frozen sections and paraffin sections. What actually happens during the microtomy process? How thick is really "too thick"? Why are certain tissues sectioned at specific microns in thickness? What role do levels, serial sections and step sections really play in cutting the tissue sections for microscopic slide preparation? This workshop will explore fixation, proper embedding and effective microtomy of most tissue specimens along with trouble shooting techniques.

-Wanda Grace - Jones, HT(ASCP)

WS#5 *Breast Cancer Overview: A Discussion of the Epidemiology, Diagnosis, and Technical Challenges of Breast Tissue Workups in the Histology Laboratory* CEU: 3 Hours Workshop Instruction Level II
 The modern clinical histology laboratory is often under great pressure to provide a diagnosis on breast samples as quickly as possible. This is largely due to the emotional nature of breast cancer and the patient's anxiety when a lesion is discovered. Few if any other disorders strike so directly to the core of a woman's sexual identity and the lack of real progress in survival rates strikes fear in all of us. Unfortunately for the lab, breast samples pose particular challenges that make rapid turnaround even more difficult and today, prognosis and therapeutic decisions rest largely on information generated from the biopsy sample. This talk will provide an overview of the epidemiology of breast cancer including factors thought to predispose a woman to this illness. The evolution of diagnostic and treatment strategies as they impact the laboratory will be discussed as well as the technical challenges of ensuring that maximum diagnostic and prognostic information is achieved from the sample. Lastly, the current regulations for the handling of breast specimens will be reviewed along with available options for prognostic markers staining.

-Vinnie Della Speranza, MS, HTL (ASCP), MT

WS#6 *Values Based Leadership with "The Leadership Pickles"* CEU: 1.5 hours Workshop Instruction Level II
 A training session that includes materials developed by Bob Farrell to present a fresh, fun look at three keys of outstanding leadership. In addition, attendees will complete an interactive exercise to help understand the impact of their value system, and the value systems of their work teams, on all workplace decisions. The 1.5 hour session includes DVD Video, PowerPoint, and interactive discussion. A "leadership pickles" survey will be completed by each participant, and a follow-up e-mail will be sent to each attendee ~60 days post-conference, to help reinforce the leadership skills from the session.

- Tom Peters, MT (ASCP)

Sunday April 14, 2013

WS#7 *Human Tissues: Histological Identification of the Major Tissue Types* CEU: 3 Hours Workshop Instruction Level I-II
 The histological features of the different types and categories of tissues will be described to facilitate identification of human tissues and organs. The four major types of tissues: epithelium, connective tissue, muscle and nervous tissue will be discussed in detail. Specific characteristics such as cell types, structural organization, membranes, fibers and extracellular matrixes will be discussed as well as how these tissues function in their respective organs. During the workshop participants will have the opportunity to observe the different types of tissues and organs in the human body via the use of microscopes and slides. After the conclusion of the workshop, participants should acquire sufficient knowledge of the structural and histological differences between the tissues and have a better understanding of the individual functions of these tissues in the human body.

-Elizabeth (Ely) Klar, MS

WS#8 *Cancer in Hollywood* CEU: 3 Hours Workshop Instruction Level II
 Mr. T had Mycosis Fungoides? Humphrey Bogart had esophageal carcinoma? In this workshop, we will take an investigative approach to the fascinating world of celebrity diagnoses and examine each case from a pathological point of view. We will travel through Hollywood history to learn exactly what conditions have affected people in the starlight and then examine the occurrence, curability, and diagnostic characteristics of each disease type. In particular, we will look at identifying histological characteristics and a specific immunophenotype for every tumor we encounter along the way. After this workshop, you will be able to use these famous faces to remember key diagnostic features for a wide array of tumors, including lymphomas, melanomas, and carcinomas.

-Jeff Gordon, BS of microbiology

GSH REGISTRATION FOR 2013 MEETING

APRIL 12-14, 2013

Oceanside Inn and Suites , Jekyll Island, Georgia

Please fill out a form completely for EACH attendee & mail along with check to the address below.

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NONREFUNDABLE REGISTRATION FEE: \$35

(includes Awards Luncheon on Saturday and attending vendor reception only)

FEES: Friday, Saturday, Sunday \$100 plus \$35 registration fee \$135.00

EARLY REGISTRATION BY MARCH 1, 2013 ONLY \$115.00

Students \$50 plus \$35 registration fee... \$ 85 00

EARLY REGISTRATION BY MARCH 1, 2013 ONLY \$65.00

STUDENTS: Your instructor must sign here to be eligible for student rates

Name: _____ School Name: _____

YOU MUST CIRCLE WORKSHOPS DESIRED: You can only attend a total of 4 workshops total.

Friday: Workshop #1 Workshop #2

Saturday: Workshop#3 Workshop#4 Workshop#5 Workshop#6

Sunday: Workshop#7 Workshop#8

PLEASE TOTAL	Registration fee for all attendees	_____ \$ 35.00 - nonrefundable
	Extra Luncheon tickets #__	_____ \$20.00
	Workshop Fee	_____ \$100.00
	Student Workshop Fee	_____ \$50.00
	Total	_____

Paid by _____ check _____ Credit Card via PayPal

MAKE CHECK PAYABLE TO GSH.**NOTE: IF PAYING WITH CREDIT CARD USING PAYPAL PLEASE BE SURE TO MAIL REGISTRATION FORM AT THE TIME OF PAYING ONLINE IN ORDER TO BE REGISTERED.**

Shirley Powell, GSH Treasurer
2690 Eatonton Highway
Haddock, GA 31033

Credit Card payments are made by going to www.paypal.com
And send funds to the email address snipes3@windstream.net

30 Years of Histotechnology



Mary Johnson retired from the Medical College of GA in August 2012 after 30 years of dedicated service. She enjoyed working in histology and interacting with staff, residents, and pathologists.

Mary is an avid cook and often brought her delicious creations to the laboratory. She is enjoying her retirement by spending it with her family and planning her daughter's upcoming wedding.

Mary is missed in the histology lab.

By Billie Zimmerman

Carole Fields, HT (ASCP)
962 Hickory Leaf Ct.
Marietta, GA 30065

TO:

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