

ANATOMICAL PATHOLOGY TARIFF

A GUIDE TO UTILISATION.

The following **guidelines** have been agreed by consensus of Anatomical Pathologists who are members of the Anatomical Pathologist's Group, or the National Pathology Group of S.A.M.A. and Pathologists in full time Academic Practice.

The *guidelines* have been formulated in order to achieve a uniform billing policy applicable to all histo-pathology investigations.

Examination of appropriate tissue sections, special stains or techniques, should be relevant to establishing the diagnosis, or staging the disease process.

The guide does not refer to the value ascribed to any procedure as performed by Anatomical Pathologists, but solely gives guidance as to the utilisation of the system currently in use.

DEFINITIONS

- 1 **A SPECIMEN** is a portion of tissue from a single anatomical site that is identifiable by description of origin, macroscopic appearance, or microscopic histological examination.

- 2 **A SAMPLE**
 - is a single separate and identifiable portion of tissue either submitted as a specimen in a specimen container, or
 - is a portion of tissue submitted with others that is macroscopically or microscopically identified as being derived from a distinct anatomical site, or
 - is a single piece or block of tissue obtained from a larger specimen through dissection as part of the macroscopic pathological evaluation of such a specimen.

Such samples are submitted for technical processing and paraffin embedding in cassettes from which sections are prepared for microscopic examination by the pathologist.

A SAMPLE as described above is billed according to the unit system 4567, 4571 for single samples or blocks of tissue, and as 4582, 4584 when serial step sections are prepared and examined, as set out below.

- 3 **A TISSUE SECTION** is a thin tissue section cut from a *cassette* and mounted on a slide for histological examination by the pathologist. This may comprise multiple samples.
- 4 **SERIAL STEP SECTIONS** are prepared when it is appropriate to examine multiple tissue levels from a small biopsy specimen. The tissue levels are placed on a single slide for examination.

The charge for serial step sections 4582 is inclusive of the fee for a single sample 4567.

If serial sections are prepared from multiple samples from the same specimen, (as defined in 1 above) then multiples of the tariff item 4584 are billed.

The tariff item 4584 is inclusive of the item 4571.

When further multiple serial step sections from the same sample are examined on separate slides, these are individually billed as additional stains using Code 4589.

Probable tissue sources for such examination are from the Gastro-intestinal tract, Prostate, Skin, Uterine Cervix, Bladder, Oral mucosa, Kidney, and Liver, but also other sources where the biopsy material is small might also need such technical preparation and examination.

- 5 **SPECIAL STAINS:** A special stain is any staining process or procedure, other than immunofluorescence or immunoperoxidase techniques, that is used to prepare or identify tissue component types, pathology or organisms.

Each stain is billed using the code 4589.

METHODS OF SPECIMEN DISSECTION: Use recognized and appropriate surgical pathology text books i.e. Ackerman's Surgical Pathology, Surgical pathology Dissection William H. Westra, and the Manual for Gross Specimen Examination and Sectioning as published by the Anatomical Pathology Department of WITS University.

GUIDELINES

- A. Each specimen/sample that is submitted in a separate specimen container is billed as an individual specimen/sample.
- B. All surgical specimens, whether simple excisions or larger surgical resections, are billed per the number of samples prepared and examined (as outlined in #2 above).
Billing is in multiples of 4567 and 4571 or 4582/4584.
- C. When multiple samples are obtained from different anatomical sites, which can be identified either by description of the site of origin, macroscopically or microscopically, such samples are billed individually utilising the unit codes 4567/4571 or 4582 /4584 etc. i.e. such separate samples are treated as individual specimens.
This pertains irrespective of whether the specimens are submitted in separate containers or if they are submitted in only one container.
- D. When a biopsy *sample* is submitted as set out in #2 above, which contains multiple small tissue fragments, that ***do not require individual orientation***, these multiple tissue fragments should be treated as single specimens and should be charged according to the number of tissue sections examined with progression of unit billing as is set out in 4567/4571; or if serial sections have been prepared as, 4582/4584 according to the number of tissue sections examined.
Such specimens would include endometrial curettings, transurethral prostatic resections or bladder tumour curettings.
Such specimens should not be processed or billed as is set out in #E below.
- E. If the samples submitted in a single specimen container from a single anatomical site require individual detailed orientation and examination, then each of these is separately embedded and charged according to the number of tissue sections examined with progression of unit billing as is set out in 4567/4571; or if serial sections have been prepared as 4582/4584 according to the number of tissue sections examined.
Only biopsy specimens that require individual orientation and examination of the individual fragments submitted are treated in this way.

- F.** Different organs are billed as individual specimens utilising the primary code 4567 and 4571 for tissue samples or using 4582/4584 should serial step sections be prepared.
- G.** Lymph node dissections as part of a surgical resection for malignant disease are separate specimens, and separately submitted resections from different organs or sites are deemed to be separate specimens. Billing for each of these is per the number of samples examined.
- H.** When individual (anatomically distinct) organs are resected en bloc, each organ is billed as an individual specimen as per the number of samples examined. Examples include splenectomy as part of gastrectomy, prostatectomy as part of radical cystectomy, ovaries / uterine adnexae as part of hysterectomy etc.

FROZEN SECTIONS

Frozen sections performed are billed as 4577 for the first frozen section on a single specimen, and as multiples of 4578 according to the number of samples examined in theatre.

If a further specimen that is anatomically distinct from the first is examined this in turn is billed as a separate specimen according to the system outlined above.

If further lesions from different sites require intra-operative frozen section examination, each of these is treated as a separate specimen.

In the laboratory these specimen/s are submitted for selection of tissue samples for permanent paraffin sections, and are reported separately, and billed as is set out in guideline A or B.

SPECIAL CONSIDERATIONS

Cone biopsy cervix:

Complete radial samples should be selected and examined.

Breast lumpectomy:

If the specimen is small, all relevant tissue is processed. If large, two thirds of all tissue excluding fat is selected.

Skins:

Samples more than 5mm in diameter should be bisected and serial sections cut.

Larger specimens may require several samples to be prepared and examined in order to diagnose or to assess resection margins.

For the first sample units, 4567/4582 applies to all separate specimens, as per definitions set out above. Further samples from the same specimen are billed according to 4571/ 4584.

Surgical operative excision specimens including major resections for malignancy:

Charges as set out in F above apply for the number of samples selected and examined.

Complete and adequate examination will differ according to pathological processes identified macroscopically, and possibly following microscopic examination.

In some resections for malignant disease or other pathology, sample selections may vary according to diagnosis, and the need to stage the disease process. This may necessitate preparation and examination of multiple samples, and may differ from guidelines as set out in dissection manuals according to the pathological process present.

Prostate needle biopsies:

Each core should be separately embedded in a cassette and serial sections cut.

Transurethral Prostatic or Bladder resections:

Where specimens with large numbers of tissue fragments are submitted, the number of cassettes utilised is dependent on the total weight of tissue submitted. Such samples should be placed in paraffin cassettes 2.0 grams per cassette for up to 8 cassettes, and

thereafter an additional 1 cassette for each 10grams, *provided* that no abnormality or malignancy is detected.

Should any abnormality or malignancy be detected then all reserve tissue should be embedded, so that the volume of the malignancy in the entire tissue can be established, or in the case of pre-neoplastic conditions so that the possibility of neoplasia or infiltration can be excluded.

Special stains, immunoperoxidase and immunofluorescence studies:

The number of special stains and immunohistochemical studies that are performed, is dependent on the pathological diagnosis or differential diagnosis, and is an integral part of histopathological examination based on the histological assessment of the samples. The type and number of such special procedures will vary according to the tissue type and pathological processes that are observed or diagnosed.

Such special investigations are used to **diagnose** and **stage** disease processes and also to **exclude** pathological processes.

When multiple slides are prepared utilising the same stain, such as for the identification of scanty micro-organisms, these are billed as individual special stains utilising code 4589.

When the same immunoperoxidase stain is prepared on several samples then each of these is billed as an individual item, i.e. as multiples of 4592.

DESCRIPTORS OF TARIFF ITEMS

4567. HISTOLOGY PER SAMPLE/SPECIMEN EACH

4571. HISTOLOGY ADDITIONAL SAMPLE/S FROM INDIVIDUAL SPECIMEN.

**4575. FROZEN SECTION HISTOLOGY AND MACROSCOPIC EXAMINATION
IN LABORATORY.**

**4577. FROZEN SECTION HISTOLOGY AND MACROSCOPIC
EXAMINATION IN THEATRE.**

4578. SECOND AND SUBSEQUENT FROZEN SECTION IN THEATRE.

4579. ATTENDANCE IN THEATRE; NO EXAMINATION.

**4582. HISTOLOGY SERIAL STEP SECTIONS FROM INDIVIDUAL
SAMPLE/SPECIMEN.**

**4584. HISTOLOGY ADDITIONAL SERIAL STEP SECTIONS FROM
INDIVIDUAL SPECIMEN.**

4587. HISTOLOGY CONSULTATION PER SAMPLE EACH.

**4589. SPECIAL STAIN PREPARATION FOR IDENTIFICATION OF
TISSUE COMPONENT TYPES, PATHOLOGY OR ORGANISMS.**

4590. SPECIAL PROCEDURES.

4591. IMMUNOFLUORESCENCE STUDIES EACH.

4592. IMMUNOPEROXIDASE STUDIES EACH.

4593. ELECTRON MICROSCOPY.

4595. FOETAL AUTOPSY EXCLUDING HISTOLOGY.