

**University of Washington School of Medicine  
Department of Pathology  
Genitourinary Pathology Fellowship Program**

### **OVERALL EDUCATIONAL GOALS**

The genitourinary (GU) pathology fellowship program is a one-year program designed to provide a rich and diverse experience in diagnostic GU pathology. The program provides extensive exposure and in-depth evaluation of non-neoplastic and neoplastic specimens from the kidney, urinary bladder, prostate, and testis. At the conclusion of the fellowship year, the fellow is expected to: 1) be sufficiently skilled in GU pathology to perform independently in a practice setting; 2) understand the wide range of diagnostic pitfalls and approaches to recognizing and minimizing diagnostic errors in GU pathology; 3) have the skills to organize and complete a laboratory-based and/or translational clinical research project; and 4) have developed the necessary teaching skills and experience to serve as a competent mentor to junior colleagues. Participation at pathology and clinical conferences and teaching of younger trainees is required. GU pathology fellows are encouraged to engage in translational research projects with the intent to present their work at national meetings and to publish their work.

### **OVERVIEW**

The GU pathology service is the second busiest of all the surgical pathology sign-out services and provides the fellow with the opportunity to develop the ability to handle a large and diverse case load in an efficient and accurate manner. The in-house cases include a remarkable depth and breadth of GU pathology specimens including both neoplastic and non-neoplastic conditions. The outside case and consultation service includes reviews of specimens from patients being referred for treatment in our facilities from WWAMI region. These provide an outstanding resource for the fellow to observe materials and reports from a wide range of institutions. The faculty also receive personal consultations thus providing the fellow with very rare and unusual lesions to study and will expose the fellow to the common diagnostic problems that community pathologists have difficulty resolving. Through these the fellow will learn the diagnostic approach taken by the faculty and gain skills in interacting as a consultant with a referring pathologist. Successful completion of the program will require that the fellow complete at least one translational research project with submission of manuscript for publication and presentation at an annual pathology or urology conference (such as USCAP, CAP, ASCP or AUA). The program allows for 2 months of protected research time away from the clinical service.

### **FELLOWSHIP PROGRAM ORGANIZATION AND EXPECTATIONS**

Throughout a year the GU fellow will participate in the diagnostic sign-out of biopsies, surgical specimens, referral and consultation cases, grossing supervision, as well as evaluation of intraoperative frozen section consultations.

In the first 3 months fellow should focus on fundamentals of GU pathology, participate in grossing of all representative GU specimens, provide detailed microscopic differential diagnoses, recognize the limitations of diagnostic abilities, and seek consultation from an attending faculty.

In the next 3 months, GU fellow is expected to have more independence, allowed to handle complex gross specimens such as pelvic exenterations, neobladder resections etc, supervise grossing by residents, call preliminary results to clinicians on in-house and consult cases, and order ancillary tests. Fellow will work closely with junior residents, supervising, teaching and assisting in formulating and dictating microscopic diagnosis and completing all their cases as needed.

As the fellow gains further experience and demonstrate increasing competence and confidence in GU pathology gross and microscopic assessments, he/she will be granted increased responsibility, primarily in the final 6 months of the program. At this time, the fellow is expected to know recently described, rare and provisional entities, syndromic associations, diagnostic mimics, updates in staging criteria, detailed tumor subtyping, molecular features, prognostic and theranostic markers.

Throughout the year, the fellow will be partly responsible for teaching the fundamentals of GU pathology to residents and rotating medical students, as well as helping out with the medical student pathology labs as required. They will assist in the regular resident GU pathology conferences, help organize the resident didactic conferences, and review GU cases with residents. Fellow will present and discuss relevant GU pathological findings at all applicable clinical conferences and tumor boards, as required.

Two months of the year are devoted to elective time in which the fellow is expected to select an area in which to focus. Ideally this will include compiling study sets, presenting at conferences pertinent to the area, performing a laboratory-based quality assurance (QA) study and/or translational research project.

Fellow is responsible for learning about issues in laboratory management and federal, and state laws governing pathology laboratories, CAP requirements, and QA issues. Fellow should learn how to improve patient care through enhanced communication and consultative skills with clinicians and patients.

## **FACULTY**

Dr. Maria Tretiakova is the director of the Genitourinary (GU) Pathology Fellowship. The fellowship is based entirely at HMC within the Division of Anatomic Pathology. The faculty of HMC Anatomic Pathology provide an extensive knowledge and experience base for the teaching of GU and general surgical pathology. The teaching faculty include:

Lawrence D. True, MD  
Professor, Pathology  
Chief of GU pathology service

Funda Vakar-Lopez, MD  
Clinical Associate Professor, Pathology  
Subspecialty: GU Pathology

Stephen S Schmechel, MD, PhD  
Associate Professor, Pathology  
HMC chief of service, Director of Cytopathology  
Subspecialty: Cytopathology and GU pathology

Maria S Tretiakova, MD, PhD  
Associate Professor, Pathology  
Director, GU fellowship  
HMC co-chief of service

## **FACILITIES**

Training is offered at the University of Washington Medical Center (UWMC) and will be primarily located at the Harborview Medical Center (HMC). As tertiary-level care facilities serving the five state region of Washington, Wyoming, Alaska, Montana and Idaho, UWMC/HMC draw a patient population that exposes fellows to a broad range of challenging diagnostic cases. In this setting, residents and fellows in pathology learn to apply a comprehensive and multidisciplinary approach to the diagnosis of disease, using standard diagnostic practices and specialized techniques. The facilities in Anatomic Pathology include laboratories for frozen sections, histology, autopsy, and gross examination. In addition, Anatomic Pathology maintains active facilities for specialized techniques including immunohistochemistry, cytogenetics, molecular diagnostics, immunofluorescence, electron microscopy, and DNA flow cytometry. There are over 35,000 surgical pathology cases accessioned annually (combined UWMC and HMC), which include 6,800 referred consultations. GU service is the 2<sup>nd</sup> busiest surgical pathology service accounting to approximately 15% of all UWMC/HMC cases.