Freedom of Information Request

Reference Number: EPUT.FOI.20.1511
Date Received: 09 April 2020

Information Requested:

Section 1: Respondent/response details

1. Respondent/response details:
   a. Name of hospital trust: Essex Partnership University NHS Foundation Trust
   b. Address of hospital trust: The Lodge, Lodge Approach, Wickford, Essex, SS11 7XX
   c. Name of laboratory providing histology services: Essex Partnership University NHS Foundation Trust is a Mental Health, Learning Disability and Community Services Trust and does not provide these Services
   d. Address of laboratory providing histology services: N/A

Section 2: Breast Cancer Reporting

2. Do you perform diagnostic reporting of breast cancers in the house? [Y/N]
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3. What are the steps involved in diagnostic reporting once a tissue sample has been received? Please tick as appropriate.
   a. Tissue preparation
   b. Primary diagnosis by pathologist
   c. Molecular test
   d. Secondary diagnosis (opinion)
   e. MDT
   f. Other - please specify

   N/A
4. Q4: How many breast cases do you receive per year?
   a. <100
   b. 100-500
   c. 500-1000
   d. 1000+ (please specify an approximate number)

   N/A

5. What % of breast samples received constitute breast cancers?
   a. <25%
   b. 25-50%
   c. 50-75%
   d. 75-100%

   N/A

6. What % of breast samples come from Breast Cancer Screening? What % of breast cancers come from Breast Cancer Screening Program?
   a. <25%
   b. 25-50%
   c. 50-75%
   d. 75-100%

   N/A

7. What are the additional tests performed for characterisation of breast cancers? Select all that apply:
   a. Estrogen receptor IHC
   b. Progesterone Receptor IHC
   c. Her2 Receptor IHC
   d. Her2 Receptor FISH
   e. Ki67 IHC
   f. OncotypeDx
   g. Others (please specify)

   N/A

8. Which of the below tests are routinely performed? For non-routine/conditional tests, please specify the conditions for these tests to be performed.
   a. Estrogen receptor IHC
   b. Progesterone Receptor IHC
   c. Her2 Receptor IHC
   d. Her2 Receptor FISH
   e. Ki67 IHC
   f. Oncotype Dx
9. What is the cost per patient for the following tests?
   a. Estrogen receptor IHC
   b. Progesterone Receptor IHC
   c. Her2 Receptor IHC
   d. Her2 Receptor FISH
   e. Ki67 IHC
   f. OncotypDx
   g. Others (please specify)

If cost per patient is not available, please provide whatever cost breakdown is available (total number of patients + total cost of testing OR total cost of all tests per patient OR routine cost of IHC/FISH + number of cases tested etc.). Please specify the type of costs provided.

N/A

10. What is the average turnaround time for following steps? Is there any mandated target for each step? If so, what % of cases exceed the target?
   a. Preparation of diagnostic biopsy
   b. Primary Diagnostic Reporting
   c. IHC testing
   d. Other molecular testing

NOTE: where numbers for breast malignancies are unavailable, overall numbers will be accepted (please indicate).

N/A

11. What percentage of cases exceed a 7 day turnaround time and 14 days respectively?

N/A

Section 3: Use of digital/computational pathology

12. Did your histology laboratory use any form of digital/computational pathology in 2019 [Y/N]. If [N] to the above question are you planning to introduce digital pathology in the near future (please provide details)?

NOTE: If your histology laboratory does not currently use any form of digital/computational pathology, the remainder of this section can be left blank. Please proceed to Section 4.
13. What was digital pathology used for in your laboratory during 2019?

   a. Research
   b. Training
   c. Primary diagnosis
   d. Secondary diagnosis (second opinion)
   e. Telepathology (Requestor)
   f. Telepathology (Consultant)
   g. Preparing cases for review at multi-disciplinary team meetings
   h. Other (please detail)

   N/A

14. Please indicate which of the listed systems were used in your histology laboratory in 2019. If a software suite is used please indicate the features used from the suite.

   a. Telepathology
   b. Whole Slide Imaging
   c. Image analysis
   d. Conventional (analog) light microscopy
   e. Voice recognition system for reporting
   f. Digital case requesting (ICE) system
   g. Digital dissection macro imaging systems
   h. Voice recognition system for dissection
   i. Specimen tracking system
   j. Pathology reporting software
   k. LIS/LIMS/PACS
   l. Other (please detail)

   N/A

15. If whole slide imaging was used in your laboratory in 2019 please provide the following details on system configuration.

   a. Number of scanners (and manufacturer)
   b. PACS/ Image management systems provider
   c. Current size of digital slide archive
      i. Total number of cases
      ii. Number of years
      iii. Estimated retrospective digitization rate (%)
   d. Number of slides routinely scanned per week
      i. Of these, how many are on-demand
   e. Number of slides routinely scanned at 40x
      i. For diagnostic reporting
      ii. For other purposes
   f. Other (please detail)

   N/A
Section 4: Future use of digital/computational pathology (only to be filled if Section 3 does not apply)

16. Which of the following reasons best describes why you have not used or increased your use of digital pathology?

   a. High costs
   b. Lack of evidence surrounding clinical effectiveness
   c. Staff training requirements
   d. Disruption to current workflows
   e. Lack of existing digital infrastructure
   f. Other (please specify)

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Publication Scheme:

As part of the Freedom of Information Act all public organisations are required to proactively publish certain classes of information on a Publication Scheme. A publication scheme is a guide to the information that is held by the organisation. EPUT’s Publication Scheme is located on its Website at the following link https://eput.nhs.uk