2004 Resident Research Day

The twenty-second annual Department of Pathology Resident Research Symposium (Resident Research Day) was a tremendous success! The annual event that highlights the residents and fellows research over the previous year was held on Saturday, May 8, 2004. Distinguished guests in the audience included Dr. Raymond Hackett, Dr. Shahla Masood (Associate Chair of the Pathology Department at Shands/Jacksonville), and Dr. Steve Glanz (dermatopathology fellow, 2001-2002). University of Florida Pathology Chair, Dr. James Crawford, opened with an introduction outlining the importance of residents' pursuit of knowledge through research. Resident research has contributed at every level of medicine throughout history. The act of performing research and attempting to answer new questions is vital to our medical profession.

The resident presentations went on throughout the day and varied in fields of pathology, including dermatopathology, gynecologic, otolaryngologic, hepatobiliary, and forensic pathology. "I thought the residents had interesting and quite professional presentations at this year's Resident Research Day," commented Dr. William Clapp, Director of the Department of Pathology Clinical Research Committee. They approached their investigations with an underlying interesting question and/or hypothesis. Their talks addressed clinically relevant problems in diverse areas of pathology. The presentations provided an excellent educational experience for all that attended." Later that day, Dr. Julia Bridge, Director of the Cytogenetics Unit at the University of Nebraska, discussed the advantages and limitations of cytogenetics, molecular cytogenetics, and molecular diagnostic testing in the diagnosis and treatment of bone and soft tissue tumors. "Dr. Bridge is a leader in the field of molecular diagnostics and cytogenetics, and the quality of her presentation reflects that," commented Dr. John Reith.

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Forensic Pathology

Teaching and NASCAR

by Dr. William Donnelly

Forensic pathology is a required and exciting area of pathology training with which every pathology resident must be well acquainted. However, since 2001, forensic teaching at every level in Florida has been handicapped by a revision to the Medical Examiner law that prevents use or release of any photographic, other visual, or audio recordings for any purpose other than evidence for court proceedings. As written, the law prevents use of all past, present or future medical examiner photos in the medical education of health care professionals, law enforcement groups, or in medicolegal training programs. These limits also prevent publication in any scientific journal.

The Medical Examiner law revision resulted from the death of Dale Earnhardt, the great star of NASCAR racing, who was killed on February 18th 2001 in a crash at the last turn of the 2001 Daytona 500 Race. His family, rightfully, was concerned because photos of prior NASCAR accidents had been unscrupulously sensationalized by internet and tabloid publications, without regard to the families involved. Such publication of Earnhardt's autopsy and accident photos, they contended, would painfully invade their privacy. After several newspapers petitioned the Medical Examiner to release the (Continued on page 2)
Resident Research Day

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Director of the Bone and Soft Tissue pathology unit, "Her talk provided a fantastic synopsis on the utilization of molecular testing and cytogenetics in the diagnosis of musculoskeletal neoplasms."

That evening, a cocktail reception and dinner was held in honor of the faculty and residents. Awards were given to outstanding faculty and included: Dr. Neil Harris, recipient of this year’s department teaching award for his excellent instruction in Clinical Chemistry, and Hematology, Dr. Ashraf Hassanain, recipient of the "Hydra Award" for his contribution at the microscope, Dr. Anthony Yachnis, recipient of the Attending IRONMAN, for his availability and dedication to the residents, and Dr. James Crawford and Dr. William Murphy, recipients of the Point-Counter Point Award for their stimulating debates during resident conferences.

The departing residents and fellows were recognized and the entertainment began when first year resident, Dr. Dominique Coo, presented a slide show spotlighting the graduating seniors. To close, third year resident Dr. David Grier parodied faculty, staff, residents, and fellows in faux publication titles and book covers.

Of the day’s events, Dr. Bridge commented, "The Pathology Department Research Forum at the University of Florida is an impressive demonstration of talent, resourcefulness, and hard work. It is evident that this Department is dedicated to achieving a high standard of residency education. It was an honor to participate in this special event."

The department would like to thank Boston, Dickerman & Company and Corpe Corporation for their contribution to the day.

New Residents

by Diana Cardona and Samantha Butler

Dr. Constance Yuan is a familiar face within the Department of Pathology. Constance, better known as Connie, completed her CP residency at the University of Pennsylvania. After being offered the fellowship in hematopathology, she moved to Gainesville to work with Dr. Raul Breaux. Following her fellowship, she stayed on as faculty for one year. She then courageously decided to return "to school" and begin a residency in Anatomic Pathology. This additional training, she feels, will help increase future opportunities, though she eventually plans on practicing as a hematopathologist. Her biggest challenge thus far has been transitioning back to life as a resident. She thoroughly enjoys the new perspective and new working relationship she has with the faculty and residents. In addition, she is investigating the value of flow cytometry in predicting outcome after bone marrow transplant in multiple myeloma patients. Outside of work, Connie enjoys exploring her creative side by making custom jewelry and cooking.

Dr. Diana Cardona is a native central Floridian and one of the department’s two recent graduates from the University of Miami School of Medicine. Diana grew up not too far from Gatorland in Ocala, Florida. Although she claims to be a true Hurricane fan, we won’t stop trying to convert her!

Her road to pathology is distinctive in that her interest was sparked in high school following a cytopathology demonstration here at UF. The field intrigued her so much that she began shadowing various area pathologists. Her enthusiasm for pathology helped trigger a tremendous interest at the University of Miami which lead to an astonishing 12 students entering pathology residencies last year. Last October, Diana spent a month here in the Department of Pathology where she was well liked by faculty and residents. In turn, she felt the program possessed the qualities she was looking for in a residency program.

Dr. Steven Goldstein, the furthest traveler of the group, grew up outside Harrisburg, Pennsylvania and attended medical school at Jefferson Medical College. Steve’s initial interest in pathology stems from his senior year rotation. His level of interest in pathology caught him a little by surprise. He had been considering a variety of fields from radiation oncology to psychiatry, but discovered a certain thrill in looking at a slide and making a diagnosis.

Dr. Cardona
Bladder Cancer Screening
by Dr. William Murphy

The International Society of Urology brought many of the world’s leading urologists together recently to form a consensus on screening for bladder cancer. Urologists seem to define the term “bladder cancer” as a synonym for “urothelial neoplasm.” When they speak of screening, they refer to high-risk people, not the general population. This includes anyone over 40 years old with a history of cigarette smoking as well as any patient who has already developed a bladder cancer. Tumor markers include an ever-increasing array of substances that are associated with the presence rather than the future development of a urothelial neoplasm.

One gets the impression that urologists as a group are not keen on screening as bladder cancer patients and haven’t come to grips with the issue. Among available markers, the only one that seems to be favorably viewed by the majority is hematuria evaluated by dipstick. The data are mixed but indicate that patients with dipstick positive tests have a higher frequency of bladder cancer than those with negative findings. The yield is predictably low (less than 1%) and only 31% of those with a positive test have had bladder tumors, even in the prevalence population. Dipstick tests are cheap and easy, it’s what comes next that’s at issue.

In fact, there was no agreement about what should come next. All of the options—cystoscopy, urinary cytology, tumor markers—are suboptimal for screening. Some markers, e.g., BTA, measure substances that will occur in most patients having hematuria and therefore will not further subclassify that population. Others are extraordinarily sensitive but not FDA approved, associated with unacceptable levels of false positive and negative results, or both. Only a few markers, e.g., ImmunoCyt, telomerase, microsatellite chromosomal aberrations and the chromosome-based FISH assay—actually claim to identify tumor cells versus some product of the neoplastic process and only

Immunocy and FISH do not destroy the cells during the assay. Immunocy is based on immunofluorescence but seems to be very difficult to use. Its promoters talked about a “learning curve.” The Vysis FISH assay is somewhat easier to evaluate in skilled hands (cytotechnologists are used at the Mayo Clinic) but it’s expensive. It may well be more sensitive than urinary cytology only because of an enhanced ability for any observer to see colored dots on a black background rather than abnormal cells in a mixed cellular background.

There seemed to be slightly more enthusiasm for tumor markers in the followup of patients with known bladder tumors, where their use could decrease the frequency of cystoscopy. Most urologists would probably confine such tests to individuals with high-grade lesions or recurrent low-grade, papillary tumors, however. Most urologists realize that patients presenting with high-grade neoplasms, whether invasive or not, are at greatly increased risk of death from disease. The problem is one of sensitivity and specificity. When it comes to clinical application, false negative and false positive rates in the range of 10 to 30% are unacceptable because no specific actions can be justified.

Furthermore, most urologists are not well disposed to the detection of cancers that they cannot confirm with conventional methodology. Of course, sorting out the issues with multiparameter blinded trials was discussed but it seems unlikely that this approach will be applied.

In the end, screening was not recommended. The lack of consensus notwithstanding, the impetus for improved methods of detection remains and many practices will adopt alternative approaches. Meanwhile, pathologists might hone their diagnostic skills in the area of urinary cytology, especially since the detection methods used for the majority of bladder tumor markers are not based on light microscopy and will not fall within the purview of anatomic pathology if adopted.

Mark Your Calendars! Dinner Reception at USCAP 2005

The University of Florida Pathology Alumni and their spouses are invited to a dinner reception at the 2005 United States and Canadian Academy of Pathology Meeting in San Antonio. This will be an excellent opportunity for alumni to reunite and meet some of our current faculty. The dinner will begin at 7:30PM on Monday, February 28th. Please R.S.V.P. to Nancy Lambka or MaryAnn Hancock at (352) 392-3741 or email lambka@pathology.ufl.edu for more details. Food and drinks will be sponsored by the University of Florida Department of Pathology. We hope to see you there!

Visit us on the web!
www.pathology.ufl.edu/~alumni

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Our email address is alumni@pathology.ufl.edu

Can you name this resident from 1975?

Answer: John Mahoney, MD, UF Pathology Class of 1978. Dr. Mahoney is in practice in Tallahassee and is a member and past president of the UF College of Medicine Medical Alumni Board of Directors.
Forensic Pathology Teaching and NASCAR

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... autopsy photos, under Florida's open public records law (FS 119), Mrs. Earnhardt immediately sought protective relief from the courts. This would be a major change in the interpretation of the open records law. On specific prior occasions, Florida courts had established rules to prevent release and sensationalism of autopsy photos, but no specific legislation had been requested, and no constitutional challenges resulted.

However, within six weeks of Mr. Earnhardt's death, through the intense efforts of Mrs. Earnhardt, the Florida Legislature passed what became known as the Dale Earnhardt Bill. Governor Jeb Bush signed the bill into law on March 20, 2001. The bill amended Chapter 406 (Medical Examiners) by adding section 406.135, F.S. entitled Autopsies, confidentiality of photographs and video and audio recordings; exemption. This change specifically precludes any person, physician, medical examiner, or pathologist who is in lawful custody of autopsy photographs or other visual or audio recordings from using or releasing them. The law further stipulates release is permitted only by a court order, and willful and knowing violations will result in third degree felony charges. Subsection 4 is particularly chilling; it stated: This exemption shall be given retroactive application. This sentence means that no illustration past, present, or future photograph, video, or audio report can be shown without court order or written family permission.

In Florida, prior to the Earnhardt bill's passage, the elements of medical examiner autopsies were considered public records under Florida's Sunshine Law. Today, 34 states have defined through statutory law or case law that autopsy records in general are not subject to public disclosure. Fifteen other states have closed autopsy records or parts of those records under certain circumstances. Also, six states, Ohio, New Hampshire, Alaska, Connecticut, New York, and Massachusetts already had determined either through statutory law or case law that autopsy records in general are closed. Fifteen states have closed these records or parts of these records in some circumstances, such as when the autopsy was requested by the family and not the state. Additionally, in California, the code of civil procedure denies public access to autopsy reports. Autopsy records in the remaining states are generally open.

The stringent legal limitation of this law has resulted in near total cessation of formal forensic teaching and academic publication of forensic autopsy cases in the state of Florida. Multiple court challenges to the law's constitutionality by newspapers have failed, and the United States Supreme Court ultimately refused to review the lower court decisions. Nearly all teaching in clinical medicine, including forensic pathology, involves the case method, much like teaching law. Vivid photographs of actual spousal or child abuse, and other violence have far greater impact on learning than any computer generated or hand-drawn illustration, especially when teaching medical students, residents, and paramedical and law enforcement professionals. So, the law impacts not just forensic medicine, but all specialized training of medical, nursing, paramedical, and law enforcement personnel who must be educated for prevention.

Immediately following enactment of the Earnhardt law, the need for modifications became transparent. The College of American Pathologists has proposed changes to help break the legislative stalemate and to allow for bona fide teaching, research, publication, and public health education. They would preserve the legislative intent while eliminating some of the practical problems that have arisen in the law's implementation. We hope to see significant changes in the coming legislative sessions.

New Residents

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Fortunately, he chose to join us here at UF providing the Y chromosomes that balances out this new group of residents. Steve was attracted not only to the strengths of the residency program, but the hometown feel Gainesville provides. In his own words, "I had just spent four years in a big city and was tired of the congestion. I am not a 'city person' in the first place, so a smaller college town seemed like a good fit." He is still adjusting to life as a resident and a Floridian, but has enjoyed his rotations thus far.

Dr. Samantha Butler, an undergraduate alumna from the University of Florida, returns to her alma mater to begin her career as a pathologist. Her childhood is unique in the fact that she lived overseas for 13 years in Germany, Saudi Arabia, Turkey, Indonesia and Spain. Her family eventually settled in Lakeland, FL in 1990, where she finished high school. Samantha's initial interest in pathology was kindled during her first year gross anatomy course and further developed during her histology and pathology courses. She feels inspired by the diversity and intellectual challenge the field provides. During her residency interview process, Samantha was drawn back to Gainesville and our residency program. Besides being excited about starting her career, she looks forward to being a true Gator fan again. Following her training at UF, she will continue her family's tradition of service to...