

# [Group's pathology aides fill gaps, lighten the workload](#)

written by CAP TODAY  
February 18, 2024

February 2024—Efficiency can be hard to measure. But Kenneth Batts, MD, of Hospital Pathology Associates in Minneapolis, which contracts with Allina Health to provide anatomic pathology coverage, is sure that a pathology aide program the group started long ago makes its pathologists far more efficient.



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# [The race to keep pace with drug use changes](#)

written by CAP TODAY  
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February 2024—Xylazine prevalence, lab-developed testing, and new technology are converging at Yale New Haven Health in a way that gives rise to questions, worry, and new hope for faster drug testing.



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# AP and CP reporting—the needs, the caveats

written by CAP TODAY  
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February 2024—Anatomic and clinical pathology reporting—what’s working, what’s missing. Three pathologists (all board certified in informatics) and representatives of three information system companies met online Dec. 19 with CAP TODAY publisher Bob McGonnagle to talk about reporting needs, the changes, what’s optimal. The first half of their discussion begins here; the second half will be published in the March issue.



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## From the President’s Desk

written by CAP TODAY  
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February 2024—Even before the pandemic, burnout had become a major issue in medicine. Today, the effects of too much stress, staff shortages, and increasing demands have become so widespread in health care that they cannot and should not be ignored.



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## [Clinical pathology selected abstracts](#)

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February 2024—Patients receiving a pathology report may have many outstanding questions that can cause anxiety and confusion. The 21st Century Cures Act has increased patients' access to pathology reports via delivery to patient portals. However, reports sent without further explanation can exacerbate the anxiety and confusion. Many health care institutions are creating new communication methods to help patients interpret these reports and develop a better understanding of their health status. One such approach is the pathology explanation clinic (PEC), which is an interactive visit between patients and pathologists to discuss the pathology report and review the patient's slides.



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## [Anatomic pathology selected abstracts](#)

written by CAP TODAY  
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February 2024—The gold standard for prostate cancer diagnosis is the pathological examination of prostate biopsy tissue by light microscopy. The application of artificial intelligence (AI) to digitized whole slide images (WSIs) can aid pathologists in cancer diagnosis, but robust, diverse evidence in a simulated clinical setting is lacking. The authors conducted a study to compare the diagnostic accuracy of pathologists who read WSIs of prostatic biopsy specimens with and without AI assistance. Eighteen pathologists, two of whom were genitourinary subspecialists, evaluated 610 prostate needle core biopsy WSIs prepared at 218 institutions, with the option for deferral. Two evaluations were performed sequentially for each WSI: the first without assistance and the second, conducted immediately thereafter, aided by Paige Prostate (Paige, New York City).



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## [Molecular pathology selected abstracts](#)

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February 2024—Precision cancer medicine relies heavily on understanding the genomic landscape of tumors. Prior comparisons between African and European ancestry, though based on limited data, have indicated distinct differences in the landscape of cancer driver alterations between these populations. Whether these discrepancies are mediated by genetic variants or environmental influences is still unclear. Accurately characterizing ancestry-associated genomic alterations is essential to not only improving genomic diagnostic testing but also to developing targeted therapies, biomarkers, and personalized cancer care for diverse populations. The authors conducted a study that leveraged two large genomic cohorts to investigate the relationship between genomic alterations and African ancestry in six common cancers: prostate, pancreas, ovary, nonsmall cell lung cancer (NSCLC), colorectal, and breast.



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## [Q&A column](#)

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### **February 2024**

**Q.** In a case of suspected drug-related death, how specific can an autopsy be in identifying the drug(s) that might have caused the person's death and the amount of drugs present? For example, can a toxicology report say a person's death was caused by a fake oxycodone pill containing fentanyl? [Read answer.](#)

**Q.** A nephrology patient who has been treated with vitamin D<sub>2</sub> for several years contacted our laboratory to find out why their 25-hydroxyvitamin D level of 60 ng/mL is now considered elevated when before it was within the normal range. How can we explain this? [Read answer.](#)



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## Newsbytes

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February 2024—The key to using ChatGPT and other large language models effectively in pathology is understanding not only what they are designed to do but, just as importantly, what they are not designed to do, says Eric Glassy, MD, medical director at Affiliated Pathologists Medical Group, Rancho Dominguez, Calif., and past chair of the CAP Information Technology Leadership Committee.



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## Put It on the Board

written by CAP TODAY  
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February 2024—Members of the CAP Machine Learning Working Group, Informatics Committee, Digital and Computational Pathology Committee, and Council on Informatics and Pathology Innovation have proposed 15 recommendations for evaluating the performance of machine learning-based clinical decision support systems in pathology.



