

SeraCare launches NGS reference material for BRCA

written by CAP TODAY
November 22, 2022

Nov. 22, 2022—LGC SeraCare announced the availability of its Seraseq FFPE BRCA1/2 LGR Reference Material intended for use with next-generation sequencing assays or amplified nucleic-acid-based methods that identify somatic and germline variants in the *BRCA1* and *BRCA2* genes.



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Bright prognosis for brain injury biomarkers

written by CAP TODAY
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November 2022—The lack of tools for assessing traumatic brain injury has long bedeviled physicians. There's CT. And then? "This has been an unmet medical need for years," says Ramon Diaz-Arrastia, MD, PhD, the John McCrea Dickson, MD, professor of neurology and director of the Clinical Traumatic Brain Injury Research Center, University of Pennsylvania Perelman School of Medicine. "As many of us know, it's one of the major barriers that has hindered clinically advanced development of new therapies in TBI. And I think it's pretty clear that the clinical evaluation alone leaves a lot to be desired." "I am always frustrated that we have limited tools," agrees Frederick Korley, MD, PhD, associate professor and associate chair for research in emergency medicine, University of Michigan Medical School, and scientific director, Massey TBI Grand Challenge, Weil Institute, University of Michigan. That's now on the cusp of changing. Blood-based biomarkers for brain injury may not be bellying up to the bar just yet, but they are starting to raise the bar for how physicians assess TBI.



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[Is apolipoprotein B the best measure of CVD risk?](#)

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November 2022—The evidence in favor of measuring apolipoprotein B routinely, with other lipid parameters, is now so overwhelming, says cardiologist Allan Sniderman, MD, that he believes it's unreasonable to deny patients the advantage of apoB. "If evidence is what counts," he says, "then the care Americans receive should include apoB."



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[Canadian pathology study finds high burnout prevalence](#)

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November 2022—Burnout among Canadian pathologists is prevalent, pain related for some, and workload driven for many. "There needs to be more of us," says Julia Keith, MD, associate professor in the Department of Laboratory Medicine and Pathobiology at the University of Toronto.



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[In toxicology, puzzling out the unexpected negative](#)

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November 2022—In cases of unexpected negative results in toxicology testing, avoid overinterpretation, know your assays and providers, and don't put off definitive testing when it's needed, though it's not a panacea.



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[The who, what, and when of respiratory virus testing](#)

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November 2022—In mid-October, flu was picking up, with high levels of activity in Texas, Georgia, the District of Columbia, South Carolina, Tennessee, and New York. Elsewhere, it was still on the lower side, with less known about what was to come but plans in place. And questions, too, about laboratory testing as it relates to SARS-CoV-2, "which is going to be a challenge," says David Peaper, MD, PhD, D(ABMM), a member of the CAP Microbiology Committee.



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No time to wait: How rapid NGS changed cancer care

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November 2022—Rapid next-generation sequencing in a community hospital setting, performed by histotechnologists and interpreted by anatomic pathologists, is possible and paying off, and it “makes the pathologist a much more meaningful part of the precision oncology team,” says Brandon Sheffield, MD, of the Department of Laboratory Medicine, William Osler Health System, Brampton/Etobicoke, Ontario. “It has changed practice at our hospitals,” he says.



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Lab information systems—where the needs are greatest

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November 2022—What labs want and need from their lab information systems and what the missing pieces are in interoperability are what pathologists and LIS company reps talked to CAP TODAY publisher Bob McGonnagle about when they met online Sept. 12. “The biggest challenge is with device integration” in molecular testing, said J. Mark Tuthill, MD, of Henry Ford Health System. “We have million-dollar instruments and we’re still programming runs manually. We don’t have HL7 order feeds. We don’t have the ability to get result feeds outbound from those devices.”



From the President's Desk

written by CAP TODAY

November 22, 2022

November 2022—Like me, many of you can remember when you first thought about specializing in pathology, a decision that for a lot of us was made difficult by the notion of “disappearing” from the scene—working behind the scenes and in relative obscurity. As a specialty we are not as self-explanatory as surgery or pediatrics; indeed it can be exhausting for all concerned to explain, even to our fellow physicians, what we do. And so we often find ourselves somewhere between disregarded and misunderstood. Despite this, there is no other specialty with comparable impact. We are aware each time we sign a pathology report that a cascade of usually predictable consequences will ensue, and that upon this work the types of treatment, expectations for response, and tenor of conversations will depend. We know each time we validate a new test, review quality metrics, or accept a specimen for testing that subsequent laboratory results will be accepted as credible and acted upon. In short, while pathologists are not always visible, there can be no doubt that pathologists are palpable.



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Clinical pathology selected abstracts

written by CAP TODAY

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November 2022—Exposure to lead may cause severe illness in children, including neurological damage, organ failure, and even death. The Centers for Disease Control and Prevention and other agencies recommend routine testing for blood lead levels (BLL) as part of a well-child examination to identify elevated levels and, subsequently, eliminate exposure to lead and initiate therapeutic interventions.



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