

[Study probes value of lay language comments in placental path reports](#)

written by CAP TODAY
May 18, 2025

May 2025—Adding interpretive comments in lay language to placental pathology reports helps physicians and other providers understand the reports and makes it easier for them to share the findings with patients.



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[Canada's path to targeted antenatal RhIG prophylaxis](#)

written by CAP TODAY
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May 2025—Fetal RhD prediction by genotyping can prevent unnecessary RhD treatment in some patients and conserve anti-D immunoglobulin. Other countries long ago adopted a targeted antenatal approach to RhD genotyping, and in Canada change is underway.



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[Close-up on StatLab's portfolio and plans](#)

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May 2025—Despite its extensive portfolio and multiple manufacturing sites, simplicity seems to be at the heart of StatLab, thanks to its self-manufacturing approach. Four years ago, StatLab was primarily a distributor of medical products and manufacturer of a select few. Acquisitions, investment, and a change in the company's profile came with new ownership, and the company, based in McKinney, Tex., is now "a full-fledged manufacturer across the entire histology portfolio," says Joe Bernardo, chairman of the board of StatLab.



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[Shorts on Standards: Integrating the Healthcare Enterprise develops vendor-agnostic approach to interoperability of digital pathology data using the DICOM standard](#)

written by CAP TODAY
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May 2025—Digital pathology has revolutionized tissue-based diagnostics by allowing remote viewing of scanned slides on a display and the use of computational algorithms. However, the implementation of digital pathology has not been without growing pains, with issues arising from the proliferation of proprietary image formats from competing vendor solutions and lack of interoperability between different information systems. Diagnostic data aggregation currently requires toggling between applications that may not be synchronized to patient, specimen, or case. Clinical reporting involves manually pasting diagnostic data between information systems. Measurements, enumeration, and sophisticated analysis of images by machine learning algorithms may also require manual entry of that data.

[Granulomas on FNA: recognizing and ruling out malignancy](#)

written by CAP TODAY
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May 2025—Granulomas are organized clusters of immune cells that form as part of the body’s chronic inflammatory response, typically triggered by persistent antigens, chronic infections, or immune dysregulation. They develop when macrophages are activated, transforming into epithelioid histiocytes and multinucleated giant cells (MGC) in response to ongoing immune stimulation. Granulomas are usually surrounded by T lymphocytes, fibroblasts, and extracellular matrix components. While granulomas are most often associated with infections or autoimmune conditions like sarcoidosis, they can arise in a variety of other processes, including malignancy.

[For myeloid malignancies, how WHO-HEM5 and ICC differ](#)

written by CAP TODAY
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May 2025—How the World Health Organization fifth edition of hematolymphoid tumors and the International Consensus Classification differ for myeloid malignancies was highlighted in cases presented in a CAP24 session last fall. Sanam Loghavi, MD, associate professor of pathology and

laboratory medicine, Department of Hematopathology, University of Texas MD Anderson Cancer Center, spoke of myelodysplastic neoplasms/syndromes (MDS) with defining genetic abnormalities and the allelic state of *TP53* in MDS, among other things. (Kamran M. Mirza, MD, PhD, of the University of Michigan, co-presented.)



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[Claudin 18.2: a new therapeutic target: What are the implications for cytopathologists?](#)

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May 2025—Claudin 18.2 (CLDN18.2), an isoform of claudin-18, is a transmembrane tight junction protein essential for maintaining barrier function and cell polarity in normal gastric and pancreatic epithelium. In malignant epithelial cells, the loss of polarity exposes the CLDN18.2 epitope, leading to its increased expression in gastric and pancreatic adenocarcinomas. CLDN18.2 has drawn attention as a therapeutic target, particularly with the development of the monoclonal IgG antibody zolbetuximab (Vyloy, Astellas Pharma). Zolbetuximab exerts its antitumor effects via both antibody-dependent and complement-mediated cytotoxicity and has demonstrated significantly improved progression-free and overall survival when combined with standard chemotherapy in two pivotal phase three clinical trials (SPOTLIGHT and GLOW). These data validated CLDN18.2 as a promising target in advanced, HER2-negative gastric and gastroesophageal junction (GEJ) adenocarcinoma.



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[NGS and the cancer biomarker balancing act](#)

written by CAP TODAY
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May 2025—In-house or send out, small panel or large, ease of use, getting the most information possible from a sample and doing it fast—that was at the center of a March 17 conversation on next-generation sequencing, led by CAP TODAY publisher Bob McGonnagle. “More and more patients need this testing faster and faster,” Jeremy Segal, MD, PhD, of the University of Chicago, said. What he and four industry executives told us in the online roundtable follows.



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[From the President's Desk](#)

written by CAP TODAY
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May 2025—This won't be news to CAP TODAY readers, but it bears saying: Pathology and laboratory medicine are among the most heavily regulated parts of the health care system in the United States. This regulation is so ingrained in our culture as pathologists that we sometimes deal with it without even thinking. It's part of our training as residents and remains part of our daily work as pathologists for our entire career.



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Clinical pathology selected abstracts

written by CAP TODAY

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May 2025—Independent risk factors for many cancers include health conditions such as type 2 diabetes and obesity. Glucagon-like peptide-1 receptor agonists (GLP-1RAs) are an effective treatment for these chronic conditions and provide glycemic control, weight reduction, and immunomodulation. In a recent study, GLP-1RAs were associated with lower cancer risk in solid tumor cancers. However, the relationship between GLP-1RAs and hematological cancers has not been explored. Therefore, the authors conducted a study to compare the risk of hematological cancers in patients with type 2 diabetes treated with GLP-1RAs to that of patients with type 2 diabetes treated with metformin or insulin. The primary outcome was a first diagnosis of a hematological cancer within 15 years of an antidiabetic drug being prescribed. The retrospective cohort study used TriNetX, a repository of aggregated electronic health record data of medical encounters for approximately 25 percent of the U.S. population. The platform includes medical information from various age groups, racial and ethnic backgrounds, income levels, and insurance types.



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