

ACP news



COVID commentaries

Do we need best practice guidelines for managing our laboratories?

What makes some labs a success...and others a failure?

Forty nights and forty days

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Calendar of Forthcoming Meetings & Courses

DIARY DATES FOR 2020/21

Date	Title	Venue	Contact Details
Friday 6 November 2020	Introduction to Leadership & Management	TBC	01273 775700 info@pathologists.org.uk www.pathologists.org.uk
Monday 9 November 2020	Autopsy Update Day	Royal Society of Chemistry, London	01273 775700 info@pathologists.org.uk www.pathologists.org.uk
Spring 2021	Advanced Leadership & Management Course	Chilworth Manor, Southampton	01273 775700 office@pathologists.org.uk www.pathologists.org.uk

The ACP accepts no liability for errors or omissions in this calendar of meetings. Readers are reminded that advertised meetings may be cancelled. Those intending to attend are obliged to check the details on booking with the organiser in every instance. There will be a £25 administration fee per issue for entries in this table.

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Summer 2020

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The main topic in the national press as well as in the laboratory in the last three months has been the coronavirus, and testing has never been more talked about.

Invitation to Contributors

In addition to the constant flow of material from ACP Council, ACP committees and ACP branches, *ACP news* needs new material from you, the members of the ACP.

Pathology news items (1200-1500 words): Any items related to the ACP or the College, pathologists in general, or medical and management matters that may have an impact on pathologists.

Articles (1500-2000 words): These can be papers, reviews, essays, commentaries, critiques or polemics. Submitted articles are always very welcome, as well as suggestions for articles and/or details of people whom the editor may approach.

Reports (1000 words): These may be personal views and reports on interesting meetings, travel or anything else of interest to the readership. Travel reports are specifically for holders of ACP travel fellowships; however, other reports from abroad are welcomed.

Columns (600 words): Regular and irregular columnists exercise their thoughts. Please feel free to rant.

Pathological creative writing: All literary forms, including short stories, serials, surrealism and even poetry.

Appreciations (1000-1500 words): We prefer appreciations on retirement, rather than obituaries. Please discuss these with the editor before submission.

Photo-journalism: Favoured subjects include pathologists doing something interesting, or College and ACP officers doing anything at all. Interesting or artistic photographs are welcomed.

Cartoons: Suggestions are welcomed.

Curetings: Jokes and humorous titbits are always needed.

Debate: Letters to the editor are welcomed, but may be shortened for publication, or even converted into articles. Please try to refrain from writing unless you are prepared to be published. All criticisms of organisations or named individuals will entitle the parties to a right of reply. Please bear in mind the UK libel laws!

Trainees: Trainees are especially encouraged to submit material in any and all of the above categories. These will normally be placed in the trainees' section. Appointments committees in particular value publications in *ACP news*.

Editorial Policy: The editor would particularly encourage overseas contributors, material from trainees, material from non-histopathologists, commentary on current affairs in pathology, occasional columnists, innovations in pathology, humorous writing on pathology-related topics, and anything downright cantankerous.

Format: The *ACP news* style guide is now available online via the ACP website in PDF format at: http://www.pathologists.org.uk/allpagestuff/publications_frameset2.htm. The publication is a magazine, not an academic journal, and long lists of references are generally considered unnecessary. Where given, references should be in the Vancouver style and should be kept to a maximum of around six per article, unless absolutely necessary. Alternatively, authors may prefer to give a recommended reading list, or a list of relevant internet links. The editor prefers these as they take up less space.

All suggestions are welcome; however, the editor's decision is final.

ACP news is published quarterly. Regular publication dates are:

Issue	Publication month	Copy date
SPRING	February	5 December
SUMMER	May	5 March
AUTUMN	August	5 June
WINTER	November	5 September

Copy is best submitted by email, in any version of Microsoft Word, although it should be possible to accommodate other formats. Submissions on paper by snail mail will also be accepted. Illustrations should be sent as JPEG digital images or hard copy prints. **Please do not embed images in your text. Send them as separate files.**

Please send email submissions direct to the editor at acpnews@pathologists.org.uk

In keeping with GDPR, please state if you wish your contact details to be published; they will appear in the print issue and will also be available as a PDF in the members' area of the website.

We know that heavyweight textbooks are often out of date by the time they come off the printing press, but our newsletter is produced more quickly and we're usually able to comment on current affairs. At least under normal circumstances, but now events move faster than ever. I am reporting some of the facts as they have occurred and comments made at the time, not so much that they are newsworthy at the moment but they could be of more interest in future years as a record of what was happening at the time.

All of this issue has been written under lockdown and I have been nowhere near the laboratory nor a colleague for two months. We are getting used to seeing each other through video links, and this issue's self-portrait is how the world sees me now through the lens of the electronic media with a bigger than usual nose and a motley collection of books on the shelves.

As we look forward to the easing of lockdown and all the difficulties it has caused there can be little doubt that it has slowed the spread of the virus, and some form of social isolation may be necessary in the mid-term or even long term. Whilst we continue to gather knowledge about COVID-19 we appreciate that there is a lot that we do not know in respect of the best containment policies.

At this point over 30,000 have died in the UK; we have lost colleagues, and we must pay tribute to all in the health and social care services, as well as all key workers who have continued in the face of danger. Families of those who have died have been urging the government to maintain lockdown and for the public to keep to the rules.

Virology tests are now a high profile activity and laboratory science has never been more topical. Microbiologists have never been busier; I hear of pathologists being moved to new tasks to help with the emergency while less urgent work slows down. General pathologists belong to previous generations but now we do need some of the more sub-specialised colleagues to work outside their chosen field, bringing new problems.

Haematologists have a new challenge in treating the coagulopathy that accompanies COVID-19, and histopathologists have fewer surgical samples. For a haematopathologist to report haematological cytology is one thing, but for histopathologists to be moved from their microscope to medicating patients is another.

It will be fascinating to hear what we have all learned when time allows. It is becoming clear that when the emergency is over we will not be returning to the old normal and a 'new normal' will emerge. The new normal is now a major topic of discussion. Many doctors will be familiar with patients recovering from life-changing illness and achieving a new normality. The illness



Editor in lockdown conference mode

experience can expose both unaccustomed vulnerability and hidden strengths in individual patients; now the illness is a collective experience.

One of the few constants of our current life is change, sometimes incremental, sometimes by force majeure, and now we are seeing both. Recent changes have included the establishment of pathology networks and new working arrangements with varying degrees of success. Whatever the cause of the change, we need to evaluate the effect in order to generalise best practice and to learn from mistakes as discussed in this issue.

As ever, unless otherwise stated, these views are my own and I welcome comments, dialogue, and discussion just like at any good ACP meeting.

Eric Watts
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NEXT ISSUE

Predictions are always difficult but I expect COVID will be the main interest for months to come



Are laboratories like factories or should they be?
The debate opens...

<https://www.goodwillb2b.com/7-reasons-the-assembly-line-makes-for-light-work/>

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