



Abstract

Introduction

The Human Tissue Resource Network (HTRN),¹ The Ohio State University Comprehensive Cancer Center, facilitates 2011 NCI Best Practices for Biospecimen Resources (BPBR)² compliance for the AIDS and Cancer Specimen Resource (ACSR/NCI)³⁻⁵ and Cooperative Human Tissue Network (CHTN/NCI).⁶ BPBR specifies QA/QC should be customized to assure that "accurate data accompany biospecimens....for research purposes". BPBR specifies that biorepositories use Standard Operating Procedures (SOP) for biospecimen quality including confirmation of histopathology diagnosis. HTRN/ACSR/CHTN developed and deployed a facilitated on-line pathologist/technologist review/release SOP for research tissue QC.

Method

We integrated digital images (Scanscope, Aperio, Vista, CA) of QC tissue, de-identified pathology reports and image analysis detection of percent region of interest (%ROI) using an algorithm trained to recognize 8 tissue classes (Tissue Studio software, Definiens, Munich, Germany) together into a web-based pathology management system (Spectrum, Aperio). The colored ROI visual map can indicate 3 tumor types, glands, necrosis, blood, normal tissue and white space. This integrated system functions on-line for technical and pathology review of QC results before acceptance of procured tissue into a biorepository (ACSR) or release of prospectively procured tissue (CHTN) to investigators. On-line assembled data is reviewed and enriched by technical personnel who flag problem samples. Pathologists review the on-line visual and numerical %ROI data, complete data fields as needed and release or reject samples.

Results

Our facilitated on-line QC process improves turnaround time (3 vs. 10 days) to complete tissue review, reduces pathologist's time and paperwork and generates a permanent, easily accessible, secure QC record. The included tissue digital image, 12 text data fields with 42 data drop down elements, complete ROI map of the image and attached pathology report file constitute a unified record of individual tissue specimen quality.

Conclusion

This technologist/pathologist on-line QC method improves QC data for internal and researcher review of biospecimen quality.





Figure 2: Web-based



Figure 3: Slide H&E tissue image (A) is used to train Tissue Studio for segmentation (B) and categorization (C). The algorithm can then be applied to this image (or others) to produce a final categorization map (D) which color codes each of 8 categories. Category key above.



- QC is performed via web without sending physical material.
- Paper filing system eliminated.
- Pathologist time and paperwork reduced.
- detail.
- QC record.
- Turnaround time improved (3 vs. 10 days) speeding release of tissues.

| | Image |
|---|-------|
| ~ | |

On-line Biospecimen Histology Review for Facilitated Biorepository Quality Control (QC) of Research Tissue

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| | | | | Backgro |
|--|-----------|--|-------|---------------------------------------|
| Slides cut, stained. | | | | |
| nformation entered into database. | | Slides, QC forms, pathology reports sent to pathologist. | | Pathologist review QC forms, patholog |
| QC forms generated, athology reports printed. | | | | |
| placed) process for C | C of | f released tissues. H&E st | aine | d tissues marked |
| | | | | Metho |
| Slides cut, stained, scanned. | \langle | | | |
| nformation entered into database. | \sim | Slides analyzed. | repo | orts) entered into dat |
| I process for quality a | ISSE | ssment and investigator us | se. C | On-line record con |
| Porkger (7022 Tasutevel 41 Classifiation) | | 2x 5x 10x 20x 40x 2x 5x 10x 20x 40x | | |

| Slide ID | ROI | Tumor Area | Tissue QC Match | Anatomical Site | |
|-----------|-----|------------|-----------------|-----------------|---|
| 1111936AQ | | | | • | Γ |
| 1111936AQ | | | | • | [|

Figure 5: QC tissue review web page in Spectrum has 12 text data fields and 42 data drop down elements. Users can access tissue image and category map using thumbnails.



Figure 8: Example of results gathered in QC tissue review web page in Spectrum.

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for TMA on glass if appropriate. Glass has to be pulled for TMA production.



nplete for subsequent production of TMA, microdissection for DNA and review.

Key normal tissue hemorrhage glands, ducts white space tumor type tumor type 2 tumor type 3 necrosis



Figure 4: QC work station with tissue review web page (left) and tissue/ROI map (right).

Good Case for TMA Pathologist Notes Tissue Prep Diagnosis

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A Comprehensive Cancer Center Designated by the National Cancer Institute

| Selected data field | Allowed values |
|---------------------|---------------------|
| | Pass |
| | Fail - Wrong |
| Tissue OC Match | Fail - Benign |
| | Fail - Normal |
| | Fail - Insufficient |
| | Fail - Other |
| | Adrenal |
| Anatomical Site | Bladder |
| Anatomical Site | Brain |
| | ••• |
| | Normal |
| | Benign |
| Primary | Primary |
| Тппату | Disease |
| | Metastatic |
| | Unknown |
| | Tissue Block |
| Tissue Pren | Frozen |
| 1133001100 | Frozen OCT |
| | Needs Review |
| Good Case for TMA | Yes |
| | No |

Conclusions

This technologist/pathologist on-line QC method improves QC data for internal and researcher review of biospecimen quality.

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