

The Arab League  
Council of Arab Health Ministers  
The Arab Board of Health Specializations

جامعة الدول العربية  
مجلس وزراء الصحة العرب  
المجلس العربي للاختصاصات الصحية



## The Scientific Council of Pathology

Anatomic Pathology

### Log Book

May 2021

Name of Trainee: .....

Registration No: .....

Program Director: .....

Training Institute: .....

## Minimum number of Surgical Pathology specimens required during training

System	Type of specimens	Procedure and diagnosis	No. expected	No. done
Female Genital System	Breast bx		60	
	Breast mastectomy		30	
	Axillary dissection		30	
	Uterus D & C		100	
	Cervix		30	
	Ovaries		30	
	Hysterectomy specimens		30	
	Vulva		4	
	Placenta		20	
Head and Neck	Tongue, Nose, Ear, Maxilla, Salivary gland		100	
Gastro-intestinal	Esophagus bx		20	
	Esophagus		3	
	Stomach bx		100	
	Gastrectomy		5	
	Small intestine bx		20	
	Colectomy		10	
	Colon bx		100	
	Rectal bx		100	
	Appendix		50	
Respiratory	Larynx bx		20	
	Laryngectomy		2	
	Trachea		±1	
	Lung bx		20	
	Lobectomy		5	
	Pleural bx		20	
Mediastinum	Thymic Tumour		4	
	Other (indicate)		2	
Skin	Tumours and inflammation		50	
Muscle	Muscle bx		5	
Nerve	Nerve bx		5	
Soft tissue Bone & Joint	Soft tissue Tumour		50	
	Bone Tumour		20	
	Joint Path		10	
Central & Peripheral nervous system	Brain Tumour		20	
	Nerve Tumours		20	

Lymph node	Lymphoma & other Path		100	
Spleen	Tumour & other Path		10	
Peritoneum & Retro-peritoneum	Tumour & other		10	
Endocrine	Thyroid		50	
	Para- thyroid		5	
	Pancreas		5	
	Pituitary		5	
	Adrenal gland		5	
Cardio - Vascular	Heart & Blood Vessels		10	
Urinary Tract	Kidney Tumour		20	
	Kidney bx		20	
	Ureter		5	
	Urinary Bladder bx		30	
	Urinary Bladder		5	
Male Genital	Prostatic bx		30	
	Prostatectomy		5	
	Testes bx		20	
	Testes Tumour		10	
Liver & Gallbladder	Liver biopsy		20	
	Liver Tumour		20	
	Explants		±1	
	Whipple		1	
	Gallbladder Routine		40	
	Gallbladder Tumour		2	
Frozen section	Different organs		50	
cytology	Pap smear		200	
	Exfoliative		200	
	FNAC		100	

**Trainee's Name & Signature:**

**Program Director Name & Signature:**

**Institute Director of Academic Affairs Name & Signature:**

## Electron Microscopy (EM)

Tissue / Organ	No. of specimens required	No. of specimens done
Kidney	10	
Others: (muscle, skin..., etc)	5	

**Trainee's Name & Signature:**

**Program Director Name & Signature:**

**Institute Director of Academic Affairs Name & Signature:**

**Seminars / Lectures  
(Presented)**

<b>Seminar</b>	<b>topics</b>	<b>Date / Year</b>
Seminar 1		
Seminar 2		
Seminar 3		
Seminar 4		
Seminar 5		
Seminar 6		
Seminar 7		
Seminar 8		
Seminar 9		
Seminar 10		

**Trainee's Name & Signature:**

**Program Director Name & Signature:**

**Institute Director of Academic Affairs Name & Signature:**

### Educational Activities presented

Activity	topics	Date/Year	No. of activities expected	No. of activities done
Case presentations			10	
Lectures / Seminars			10	

**Trainee's Name & Signature:**

**Program Director Name & Signature:**

**Institute Director of Academic Affairs Name & Signature:**

### Educational Activities Attended

Activity	topics	Date/Year	No. of activities done
Case presentations			
Lectures / Seminars			
Workshops / Conference			

**Trainee's Name & Signature:**

**Program Director Name & Signature:**

**Institute Director of Academic Affairs Name & Signature:**

**Trainee's Name & Signature:**

**Supervisor:**

Name: .....

Signature: .....

Date: ..... / ..... / .....

**Program Director:**

Name: .....

Signature: .....

Date: ..... / ..... / .....