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Ethics and medicolegal issues in Oral Pathology

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Oral Pathology is a branch of dentistry and a specialized field of pathology which deals with diseases of the oral cavity and its associated structures (i.e., teeth, tongue, maxilla and mandible, temporomandibular joint, lymph nodes, nerves, and blood vessels). It is the only branch of dentistry that represents the nexus between basic sciences and clinical dentistry, covering the subjects of hematology, biochemistry, immunology, serology, microbiology, oncology, histopathology, and cytopathology.¹

Oral Pathologists are usually stereotyped as working with only inert tissues and are removed from direct patient contact. With these existing stereotype issues, limited consideration is given to the existence of a code of ethics in Oral Pathology.²

One of the first studies published in 2002 found that ethical issues in pathology were underrecognized and that ethics education for residents was inadequate.³ An international study found that educational efforts in teaching ethics to residents in laboratory medicine programs were either nonexistent or highly variable.⁴

However, there is a good amount of evidence to consider ethics in Oral pathology. Oral Pathologists are obliged to ensure patients' privacy, ensure that a specimen remains uniquely identified with a specific patient, and treat patients' specimens with respect.^{1,5}

Commonly encountered ethical issues were related to the use of tissue for research, confidentiality/privacy issues, diagnosis errors, and medicolegal issues.^{3,6} The emergence of molecular techniques in oral pathology calls for even more complex ethical issues.²

Unfortunately, there are no guidelines or legislation regarding the use of human tissue in research in our part of the world. The patient has the right to tissues, they have the right to a second opinion, are the owner of the tissue and tissue block, and pathologists cannot deny handing over the paraffin block. Furthermore, Oral Pathologists are ethically obliged to take permission from the patient for using tissues for research purposes.⁷ It is best practice to obtain the patient's consent, and the use of tissue blocks to build commercial tissue arrays must be critically reviewed, keeping in mind patient privacy, autonomy, and intellectual property rights.⁶

However, the Health Insurance Portability and Accountability Act suggested that deidentified patient data are not private and may be shared publicly, such as in a textbook, a platform presentation at a national pathology meeting, a website, a newspaper, a Twitter account, a Facebook group, or a YouTube video.⁸

Accurate and timely histopathological diagnosis plays a vital role in patient management.¹ Error can occur during the surgical pathology during numerous steps

in receiving, processing, and reporting a specimen. The possibility of misdiagnosis and thus the risk of medicolegal issues can be reduced with the quality control measures during pre-analytical, analytical, and post-analytical processes.⁶

Guidelines have been suggested in the existing literature for maintaining quality and ethical practice in histopathology, which include a random review of reported events, blind review, intra- and inter-departmental audit, expert consultation, and telepathology.^{1,6} The surgical pathological report is a potentially legal document. The Association of Directors of Anatomic and Surgical Pathology (ADASP) has provided few recommendations, following which would make the process of reporting more standardized, which may contribute to patient care.⁶

CONCLUSIONS

Nepal Medical Education Commission should introduce Ethics in the Oral Pathology curriculum and encourage the Oral Pathologist to make this a way of life.

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