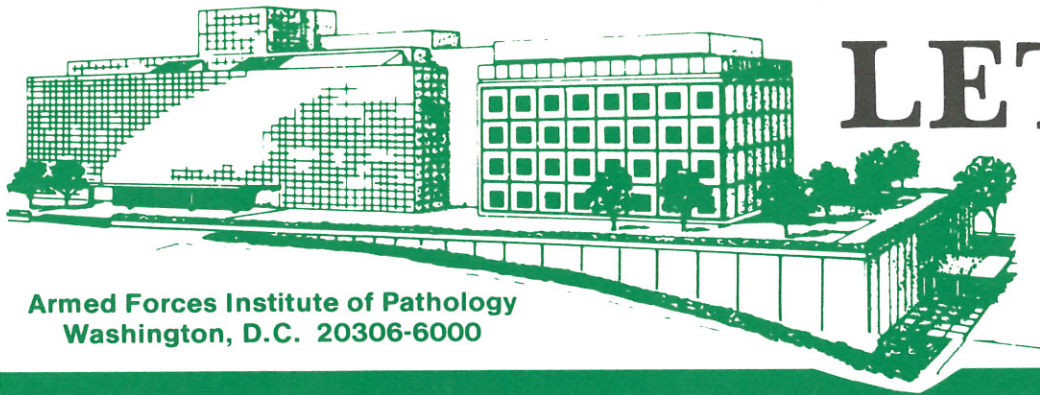


# the AFIP LETTER



Armed Forces Institute of Pathology  
Washington, D.C. 20306-6000

Vol. 148, No. 4  
August 1990

## The Director's Message

### CONSULTATION FEES: MAINTAINING SUPPORT FOR THE AFIP

Budget constraints have become a fact of life, not only for those of us in the government but for many in the private sector as well. We at the AFIP are no exception. Budget constraints in the upcoming fiscal year will effect and even deter some of the consultative, research and education goals of the Institute.

To this end, the AFIP has obtained permission from the Department of Defense to institute consultation fees for specimens received in the Fall of 1990. Details of our new program will be publicized in the upcoming months. Our first department to charge for consultations will be Gynecological/Breast Pathology, with other departments to follow. Specimens received from military, VA and foreign hospitals, as well as cases solicited for their educational and research value, will remain exempt from fees.

I cannot emphasize enough the importance which this new program will have in keeping the AFIP as a national resource in all areas of medical, dental and veterinary pathology. The American Registry of Pathology (ARP) will be the agent for receipt of civilian cases, and for billing procedures. Because the ARP is a nonprofit organization, monies obtained from consultations will be utilized to support and fund a variety of existing and planned activities. We intend to fund new

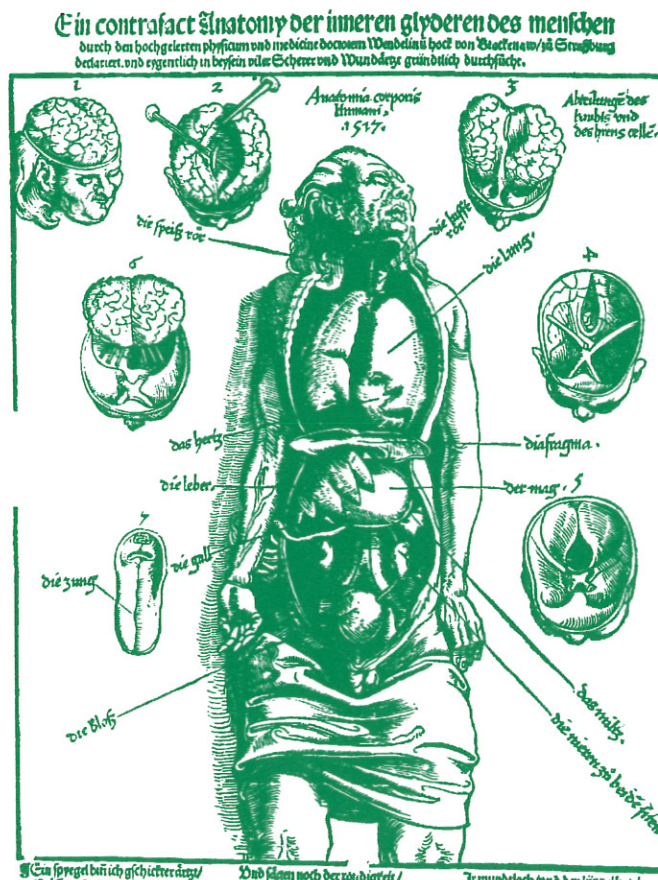
diagnostic investigative Fellowships, particularly in the 3rd, 4th or 5th year of specialty areas in anatomical and experimental pathology.

We also plan to institute new diagnostic procedures utilizing immunology techniques, nucleic acid probes and other newly developing methods. In addition, we will develop an Environmental Pathology Center to serve as an archival resource for the study of environmental agents of injury.

In the coming weeks, pathologists and others affected by the new consultation fee program will receive a letter from ARP detailing our plans. We urge you to read this in detail, and to learn more about becoming a member of our new society, "Friends of the AFIP." Discounts on courses and fascicles will be available for all members.

Through your continued support and cooperation, the AFIP will be able to maintain the high quality of service to which you have been accustomed. We hope you will continue to contribute your problem consultation cases.

*Robert F. Carnei, Jr.*  
Robert F. Carnei, Jr.  
CAPT, MC, USN  
The Director



## PROFILES

### LTC James Voss Retires



LTC James Voss, Chief of Automated Management Services at the AFIP since January 1985, will retire from the Army on August 31. LTC Voss, whose Army service spans 22 years, has directed a staff of 30 personnel and managed an annual budget of \$4 million to provide computer support services for over 700 personnel

engaged in medical consultation, education and research. He most recently served as Acting Executive Officer, where he directed the senior administrative staff of the Institute in providing computer, legal, logistical, contract, personnel and financial management services.

A graduate of Canisius College, NY, LTC Voss earned a Master of Science in Public Administration from St. Mary's University, San Antonio, Texas, and a Master of Hospital Administration from Baylor University. Fully qualified in the fields of Computer Operations, Hospital Administration, Field Medical Operations, and Personnel, LTC Voss is currently a member of the Baltimore-Washington Regional User's Group Board of Directors.

From 1979 until 1982, LTC Voss served as Administrator for Professional Services at Eisenhower Army Medical Center in Augusta, Georgia. While there, he developed plans for the implementation of several stand-alone medical information systems in a 600 bed tertiary care teaching hospital.

From 1982 until 1984 he served as Chief, Medical Service Corps Officer Procurement, Office of the Army Surgeon General. During this assignment, he coordinated development and design of reports, databases and systems to support the full range of personnel reporting and management decisions required by the staff of the Surgeon General.

A resident of Brookeville, MD, LTC Voss will continue working as a manager of data processing activities in the private sector.

### Colonel Malachi Jones Departs



COL Malachi B. Jones, Chief of Logistics Division at the AFIP since 1984, will be reassigned to the U.S. Army MEDDAC at Ft. Dix, NJ (Walson Army Hospital) on 1 September 1990. Ft. Dix, NJ, is the second largest Basic Training Center for the U.S. Army. An Army officer since 1962, COL Jones has overseen a division

with a \$6 million annual budget that provides all medical and non-medical materials for over 700 personnel. He has also overseen an additional \$2.1 million in equipment and maintenance contracts, and directed a capital equipment replacement program with a \$2 million annual requirement.

A graduate of Florida A&M University, COL Jones holds a Master of Science in International Relations from Troy State University, Troy, AL, and a Juris Doctorate from Northern Virginia Law School, Alexandria, VA. From 1962 until 1970, he served as a Medical Administrative Officer, where he held progressively responsible leadership positions in budgeting, personnel management, medical operations, contracting and maintenance operations. Following a tour as Medical Advisor to the Republic of Korea, COL Jones served in a similar capacity at the US Embassy in Cambodia.

From 1974 until 1977, he served as Director of Distribution at the U.S. Army Medical Material Agency in Europe, and followed with an assignment as Chief of Property Management at Walter Reed Army Medical Center until 1981. Prior to his current position, he served as Chief of Logistics for the U.S. Army Medical Activity at Ft. Sill, OK (Reynolds Army Community Hospital).

COL Jones has completed training in Officer Logistics Management, Medical Field Service and Command, and General Staff College. A member of the Health Care Materials Management Society, he has received the Bronze Star, Meritorious Service Medal, Joint Service Commendation Medal, Army Commendation Medal, and Vietnam Service Medal.

*Cover: Woodcut illustration from Hans von Gerfsdorff's Feldtbuch der Wundtartzney, 1517. The plates for the reprinted edition were made from copies of the original 1517 Strasbourg edition.*

## Correction!

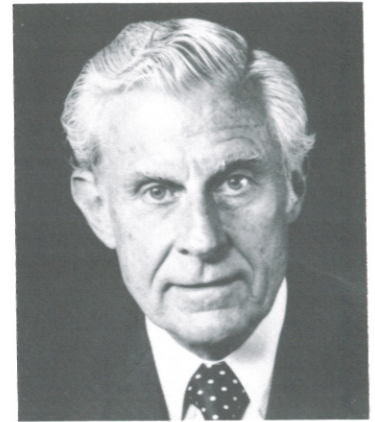
### Dr. Hyman Zimmerman Receives AGA Distinguished Educator Award

Congratulations are extended to Dr. Hyman Zimmerman, Distinguished Scientist of the Armed Forces Institute of Pathology, on receiving the 1990 Distinguished Educator Award from the American Gastroenterology Association on May 14. Dr. Zimmerman, of the Department of Hepatic Pathology, is recognized as an outstanding educator in the field of hepatology.

In the June issue of the AFIP Letter, we mistakenly identified Dr. Lorenz Zimmerman, Chairman Emeritus of the Department of Ophthalmic Pathology, as the award winner.



Dr. Hyman Zimmerman



Dr. Lorenz Zimmerman

### Dr. Florabel G. Mullick Honored by Georgetown University



Dr. Florabel G. Mullick, Associate Director, Center for Advanced Pathology (CAP), was presented with the Silver Vicennial Medal by Georgetown University on April 21. The award, in recognition for 20 years of distinguished academic service as Clinical Associate Professor of Pathology

at the Georgetown University Medical School, was presented to her by Father Leo J. O'Donovan, S.J., Georgetown University President. The ceremonies were held on the Georgetown campus.

Originally from Spain, Dr. Mullick received her

Doctor of Medicine degree in 1964 from the School of Medicine, Puerto Rico. A Diplomate of the American Board of Pathology in Anatomic Pathology, she first joined the AFIP staff in 1972 as Assistant Chief of the Division of Tissue Reactions to Drugs. A succession of progressively responsible positions followed.

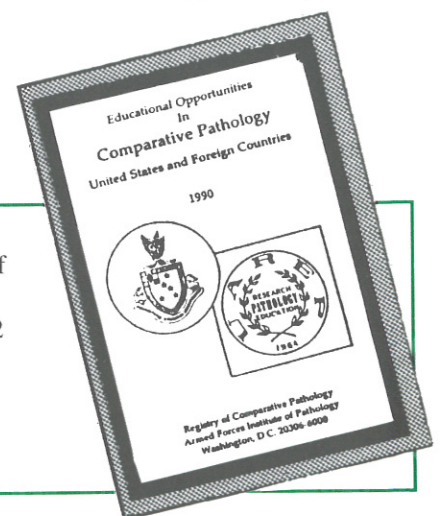
Dr. Mullick, author or coauthor of five book chapters and 30 professional journal articles, has presented lectures and papers at national and international meetings. Her activities have also included the production of numerous award-winning scientific exhibits.

In her present role at the AFIP, Dr. Mullick coordinates the Departments of Cellular, Chemical, Pediatric, Environmental and Toxicologic, Veterinary, Radiology, Infectious and Parasitic Disease Pathology, along with Legal Medicine.

### New Directory Available

The newly revised edition of "Educational Opportunities in Comparative Pathology - United States and Foreign Countries," is now available. It is published by the Registry of Comparative Pathology, and is revised every two years. There is no charge for the directory. Please

contact the Registry of Comparative Pathology at (202) 576-2452 to obtain a copy.



## FROM JONESTOWN TO OPERATION "JUST CAUSE" -- THE OFFICE OF THE ARMED FORCES MEDICAL EXAMINER

A plane carrying 248 U.S. soldiers crashes, killing all on board...47 sailors on the USS Iowa die following a tragic explosion...hundreds perish in a Jonestown, Guyana religious cult. To these and other highly visible disasters, the AFIP's Office of the Armed Forces Medical Examiner responds with professional assistance at the site.

Formally established in March, 1988, OAFME combines the expertise of the Departments of Aerospace Pathology and Forensic Sciences of the AFIP. Under the direction of Dr. Richard Froede, a staff of 10 forensic pathologists and support personnel (consisting of forensic odontologists, photographers and a forensic anthropologist) are readily available for rapid deployment worldwide. At the AFIP, the Toxicology Department is tasked with supporting the OAFME as well as other government agencies in forensic toxicology and drug testing programs.

Multiple disasters have occurred both within the US and overseas during the past 10 years. Defense related missions that have been processed at Dover AFB, Delaware, include the 248 soldiers killed in the Gander, Newfoundland crash; the 47 sailors involved in the USS Iowa explosion; and, the 23 fatalities from the "Just Cause" action in Panama.

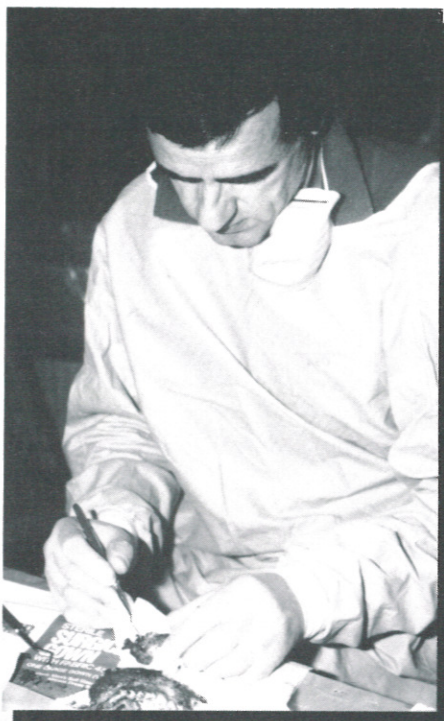
The Dover facility stands ready to process casualties in a rapid and orderly manner. Under a team leader, each set of remains is sent through various stations for photographs, x-rays, fingerprints, dental comparisons and autopsy. After the remains have received a complete autopsy and are positively identified, they are released to the families.

The experience gained from "Just Cause" highlighted the preventive medicine aspect of forensic pathology. By correlating the injury patterns with the equipment, improvements in combat equipment may be tailored for future missions.

The Department of Defense is just one of many federal agencies requiring the services of the OAFME. Routinely, cases are evaluated from the Justice Department, FBI, and DEA. On several occasions, the State Department has requested assistance in mass disasters such as Jonestown, in which hundreds of fatalities occurred. More recently, a team was sent to Africa to help recover and identify the remains of Rep. Mickey Leland and his staff.

A December, 1989, plane crash in San Salvador, El Salvador, resulted in a team being sent to identify four individuals involved in arms shipments to that country. Dr. William Rodriguez, a forensic anthropologist, accompanied the team and helped in the determination of race and possible national origin of the victims. Dr. Rodriguez will become a permanent member of the AFIP/OAFME staff in September 1990.

Fatalities have and will continue to occur in realistic military training environments. Recently, teams have been sent to investigate the fatalities occurring during the joint training missions between the U.S. and its allies in Europe and the Orient. The goal of each investigation is to determine the cause and manner of death, identify the victims, and correlate the injury patterns with the accident site. Improvements in equipment and mission procedures have been achieved through the collection and analysis of injury patterns.



Top: CAPT Paul Auclair, DC, USN, Oral Pathology, examines a portion of the mandible for the purpose of identification following the 1989 Ethiopian air crash.

Bottom: Maj Joni McClain, USAF, MC (left), and Col Donald G. Wright, USAF, MC, conduct an autopsy following a December 1989 plane crash in San Salvador, El Salvador.

## Secretary Sullivan Tours National Museum of Health and Medicine of the AFIP



Sheila Pinsker, Curator of Education, describes the AIDS Education exhibit. Looking on are (from left): Mrs. Sullivan; Dr. Sullivan; Dick Levinson, Museum Community Relations; and Dr. Micozzi, Museum Director.\*

The Honorable Louis W. Sullivan, M.D., Secretary of the Department of Health and Human Services, visited the AFIP's National Museum of Health and Medicine on Saturday, July 7. Dr. Sullivan was greeted by the AFIP's Director, CAPT Robert F. Karnei, Jr., MC, USN, Dr. Marc S. Micozzi, Museum Director, and Dr. Charlene Drew Jarvis, a Trustee of the National Museum of Health and Medicine Foundation, Inc. Dr. Jarvis is also a D.C. Councilmember whose ward is home to the AFIP.

During his extensive visit, Secretary Sullivan was briefed on the Museum's campaign to find a new home in downtown Washington, DC; explored the Museum's AIDS Education exhibit; visited the anatomical and historical collections and the Otis Archives; and, examined the Museum's visiting exhibit on Afro-American medical pioneers.

Dr. Sullivan's visit reflects a cooperative relationship between the AFIP and the Department of Health and Human Services which has existed since 1976, when Congress passed legislation designating the AFIP as the national medical repository.

## AFIP HAPPENINGS

■ The Surgeon General of Royal Thai Army, LT GEN Penya (second from left), visited the AFIP on May 9. Dr. Penya and his staff were treated to a briefing and tour of the facility by Director Robert F. Karnei, Jr., CAPT, MC, USN, which included a visit with Dr. Renu Virmani, (left), Chairperson of the Cardiovascular Pathology Department.



■ Dr. Kamal G. Ishak, Chairman, Department of Hepatic Pathology, participated in the 23rd Annual Meeting of the International Liver Group held in Weiden, Germany, 22-27 May. Dr. Ishak presented four rare cases of granulomatous liver diseases and gave a lecture on flosuridine-induced cholangiopathy. The Mayor of Weiden honored the group at a reception held in the town hall.

■ Dr. Kamal G. Ishak, Chairman, and Dr. Hyman J. Zimmerman, Distinguished Scientist, Department of Hepatic Pathology, participated in the "International Conference on Nomenclature of Liver Diseases," sponsored by the University of Medicine and Dentistry of New Jersey and the Sammy Davis Jr. Institute of Liver Diseases, Newark, NJ, from June 24 to 27, 1990. Dr. Ishak chaired the sections on morphology and tumors of the liver, and Dr. Zimmerman chaired the sections on viral hepatitis and drug-induced liver injury.

■ RADM Robert W. Higgins, MC, USN, Deputy Surgeon General of the U.S. Navy (left), and CAPT Robert F. Karnei, Jr., MC, USN, AFIP Director, relax during Admiral Higgins' June 11 visit to the AFIP. CAPT Karnei briefed Admiral Higgins about ongoing AFIP initiatives and then toured the facility with him.



### THE MCGEE COLLECTION

Dr. Anita Newcomb McGee, an Assistant Surgeon in the Army at the turn of the century, is today known as the "Founder of the Army Nurse Corps." During the Spanish-American War, she selected graduate nurses for the Army and was soon transferred to the Nurse Corps Division of the Surgeon General's Office. In 1901, Dr. McGee was tasked by Army Surgeon General Sternberg to write the bill which established the Army Nurse Corps.

In 1904, Dr. McGee observed the medical lessons of the Russo-Japanese War firsthand when she served as a military attache in Japan. As a translator read to her, she showed great initiative by immediately transcribing the Japanese Army Medical Department's Field Service Regulations for study in the U.S. The Otis Archives' McGee Collection holds material from the period in which she was in Japan, including a speech which details her entire service.

Dr. McGee took an active interest in the Japanese Red Cross Society, as reflected by articles and photographs in the collection. Many of the documents are in Japanese, especially letters from dignitaries, and have not been



translated. The collection also contains many Japanese calling cards which are still today a necessity in all formal meetings. The elegance of the Japanese calligraphy is quite pleasing in this material.

#### Captions:

Bottom left — "Kosai Maru" of Japanese Red Cross, one of the two sister ships built for hospital ships in war - used commercially in peace. Dr. McGee went on "Kosai Maru" to Korea - Manchuria.

Right — Nurse with turban: Miss Suwo, chief nurse on the "Hakiu Maru", a hospital ship of the Red Cross Society. One of the leading nurses of Japan, Miss Suwo is in her out-of-door uniform, wearing her war-medals and decorations.

Bottom right — Group of nurses at Hiroshima Reserve Hospital, July 1904. Dr. McGee is at center, hatless.



### Repository and Research Services Update

The Institute has been routinely using certified mail when returning blocks to the contributor, loaning glass microslides and blocks to authorized requestors, and for forwarding back to the contributor case materials which were not accessioned. The use of certified mail often resulted in a significant time delay, which caused a number of complaints from contributors. Therefore, effective immediately, certified mail will not be used for these routine purposes. The elimination of the use of certified mail should result in a significant cost saving and a shortened postal delay. The use of certified mail

can still be requested by the contributor or authorized requestor in a case by case basis.

We have recently expanded our mailing lists for this letter. As a result, some individuals may receive more than one copy of the AFIP Letter. If this occurs, please forward the mailing labels from both copies and we will insure that any duplication in our mailing lists is immediately corrected. Any correspondence concerning the mailing lists should be directed to the AFIP Research Office, AFIP-RR, Washington, D.C., 20306-6000.

## CENTER FOR ADVANCED PATHOLOGY TELEPHONE LISTING -1990

<u>DEPARTMENT NAME</u>	<u>COMMERCIAL NO (202)</u>	<u>AUTOVON</u>
Dermatopathology .....	576-2140/45 .....	291-2140/45
Endocrine Pathology .....	576-2974 .....	291-2974
Gastrointestinal Pathology .....	576-2871/72 .....	291-2871/72
Genitourinary Pathology .....	576-2961/62 .....	291-2961/62
Nephropathology .....	576-2891 .....	291-2891
Urogenital Research .....	576-2962 .....	291-2962
Urologic Pathology .....	576-2962 .....	291-2962
GYN/Breast Pathology .....	576-2981 .....	291-2981
Hemat/Lymphatic Pathology .....	576-2986/2128 .....	291-2986/2128
Hepatic Pathology .....	576-2951/2975 .....	291-2951/2975
Neuropathology .....	576-2928/29 .....	291-2928/29
Neuromuscular Pathology (Yakovlev Collection) .....	576-2928/29 .....	291-2928/29
Office of the Armed Forces Medical Examiner (OAFME) .....	576-0443 .....	291-0443
Staff member's office - AFME .....	576-3288 .....	291-3288
OAFME - Medicolegal Investigator. ....	576-3232 .....	291-3232
OAFME - Toxicology .....	576-2910/82 .....	291-2210/82
Ophthalmic Pathology .....	576-2955/56 .....	291-2955/56
Orthopedic Pathology .....	576-2932/33 .....	291-2932/33
Soft Tissue Pathology .....	576-2158/2968 .....	291-2158/2968
Cardiovascular Pathology .....	576-2806/2857 .....	291-2806/2957
Cellular Pathology .....	576-2915/2964 .....	291-2915/2964
Cytopathology Division .....	576-2915/2964 .....	291-2915/2964
Molecular Division .....	576-2915/2964 .....	291-2915/2964
Quantitative Division .....	576-2915/2964 .....	291-2915/2964
Immunopathology Division .....	576-2816 .....	291-2816
Environmental & Toxicologic Pathology .....	576-2434/35 .....	291-2435/35
Biochemistry Division .....	576-2855/0167 .....	291-2855
Chemical Pathology Division .....	576-2976/2807 .....	291-2976
Environmental Toxicology Division .....	576-2434 .....	291-2434
Environmental Pathology Division .....	576-2434 .....	291-2434
Infectious & Parasitic Diseases Pathology .....	576-2213 .....	291-2213
AIDS Pathology Division .....	576-2264 .....	291-2264
Geographic Pathology .....	576-2182 .....	291-2182
Microbiology Division .....	576-2954/93 .....	291-2954/93
Legal Medicine .....	576-3285/86 .....	291-3285/86
Oral Pathology .....	576-2679 .....	291-2679
Otolaryngic Pathology .....	576-2366 .....	291-2366
Pediatric Pathology .....	576-2947/2950 .....	291-2947/2950
Pulmonary/Mediastinal Pathology .....	576-2870 .....	291-2870
Radiologic Pathology .....	576-2162 .....	291-2162
Diagnostic Radiologic Pathology .....	576-2534 .....	291-2534
Scientific Laboratories .....	576-0881/0882 .....	291-0881
Alt & HBO Physiology Division. ....	576-2868 .....	291-2868
Cytogenetics Division. ....	576-2430/0793 .....	291-2430
Electron Microscopy Division .....	576-4323 .....	291-4323
Histopathology Division .....	576-2935/2841 .....	291-2935/2841
Veterinary Pathology .....	576-2601/2453 .....	291-2601/2453
Comparative Pathology .....	576-2452 .....	291-2452

### **Correlation of Nucleolar Organizer Regions and Glandular Dysplasia of the Stomach and Esophagus.**

Allen P. Burke, Leslie H. Sobin, Kris M. Shekitka, and Francis A. Avallone

Forty-seven biopsies of gastric mucosa and Barrett esophagus from 32 patients were studied with the argyrophilic nucleolar organizer region method. Twenty-two biopsies were gastric and 25 esophageal. Four showed normal noninflamed mucosa, 14 reactive glandular changes, eight intestinal metaplasia without dysplasia, ten low grade dysplasia with intestinal metaplasia, and 11 high grade dysplasia. The mean number of nucleolar organizer regions was 14.9 for high grade dysplasia, 10.9 for low grade dysplasia, 8.5 for intestinal metaplasia without dysplasia, 6.7 for reactive changes and 3.9 for normal mucosa. The difference between high grade dysplasia and the other groups was significant ( $P=0.004$ ). However, the difference between high and low grade dysplasia was not significant ( $P=0.06$ ), and there was an overlap between reactive and high grade dysplastic lesions. We conclude that although nucleolar organizer counts correlate with the degree of dysplasia, the technique is of limited practical use.

Modern Pathology, 1990;3:357-360.

### **Lymphoepithelial Carcinoma of the Stomach with Epstein-Barr Virus Demonstrated by Polymerase Chain Reaction**

Allen P. Burke, T. S. Benedict Yen, Kris M. Shekitka, and Leslie H. Sobin

Epstein-Barr virus DNA was detected by polymerase chain reaction in a paraffin-embedded block of an undifferentiated lymphoepithelial gastric carcinoma but was absent in a poorly differentiated gastric adenocarcinoma which also had pronounced lymphoid stroma. This is the first report, to our knowledge, of a lymphoepithelial carcinoma of the stomach. The association with Epstein-Barr virus and the distinctive histologic appearance justify the separate classification of undifferentiated lymphoepithelial carcinomas of the stomach similar to those of the nasopharynx from adenocarcinomas with lymphoid stroma.

Modern Pathology, 3:(3)377-380, 1990.

### **Modification of an Automated Vascular Diagnostic System for Hyperbaric Use**

J.W. Dooley, W.J. Mehm, C.A. Jennings, E.P. Flowers, and J.G. Casale

Modifications of an automated, noninvasive vascular diagnostic system (VASCULAB, MedaSonics, Inc.) for measuring blood pressure and plethysomographic blood flow responses to normobaric and hyperbaric oxygenation are described. The system consisted of a pump for inflating and deflating blood pressure cuffs, and a microprocessor program controller (VSC21) with ultrasound Doppler, strain-gauge plethysmograph, and chart recorder. Inclusion of the VSC21 controller in the chamber was required for performance of procedures that could not be controlled from outside the chamber. All other components were outside the chamber. For fire prevention, the VSC21 controller was nitrogen-purged in an acrylic case mounted on a mobile cart. Pressure-cuff tubes were attached via adapted fittings and connectors in the cart to connector ports in the controller's front panel. Electrical power cables and instrument signal wires were routed through chamber penetrations to an electrical power source and other VASCULAB components, respectively, outside the chamber. Initially, compression of the chamber to pressures in excess of 1.68 bar disabled the VSC21, requiring removal of its front membrane panel and ventilation of its pressure-sensitive keypad switches. This allowed automated assessment of blood pressure and calf blood flow at test pressures of 1.97 and 2.96 bar.

Undersea Biomedical Research, 17(3):247-251, 1990.

### **Bilateral Internal Mammary Artery Aneurysms: A Previously Unreported Cause for an Anterior Mediastinal Mass**

John A. Giles, Alan G. Sechtin, Mary M. Waybill, and Richard P. Moser, Jr.

Although anterior mediastinal masses have many causes, vascular causes are among the most important and must always be excluded. Vascular causes usually include aneurysms of the thoracic aorta, the brachiocephalic arteries, the intercostal arteries or, rarely, of the innominate vein. We report a case of a 39-year-old woman with bilateral internal mammary artery aneurysms, an unusual (and, to the best of our knowledge, previously unreported) cause for an anterior mediastinal mass.

AJR 154:1189-1190, June 1990.



# Postgraduate Short Courses in Continuing Education Academic Year 1990

Course Title	Scheduled Dates	Application Deadline	Non-Federal Fee	Federal Fee
Oral Pathology .....	1-5 Oct 90 .....	31 Aug 90 .....	\$295 .....	\$35
#Aerospace Pathology .....	o/a 13-15 Oct 90 .....	12 Oct 90 .....	\$200 .....	\$20
Basic Forensic Pathology .....	12-16 Nov 90 .....	15 Oct 90 .....	\$275 .....	\$30
*Surgical Pathology of the Head & Neck .....	3-5 Dec 90 .....	2 Nov 90 .....	\$295 .....	\$25
Path of Congenital Heart Disease .....	3-7 Dec 90 .....	2 Nov 90 .....	\$250 .....	N/A
Orthopaedic Pathology .....	28 Jan-2 Feb 91 .....	28 Dec 90 .....	\$400 .....	\$30
Neuroradiology Review .....	2-3 Feb 91 .....	2 Jan 91 .....	\$275 .....	\$20
Neuropathology Review .....	4-8 Feb 91 .....	4 Jan 91 .....	\$450 .....	\$30
Pathology of Congenital Heart Disease .....	4-8 Feb 91 .....	4 Jan 91 .....	\$250 .....	N/A
Uroradiology .....	6-7 Feb 91 .....	7 Jan 91 .....	\$275 .....	\$20
Genitourinary Pathology .....	8-13 Feb 91 .....	8 Jan 91 .....	\$500 .....	\$100

# Reflects change in course dates      \* Course offered every other year

## Course Descriptions

### Oral Pathology

Course designed to provide dentists, physicians and trainees in oral pathology, oral and maxillofacial surgery, and general pathology a fundamental knowledge and recent developments of various aspects of oral diseases. Developmental disturbances of the head, neck and oral region, inflammatory diseases of the oral mucosa and jaws, oral manifestations of systemic diseases, and neoplasms of the oral cavity and related structures will be discussed. Lectures will be complemented by case presentations, microscopic slide seminars and clinico-pathologic conferences.

Enrollment limited to 125. Approximately 36 CME credit hours.

### Aerospace Pathology

For flight surgeons, residents in pathology and aerospace medicine, pathologists and other accident investigators with specialized instruction in areas of pathology concerned with aerospace vehicle accident investigations. Will cover pre-accident planning; operational correlations; identification procedures; special autopsy techniques in aircraft correlations; toxicological exam and correlation; practical evaluation and correlation of findings; crash-worthiness; survivability and human tolerances; and the flight surgeon's responsibilities.

Enrollment limited to 100. Approximately 24 CME credit hours.

### Basic Forensic Pathology

Basic training and review of medico-legal autopsy, identification of human remains, blunt and sharp force injuries, child abuse, basic ballistics and missile wounds, sex crimes, sudden and unexpected deaths, asphyxial deaths, drug reactions and drug deaths, and problems arising from investigations and court presentations.

Enrollment limited to 100. Approximately 29 CME credit hours.

### Surgical Pathology of Head & Neck

Course emphasis is on the histopathological appearance of disease processes that involve the upper respiratory tract, salivary glands, thyroid glands and oral regions. Fundamental aspects of surgical pathology of the head and neck will be discussed to include recent developments in these areas. Clinical, radiographic and microscopic characteristics will be illustrated with emphasis on developing an understanding of the basic disease process.

Enrollment limited to 125. Approximately 19 CME credit hours.

### Orthopaedic Pathology

Course will consist of lectures, demonstrations, and laboratory experience in orthopaedic pathology, and will emphasize radiologic-pathologic correlation and conceptual morphologic analysis developed at the AFIP. Course is designed to introduce basic biological principles underlying orthopaedic pathology to both experienced pathologists and senior pathology trainees through a conceptual approach.

Enrollment limited to 90. Approximately 46 CME credit hours.

### Neuroradiology Review

The Sixth Annual AFIP Neuroradiology Review Course precedes the Neuropathology Review Course. The course offers neurologists, neurosurgeons, pathologists, and radiologists a basic review of neuroradiology. The essential morphologic and physiologic principles which create the diagnostic image will be emphasized. Important radiologic-pathologic concepts will be illustrated by CT, MRI as well as conventional studies.

Enrollment limited to 250. Approximately 12 CME credit hours.

### Neuropathology Review

A basic review review of neuropathology stressing recent developments in the understanding of clinical and pathophysiological bases of neurological diseases and their techniques of study. Course especially useful in studying for specialty exams. Radiographs and slides of clinical cases will be available for study and will be discussed in a CPC format. Sets of slides will be available for purchase.

Enrollment limited to 250. Approximately 33 CME credit hours.

### Pathology of Congenital Heart Disease

Designed for fellows, residents, and board eligible candidates in cardiology, cardiothoracic surgery, pathology and radiology. Lectures on the gross and microscopic pathology of the major forms of congenital heart and aortic disease and demonstrations with gross and microscopic preparations and select videotapes. Ample time for interaction between faculty and attendees.

Enrollment limited to 15. Course offered Feb, May, Aug, and Dec each year. When applying, please specify when you want to attend. Approximately 30 CME credit hours.

### Uroradiology

This course is designed to offer radiologists and urologists a summary of the most important morphological principles that underlie the evaluation of roentgenologic signs. Particular emphasis will be placed on the differential diagnosis of abnormal urograms.

Enrollment limited to 200. Approximately 14 CME credit hours.

### Genitourinary Pathology

Course consisting of basic and comprehensive survey of pathology of kidney, ureter, bladder, prostate, testes, penis, and urethra. Course designed for urologists and will be presented by lectures, demonstrations, and study of microscopic slides. Course is not designed for pathologists as it is quite elementary. Microscopes will be provided for the microscopic slide portion of the course.

Enrollment will be limited to 250. Approximately 59 CME credit hours.

# Instructions for Filling Out Registration Form for AFIP Courses

1. **Course Fee:** Payments for all courses are to be made payable to the American Registry of Pathology or ARP. To safeguard your course space, we strongly encourage advance fee payment when registration form is submitted, but not later than the Application Deadline (does not apply to non U.S. citizens).
2. **Application Deadline:** Fifty percent of the course spaces are reserved for federal applicants and 50% for non-federal applicants until the Application Deadline Date. After that date applications will be considered on a first-received, first-accepted basis.
3. **Federal Personnel Please Note:** To insure a space will be held for you, submit an application for each course you desire to attend directly to the Education Division, AFIP. Do this regardless of any funding action.
4. **Accreditation:** The Armed Forces Institute of Pathology is accredited by the Accreditation Council for Continuing Medical Education to sponsor continuing medical education for physicians.
5. **Registration Procedures for International Applicants:**

Mail letter of application to:  
 Chief, Program Resources Branch  
 E/VCP  
 United States Information Agency  
 301 4th Street, S. W.  
 Washington, D.C. 20547  
 Telephone: (202) 485-7228

**Civilians:**

Letter of application should include:

1. Title of Course
2. Inclusive dates of course
3. Your present position
4. Your home and office mailing address
5. Your date and place of birth
6. Your country of citizenship
7. Your financial arrangements for stay at this course (U.S. Government cannot be responsible for any expenses incurred while you are in the U.S.)

With your letter of application, attach a copy of course application form, a check drawn on a U.S. bank or International Money Order, made payable to the American Registry of Pathology, in U.S. dollars in the amount required.

**Military**

Request the desired training through your military training channels to the Security Assistance Office of the U.S. Mission in your country.

**International Applicants Employed by an Agency of the U.S.**

**Government**

Attach to letter of application (see above) a letter certifying employment from your servicing personnel office and mail to:

U.S. Army Health Professional Support Agency  
 Attn: SGPS-EDI  
 5109 Leesburg Pike  
 Falls Church, VA 22041-3258

Residents and fellows deduct 25% of Course Fee

Friends of AFIP deduct 10% of Course Fee

## REGISTRATION FORM - AFIP COURSES

Course Title & Dates \_\_\_\_\_

Name (Last, First, MI) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ Specialty \_\_\_\_\_ Board Status:  Certified -  Eligible

Military/Federal Civilian Employees (Only): Rank/Civilian Grade \_\_\_\_\_

Service Agency \_\_\_\_\_ Citizenship (See Notes 1 & 5) \_\_\_\_\_

Corps:  MC,  DC,  NC,  VC,  Biomedical/Allied Science

Tuition Enclosed: (Payable in U.S. dollars only)  Non-Federal Personnel \$ \_\_\_\_\_  Federal Personnel \$ \_\_\_\_\_

Make All Payments to: AMERICAN REGISTRY OF PATHOLOGY

Mail To: **Non-Federal Civilians**  
 American Registry of Pathology  
 Armed Forces Institute of Pathology  
 Washington, D.C. 20306-6000  
 Telephone: (202) 576-2980

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The Director  
ATTN: AFIP-PA  
Armed Forces Institute of Pathology  
Washington, D.C. 20306-6000

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**Director**

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**Graphics**

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**Photography**

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