## Placental Pathology, a Survival Guide

Drucilla L. Roberts, AID:

 Placental pathology continues to be an underutilized, undertaught, and inadequately handled surgical subspecialty. The requests for placental pathology are soaring, due partby to demands from obstetricians and to the litigious environment in which they practice, and to improved obstetrical care leading to pregnancies in medically challenging situations. Evaluation of the placenta requires a good understanding of the questions and issues concerning both the fetus/infant and the mother. Information from placental pathology can be critical in early neonatal care and in reproductive planning for the family, and it can provide risk assessment for neurologic outcome of the infant. A comfortable interaction among the obstetric staff, mothers, and pathologists often obviates need for legal intervention in unexpected pregnancy outcomes. Some critical pathologic features that involve maternal and fetal management are illustrated herein. A template for gross examination and a few critical histopathologic diagnostic features with clincopathologic correlation are included.

(Arch Pathol Lab Med. 2008;132:641-651)

#### GROSS PLACENTAL FINDINGS/EXAMINATION

I believe that all placentas should have at least a gross examination, saving the full histopathologic examination for a defined subset (Table 1). At the Massachusetts General Hospital, all placentas are delivered to the pathology department with a minimal required set of clinical information: maternal gravidity, parity, gestational age, and a blank section to provide any other information deemed pertinent by the obstetric staff. Using only these provided data, we triage the placenta into a "hold" or "examine" category. Hold placentas are those that do not meet criteria as described in Table 1 and are basically normal-term singleton livebirths who received prenatal care and delivered in the hospital without maternal or fetal/infant pathologic history or complications. The hold placentas are placed in a large, locked refrigerator for at least 7 days and are disposed of after 7 days so long as the infant is not transferred to the reconatal intensive care unit and the mother is not readmitted with an obstetric or other complication. Maternal admission and neonatal intensive care unit admission lists are checked daily for these events. The examine category includes all placentas from deliveries other than those described in Table 1 or are maternal readmissions or neonatal intensive care unit admissions.

Placentas are stereotypic organs that lend themselves to template gross description (Table 2), ensuring that all the important information is obtained and facilitating dictation and transcription. Deviations from this template-for example, twin gestation or other multiples or fragmented placentas—can be handled without the template or with minor deviations from it. The template ensures that the most critical information is noted: color, cord length\*\* (standards in Figure 1), lesions, and trimmed weight. ... The importance of these gross findings is listed in Table 3. This also allows for easy sampling, as once the grosstemplate is complete the necessary sections needed for histology are neatly outlined. We take at least 2 sections of cord (proximal to the placents and proximal to fetus), I membrane roll (including the membrane rupture site), and 3 full thickness sections of parenchyma, including choriomic plate vessels. All parendwmal lesions should be sampled (just a small representative section), and at least one "normal" representative section of parenchyma needs to be sampled.

These "chunks" of placenta, the membrane roll, and the cord sections are placed into a small specimen jar with 10% formalin and fixed for at least 4 hours. Very sick babies or mothers need pathologic interpretation promptly, and these specimens should be processed the same day as accessioned. Others can be fixed overnight, or as convenient. We fix the remaining placental tissues as well and save it until the case is complete.

#### HISTOLOGIC FINDINGS

Remembering that the placenta is an organ with circulations from both the mother and the fetus, examination of the placenta should look for pathology from both individuals. Historically, the focus of placental histopathology has been on maternal side diseases/disorders. Recently, much attention has been focused on the fetal side. There may be much more importance in the fetal histopathology of the placenta in terms of predicting or explaining subsequent morbidity.

Maternal side diseases/disorders that affect the placenta are many and are too mamerous to describe herein. Instead, I will focus on those that have been shown to have important fetal sequellae or recurrence risk.

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# **Placental Pathology A Survival Guide**

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#### **Placental Pathology A Survival Guide:**

Autopsy Pathology: A Manual and Atlas E-Book Andrew J Connolly, Walter E. Finkbeiner, Philip C. Ursell, Richard L. Davis, 2015-08-19 A mainstay for pathology residents Autopsy Pathology is designed with a uniquely combined manual and atlas format that presents today s most complete coverage of performing interpreting and reporting post mortem examinations This lasting and useful medical reference book offers a practical step by step approach to discussing not only the basics of the specialty but the performance of specialized autopsy procedures as well Material is divided into two sections for ease of use a manual covering specific autopsy procedures biosafety generation of autopsy reports preparation of death certificates and other essential subjects and an atlas organized by organ system which captures the appearance of the complete spectrum of autopsy findings Covers forensic pathology in a chapter introducing the subspecialty Offers expanded coverage of microscopic anatomy Includes a chapter on performing special dissection procedures that may not be covered during a typical residency Examines important techniques such as autopsy photography and radiology microscopic examination supplemental laboratory studies and other investigative approaches Addresses the latest legal social and ethical issues relating to autopsies as well as quality improvement and assurance Presents more than 600 full color photographs depicting common gross and microscopic autopsy findings for every part of the body Correlates pathologic findings with their clinical causes to enhance diagnostic accuracy Improved images in the Atlas section provide greater visual understanding Additional online features include dissection videos demonstrating autopsy techniques downloadable commonly used forms for autopsy reports and calculators for weights and measures Expert Consult eBook version included with purchase This enhanced eBook experience offers access to all of the text figures images videos forms calculators and references from the book on a variety of devices Autopsy Pathology: A Manual and Atlas E-Book Walter E. Finkbeiner, Andrew J Connolly, Philip C. Ursell, Richard L. Davis, 2009-02-17 This how to guide presents today s most complete coverage of performing interpreting and reporting post mortem examinations In addition to discussing the basics of the specialty this lasting and useful reference features information on the performance of specialized autopsy procedures The material is divided into two sections for ease of use a manual covering specific autopsy procedures biosafety generation of autopsy reports preparation of death certificates and other essential subjects and an atlas organized by organ system that captures the appearance of the complete spectrum of autopsy findings. The updated second edition features a new chapter on the popular topic of forensic pathology Focuses on hospital autopsy while also providing a brief introduction to forensic autopsy Examines autopsy photography and radiology microscopic examination supplemental laboratory studies and other investigative approaches Includes a chapter on performing special dissection procedures that are usually not covered during a typical residency Presents over 590 full color photographs depicting common gross and microscopic autopsy findings for every part of the body Correlates pathologic findings with their clinical causes to enhance diagnostic accuracy Covers the hot

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Sergi, 2020-10-28 This book covers the full range of pathologic conditions encountered during childhood and youth including tumors and tumor like conditions of all organ systems with direct links to developmental biology pathways and genetics It provides a user friendly road map to the main diagnostic criteria and combines an organ related approach with an explanation of the diagnostic approaches to various specific diseases and syndromes including sequential segmental analysis of congenital heart disease More than 500 new full color macro and microphotographs using more than 500 multi photographic panels are included to provide a realistic basis for comparison macroscopically and under the lens and summarizing tables highlight key information in the concise form required for at a glance review Pathologists will find the book very helpful when signing out complex and challenging cases and it will also prove invaluable for exam preparation and continuing medical education Medical Image Computing and Computer Assisted Intervention - MICCAI 2019 Dinggang Shen, Tianming Liu, Terry M. Peters, Lawrence H. Staib, Caroline Essert, Sean Zhou, Pew-Thian Yap, Ali Khan, 2019-10-10 The six volume set LNCS 11764 11765 11766 11767 11768 and 11769 constitutes the refereed proceedings of the 22nd International Conference on Medical Image Computing and Computer Assisted Intervention MICCAI 2019 held in Shenzhen China in October 2019 The 539 revised full papers presented were carefully reviewed and selected from 1730 submissions in a double blind review process The papers are organized in the following topical sections Part I optical imaging endoscopy microscopy Part II image segmentation image registration cardiovascular imaging growth development atrophy and progression Part III neuroimage reconstruction and synthesis neuroimage segmentation diffusion weighted magnetic resonance imaging functional neuroimaging fMRI miscellaneous neuroimaging Part IV shape prediction detection and localization machine learning computer aided diagnosis image reconstruction and synthesis Part V computer assisted interventions MIC meets CAI Part VI computed tomography X ray imaging Fetal Growth, An Issue of Obstetrics and Gynecology Clinics. E-Book Nathan R. Blue, Bob Silver, 2021-05-14 In this issue of Obstetrics and Gynecology Clinics Guest Editors Nathan Blue and Bob Silver bring their considerable expertise to the topic of Fetal Growth Top experts in the field cover key topics such as placental function and physiology of fetal growth fetal growth and stillbirth fetal growth in multiple gestations and more Provides concise and comprehensive coverage of the issues physicians face every day Presents the latest information on a timely focused topic under the leadership of experienced editors in the field Contains 12 relevant practice oriented topics including recurrence risk of FGR fetal growth curves diagnosis of FGR and LGA routine third trimester sonograms and more

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**Sudden Death in the Young** Roger W. Byard, 2010-09-16 Highly illustrated complete overview of pathological aspects of sudden death in the young from before birth to middle adult life Pathology of the Human Placenta Kurt Benirschke MD, Professor Dr med Peter Kaufmann, 2013-03-14 Most obstetricians and pediatricians would agree that the examination of the pla centa often helps to explain an abnormal neonatal outcome As early as in 1892 Bal lantyne wrote that A diseased faetus without its placenta is an imperfect specimen and a description of a foetal malady unless accompanied by a notice of the placental condition is incomplete Deductions drawn from such a case cannot be considered as conclusive for in the missing placenta or cord may have existed the cause of the disease and death During intrauterine life the foetus the membranes the cord and the placenta form an organic whole and disease of any part must react upon and affect the others Similar thoughts were succinctly detailed in Price's discussion of his concept of the prenatal biases as they affected twins His contribution also admonishes us that placental study is a sine gua non for a more perfect understanding of fetal develop ment 1950 Despite all this understanding of the past and appreciation for placen tal disease great resistance still exists to performing the task of placental examination routinely For many pathologists therefore the placenta has remained a Pathology of the Human Placenta, 5th Edition Kurt Benirschke, Peter Kaufmann, Rebecca N mysterious organ Baergen, 2006-11-17 Pathology of the Human Placenta remains the authoritative text in the field and is respected and used by pathologists and obstetrician gynecologists alike This fifth edition reflects new advances in the field and includes 800 illustrations 173 of them in color The detailed index has been improved and the tables updated Defined terms are highlighted in bold for easy identification and further findings are discussed in small type throughout each chapter Advances in genetics and molecular biology continue to make the study of the placenta one of vast diagnostic and legal importance **Myles** Survival Guide to Midwifery Maureen D. Raynor, Christine Catling, 2017-03-15 New edition of the hugely popular Survival Guide to Midwifery originally created in response to student requests for quality assured dip into information designed for use in the clinical environment The latest edition is fully updated throughout and has new authorship from the UK and

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