Embedding Competency Assessment

EMBEDDING SKILLS AND QUALITY CHECKS

SOP/reference _____

Staff Member _____ Date _____

Assessor _____ Assessment period ☐ Initial ☐ 6 month ☐ Other: _____

C Competent R Remediation required O Not assessed N/A Not applicable

Pre-embedding verification / station readiness	C	R	O	N/A
Verifies cassette identity, tissue count and embedding instructions.	☐	☐	☐	☐
Checks station, paraffin and temperatures; uses PPE / hot tools safely.	☐	☐	☐	☐
Keeps station clean and prevents tissue carryover.	☐	☐	☐	☐
Tissue orientation				
Follows grossing-directed orientation.	☐	☐	☐	☐
Orients tubular structures (duct margins, tubes and appendix) as directed.	☐	☐	☐	☐
Orients membranes / rolls to expose the intended sectioning face.	☐	☐	☐	☐
Orients skin sections and en face margins as directed.	☐	☐	☐	☐
Orients alopecia scalp biopsies, temporal arteries and skin tips per SOP.	☐	☐	☐	☐
Block construction / paraffin handling				
Selects mold; sets tissue plane without overlap; recovers tissue, fills, assembles and cools block.	☐	☐	☐	☐
Quality control / corrective action				
Confirms secure cassette attachment and label legibility.	☐	☐	☐	☐
Reviews block / section quality for orientation, tissue recovery and artifacts.	☐	☐	☐	☐
Checks paraffin support, bubbles, cracks and other block defects.	☐	☐	☐	☐
Corrects or escalates defects; documents re-embedding and reassessment.	☐	☐	☐	☐

CASE / BLOCK REVIEW

☐ Direct observation ☐ Block review ☐ Section review ☐ Questions

Case / block ID	Notes

Case / block ID	Notes

Assessment outcome ☐ Competent ☐ Other: _____

Staff Member signature _____ Date _____

Assessor signature _____ Date _____

Medical Director signature _____ Date _____