**Definition:** Amended report is strictly defined as changes to information that occurs after release of an original report. Any supplemental or secondary report intended to revise and change information that was present on the original report, issued after completion and distribution of original report.

**Purpose:** Amended reports (revised reports) are reserved for significant modifications to a previously released pathology report and are monitored as a standard component of quality assurance programs.

Amendments are usually given greater emphasis, as this may affect patient care, and are often accompanied by additional notification to the clinicians.

**Procedure:** All amended reports and corresponding original reports for surgical pathology, cytopathology and autopsy will be documented, collated and reviewed for classifications of reasons for amendment as indicated below:

**Reasons for amendment:**

- **Significant primary diagnosis change or errors (such as nevus to malignant melanoma)**
- **Significant diagnostic information changes (such as margin or nodal status change)**
- **Patient identification errors (wrong patient name in the original report)**
- **Specimen source identification errors (wrong site left vs right)**

The reason for the amendment should be stated in the report and the clinician should be notified of the updated report and the time, date and name of clinician informed should also be documented in the report.

The data generated will be collated to calculate the amended report rates and also reviewed for reasons for amendment. The information could potentially be used to improve error detection and reduce the number of amended reports.

The national average rate of amended pathology report is 1.5/1000 cases.