American Registry of Pathology Report for 2011

The American Registry of Pathology (ARP), along with the entire pathology community, experienced a huge loss with the sudden passing of William A. Gardner, Jr., M.D., Executive Director, on October 2, 2011. Throughout Dr. Gardner's 46 years of service to the fields of medicine and science, he became well-known as an outstanding physician and a leader, mentor, and friend. During his ten year tenure at ARP, Dr. Gardner steered the organization through turbulent waters created, in part, by the closing of the Armed Forces Institute of Pathology (AFIP). Dr. Gardner will be truly missed.

With the closure of AFIP on September 15, 2011, ARP has become a different organization. As a direct result of the AFIP closure ARP has shed one-third of its work force, including all of our physicians and pathology laboratory and support positions. Today, more than 80 percent of ARP's efforts are in support of the forensic science functions of the Armed Forces Medical Examiner (AFME). In accordance with the Department of Defense Base Realignment and Closure decisions, those functions and the 160 ARP employees who support them are moving from Rockville Maryland to Dover Delaware during the period November 2011 to March 2012. ARP will also relocate our administrative organization (8 staff in Accounting, Human Resources, and Operations Management) to an office facility near the Dover Air Force Base. The ARP Press editorial staff will remain in Silver Spring Maryland.

During 2011 the National Museum of Health and Medicine relocated from AFIP to a new facility in Silver Spring Maryland. ARP continues to support the Museum with 19 staff members, although our contract is expected to end in May 2012. ARP will compete for any follow-on contract in April 2012.

ARP Press is on track to complete our current series of pathology atlases by 2014. In this past year, we published 3 volumes: Tumors of the Prostate Gland, Seminal Vesicles, Penis, and Scrotum; Tumors of the Pituitary Gland; and Non-Neoplastic Diseases of the Bones and Joints. We have another 12 tumor volumes and 4 nontumor volumes under development. Next to be published will be Non-Neoplastic Diseases of the Skin and Tumors of the Jaw. ARP continues to support hospitals and laboratories in underserved countries with complementary Atlases.

For the last three years, ARP's attorneys have pursued legislation to revise our Congressional Charter (10 U.S.C. 177) move the relationship that we had with AFIP to another military medical agency. Our efforts have been met with resistance from some in the Health Affairs component of Defense Department who apparently would prefer to drop any synergies that the ARP-AFIP relationship created. Nevertheless, we were able to get Defense Department agreement to amend several provisions in the Charter that are no longer appropriate given the closure of AFIP, such as the requirement that AFIP approve the selection of the ARP Executive Director. While our proposed amendment is a "technical correction" and requires no funding, our efforts were stymied by the difficult climate in Congress this past year. We will continue to pursue this amendment in the current Congressional term.