



ACADEMY OF CLINICAL LABORATORY
PHYSICIANS AND SCIENTISTS

NEWSLETTER

Spring, 2003

Editor: Geza S. Bodor
Denver, Colorado

President's Message

Alan Wells

Fellow ACLPS Members:

As we are getting ready to meet again in Tucson, there are a few things to think about for more productive discussions at the Annual Meeting. Thanks to the work of Hossein Sadrzadeh and Ron Schiffman, our local hosts, and Eric Spitzer, the PESYIAP Director, we will have another enjoyable and educational meeting with a full slate of young investigators. Another sign of our health is that a large number of individuals indicated that their Departments would be looking for new recruits at this meeting; this is despite a tepid economy and the further unique challenges facing both health care and biomedical funding these days. All of these signs point to an optimistic future for our discipline and our Academy.

New tests, testing modalities and even diseases are being introduced at an accelerating rate; these are both challenges and opportunities. The fields of genomics and proteomics are maturing to the point of introduction into routine clinical medicine. In addition to the excitement that such paradigm-shifting technologies bring, the challenges are immense. Many of these newer targets are still

unproven in widespread utilization and many have gotten ahead of the medical care available in that the steps to be taken for the patient are far from evident. The interpretation of these tests, and the education of the clinicians will be challenging. Furthermore, these new technologies are eagerly being applied by not only anatomic and clinical pathologists but also those in other disciplines. The issues are not ones of turf and billing, but the more important ones of intellectual/academic access and input, and who is in the best position to assure not only test robustness but also interpretation and communication to the patient. These challenges are not new, but will require a multidisciplinary and team-building approach that we have successfully applied before, and, as before, it will be slow and individually tailored at each laboratory. Still, this is an exciting opportunity that will test our abilities and integrate us ever more fully into the patient-care team.

The new tests and diseases also are shifting the ways we provide our expertise. Many of the newer analytes are focused on disease predilections often without clinical interventions. For instance, the markers for

predilection for cardiac risk have to be interpreted in the absence of clinical directives. And the newer diseases, SARS is this year's west Nile virus, bring us the challenges of gearing up for diagnosis new entities even when the causative agents and comorbidities are still uncertain. Along with bioterrorism and chemical terrorism, these newer challenges force us to be proactive with designing testing mechanisms as well as re-engineering our laboratories to minimize risks to our technologists. The xenotransplant push will only increase the pressure to be prepared for the unknown. Even though these are occurring while under the pressure to cut budgets, the speed of response and progress is exhilarating.

The Academy has an opportunity to become even more directly involved in training of our next generation. After discussion and agreement by the Executive Council, we are in talks with ASCP to formulate and generate the Laboratory Medicine/Clinical Pathology topics of the RISE. Mark Wick, who directs the RISE resident in-service examination) for ASCP, approached us to undertake this monumental task. ASCP has already made arrangements with ADASP (Association of Directors of Anatomic and Surgical Pathology) for that organization to function similarly for the AP part of the RISE. This will require not only designing some 70 questions a year, but also first formulating a core curriculum. The members of the Executive Committee all felt that this was central to our mission and an opportunity that could not be shirked. We are not, however, naïve to the difficulty and work required. We hope to have a session in Tucson to discuss how to proceed. Pete Rainey, Brian Smith and Steve Spitalnik have bravely stepped forward to get the ball rolling, but everyone is encouraged to come with ideas and energy to contribute to or even lead this effort.

These developments all point to a vibrant discipline and growing Academy. Therefore it is ironic that once again, the ability to be

trained in LM/CP only is being challenged. This time the pressures are the logistics and costs of providing individual exams in LM/CP or AP by the ABP. For that reason, I undertook an unscientific survey over the internet last month. By asking who had trained in straight LM/CP, I was trying to gauge the desirability of such a track. This is not to minimize the contributions of those who trained differently. Our discipline would not function with those who have come via the AP/LM route, through doctoral degrees, and even from other medical disciplines; I suspect that these routes lead to the majority of our colleagues and our membership. But, in recognizing the diversity of our roles and our individuals, I would fight to maintain all the options, and this is the one being questioned now. As of May 7, 62 ACLPS members responded that they are trained initially in LM/CP only. They are currently functioning in these roles in 27 states and Washington DC. (For those of you who are data-driven, and if we weren't we would not be in this field, the following states (and Puerto Rico) are still unrepresented: Alaska, Arkansas, Delaware, Hawaii, Idaho, Indiana, Kansas, Kentucky, Louisiana, Maine, Michigan, Mississippi, Nevada, North Carolina, North Dakota, Ohio, Oklahoma, Rhode Island, South Carolina, South Dakota, Vermont, West Virginia, Wyoming.) This demonstrates a large cadre of individuals providing valuable service across the country. Pete Rainey is collecting data on LM/CP only resident outcomes from a half dozen programs that have generated a substantial number over the past decade. These findings will be presented to the ABP as evidence that this is a viable option, not only to attract individuals to Pathology & Laboratory Medicine, but also to provide trained individuals to function in clinical service, research and education.

One further request is that you post all open positions your Departments may have on the ACLPS web site. In addition, if you hear about

appropriate positions in other institutions or in industry, please encourage them to post those positions also (it is free of charge). This way, the ACLPS could be a 'clearing house' for our field.

I look forward to turning the Presidency of ACLPS over to Fred Apple next month knowing that the future is bright even if new

challenges appear. Still feel free to contact me directly with suggestions of how ACLPS may better serve its members (wellsa@msx.upmc.edu).

Alan Wells, ACLPS President

Announcements

2003 Paul E. Strandjord Young Investigator Awards Program

This year forty-six abstracts were submitted by individuals from fourteen institutions. All of the abstracts were scored by an anonymous, blinded panel of ACLPS members. Based on these scores, thirty individuals were selected to receive Paul E. Strandjord Young Investigator Awards. The abstracts cover a broad range of basic and applied research in all of the major areas of Laboratory Medicine. The abstracts will be presented in Tucson on Friday, 6 June 2003.

Eric D. Spitzer, MD, PhD
Director, Paul E. Strandjord Young Investigator Awards Program

2004 ACLPS Annual Meeting in Denver

The 2004 Annual ACLPS meeting will be held June 3-5 at the Westin Tabor Center in Denver, Colorado. The Co-Hosts for this meeting are Geza Bodor and Mike Wilson.

The program for the meeting will be similar that held in the recent past, starting with a reception on Thursday evening and concluding with the annual business meeting and lunch on Saturday. Several optional tours are being discussed, as well as spectacular sites for the banquet. Those of you who like to ski may bring your equipment for an early summer excursion to Arapahoe Basin after the meeting.

Michael L. Wilson and Geza S. Bodor
Co-Hosts

Invitation to Tucson

Dear Colleagues,

It is with great pleasure and pride that I invite you to join us to participate in our annual ACLPS meeting in Tucson. The meeting will be held at the beautiful and elegant Hilton resort in the foothills of Catalina mountain, June 5-7, 2003. Dr. Ron Schifman and I have put together a comprehensive program that covers the latest in different disciplines of laboratory medicine. We have been fortunate to assemble some of the most recognized authorities in the field of laboratory medicine to share their expertise with us. Saturday

morning's panel discussion on test utilization will provide a great opportunity for an effective and informative interaction between the speakers and the participants. Our Paul E. Strandjord Young Investigator Award winners' abstracts are indeed an excellent collection of very interesting and informative results. Please join us in Tucson, see old friends, exchange the most current scientific information, taste the best of Southwest cuisines and find out first hand "how the west was won". See you in Tucson.

Hossein Sadrzadeh, PhD, and Ron Schifman, MD

2003 ACLPS Annual Meeting Program
Hosted by the Southern Arizona VA Healthcare System
And University of Arizona
Sheraton El Conquistador Resort and Country Club
June 5-7, 2003, Tucson, AZ

Meeting Agenda

Thursday June 5

Afternoon
3:00-5:00 p.m. Executive council Meeting
3:00-6:00 p.m. Registration
6:00-8:00 p.m. Welcome Reception

Friday June 6

7:30-8:30 a.m. Breakfast
8:30-9:45 a.m. Young Investigator Presentations
Chemistry (Sadrzadeh)
Hematology (Spier)
Microbiology (Schifman)
Molecular Biology (Wolk)
9:45-10:00 a.m. Break
10:00-11:45 a.m. Young Investigator Presentations
Chemistry (Sadrzadeh)
Hematology (Spier)
Microbiology (Schifman)
Molecular Biology (Wolk)
11:45-1:00 p.m. Lunch
1:00-2:00 p.m. **Cotlove Lecture**
Thomas Grogan, MD
Professor of Pathology
University of Arizona
*“ Development of Automated
Immunohistochemistry And In-situ Hybridization
Instruments ”*
2:00-2:15 p.m. Break
2:15-3:0 p.m. Steve I. Gutman, MD, FCAP
FDA Office of Device Evaluation
Rockville, Maryland
*“The FDA's Role in the Regulation of Laboratory
Tests: An Update on IVDs, ASRs, OTCs, CLIA
Waivers, and Other Wonders of the Regulatory
World”*
3:00-3:30 p.m. Break
3:30-5:00 p.m. **Breakout sessions**
Session A. Clinical Chemistry - Dr. Sadrzadeh
Leslie Boyer MD: *Correlation of Snake venom
Antigen and Antivenom with Hypofibrinogenemia*

and Thrombocytopenia

Jude Mc Nally, PharmD: *Rattlesnakes and
Venom*

Session B. Hematology - Dr. Spier

Catherine Spier, MD: *Pre-transplant HLA
Typing: Pitfalls and Solutions*

Lisa Rimsza, MD: *Diagnostic and Research
Techniques in Hematopathology*

Session C. Microbiology - Dr. Wolk

Steven Fischer, MD, PhD: *Using Quantitative
PCR to Increase the Clinical Utility of Testing for
Agents of Interstitial Pneumonia: Assaying Oral
Wash samples for Pneumocystis carinii*

Larry Reimer, MD: *Update on Laboratory Tests
for HIV Diagnosis and detection of Resistance*

5:00-6:30 p.m. Optional planned activity

6:30-10:30 p.m. Reception and Awards Banquet

Saturday June 7

7:30-8:30 a.m. Breakfast - Special Presentations

Ron B. Schifman, MD: *Introduction*

S. Shahangian, PhD: *Hospital Coagulation
Laboratory Practices, United States - 2001*

Donna Wolk, PhD: *Document Control with
Electronic management Systems*

8:30-10:45 a.m. Panel Discussions
Utilization management

Ron B. Schifman, MD

George Cembrowski, MD, PhD

Philip Foulis, MD

10:45-11:00 a.m. Break

11:0-12:00 p.m. Roundtable discussion

12:00-1:30 p.m. Lunch and Business meeting

2:00-4:00 p.m. Executive Council Meeting