

# Annual Report

*AACC's Vision: To provide national and worldwide leadership in advancing the practice and profession of clinical laboratory science and its application to healthcare.*

## Message from Susan Evans, PhD, 2003 President:



AACC has long been known for its significant role in the advancement of the profession and field of clinical laboratory medicine. In 2003, two of the cornerstones of our programming, the Annual Meeting and *Clinical Chemistry*, continue to be outstanding contributors

to this role. Our thanks go to Dr. Jack Zakowski and the members of the 2003 Annual Meeting Organizing Committee and to Dr. David Bruns and the members of the Board of Editors of *Clinical Chemistry*. The scientific program and exhibition in Philadelphia drew visitors from around the world, and the journal continues to define excellence in peer-reviewed scientific publications.

I want to acknowledge and thank the dedicated member volunteers and AACC staff who contribute so much to the association. Our programs are fueled by the creative contributions of so many. We are an association of individual members with both a commonality and diversity of needs and interests. The strength of the association is in its membership. Through participation on committees and working groups throughout the association, the members have the opportunity to help shape its future direction.

In 2003 we focused on a number of key areas, including membership and leadership, the value of professional and diagnostic testing, and member communication, as well as our core programming in science, technology, and clinical and laboratory practice. Some additional key accomplishments were:

- *Lab Tests Online*, the patient-oriented laboratory Web site, continues to grow in the number

of contributing partners, sponsors, and visitors. In 2003 the site won the prestigious Summit Award from ASAE, which recognizes its contribution to society, and a Gold Award for Best Health/Healthcare content in the fourth annual eHealthcare Leadership Awards. The original members of the ITO Editorial Board received an AACC Presidential citation in Philadelphia for their significant contribution to the success and quality of this important site.

- We continued our "path to e" through enhanced Internet services and Internet-based educational programming.
- The board updated the strategic plan to reflect an increased emphasis on advancing the profession, the role of the laboratorian, and the importance of recruiting young professionals into the field of laboratory medicine and AACC involvement.
- We continue to partner with other laboratory associations to provide educational programming and to work together to increase awareness of the role of the profession and the laboratory in the quality of patient care.

I want to give special thanks to association groups, such as the EBM Advisory Group, TDM Renaissance Group, and the Government Affairs Committee, for taking leadership roles in working with regulatory and funding agencies to enhance the recognition and stature of AACC and the profession. The use of outcomes data and evidence-based medicine are important tools in communicating the value of diagnostic procedures and enhancing the quality of clinical decision making. These groups have established valued relationships with the AHRQ, the FDA, and other agencies and organizations. In 2003, AACC was asked to make project recommendations, endorse important new guidelines like the American Heart Association's guidelines for the prevention and treatment of cardiovascular disease in women, and recommend guidelines for review of new TDM assays.

It was a privilege to serve as AACC president in

2003. Like the presidents before me, I benefited from a continuum of leadership that has supported the association for many years. The successes of 2003 were built on the accomplishments of previous years and the contributions of many. My best wishes to Dr. Tom Moyer, who will lead the association in 2004, and to Dr. Mitch Scott in his role as President-Elect. I look forward to serving as immediate past president and will cherish my memories of this year.

## 2003 Successes

- AACC's Lab Automation Conference series set a record for attendance: 201 laboratory professionals joined us this year in San Francisco.
- The 2003 Clinical Lab Expo in Philadelphia broke AACC records for the number of booths—almost 1,500—in the expo.
- *Lab Tests Online* hosted 2.6 million visits (63 percent more than in 2002).
- *Lab Tests Online* received 180 press mentions, including the *Wall Street Journal*, *US News & World Reports*, *Business 2.0*, and *Ladies Home Journal*.
- The number of visitors to *AACC Online* continued to increase, surpassing 81,000 per month by the end of 2003.
- *AACC Online* launched a new online registration feature for meetings and audio-conferences, providing greater ease and efficiency for customers and members.
- *Clinical Chemistry ISI<sup>®</sup> Impact Factor* reaches an all-time high of 4.788. It remains the highest among all journals in the field of clinical laboratory science.

## Annual Meeting & Clinical Laboratory Exposition

AACC's 2003 Annual Meeting & Clinical Laboratory Exposition in Philadelphia from July 20 to July 24 attracted more than eighteen thousand participants from more than ninety countries. The Clinical Lab Expo grew again, to nearly 1,500 booths sponsored by nearly 600 exhibitors. Conference participants chose from more than 170 programs, including 5 plenary sessions and 31 EduTraks. More than seven hundred scientific posters updated and informed attendees. The five plenary session speakers were:

- Craig Venter, PhD—AACC Lectureship Award recipient (Sequencing the Human Genome: Gateway to a New Era in Science and Medicine)
- Atul Butte, MD (Novel Visualization and Bioinformatics Techniques in Functional Genomics)
- E. Magnus Ohman, MD (Evolution of Cardiac Markers and Their Use to Guide Therapy)
- Barbara Weber, MD (Genomic Approaches to Cancer Gene Discovery)
- David Nash, MD, MBA (The Laboratory's Role in Outcomes: A Physician's Perspective)

The program covered the gamut of laboratory practice—from infectious disease testing to point-of-care testing management to many sessions on DNA, genetic, and molecular testing. An exciting mix of cutting edge science, sessions to enhance management skills, and opportunities to network with peers from around the world made the program a must-attend event.

## 2003 San Diego Conference

Once again, the San Diego Conference Organizing Committee planned and presented an outstanding event. The 2003 conference was held in Baltimore from October 30 to November 1. The committee used the opportunity of being in Baltimore to invite outstanding speakers from the MidAtlantic, including keynoter Bert Vogelstein, MD, of Johns Hopkins University, who updated participants with his presentation "Digital Technologies for Cancer Diagnostics." Following the established format, two morning sessions focused on new technologies for molecular and genetic technologies, while two afternoon sessions covered potential applications of new technologies, and the last session Saturday morning covered clinical applications for new technologies.

## Oak Ridge Conference

The 35th Annual Oak Ridge Conference explored "New Approaches to Diagnosing Neurological Diseases." In the keynote presentation, R. Alta Charo, JD, of the University of Wisconsin—Madison School of Law presented "Emerging Challenges in Ethical Management of Clinical Trials." Invited speakers presented a range of diagnostic technologies for Parkinson, Alzheimer, and Huntington diseases. The Wallace H. Coulter Foundation provided funding for the conference.

## Laboratory Portal Jamboree: Powering Your Lab with Web Functionality

This was the third in a series of annual conferences that have focused on how to leverage the Internet to improve laboratory operations. CAP and API once again co-sponsored the program. A new feature of the highly rated program included a sponsors' exhibit during the conference lunch. The program attracted 108 paid attendees and was supported by Atlas Development Corporation; LabDat, Inc.; 4 Medica, Inc.; Cerner Corporation; CareEvolve; LabTest Systems, Inc.; McKesson Corporation; Misys Healthcare Systems; Park City Solutions, Inc.; SCC Soft Computer; SIA A Sysmex Company; and Triple G System Group. Many supporters mentioned that they would start attending the AACC Annual Meeting.

## Laboratory Testing for Cardiac Disease: Options and Answers

This event was the third in an occasional series of cardiac-focused conferences. The one-day format, with a dinner presentation hosted by the Chicago Local Section, offered a broad range of topics that highlighted the role of the clinical laboratory in care of patients with ACS and heart disease. The program drew 113 participants. The Centers for Disease Control and Prevention co-sponsored this event; Bayer HealthCare Diagnostics provided financial support.

## Laboratory Automation: Customizing Solutions for Your Institution

This event, held November 6 to November 7 at the Pan Pacific Hotel in San Francisco, was the fifth annual edition of the Lab Automation Conference Series. The format—one day of lectures followed by a half day of sponsor-led breakout sessions—was maintained from previous years, and participants had the opportunity to interact with specific vendors. This year the event drew 201 attendees—

a record for the Lab Automation series. Attendees included thirty-three international participants from eleven different countries—Belgium, Canada, Germany, Hungary, Italy, Japan, Mexico, the Netherlands, Saudi Arabia, the United Kingdom, and the United States. A&T Corporation, Abbott Laboratories, Bayer HealthCare Diagnostics, Beckman Coulter, Dade Behring, LAB-InterLink, Olympus America, Ortho Clinical Diagnostics, Roche Diagnostics, Sysmex America, and Tecan U.S. supported the program.

## 2003 Professional Practice in Clinical Chemistry

This course was held in Arlington, Virginia, from April 27 to May 1 and attracted ninety-three attendees. Thirty-eight lectures were presented, providing an intense review of the clinical chemistry field. Attendees also participated in interactive case study sessions.

## Audiokonferences

**Pre-Diabetes**—This highly rated program, co-sponsored by the Endocrine Society, was designed to help laboratorians understand the definition of pre-diabetes in children and adults and the increasing role of laboratories in diagnosing pre-diabetes and metabolic syndrome. The program tried an Oprah-style dialogue/interview format between a laboratorian and a clinician. This new format was well received by the audience and helped to keep them engaged. The program attracted forty-four paid attendees and was supported by Bayer.

**Managing Your POCT Program for Success**—The 2004 POCT audioconference series focused on POCT billing, cardiac markers, and emerging POCT technologies. This was the eighth consecutive year the program was offered, and the audience again confirmed that POCT is a critical issue among laboratory professionals. Bayer HealthCare Diagnostics, International Technidyne Corporation, and ABX provided support for this event.

**Immunoassay Interference**—The program tried a new format this year. One speaker provided the science of a particular interference problem and was then followed by the second speaker giving a case study. This format was very well received and contributed to the very high rating from the participants. The program attracted 115 participants and was supported by DPC.

**The Role of Biochemical Markers in Diagnosing and Managing Prostate Cancer: Current Practice, Conflicting Evidence**—Once again AACC turns its focus to the interface of the

(continued on page 10)

## Clinical Chemistry, International Journal of Laboratory Medicine and Molecular Diagnostics

*Clinical Chemistry* maintained its leadership in 2003 as the foremost international journal of laboratory medicine and molecular diagnostics, publishing more than two thousand pages of peer-reviewed papers advancing clinical laboratory science. The *Journal* is available to our readers not only in print, but also in a full-text online version at <http://www.clinchem.org>.

The *Journal's* popularity is well deserved and well earned. In 2002, the Institute for Scientific Information's Journal Citation Report once again rated *Clinical Chemistry* the most cited periodical in the field of clinical chemistry. Last year the *Journal* was cited more than 16,100 times in more than 1,200 journals. With *Clinical Chemistry Online*, members and subscribers can access this valuable resource before receiving their copies in the mail. Readers are just a few mouse clicks away from viewing, fully searching, reference linking, and printing the full text—including all figures and tables. The *Journal's* online version continues to be enhanced and improved. Readers may sign up to receive e-mail alerts to new articles of personal interest and send an Electronic Letter to the Editor while viewing an article on the Web site.



## Clinical Laboratory News

*CLN* provided authoritative analysis of top issues facing clinical laboratories and laboratorians.

Among the front-page stories were CLIA-waived HIV tests, the STARD initiative, quality initiatives in laboratory testing, and test classification by the FDA. Invited authors wrote educational articles on newborn screening, cardiac troponins, thyroid testing, and gly-



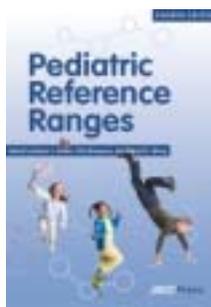
cated hemoglobin in the series, "Lab 2003: Connecting to the Future." The popularity of *CLN*

*Online* (<http://www.aacc.org/clin/default.stm>) remains high, with many laboratorians coming to the site for the educational articles.

## AACC Press Books

AACC Press published six new titles during the year:

- *Clinical Diagnostic Technology—The Total Testing Process, Volume 1: The Preanalytical Phase*, edited by Kory M. Ward-Cook, Craig A. Lehmann, Larry E. Schoeff, and Robert H. Williams.
- *Evidence-Based Laboratory Medicine: From Principles to Outcomes*, edited by Christopher P. Price and Robert H. Christenson.
- *Laboratory Evaluation of the Poisoned Patient—A Teaching Slide Set*, edited by Tai C. Kwong, Thomas P. Moyer, Paul J. Orsulak, Thomas G. Rosano, and Leslie M. Shaw.
- *Optical Methods: A Guide to the "-escences,"* Larry J. Kricka.
- *Pediatric Reference Ranges, Fourth Edition*, edited by Steven J. Soldin, Carlo Brugnara, and Edward C. Wong.
- *Principles of Forensic Toxicology, Second Edition*, edited by Barry Levine.



## Clinical Laboratory Strategies

In 2003, *Clinical Laboratory Strategies*—AACC's monthly newsletter for laboratory directors and administrators—continued to report on the latest technology and research in laboratory medicine. Among the new tests covered in *Strategies* this year were:

- protein pattern recognition, a proteomic technique being explored for cancer diagnosis and other purposes
- lipoprotein-associated phospholipase A2 (Lp-PLA2), a new marker of CHD risk
- invasive trophoblast antigen (ITA), a promising marker for Down's syndrome
- myeloperoxidase, a cardiac marker that may provide additional information about an individual's risk of a heart attack

*Strategies* also covered important issues affecting the practice of laboratory medicine in 2003.

Early in the year, the newsletter explored how the smallpox vaccine rollout would affect not only patient populations, but also laboratorians. Articles on improving turnaround time and new patient-safety practices endorsed by organizations like the JCAHO and the National Quality Forum underscored the role lab directors and administrators play in making their environments safer and more efficient. Broad coverage of new CLIA regulations provided the information necessary for lab directors to ensure their labs' compliance with federal laws.

Be sure to visit the *Strategies* Web site at <http://www.aacc.org/strategies/default.stm> to read past issues and to find out what *Strategies* is covering this month.



## Clinical & Forensic Toxicology News

Subscriptions to *Clinical & Forensic Toxicology News* remained strong in 2003 at 3,700. This quarterly newsletter provides practical and timely information on the clinical, forensic, technical, and regulatory issues faced by toxicology laboratories.



Newsletter articles written in 2003 included:

- Oxycodone: Recognition and Pharmacogenomics
- Methadone: An Old Drug Achieves New Notoriety
- New Anti-Epileptic Drugs Feature Fewer Side Effects
- Alternative Drug-Delivery Systems Are Subject to Abuse

## AACC eNews

In its second year, *AACC eNews*, the association's bimonthly e-newsletter, brought news items right to members' e-mail inboxes. Members were able to link quickly to more information on valuable topics and learn about the latest conference and book offerings from AACC.

## Divisions

### Awards

The Annual Division Award in Education went to the Therapeutic Drug Monitoring/Clinical Toxicology Division and the Award for Networking was given to Molecular Pathology.

### Education and Networking

Divisions supported more than ninety sessions at the AACC Annual Meeting in Philadelphia, as well as the following educational activities during the year:

- TDM Renaissance and Pharmacogenomics Forum by TDM/CT.
- The Use of Flow Cytometry in Non-Human Species by the Animal Division.
- Issues in Immunodiagnosics Symposium: BNP: Importance to Laboratorian and Clinician by CDID.
- Point-of-Care Coordinators Forum presented by CPOCT.
- Outpatient Coagulation: From Coumadin Clinics to Patient Self-Management. Online course by CPOCT.
- Top 10 Tips: The Keys to Improving Your Point-of-Care Testing Program. Audioconference co-sponsored by CPOCT with AACC.
- Practical Guidance for the Calculation of the Uncertainty of Calibrator Values for IVD Manufacturers. Webcast by NIST with Industry Division support.

### Division International Activities

- The XXVI Congress of Clinical Chemistry in San Luis Potosi, Mexico, had presentations by the Management Sciences Division and the Pediatrics and Maternal-Fetal Division.
- International Association for Pediatric Laboratory Medicine in Rome, Italy, had presentations by the Pediatrics and Maternal-Fetal Division.

### Other Division Activity

Divisions funded an international travel grant; presented abstract awards at the Oak Ridge Conference, the San Diego Conference, and the Annual Meeting; and recognized outstanding science and service among their members. The History Division paid tribute to the life of Samuel Natelson with its publication of a biography by Amadeo Pesce.

## Administrative Changes

The TDM/CT Division received approval for a name change. Effective January 1, 2004, it is the Therapeutic Drug Management and Toxicology Division.

## National Academy of Clinical Biochemistry (NACB)

In 2003, the AACC's National Academy of Clinical Biochemistry invested thirty-one scientists as fellows. During the annual awards luncheon in July in Philadelphia, eight of NACB's twenty presidents participated in the inaugural presentation of the NACB Presidents Medal. Recipients of NACB's three major awards also were honored. Award recipients were:

- Michael Bennett, who merited the Distinguished Scientist Award
- James Westgard, who was presented with the Alvin Dubin Award for distinguished contributions to the discipline and practice of clinical biochemistry
- Roshini Sarah Abraham, who was given the George Grannis Award for excellence in research and scientific publication.

NACB published its guidelines on emergency toxicology in *Clinical Chemistry*, invited comments on draft guidelines on maternal-fetal health, and held an Edutrak on its cardiac risk assessment guidelines during the AACC Annual Meeting.

## Accreditation

The Accreditation Council for Continuing Medical Education has accredited the AACC to sponsor continuing medical education for physicians. AACC is an approved provider of continuing education for clinical laboratory personnel in California, Florida, Louisiana, Montana, Nevada, North Dakota, Rhode Island, and West Virginia. In 2003, 8 programs were approved for CME credit and 113 programs were approved for ACCENT credit.

At the 2003 AACC Annual Meeting, a new online system was implemented that enables attendees of the scientific sessions to download their own Verification of Participation certificates. Attendees can download their certificates while at the meeting or after the meeting from their computers. This new system greatly speeds up the time in which attendees can obtain their records of attendance. For the 2003 meeting, 735 certificates were downloaded.

### Awards

AACC awarded the Clinical Chemist Recognition Award to eleven members who had provided documentation of having completed seventy-five continuing education credits in the past three years. The association also recognized ninety-seven presenters who had received an overall speaker evaluation score of 3.60 or higher in 2003 as outstanding speakers. To view the lists of award winners, go to: <http://www.aacc.org/membership/awardsindex.stm>.

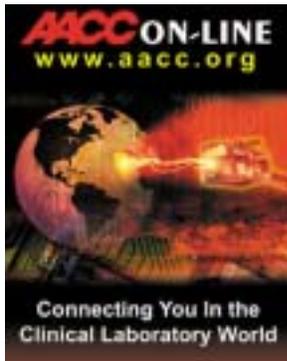
## AACC Direct

*AACC Direct* (<http://www.aaccdirect.org>) is AACC's newest eCommerce solution and complete source for clinical laboratory education and information. Featuring all publications and products—and now meetings and audiconferences, as well—*AACC Direct* allows customers to access the entire publications catalog online, get member discounts on orders, check the status of an order, update or change address information with Customer Service, and check order history. *AACC Direct* increased the ease of ordering AACC products during the 2003 Annual Meeting.



*AACC Online* (<http://www.aacc.org>) continues to grow and expand, increasing valuable services to laboratorians. The number of visitors to the Web site increased, from an average 67,119 per month in 2002 to 81,353 per month in 2003.

*AACC Online* creates and provides a broad range of valuable services, including a new CE/CME certificate system for the Annual Meeting and a new online registration feature for meetings and audioconferences to clinical labo-



ratory scientists worldwide. The year 2003 also saw expansion of online educational services with an increase in the number of online audioconferences and the addition of the presentation, "Outpatient Coagulation: From Coumadin Clinics to Patient Self-Management," sponsored by the CPOCT Division.

The association expanded Expert Access Live Online, the popular monthly series of interactive Q&A programs, and included programs that ranged from direct access testing to laser

capture microdissection to aiding the FDA in its pre-market review process for new ASR-based genetic tests. The e-mail listservs provided by *AACC Online* continue to grow in number and popularity and have been moved to a new, more secure provider. The POCT list has grown to 975 participants, 445 are signed up for Clinical Chemistry General Topics, 319 for Molecular Pathology, 258 for LIS, 222 for Pharmacogenomics, 212 for Animal, 140 for TDM/Tox, 75 for International, 100 for Pediatric-Maternal, 123 for Clinical and Diagnostic Immunology, and 54 for Lipoproteins and Vascular Diseases. Another new listserv—Industry Division—currently has twenty-nine participants.

## Lab Tests Online

**Increased Recognition**—*Lab Tests Online* (<http://www.labtestsonline.org>) firmly established itself over the past year as one of the premiere resources for laboratory testing information by receiving two awards, the praise of the Consumers Union, and creating a prominent place for itself in the minds of journalists. The site was awarded the American Society of Association Executives' Summit Award, given each year to programs that significantly enhance American society, and a Gold Award for Best Health/Healthcare content in the E-Healthcare Leadership Awards program. Consumer WebWatch, a project of the Consumers Union, named *Lab Tests Online* one of several "Praiseworthy" Web sites in a national advertising campaign aimed at promoting sites that adhere to guidelines designed to advance the credibility of their information. And *Lab Tests Online* accumulated 180 press mentions, including references in two articles on direct access testing that identify the site as a valuable resource for DAT customers.

**More Traffic**—Traffic increased by 63 percent as the site hosted more than 2.6 million visitors and averaged more than 220,000 visits a month. Search engines continued to be the primary source of new visitors, with Google once again being the top-referring search engine. Thirty-five percent of *Lab Tests Online's* test pages rank as a top-five search result in Google, and more than 50 percent of its test pages rank in the top ten.

**Additional Content**—Thirty-four new tests were added to the site, including tFN, HLA-B27, tests for Celiac disease, and a number of tests

for blood disorders. Leukemia, TB, bleeding disorders, PCOS, and UTI were among the eleven condition pages added to the site. A comprehensive overview of genetic testing was also posted, as were twelve news summaries on such topics as SARS testing, West Nile Virus testing, and the new DNA with Pap test.

**Expanded Professional Support**—Three more associations joined the editorial collaboration: the Canadian Society of Clinical Chemists, the Clinical Ligand Assay Society, and the National Academy of Clinical Biochemistry. In addition to editorial contributions from all fourteen participating associations, *Lab Tests Online* benefited from their promotional support. Each organization circulated news about the site throughout the year and ran ads promoting it in member publications. In mid-summer, ASCLS, which had been responsible for answering some of the one hundred questions received each month from users, took on the additional responsibility of answering all user comments and questions.

**Continued Corporate Support**—Corporate support held steady. Twenty-five companies contributed at sponsorship levels in 2003. Last year's sponsors were Bayer Healthcare Diagnostics; Beckman Coulter; Dade Behring; Ortho-Clinical Diagnostics; Roche Diagnostics; DPC; MDS, Inc.; Bio-Rad Laboratories; Gen-Probe; the Laboratory



Healthcare Coalition; Olympic Diagnostic Systems Group; Athena Diagnostics; CanAg Diagnostics; Diagnostic Systems Laboratories; DiaSorin; Fujirebio Diagnostics; Hycor Biomedical; ITC; Nanogen; Nichols Institute Diagnostics; Pharmacia; Randox Labs; Results Direct; Sunrise Medical Laboratories; and Sysmex.

**Looking Ahead**—In 2004, we anticipate the launch of *Lab Tests Online/UK*. The Association of Clinical Biochemists has spent the last year editing the site for language and practice differences. AACC will coordinate promotional efforts with ACB for the site's launch at the ACB annual

meeting. Working with the Coordinating Council on the Clinical Laboratory Workforce (CCCIW), AACC will add a new area to the site that will direct interested users to information on careers in the laboratory. As traffic continues its upward trend, close to four million visits are expected during the year as new content is added and existing material is updated with new information.



AACC ended 2003 with a \$1,281,508 surplus, approximately 119 percent better than the \$585,202 surplus achieved in 2002. Strong performance in AACC's conferences and online programs, a \$493,355 investment gain, and cost containment measures are the primary reasons for the improved performance.

AACC's total net assets surpassed \$6.3 million, and the Reserve Fund ended 2003 with slightly more than \$3.6 million. The association's current ratio at December 31, 2003, (current assets divided by current liabilities) is 1.4. The current ratio is a measure of an organization's ability to meet its current liabilities. A ratio between 1.0 and 1.5 is considered very good.

Special note of gratitude to Mitchell G. Scott, PhD, for his leadership and dedication during his three-year term as AACC's treasurer, which ended on December 31, 2003.

## BALANCE SHEETS

### December 31, 2003 and 2002

	2003	2002
<b>ASSETS</b>		
Current assets		
Cash and cash equivalents	\$3,458,474	\$2,796,131
Accounts receivable	886,984	1,071,241
Inventory	554,846	487,037
Prepaid expenses	604,707	687,921
Total current assets	5,505,011	5,042,330
Investments	4,346,968	3,326,578
Property and equipment	493,836	678,794
Total assets	<u>\$10,345,815</u>	<u>\$9,047,702</u>
<b>LIABILITIES AND NET ASSETS</b>		
Current liabilities		
Accounts payable and accrued expenses	\$632,023	\$599,928
Deferred revenue	3,392,010	3,387,061
Deferred rent	-	20,439
Total liabilities	4,024,033	4,007,428
Net assets		
Unrestricted:		
Undesignated	1,955,313	1,657,742
Designated	3,600,219	2,620,267
	5,555,532	4,278,009
Temporarily restricted	208,160	204,175
Permanently restricted	558,090	558,090
Total net assets	6,321,782	5,040,274
Total liabilities and net assets	<u>\$10,345,815</u>	<u>\$9,047,702</u>

## 2003 AACC Awards

Outstanding Contributions to Clinical Chemistry—**Morton K. Schwartz, PhD, FACB**

Outstanding Contributions through Service to the Profession of Clinical Chemistry—**Frank Sedor, PhD, DABCC, FACB**

Outstanding Contributions in Education—**Paul Wolf, MD**

Outstanding Contribution to Clinical Chemistry in a Selected Area of Research—**Ishwarlal Jialal, MD, PhD, DABCC, FACB**

Outstanding Scientific Achievements by a Young Investigator—**George Yousef, MD, PhD, FACB**

International Travel Fellowship—**Amitava Dasgupta, PhD, DABCC, FACB**

Sigi Ziering Award for Outstanding Contribution for a Publication in the Journal *Clinical Chemistry*—**Elaine Weidenhammer, PhD**

The Edwin F. Ullman Award—**Olé Siggaard-Andersen, MD, PhD**

The AACC Lectureship Award—**J. Craig Venter, PhD**

Past President's Award—**Mary Lou Gantzer, PhD**

## STATEMENT OF ACTIVITIES

### Year Ended December 31, 2003 and 2002

<b>Change in unrestricted net assets</b>	<b>2003</b>	<b>2002</b>
<b>Revenue</b>		
Conferences and online programs	\$6,871,052	\$6,659,855
Publications and periodicals	3,577,624	3,779,934
Membership, public relations, & government affairs	1,726,757	1,835,125
Educational programs	593,589	561,685
Divisions	194,902	343,447
Marketing	121,792	133,202
Management services	74,739	78,615
Committees	73,630	50,085
Other income	889	98
Net assets released from restrictions	50,411	95,969
	13,285,385	13,538,015
<b>Expenses</b>		
<b>Program services</b>		
Conferences and online programs	4,204,308	4,273,907
Publications and periodicals	2,926,117	3,052,930
Membership, public relations, & government affairs	957,012	1,006,570
Marketing	666,703	702,834
Educational programs	188,247	184,406
Divisions	184,732	251,724
Committees	173,462	153,080
Management services	74,739	78,615
Van Slyke Society	48,489	82,507
Total program services	9,423,809	9,786,573
<b>Supporting services</b>		
General and administrative	2,618,071	2,328,496
Customer service center	459,337	411,632
Total supporting services	3,077,408	2,740,128
Total expenses	12,501,217	12,526,701
Change in unrestricted net assets from operations	784,168	1,011,314
Investment income	493,355	(377,142)
Change in unrestricted net assets	1,277,523	634,172
<b>Change in temporarily restricted net assets</b>		
Van Slyke Society	21,549	58,268
Investment income	32,847	(11,269)
Net assets released from restrictions	(50,411)	(95,969)
Change in temporarily restricted net assets	3,985	(48,970)
<b>Change in net assets</b>		
Net assets, beginning of year	1,281,508	585,202
	5,040,274	4,455,072
<b>Net assets, end of year</b>	\$6,321,782	\$5,040,274

AACC ended the year on December 31, 2003, with 9,457 members. “Newer members” continue to represent AACC’s largest member population—those who have been members of AACC for four years or less comprise 30 percent of our total membership. Those in the 5- to 9-year category make up 22 percent of AACC’s population, down 2 percent from 2002. Twelve percent of members can claim twenty-five or more years as AACC members. International membership (outside of the United States) declined by 1 percent, to 28 percent of the total AACC membership represented in 109 countries.

Thirty-one percent of members hold a PhD, while 27 percent hold a BA or BS. Sixteen percent

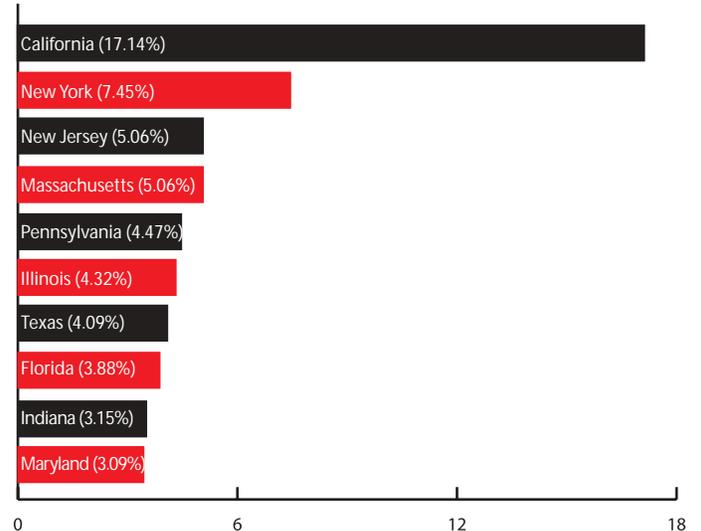
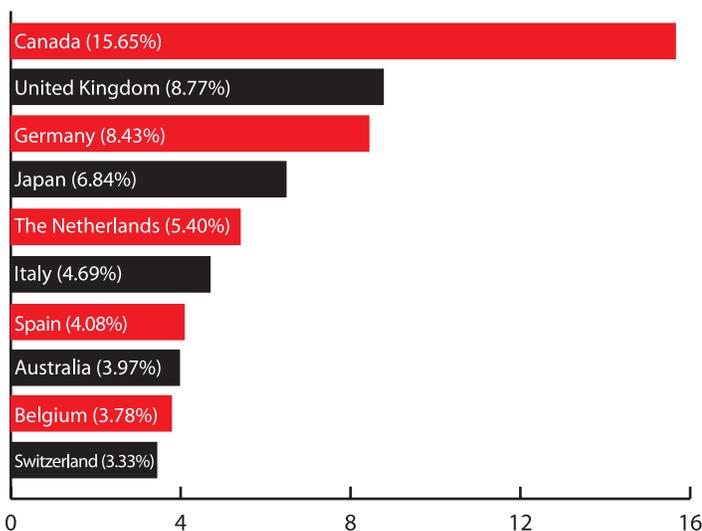
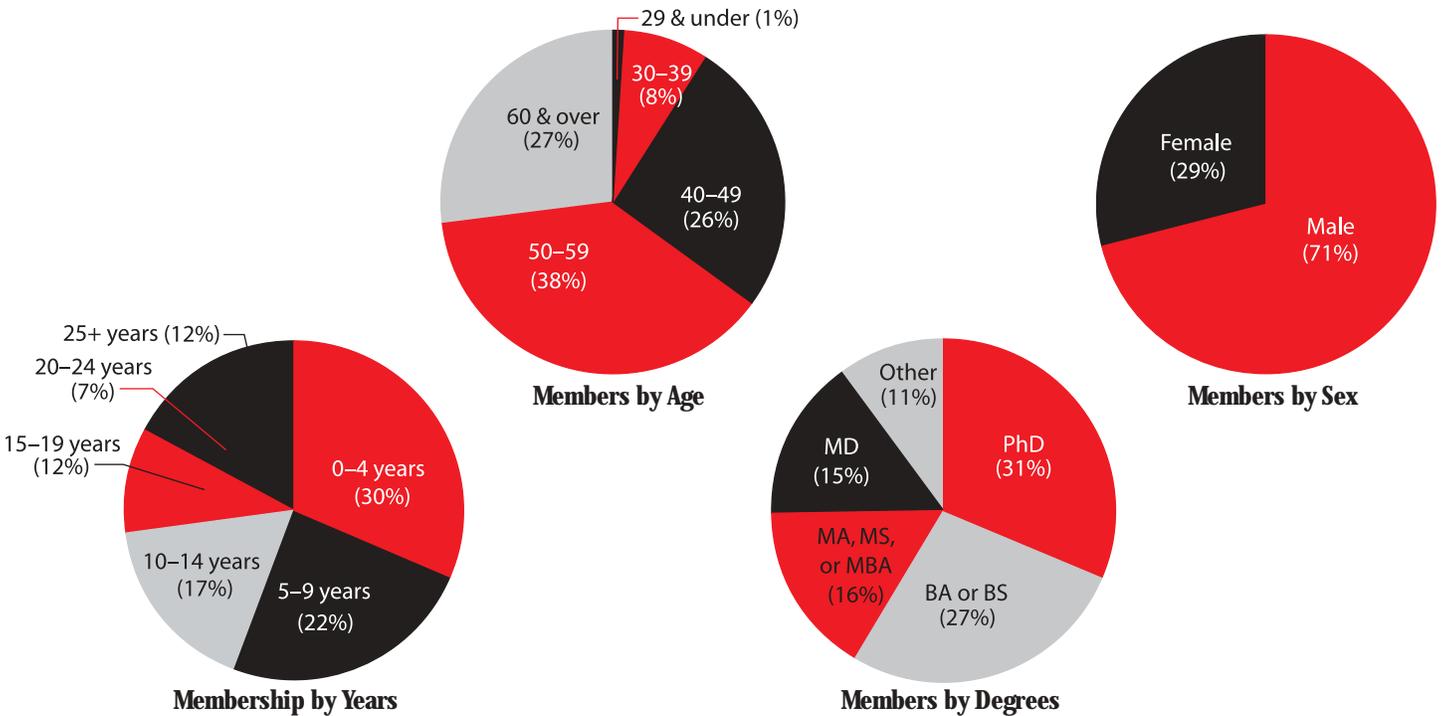
have an MA, MS, or MBA, and 15 percent are MDs.

Those ranging in age from fifty to fifty-nine represent the majority of AACC’s membership—38 percent. Twenty-seven percent of members are more than sixty years of age, up 3 percent from last year. Members between the ages of forty and forty-nine represent 26 percent of the total population, a decline of 2 percent from 2002, and 8 percent of members are between thirty and thirty-nine years of age. One percent of AACC’s membership is under twenty-nine years of age.

Seventy-one percent of AACC’s members are male and 29 percent are female.

Twenty-eight percent of AACC members are international, and the top 10 countries for membership outside of the United States are Canada (15.65%), the United Kingdom (8.77%), Germany (8.43%), Japan (6.84%), the Netherlands (5.4%), Italy (4.69%), Spain (4.08%), Australia (3.97%), Belgium (3.78%), and Switzerland (3.33%).

The top 10 states for AACC membership inside the United States are California (17.14%), New York (7.45%), New Jersey (5.06%), Massachusetts (5.06%), Pennsylvania (4.47%), Illinois (4.32%), Texas (4.09%), Florida (3.88%), Indiana (3.15%), and Maryland (3.09%).





The Van Slyke Society (VSS) raised more than \$70,000 in 2003 and supported 44 promising scientists with nearly \$50,000 in grants, awards, and gifts, thanks to the generous support of hundreds of individuals, companies, local sections, and divisions that invested in improving clinical laboratory science. As AACC's philanthropic foundation, VSS strives to improve healthcare worldwide by encouraging and supporting deserving clinical laboratory scientists and students around the globe.

In 2003, the society funded research grants to Paul J. Jannetto, PhD, MT (ASCP), Medical College of Wisconsin for his research project, "Pharmacogenetics as an Adjunct for Pain Management"; William Clarke, PhD, from the Johns Hopkins Medical Institutions for his proposal, "Proteomic Analysis of Renal Transplant Rejection Using Multi-Dimensional Separation Techniques"; and Tadaaki Kishi, PhD, of Toronto's Mount Sinai Hospital, to examine "Kallikrein 8 Is a Candidate New Biomarker for Ovarian Cancer Diagnosis."

The VSS also supported five prizes for the special poster contest at the 2003 Annual Meeting for students and post-doctoral fellows who presented abstracts. Judges evaluated each poster on scien-

tific quality, clarity of display, and oral presentation and awarded student research prizes totaling \$1,400.

International travel grants to promote the exchange of information among scientists were supported by VSS funds and awarded to ten clinical laboratorians from around the world, including Egypt, Ethiopia, Finland, and Nepal. These grants enabled recipients to attend the 2003 AACC Annual Meeting and exhibit, meet new colleagues, and learn about the latest developments in laboratory medicine and technology.

VSS continues to fund Gallwas memberships for selected scientists from emerging areas of the world who otherwise might not have access to AACC and its services. Providing five years of AACC benefits, these memberships help open the door to the best in laboratory science and practice for laboratorians. Thanks to the ongoing munificent support of Jerry and Sandy Gallwas, VSS supported thirteen new members in 2003 from Argentina, Bhutan, Cambodia, Ghana, India, Russia, the Slovak Republic, Tanzania, Zimbabwe, and elsewhere.

Special thanks to our 2003 corporate contributors: Abbott Diagnostics; Beckman Coulter, Inc.; Olympus America, Inc.; and Diagnostic Products Corporation. Thanks are also due our major individual supporters: Jerry and Sandy Gallwas, Mary Lou Gantzer, Richard Flaherty, Robert Habig, Jocelyn Hicks, Robert Stout, and Richard Nadeau, as well as an ongoing gift from Earl J. Scherago. We also thank the AACC local sections and divisions that gave so generously: Southeast Local Section, Southern California Local Section, Northern Cali-

fornia Local Section, Capital Local Section, Northeast Local Section, Ohio Valley Local Section, Pacific Northwest Local Section, Michigan Local Section, Connecticut Valley Local Section, Lipoproteins and Vascular Diseases Division, and the Critical Care Point-of-Care Testing Division.

Wouldn't you like to help promising scientists and students, too? Contributing to the Van Slyke Society is easy and allows you to give back to your profession—clinical laboratory science—and to your colleagues—clinical laboratory scientists. To make a contribution and an investment in the future of clinical laboratory science worldwide, click here for the link to the VSS contribution form [http://www.aacc.org/vss/contribution\\_form.htm](http://www.aacc.org/vss/contribution_form.htm) or contact Polly Cooper at 202-857-0717 ext. 718 or [pcooper@aacc.org](mailto:pcooper@aacc.org). Additional information regarding VSS can be found at <http://www.aacc.org/vss/>.

### Philanthropy in 2004

Watch for a new name and a new look for the Van Slyke Society when we launch the new Van Slyke Foundation at the AACC Annual Meeting in July. This reorganization is designed to reinvigorate our philanthropic efforts and to further strengthen our support for the field. The new foundation's mission statement is: "The Van Slyke Foundation (VSF) will be a leading philanthropic organization for clinical laboratory medicine that encourages and supports deserving clinical laboratory scientists and students throughout the world." The new VSF will also try to identify new ways for contributors to give back to the profession and will strive to embody its tag line, "Investing in the Future of Clinical Laboratory Medicine."

## Government Affairs

In 2003, AACC was once again in the forefront of laboratory-related issues, particularly those in the professional- and science-based arenas important to its members. The association continued to work closely with the Food and Drug Administration and other laboratory groups to find new ways to expedite the clearance of new therapeutic drug management (TDM) assays. Specifically, working through the TDM Roundtable, AACC and its partners drafted a document that reduces the review time needed for submissions on the Rapamycin assay and can serve as a model for other tests. The roundtable is working on similar documents for 2004.

The association remained involved in reimbursement issues important to all clinical laboratories. AACC joined with other laboratory associations in defeating a legis-

lative effort to re-establish a Medicare co-payment for laboratory services, which would have resulted in billions of dollars of lost laboratory revenue. The association, working with other healthcare organizations, was successful in encouraging Congress to expand coverage for Medicare patients to include cardiovascular and diabetes screening tests. In addition, AACC provided the Centers for Medicare and Medicaid Services (CMS) with input on the appropriate payment levels for new tests and was made a permanent member of the new AMA Pathology Coding Caucus, which advises the CPT Editorial Panel on laboratory coding issues.

In addition, AACC continued to play a leading role in evidence-based medicine (EBM). The association provided

technical advice on Agency for Healthcare Research and Quality (AHRQ) sponsored studies and conducted educational forums to disseminate the findings from these studies. It supplied reviewers for the agency's grant applications, participated in AHRQ EBM planning meetings, and supported efforts to increase federal funding for EBM research activities.

The AACC also provided guidance to CMS on the new CLIA interpretive guidelines, supported efforts to establish a voluntary medical errors reporting system, and endorsed legislative initiatives to expand newborn screening education and outreach efforts. The organization continued to educate its members about key legislative and regulatory issues through its biweekly Government Affairs Update and provided legislative alerts to its members, as appropriate, on critical legislative issues.



(continued from page 2)

laboratory and clinical medicine, this time delivering new information and emerging data about the role of lab testing in diagnosing and managing prostate disease. The mid-summer program was a fine tune-up for the 2003 Annual Meeting, drawing 107 participants from not only the United States and Canada, but also Finland, France, Germany, Japan, and the United Kingdom. Dade Behring supported the event.

#### Complying with the New CLIA Standards

**Audioconference**—More than four hundred Web sites participated in this highly successful audioconference, which outlined the changes to the CLIA regulations and analyzed their impact on clinical laboratories. This program was co-sponsored by ASCLS.

**Advances in Stroke Detection**—AACC was pleased to focus on an area of clinical care not often visited by clinical laboratorians. Stroke markers are a relatively new and still-evolving area of laboratory medicine, and this program was a good illustration of how AACC commands a leadership role in bringing together laboratorians and their clinician colleagues. The audioconference was promoted extensively in the United States and abroad, and the association was rewarded with participation not only from the United States and Canada, but also Austria, Finland, France, Haiti, and Trinidad and Tobago. Biosite supported this program.

**Top 10 Tips for Improving Your Point-of-Care Testing Program**—AACC's fall POCT audioconference gave participants an opportunity to enjoy a slightly different audioconference format than usual. In this program, two respected laboratory professionals with quite different out-

looks on POCT each offered his top tips for leading a successful POCT operation. The event attracted 119 registrants and was supported by Bayer HealthCare Diagnostics.

**CLIA QC Standards Part II: The New CMS Interpretive Guidelines**—This follow-up program examined the interpretive guidelines used to inspect clinical laboratories and provided practical tips on how to comply with the new standards. Nearly three hundred sites registered for this program co-sponsored by ACLA and ASCLS.

**Protecting Electronic Health Data: The New HHS Security Requirements**—This targeted program provided approximately five hundred laboratorians guidance on the new security requirements for electronic health data, the penalties for noncompliance, and recommendations for implementing a successful regulatory program. The audioconference was co-sponsored by ACLA and ASCLS.

**Reimbursement Update 2004**—At more than ninety registered Web sites, participants learned about the AMA's CPT coding changes for 2004, Medicare payment rates for laboratory-related codes, and recent congressional changes affecting laboratory reimbursement. This program was co-sponsored by ACLA and ASCLS.

### Online Programs

**Direct Access Testing**—This online conference presented three different aspects of direct access testing. The presentations were posted to the AACC Web site; participants were invited to download them and ask the presenters questions. The free program attracted more than eight hundred people.

**Hepatitis**—The first of its kind for AACC, this program allowed attendees to listen to the presentation through a conference call connection and watch the presentation on their terminals via PlaceWare. The program featured two speakers, one addressing molecular issues, the other serological issues. The highly rated and economically priced program attracted 166 sites. Bayer HealthCare supported the program.

### Expert Access Live Online

Expert Access Live Online is an exciting, Internet-based program that brings leading laboratory professionals right to the workplace of AACC members. Expert Access (<http://www.aacc.org/access/default.stm>) examines a different "hot" topic each month and is hosted by top experts in the field. Participants can view course materials and submit questions prior to the scheduled one-hour discussion or during the "live" portion of the event. You ask the questions, the AACC expert answers live online.

In 2003, the Expert Access Live Online program highlighted a wide variety of topics, such as:

- direct access testing
- laser capture microdissection
- the FDA and the regulation of ASRs
- the role of microalbumin testing in diabetic nephropathy
- the emergence of ischemia-modified albumin as a marker of cardiac function

Be sure to join the experts in 2004 for presentations on other exciting topics.

If you have any questions or comments about this report, please contact :

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