During the October 1-2, 2015, AACC/MSSS conference in Chicago, AACC Past President Dr. Steven Wong asked the audience for their wish list of currently used clinical assays that should be moved to a mass spec platform, and also a list of late-stage translational assays that would best be performed via mass spec techniques. Most entries received a single vote, except where noted in parentheses.

**Clinical**
- PSA markers
- Ovarian cancer markers
- TSH/FT3/FT4 (2 votes)
- Testosterone/androgens (3 votes)
- 17-OH progesterone (2 votes)
- Bloodstream infections
- Angiotensiogen
- Free testosterone
- Angiotensin
- Galectin-3
- NT-proBNP
- Antinuclear antibodies
- ANCA
- Estrone
- Cortisol
- Cortisol (salivary)
- Aldosterone
- Renin or renin activity
- Methylmalonic acid
- Cancer drugs (Busulfan) (2 votes)
- Vitamin D
- Metabolic disorder
- Drugs (digoxin, lithium, low therapeutic index drugs)
- Transferring and TIBC
- Acetycholine resptor
- Hemoglobin subtype estimation
- Urine albumin
- Monoclonal immunoglobulin
- Blood pH
- Thyroid autoantibody
- CD4, CD8, T cell count
- *M. tuberculosis*
- Antifungals (Voriconazole, Posaconazole)
THC-COOH in oral fluid
DAU screening/confirmation for oral fluid – (2 votes)
Synthetic cannabinoids
Metabolites to compliment pharmacogenomics
Markers normally delegated to flow cytometry (CD10, CD19, CD5, etc.)
Markers normally delegated to IHC (cytokeratin, etc.)
HLA typing (stem cell transplant)

**Late stage**
Renal metabolic indicators
POCS
Metabolic profile
Lipidomics
Interleukins
Gluten sensitivity markers
Protein biomarkers
Cancer markers
GI markers
Protein drugs
Pharmacodynamic biomarkers
Drug resistance
MALDI-TOF confirmatory test for samples ≤ 2mmol bacteria

**OTHER ISSUES AND CONCERNS**
How do you get the right people for the new LC/MS/MS lab?
High-level overview of growth industry for LC/MS/MS technology
Troubleshooting for UM
LDTs
Mentors
Coupling to other diagnostics modalities