



# From Hidden to Found. Giving a Voice to MLS

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# Dispelling the Illusions of Advocacy

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You already know what you need



Advocacy is not a full-time job



Advocacy doesn't need to be hard



Advocacy is NOT voluntary



# Imagine if...

1

Laboratorians were included in discussions between Nurses and Doctors on healthcare outcomes.

2

The work that we do was not known as the “Hidden Profession”

3

MLS were the pioneers of new and better healthcare in the United States



You are More  
Important Than  
You Realize



How's this talk different?

We are going to identify the underlying problem of all the issues surrounding Medical Lab Science

The target audience of this speech is you the laboratorian!

We will talk about simple and actionable things that you can do to take the profession from hidden to found.





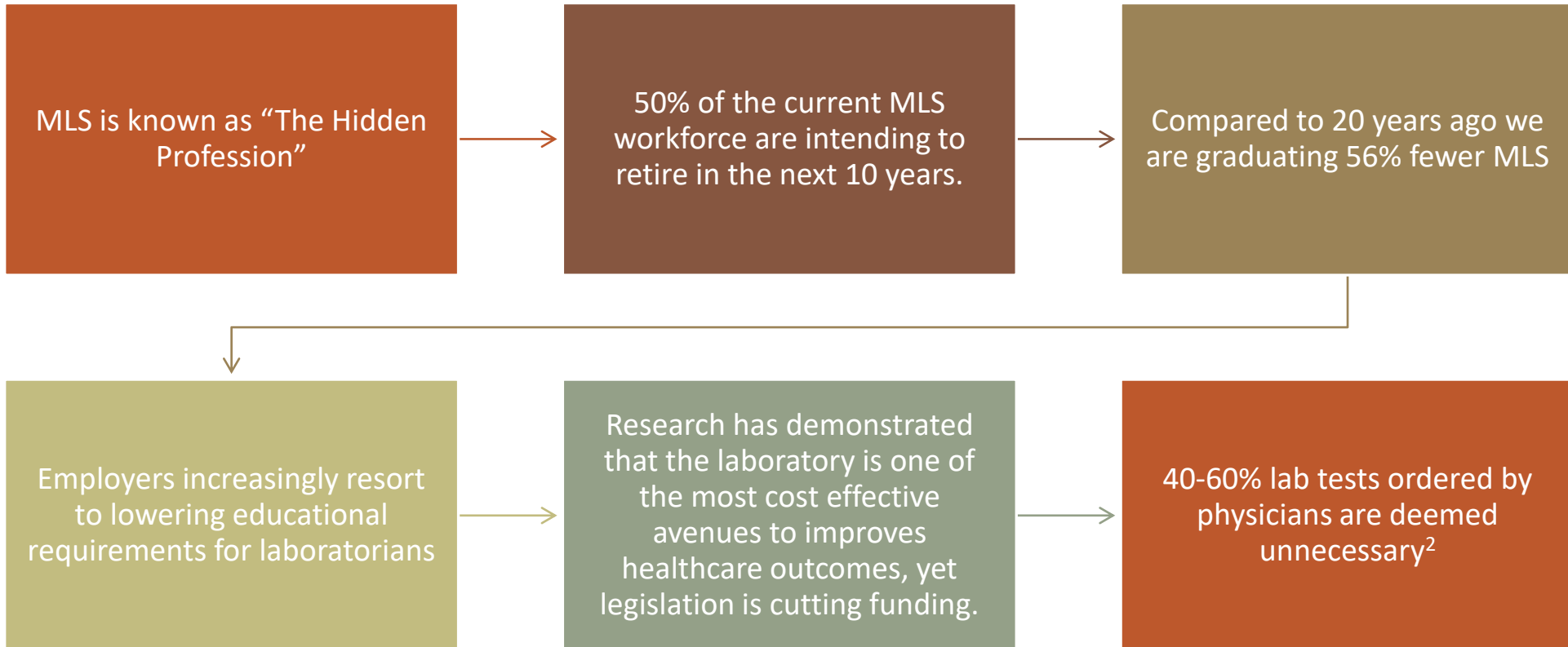


# How Advocacy Starts



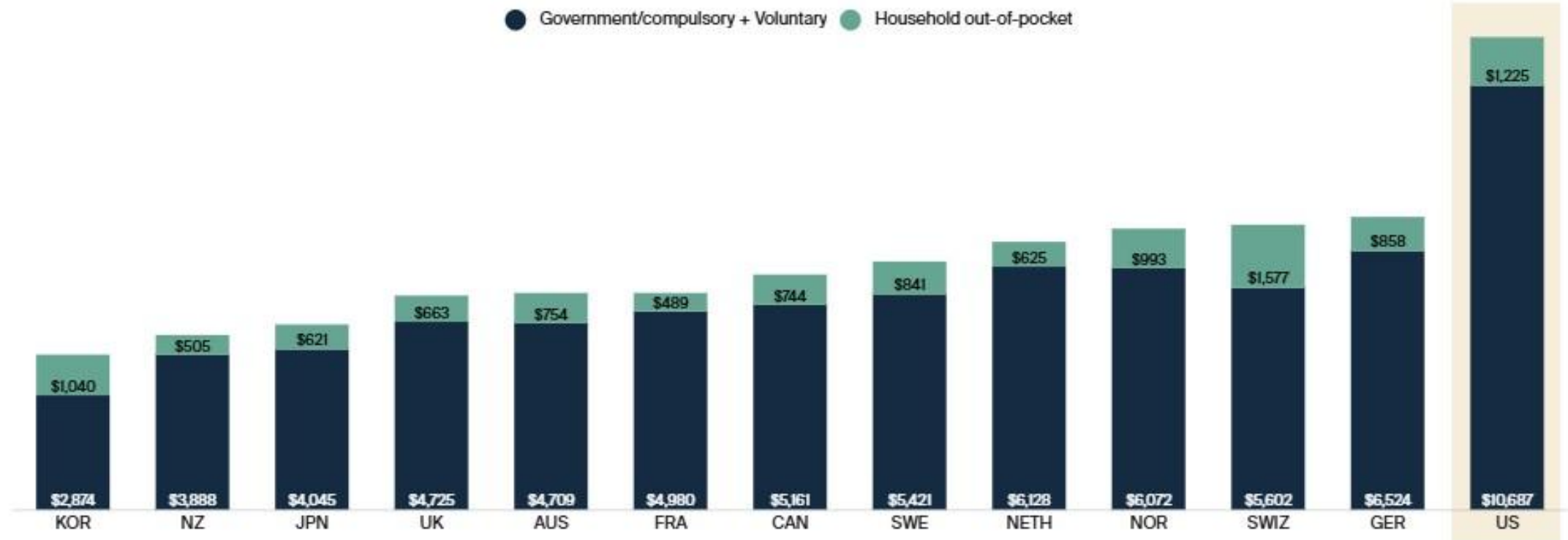
# Did you know?

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## The U.S. spends three to four times more on health care than South Korea, New Zealand, and Japan.

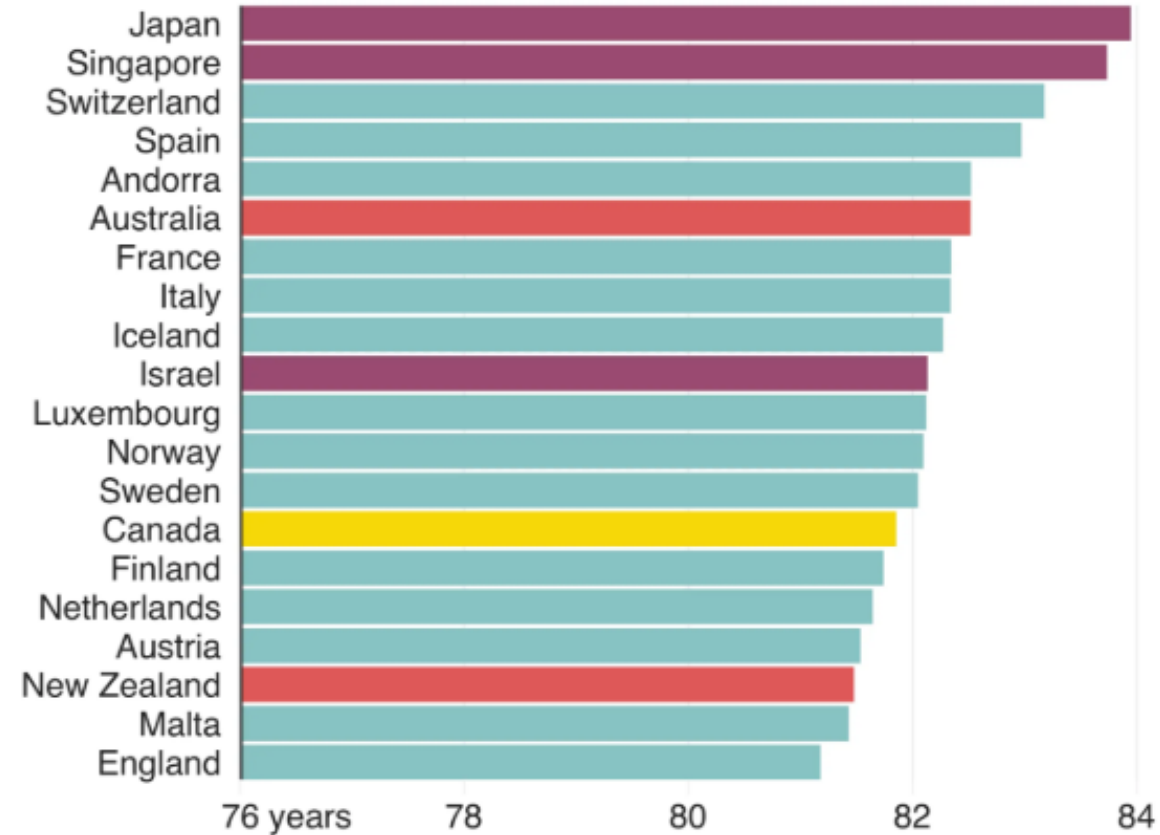
*Dollars (USD) per capita spend on health expenditures*





## Top 20 countries by life expectancy

■ Asia ■ Europe ■ North America ■ Oceania



Source: IHME

BBC



# Where's the inefficiency?



1 in 5 tests ordered by physicians are unnecessary



Data provided by Medical Lab Scientists is not leveraged to its full potential



American healthcare is reactive medicine instead of proactive



## Thirty Five Things Physicians and Patients Should Question

- 1 **Don't perform population based screening for 25-OH-Vitamin D deficiency.**  
Vitamin D deficiency is common in many populations, particularly in patients at higher latitudes, during winter months and in those with limited sun exposure. Over the counter Vitamin D supplements and increased summer sun exposure are sufficient for most otherwise healthy patients. Laboratory testing is appropriate in higher risk patients when results will be used to institute more aggressive therapy (e.g., osteoporosis, chronic kidney disease, malabsorption, some infections, obese individuals).
- 2 **Don't perform low risk HPV testing.**  
National guidelines provide for HPV testing in patients with certain abnormal Pap smears and in other select clinical indications. The presence of high risk HPV leads to more frequent examination or more aggressive investigation (e.g., colposcopy and biopsy). There is no medical indication for low risk HPV testing (HPV types that cause genital warts or very minor cell changes on the cervix) because the infection is not associated with disease progression and there is no treatment or therapy change indicated when low risk HPV is identified.
- 3 **Avoid routine preoperative testing for low risk surgeries without a clinical indication.**  
Most preoperative tests (typically a complete blood count, Prothrombin Time and Partial Prothromboplastin Time, basic metabolic panel and urinalysis) performed on elective surgical patients are normal. Findings influence management in under 3% of patients tested. In almost all cases, no adverse outcomes are observed when clinically stable patients undergo elective surgery, irrespective of whether an abnormal test is identified. Preoperative testing is appropriate in symptomatic patients and those with risks factors for which diagnostic testing can provide clarification of patient surgical risk.
- 4 **Only order Methylated Septin 9 (SEPT9) to screen for colon cancer on patients for whom conventional diagnostics are not possible.**  
Methylated Septin 9 (SEPT9) is a plasma test to screen patients for colorectal cancer. Its sensitivity and specificity are similar to commonly ordered stool guaiac or fecal immune tests. It offers an advantage over no testing in patients that refuse these tests or who, despite aggressive counseling, decline to have recommended colonoscopy. The test should not be considered as an alternative to standard diagnostic procedures when those procedures are possible.
- 5 **Don't use bleeding time test to guide patient care.**  
The bleeding time test is an older assay that has been replaced by alternative coagulation tests. The relationship between the bleeding time test and the risk of a patient's actually bleeding has not been established. Further, the test leaves a scar on the forearm. There are other reliable tests of coagulation available to evaluate the risks of bleeding in appropriate patient populations.
- 6 **Don't order an erythrocyte sedimentation rate (ESR) to look for inflammation in patients with undiagnosed conditions. Order a C-reactive protein (CRP) to detect acute phase inflammation.**  
CRP is a more sensitive and specific reflection of the acute phase of inflammation than is the ESR. In the first 24 hours of a disease process, the CRP will be elevated, while the ESR may be normal. If the source of inflammation is removed, the CRP will return to normal within a day or so, while the ESR will remain elevated for several days until excess fibrinogen is removed from the serum.

These items are provided solely for informational purposes and are not intended as a substitute for consultation with a medical professional. Patients with any specific questions about the items on this list or their individual situation should consult their physician.

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# Let Your Hospital Team Know!

Don't test for ESR in patients with undiagnosed conditions. Use CRP testing.

Don't use bleeding time test.

Vitamin D testing should only be tested in high risk patients.

Do not prescribe testosterone therapy unless signs and symptoms point to the necessity.

Do not order RBC folate testing at all.

Don't perform procalcitonin testing without evidence based protocol.

Don't perform TSH testing on asymptomatic patients

Using a CBC as a screening method for asymptomatic non-pregnant adults is unnecessary.



# ASCP Request To Laboratorians:

## Take Action, Raise Awareness

ASCP's Effective Test Utilization Best Practices (formerly *Choosing Wisely*) is designed to help raise public awareness and garner support around appropriate test utilization. ASCP encourages you to explore and share the resources, read articles, and download the PDF guides, posters, and handouts as you communicate the mission of effective test utilization with patients and colleagues in our community.

### Quick Ways to Take Action

- Share the recommendations at your next staff meeting. Build awareness among your team about the importance of Effective Test Utilization.
- Volunteer 30-60 minutes per year spreading the message with others.




# Make your Hospital an Advocacy Hospital

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Be a pioneer of dissolving hospital barriers



Talk with your lab supervisor, arrange for a Medical Lab Scientist to sit in with Nurse team meetings and vice versa.



Make concerns and expectations clear to nurses about lab collection requirements



Ask the question, is the lab department meeting the needs of our physicians?

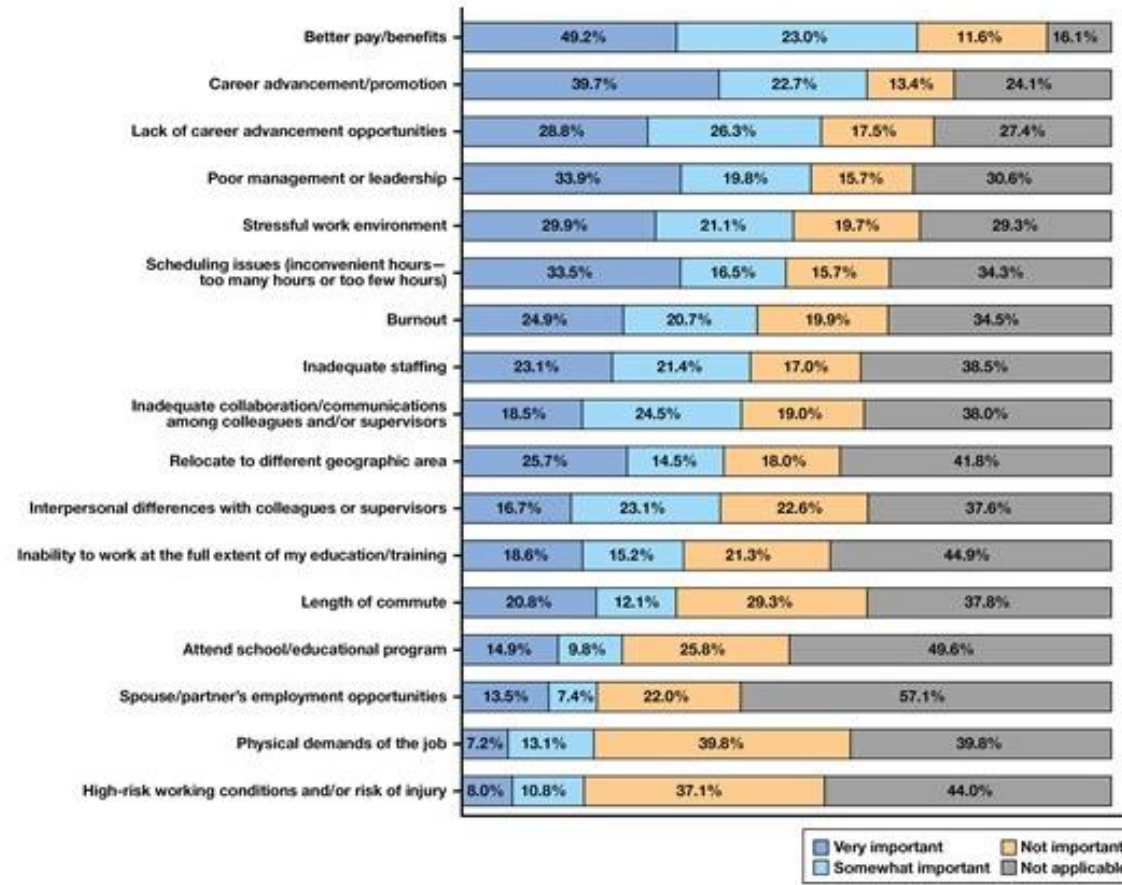






# The Key Takeaway

PARTNER WITH YOUR PHYSICIANS AND NURSES TO DELIVER BETTER PATIENT CARE

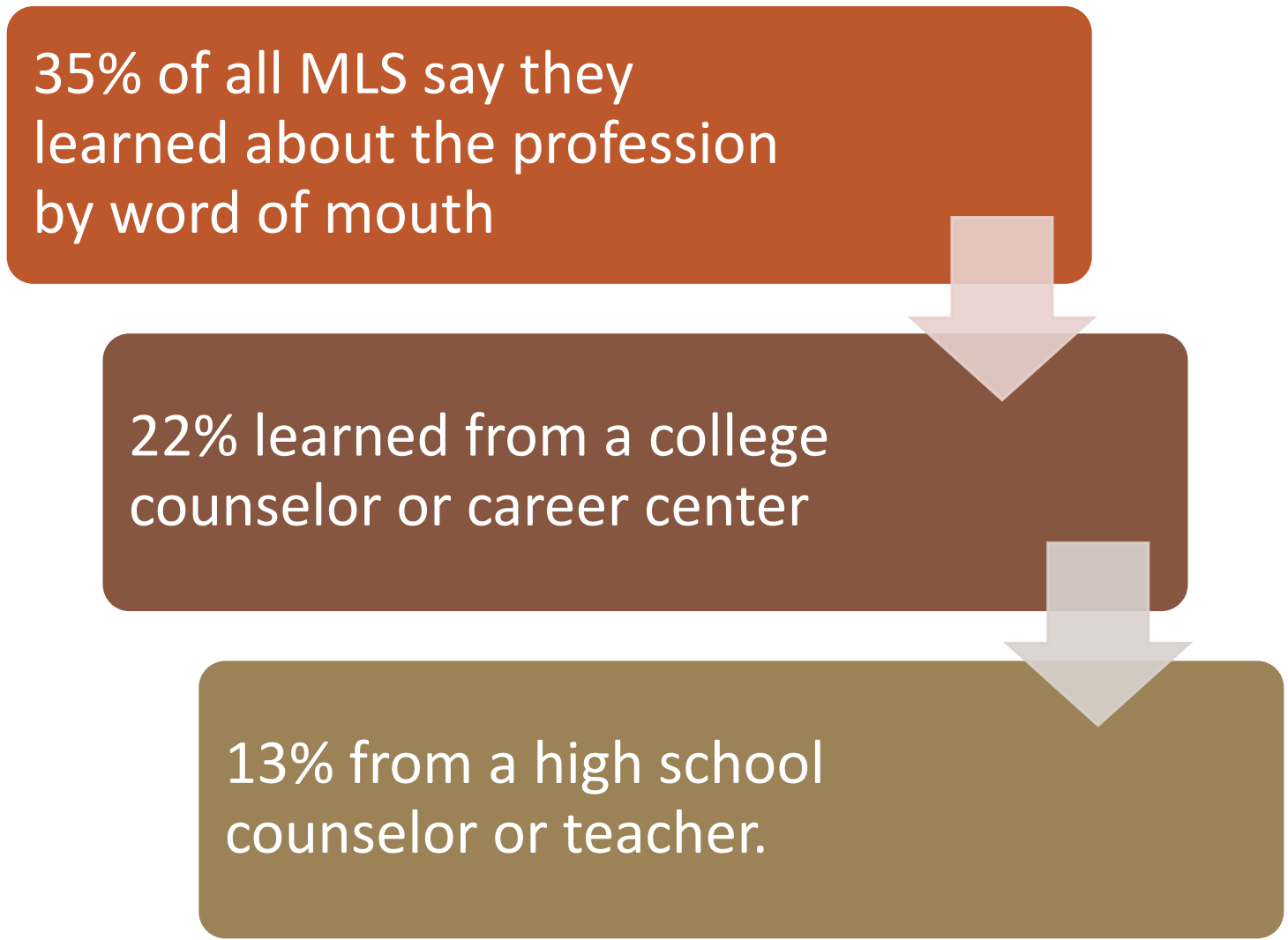


# The Workforce Shortage

**FIGURE 6** Factors for leaving prior laboratory position among currently working medical laboratory scientist respondents who held a prior laboratory-related position (n = 402). Respondents could



35% of all MLS say they  
learned about the profession  
by word of mouth



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graph TD; A[35% of all MLS say they learned about the profession by word of mouth] --> B[22% learned from a college counselor or career center]; B --> C[13% from a high school counselor or teacher.];
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22% learned from a college  
counselor or career center

13% from a high school  
counselor or teacher.

How did you  
find MLS?









# Help Students FIND MLS

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Go to Career Fairs.

Talk to the career counselors of your alma maters.

Host meetings that gather potential MLS students together to see your work.

If students aren't coming into your lab and seeing the work that we do ask why?



# Did you Know ASCP is Looking for Career Ambassadors?

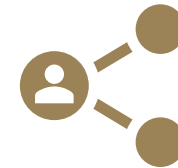
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Classroom  
Presentations



Career Fair Outreach



Hosting Meet-ups in  
your community





# Apply to be a Career Ambassador

The Career Ambassadors program puts laboratory professionals and pathologists in classrooms to encourage students to pursue a career in laboratory medicine. We also provide free resources to make engaging local students easy. To become more involved in your community, follow these simple steps.

- Apply online to serve as a Career Ambassador through our [online Volunteer Application](#).
- After your application is approved, you can begin visiting and talking to local students about careers in the medical laboratory.

Volunteer Application

<https://www.ascp.org/membership-resources/get-involved/ambassadors/career-ambassadors>





# The Key Takeaway

PARTNER WITH SCHOOLS AND PROFESSIONAL ORGANIZATIONS TO REACH STUDENTS

# Examples of Professional Organizations:



ASCP – American Society for Clinical Pathology



ASCLS - American Society for Clinical Laboratory Scientists



AABB - Association for the Advancement of Blood & Biotherapies



AGT - Association of Genetic Technologists





# The Role of the Professional Organization







ASCLS is a  
Grassroots  
Volunteer Driven  
Organization



# ASCLS Joint Annual Meeting







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HOST A MEETING JUST LIKE  
THIS ONE:



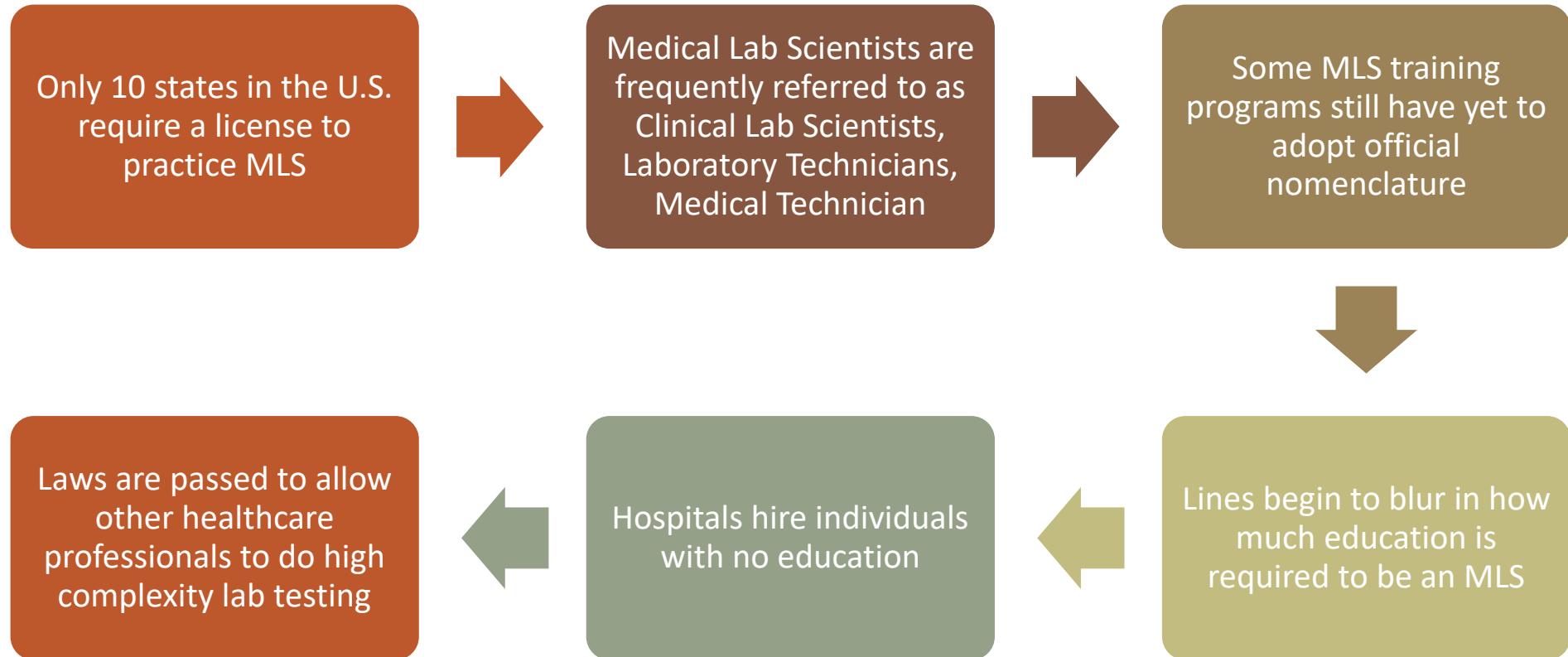


# The Key Takeaway

PARTNER WITH YOUR PROFESSIONAL ORGANIZATIONS

# The Consequence of Inconsistency

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# What can you do?

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**Adopt the  
official  
Nomenclature!**

**We are  
Medical Lab  
Scientists!**





## **CMS Final Rule abandons proposal to allow individuals with a bachelor's degree in nursing to perform high complexity testing**

ASCP and the ASCP Board of Certification (ASCP BOC) are thrilled that the Centers for Medicare & Medicaid Services (CMS) have abandoned plans to allow individuals with a Bachelor of Nursing degree to perform high complexity testing. Not only did ASCP and the ASCP BOC succeed in preventing Bachelor of Nursing degrees from qualifying individuals to perform high complexity testing, but we also succeeded in reversing CMS's policy of considering nursing degrees as equivalent to biology degrees. CMS stated in the Final Rule that nursing degrees do not provide sufficient instruction in the applicable sciences to perform high complexity laboratory testing under the Clinical Laboratory Improvement Amendments (CLIA) of 1988. The Final Rule provides quality patient care with a massive advocacy win.



# What Happens When Hospitals Have No MLS to Perform Testing?

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64% fail to have or follow current manufacture instructions for proper test performance

32% did not perform quality control as required by manufacturer

7% failed to perform calibration

23% of all labs surveyed did not have valid CLIA certificates

19% had inadequately trained or evaluated personnel

9% did not follow manufacturer storage and handling instructions

6% used expired reagents





# A step by step for talking with legislators

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Write a letter or an email to your local officials. To find them, simply go to [www.house.gov](http://www.house.gov) or [www.senate.gov](http://www.senate.gov)



Remember to state the reason for your contacting them within the first paragraph which is usually your support or opposition to a bill. ASCLS often covers legislation that will be detrimental to laboratories. Be concise. Share your story.



Call your local representatives.





# ePolicy News—May 2025

May 06, 2025



## Labvocate

advocate, ASCLS actively shapes the environment for laboratory professionals to achieve the best patient outcomes. Volunteer leadership defines how the Society aims to ensure the best patient outcomes. In collaboration with other like-minded stakeholders, ASCLS will ensure the public policy environment (both legislative and regulatory) that supports laboratory professionals working fully within their scope of practice and working to expand that scope of practice where needed. This includes state licensure and stronger rules on certification.

- Labvocate Symposium
- Licensure
- Workforce
- ASCLS Political Action Committee
- Patient Safety
- Labvocate Action Center
- Position Papers





Healthcare is a reactive science rather than a proactive one



Laboratories focus on increasing volume of testing and improving turn around time



IT systems for Laboratorians and Physicians developed separately



Lab data is interpreted by the same parameters for all patients universally

## The Old Healthcare Model 1.0



# The New Healthcare Model 2.0

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Labs assist physicians in interpretation of lab data by looking at data overtime



Labs connect the data we provide to the clinical outcomes



All healthcare professionals work under the same IT system



MLS are the pioneers that bring together everyone in the hospital hierarchy



Our actions have much bigger impact than you realize.



Establish yourself as an expert with your Nurses and Doctors

Go to career fairs, drop into biology classes, talk to career counselors, talk with students.

Interact with your Professional Organizations like ASCP and ASCLS

Be aware of legislation being passed

## A Recap



# Putting it All Together

GIVE YOUR VOICE





# Citations

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1. Grace A Guenther, Shahida F Shahrir, Susan M Skillman, Iman Kundu, Edna Garcia, Bianca K Frogner, Career pathways into the medical laboratory workforce: Education, exposures, and motivations, *American Journal of Clinical Pathology*, Volume 163, Issue 4, April 2025, Pages 545–580, <https://doi.org/10.1093/ajcp/aqae151>
2. Koch C, Roberts K, Petruccelli C, Morgan DJ. The Frequency of Unnecessary Testing in Hospitalized Patients. *Am J Med*. 2018 May;131(5):500-503. doi: 10.1016/j.amjmed.2017.11.025. Epub 2017 Dec 7. PMID: 29224739; PMCID: PMC8628817.
3. The Organization for Economic Co-operation and Development. Overweight or Obese Population. (2019, January 1). Retrieved from <https://www.oecd.org/en/data/indicators/overweight-or-obese-population.html?oecdcontrol-9202e3bf52-var3=2019>
4. Stylianou, Tom Calver and Nassos. “Nine Facts about How Long We Live.” *BBC News*, 14 May 2018, [www.bbc.com/news/health-43726436](http://www.bbc.com/news/health-43726436).



# Citations

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6. Bergeret, Miriam. “Long-Term Solutions to the Laboratory Workforce Shortage .” *Clinicallab*, Today’s Clinical Lab Magazine, 2 July 2024, [www.clinicallab.com/long-term-solutions-to-the-laboratory-workforce-shortage-27935](http://www.clinicallab.com/long-term-solutions-to-the-laboratory-workforce-shortage-27935).
7. Addressing the Clinical Laboratory Workforce Shortage - ASCLS.” *The American Society for Clinical Laboratory Science*, ASCLS, 2 Aug. 2018, [ascls.org/addressing-the-clinical-laboratory-workforce-shortage/](http://ascls.org/addressing-the-clinical-laboratory-workforce-shortage/).
8. *Support the Medical Laboratory Personnel Shortage Relief Act (H.R.9849) Position*. ASCLS
9. Allan GM, Young J. Complete blood count for screening? *Can Fam Physician*. 2017 Oct;63(10):772. PMID: 29025804; PMCID: PMC5638475.
10. ASCP. *ASCP Ambassadors Elevate the Visibility of Laboratory Professionals*. 7 May 2025, [www.ascp.org/membership-resources/get-involved/ambassadors/career-ambassadors](http://www.ascp.org/membership-resources/get-involved/ambassadors/career-ambassadors).



# Citations

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- 11 Gemini AI Image Generator. Prompt: Give me a women in a lab coat with a cape doing the superman pose, <https://Gemini.Google.Com>. Generated: 06/07/2025.
- 12 Munira Z. Gunja, Evan D. Gumas, and Reginald D. Williams II, *U.S. Health Care from a Global Perspective, 2022: Accelerating Spending, Worsening Outcomes* (Commonwealth Fund, Jan. 2023). <https://doi.org/10.26099/8ejy-yc74>
- 13 “ASCP/ASCP BOC Advocacy Win: CMS Repeals Nursing Degree Policy.” *Ascp.org*, 2019, [www.ascp.org/news/news-details/2024/01/11/ascp-ascp-boc-advocacy-win-cms-repeals-nursing-degree-policy?srsId=AfmBOoqXqQ8XjEShWV85D-fOv\\_O804K1D9ynOQab2iJmDQPX-XLDW0BH](http://www.ascp.org/news/news-details/2024/01/11/ascp-ascp-boc-advocacy-win-cms-repeals-nursing-degree-policy?srsId=AfmBOoqXqQ8XjEShWV85D-fOv_O804K1D9ynOQab2iJmDQPX-XLDW0BH). Accessed 9 June 2025.
- 14 EPolicy News—May 2025.” *Ascp.org*, 2025, [www.ascp.org/news/news-details//2025/05/06/epolicy-news-may-2025](http://www.ascp.org/news/news-details//2025/05/06/epolicy-news-may-2025). Accessed 10 June 2025.
- 15 Enrollment and Certification Processes in the Clinical Laboratory Improvement Amendments Program. U.S. Department of Health and Human Services Office of Inspector General. August 2001 OEI-05-00-00251.
- 16 *Support the Medical Laboratory Personnel Shortage Relief Act (H.R.9849) Position*. ASCLS. [https://ascpcontentwebsite.blob.core.windows.net/content/docs/default-source/istp/policypriorities\\_statelicensurelaboratorypersonnel.pdf?sfvrsn=d3db5947\\_1](https://ascpcontentwebsite.blob.core.windows.net/content/docs/default-source/istp/policypriorities_statelicensurelaboratorypersonnel.pdf?sfvrsn=d3db5947_1)

