Greetings ASCLS-Michigan members! I hope that you are enjoying the milder temperatures and welcoming the sunshine.

After a few bitter cold mornings and navigating snow covered roads, I am sure you are ready for Spring to arrive. Springtime is the season of renewal and celebration. So, I thought it would be fitting to share with you some ideas of how to renew your inspiration and enthusiasm for our profession.

1) **Participate in continuing education.** One of the best member benefits is the access and opportunity to listen to some of the best presenters in our field. Hearing about new testing methods and practices always give me a newfound perspective. ASCLS continues to offer monthly CE sessions and our State Annual Conference is just around the corner on April 18.

2) **Collaborate with peers and colleagues.** Engaging and networking with peers is one way to share information and exchange ideas. Locally, our district representatives have organized virtual events to stay connected with one another – like the Virtual Trivia Night hosted by District 1. Did you know that ASCLS has a podcast? The Off the Bench podcast is another great opportunity to keep connected and share in some light conversations. Some of our very own members have been featured on Off the Bench. More information can be found here: [https://www.ascls.org/communication/podcasts](https://www.ascls.org/communication/podcasts)

3) **Celebrate accomplishments.** Medical Laboratory Professionals Week is an opportune time to celebrate our individual and team professional accomplishments. Take time to celebrate and acknowledge one another’s efforts – whether it is a milestone like implementing a new instrument or working through a difficult shift with your team. ASCLS and ASCLS-Michigan also honors and recognizes members who continue to be supportive of the society and the profession. Consider
nominating a peer for an award. More information on ASCLS-Michigan awards can be found here: https://www.ascls-michigan.org/awards-1

4) **Volunteer.** Volunteering has always given me a renewed excitement and joy. There are many volunteer opportunities within the society. Particularly, you may be interested in volunteering as a mentor by sharing your experiences and stories with a developing or ascending professional. This program will give you inspiration while encouraging developing and ascending professionals. Sign in to https://connect.ascls.org/home to get started!

I hope this brief list will keep you motivated, inspired, and engaged. Take a moment during this season of renewal to celebrate the profession and your active role in delivering quality, safe care. I look forward to seeing you at our Virtual State Annual Conference. In the meantime, soak up some sun and **#LiveLoveLab**

**#ASCLS**

North Pierhead Lighthouse in Manistee, Michigan
I hesitate to bring up the topic of the COVID pandemic again, or SARS-CoV-2 pandemic, as we scientists call it, but I would like to explore the impact it has had on the education of our medical laboratory students over the past year. I teach in a university-based program, so this will be somewhat biased towards my viewpoint and perspective, but I hope that all can relate to what we will discuss here whether school based, or hospital based.

A few years ago, as on-line learning was becoming more and more a viable option for undergraduate and advanced degrees, most MLS/MLT programs considered putting some of their courses online, such as Medical Terminology or Immunology especially since they didn’t require lab sessions and were easier to teach in an asynchronous way. Some were also working toward an all-online Masters degree program which some of you already have. That being said, the majority of MLS/MLT programs across the US were not online.

Then the pandemic hit last spring and the reality that we would need to teach our students remotely immediately and find or create content that would teach lab skills. It was thrust upon us without the luxury of time to consider, compare and plan. Student left campus in a matter of days, and we had to adapt STAT and still deliver content that we were confident would maintain the level of rigor and information students needed to complete their clinical rotations and pass their certification exams.

This on-the-fly adaptation proved a couple of things to us. That we were capable of delivering our course content in a different format successfully, but also that we really loved teaching our labs in person! Also that the students actually learned and absorbed the material better when in the company of fellow classmates and an instructor in-person or face-to-face (FTF). It proved that we were adaptable and competent as instructors, but that here were certain emotional and intangible factors that helped students retain material and keep a positive attitude when in a rigorous program that was not delivered/available) online. We were confident that we supplied the content in a way that would not disadvantage the students who had to suddenly take the courses online, but we observed behaviors and results that were not congruent with the students’ abilities, since we had already taught them in courses FTF and saw a difference in their progress now that they were taking courses online.

What were these intangibles? Out of curiosity I sent questions to my students at the end of the semester asking them to compare advantages and disadvantages of online learning. One common theme in favor of FTF classroom experience was "I felt motivated to study when attending a class because 1) I felt I had some competition and 2) there was a sense of “we are doing this together” when meeting in person." The friendships and comradery felt by the students was significant enough to help them study and persevere. Also many of them considered home too relaxing for instance, studying...
in their bedroom. Others had the opposite situation where their study area was overrun with family members and they couldn’t concentrate. Interesting.

So where do we go from here? If we have another pandemic in the future, and have to return to only online instruction, how do we provide the emotional support or “bonding” that is needed for a full academic experience and to keep the students engaged and motivated? I know there are full programs that teach online and it would be interesting to hear their explanations on how they deal with this issue. In reality, is this our responsibility, to provide this emotional support? If not, how do we help make sure our students have the grit and emotional maturity to make it through? How do we screen for that?

In closing, I think we have more questions than answers, but we have learned a lot and I was proud of all medical laboratory professionals that I worked with during this past year; from the students, to faculty, to our clinical sites where MLS/MLT professionals who were dealing with the changes occurring in their workplaces were still willing to help us complete the training of our cohort from last year. We had to get creative sometimes, but I have to say I saw an ability to adapt and change quickly that I didn’t know existed in our field. Change is not always easy but I have seen that our field is full of competent, hard working individuals that are great at working together to help take care of our patients and each other. Thank you for making us proud. Bravo. I am confident that the road forward will be full of change and adaptation, but we got this.

Black History Month - Laboratory Science

Paul Guthrie, ASLCS-Michigan Publications Chair

Last month was Black History Month. I came across an article from LifeBrite Laboratories,¹ that paid tribute to some of the many African Americans whose work advanced medical laboratory science. There are countless people deserving of such credit, and this short list does not cover even a fraction of the most consequential contributors. I was not familiar with these individuals, and thought it was worth sharing the stories of three pioneers whose discoveries are still used in laboratories today.

Dr. Marie Maynard Daly

Born in 1921, Dr. Marie Maynard Daly was the first Black American to earn a Ph.D. in chemistry, from Columbia University in 1947.

According to the book Distinguished African American Scientists of the 20th Century, Daly’s father had also wanted to study chemistry and received a scholarship to study at Cornell University. However, unable to afford rent and board, he had to drop out during his first year.
Daly would later say that her father’s earlier ambitions and Paul de Kruif’s book, The Microbe Hunters — which told the stories of the first scientists to study microbes — were both influential in her decision to study biochemistry.

She wrote her dissertation at Columbia based on original research into the role of pancreatic amylase in digestion. After completing her doctoral studies, she went on to teach biochemistry and medicine at Howard University, Columbia University, and the Albert Einstein College of Medicine.

With funding from the American Cancer Society, Daly became an early, leading researcher in the new science of cell nucleus function and DNA. In James Watson’s Nobel Prize lecture, speaking about his discovery (with Francis Crick) of DNA, Watson cited one of Daly’s papers as having contributed to his work.

Daly later conducted groundbreaking research into the role of cholesterol in clogged arteries and heart attacks, the effect of sugar on heart health, and the impact of smoking on lung health. Late in her career, she did important work in the uptake of creatine in muscles.

Dr. William Augustus Hinton

Born in 1883, Dr. William Augustus Hinton was a bacteriologist, pathologist, and the first Black professor at Harvard University. According to a profile by Harvard Medical School, Hinton wanted to specialize in surgery, but Boston-area hospitals wouldn’t hire him, because of his race. So he turned his attention to laboratory work instead.

For three years, Hinton volunteered part-time in the Department of Pathology of Massachusetts General Hospital, performing autopsies on all deceased patients suspected of having syphilis. This work would later lead to him developing a highly reliable test for syphilis, in 1927. The “Hinton test” became the medical standard, adopted by the U.S. Public Health Service in 1934, and, with two refinements by Hinton, remained so until about 1957 when the rapid plasma reagin (RPR) test supplanted it.

Hinton went on to work at the Wasserman Laboratory, which was then housed at Harvard Medical School and served as the Massachusetts State Laboratory for communicable diseases. The laboratory was later transferred to the Massachusetts Department of Public Health, and Hinton became the Chief of the Wasserman Laboratory, holding that position for the next 38 years. He also authored the first medical text book by a Black American, and he helped break down barriers to women entering laboratory professions.
Dr. Harold Amos

Born in 1918, Dr. Harold Amos was a microbiologist and, for 50 years, professor at Harvard Medical School, where he became the first Black chair of an academic department. A biography of Louis Pasteur that he read in the 4th grade inspired his interest in medical science. (He later admitted that Pasteur’s use of goats as test subjects also played a role, because he disliked the family goat.) He would later study at the Pasteur Institute on a Fulbright Fellowship.

At Harvard, he studied in and would later chair the Department of Bacteriology and Immunology, which was later named the Department of Microbiology and Molecular Genetics. He was a generalist who worked across many fields including virology, microbiology, and genetics, and he did important early work on E. Coli.

Amos made critical discoveries in many areas of animal cell functions, including enzyme inductions, glucose starvation, and RNA metabolism. He is perhaps best known for his work in “the use of bacterial RNA to synthesize biologic materials such as insulin.”

In 2004, the Robert Wood Johnson Foundation renamed the Minority Medical Faculty Development Program as the Harold Amos Medical Faculty Development Program, in honor of Dr. Amos’ efforts to open doors for people of color seeking medical science careers.

References
1. Atlanta-based LifeBrite, led by CEO Christian Fletcher, operates LifeBrite Laboratories, LifeBrite Community Hospital of Stokes, and LifeBrite Community Hospital of Early.
   “Three Black Americans Who Made Medical Laboratories Possible (lifebritelabs.com)”

ASCLS-Michigan Announces Virtual Annual Conference!

In light of ever-changing restrictions and the continued demand for those in our profession to be present in laboratories, in classrooms (whether virtual or in-person), and in our homes when not needed elsewhere, the ASCLS-Michigan Conference Team has made the decision to once again refrain from hosting the in-person Annual Conference that was previously scheduled for March 29-31 of this year, and is instead excited to announce the first-ever Virtual Annual Conference! This event will take place April 18-19, 2021, and full meeting registrants will be able to access up to 16 CE sessions either
synchronously or asynchronously, as well as participate in a variety of governance, recognition, and networking events!

Watch for the full program to be available and for registration to open in early March.

We hope will see you there as we celebrate our profession and kick off Medical Laboratory Professionals Week 2021 with sessions such as Legal, Ethical, and Scientific Concerns with Direct-to-Consumer DNA Testing; Reducing the Environmental Impact of the Clinical Laboratory; Global Hemostatic Systems; Antimicrobial Stewardship; Laboratory Detection of Acute Kidney Injury; Tumor Marker Testing; Creating a Culture of People First, and more!