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What Have We Done for You Lately? The Role of the American Society for Microbiology in Advancing Clinical Microbiology

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Abstract

The American Society for Microbiology (ASM) is distinguished as the oldest and largest life sciences organization with a membership worldwide of 47,000. With an organization that represents the size and scope of the disciple of microbiology, its members can begin to consider the value of their membership. This article outlines the breadth and scope of activities that ASM has and is working on to advance clinical microbiology.

Introduction

The microbial sciences represent far more than what many consider to be covered by traditional microbiology. The new strategic vision of the American Society for Microbiology (ASM) recognizes that we are more expansive as a field and as a society than when we began over 100 years ago. It is clear that as the microbial sciences continue to prosper, more ways must be found to include new disciplines and groups under the ASM tent [1].

ASM must continue to facilitate scientific integration while recognizing the need for group autonomy. One change meant to promote cross-disciplinary science is the integration of the General Meeting and Interscience Conference on Antimicrobial Agents and Chemotherapy (ICAAC) into the new ASM Microbe 2016. This meeting is designed to provide a welcoming environment for everyone in the microbial sciences. ASM is expanding and evolving the bandwidth of the meeting by organizing content into broad scientific and professional "tracks" covering the breadth of the microbial sciences rather than focusing on particular microbes or disciplines.

Participation of special interest groups is absolutely essential for cross-discipline interactions in many of those tracks. ASM has always encouraged member-initiated topics and sessions at its general meeting. However, now more than ever, it is clear that the integration of disciplines and technology is essential for the discovery and translation of research findings. Such integration is difficult to achieve when autonomous groups drive agendas; therefore, interdisciplinary groups are now the norm.

ASM is much more than a single large general meeting. As an organization, our job is to make our members better because of our society. There is no magic wand to achieve this goal, just the conviction we will continue to constantly evolve and improve. We must listen to our constituents and understand what the various sub-disciplines within microbiology need and want, acting promptly on this information. The only constant in today's world of scientific societies is change.

In the discipline of clinical microbiology, ASM has been extremely active in the past several years, addressing the needs of its members. The information below outlines some (but not all) of

the activities that ASM has undertaken and is currently developing on behalf of the society's clinical practitioners.

Clinical Microbiology Mentoring Committee

The purpose of the relatively new Clinical Microbiology Mentoring Committee (CMMC) is to mentor practicing clinical microbiologists and to expose students to clinical microbiology as a career option. This committee has developed several tools to advance careers in clinical microbiology. A 5-minute video entitled Life in the Clinical Microbiology Laboratory (https://www.youtube. com/watch?v=fHitKYBOgv4) has been produced. This video highlights the experience of being a highly skilled clinical microbiologist, bridging the knowledge gap between the basic sciences and the practice of laboratory medicine. It shows the investigation of real-life "who done it" mysteries in which clinical microbiologists systematically piece together the real-time unfolding of evidence to support the diagnosis and treatment of patients who experience infectious diseases. The video portrays a clinical microbiologist evaluating cultures, identifying the organisms causing the infection, and predicting what antimicrobial therapy should be utilized. It highlights how a clinical microbiologist interacts with the patient care team to educate, inform, and advise.

In addition, the CMMC group has developed several informational documents, including Power Point presentations, brochures and guides. These documents cover topics such as, case studies, preparing students for a career in clinical microbiology, and benchlevel clinical microbiologist career development guide. They are designed to provide assistance to laboratory technologists early in their career, as they navigate potential professional paths in technical and supervisory management, near-bench research, and advanced education/certification. The CMMC has contributed an article to "Microbe Mentoring" (http://clinmicro.asm.org/images/ archive/Microbe_Mentor.pdf), a career-advice column regularly featured monthly in ASM's Microbe Magazine, answering the question, "How can I make myself more marketable for a career in clinical microbiology?". CMMC members are currently assisting ASM with consolidation of all career information on ASM's website with a projected timeline for completion in late 2016.

To aid in the improvement of scientific presentations, a Power Point presentation has been developed with audio on "How To Write a Scientific Abstract" (http://asmmicrobe.org/index.php/submit-abstract/submit-an-abstract). Soon to be available will be a presentation on "How To Prepare a Scientific Poster," listed on the ASM website. A workshop on communication entitled "How To Write and Present Microbiology for a Clinical Audience" is in development.

The CMMC has developed a program called "The New Microbiology Technologist Professional Development Grant Program." In this program, up to 10 grants of \$1,500 each are awarded to members of ASM who are non-doctoral-level clinical microbiology technologists, have worked in clinical microbiology for less than 5 years (primarily at the bench level), have aspirations for career advancement, and have never attended an ASM General Meeting. Grant recipients are mentored by a member of the

CMMC, prior to, during, and after the meeting. The program is designed to encourage and recognize a new generation of leaders in clinical microbiology. For more information see the following links: http://clinmicro.asm.org/index.php/professional-status/asm-awards-fellowships-travel-grants/441-bench-technologist-supervisor-bench-technologist-supervisor; and https://clinmicro.asm.org/index.php/explore-the-profession/careers-in-clinical-microbiology/426-career-mentoring-in-clin-micro. Most recently the members of the CMMC participated in the 2015 ASM General Meeting workshop "Microbiology Career Choices: What's Available and How to Succeed."

Public and Scientific Affairs Board

The clinical committees of the Public and Scientific Affairs Board (PSAB) are the Committee on Laboratory Practices (CLP) and the Professional Affairs Committee (PAC). Both of these committees are very busy in policy and advocacy for the profession of clinical microbiology. See Walker et al. [2] for a review of the policy of microbiology and the role of the PSAB. The CLP is currently working with the Food and Drug Administration (FDA) and the Centers for Disease Control and Prevention (CDC) on new guidance for reprocessing of duodenoscopes. Members of the CLP held a briefing with congressional staff from the House Committee on Oversight and Government Reform on duodenoscope culturing. This ongoing relationship with congressional staff members stems from the ASM endoscopy white paper publication (http:// www.asm.org/index.php/component/content/article/98-policy/ issues/93456-lp-4-15). It allows ASM staff members to monitor the activities of the committee and provide them with scientific information.

The CLP, in conjunction with the Infectious Disease Society of America (IDSA) and the Pan American Society for Clinical Virology, is drafting a letter to the FDA on their oversight of laboratory-developed tests (LDTs). The FDA is set to issue final guidance on LDTs, which could have a serious impact on diagnostics in infectious disease, particularly emerging infectious diseases. The joint letter will express strong concerns about FDA oversight of LDTs and is expected to be out in the second quarter of 2016. In a joint project with the IDSA, the CLP is beginning to discuss ways to convince the FDA to adopt new antibiotic resistance breakpoints developed by professional organizations in a more timely fashion.

As new data are published, revisions to the Sentinel Level Clinical Laboratory Protocols for Suspected Biological Threat Agents and Emerging Infectious Diseases are ongoing. The CLP has provided oversight for the revision of the Sentinel Laboratory Guidelines. The most recent revision of the bacterial protocols took place on March 7, 2016 and can be found online (http://www.asm.org/index.php?option=com_content&view=article&id=2573).

A series of documents to assist our clinical microbiology community with the implementation of the Centers for Medicare and Medicaid Services' (CMS's) mandate for the Individualized Quality Control Plan (IQCP) was produced by the CLP, the College of American Pathologists, and the Clinical and

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