

9th National Conference on Laboratory Aspects of Tuberculosis

Grand Hyatt Atlanta in Buckhead

Atlanta, GA – June 8-9, 2015

Call for Abstracts

The Association of Public Health Laboratories (APHL) is soliciting abstracts for posters to be presented at the 9th National Conference on Laboratory Aspects of Tuberculosis to be held June 8-9, 2015.

The conference, sponsored by the Association of Public Health Laboratories (APHL), will focus on finding ways to improve the quality and efficiency of TB testing practice and standards for laboratories in the United States.

Call for Abstracts for Poster Presentations

Poster sessions will address program implementation and technical laboratory aspects of Mycobacteriology related activities.

Suggested topics include (but are not restricted to):

- Molecular Methods
- Laboratory Methods
- Testing Algorithms
- Systems Approaches
- Laboratory Surveillance
- TB Lab/TB Control partnership
- Nontuberculous Mycobacteria

All abstracts must be included in a box of exact size to allow reproduction for the program brochure -- 7" wide (17.5 cm) by 4" high (10 cm). The box shall have single line borders with no text characters extending beyond the borders. All abstracts must be typed within the boxed area in Arial 11 font. Figures and graphics should NOT be included with the abstract. The title of the paper and the names of all authors must be on the first and second lines, respectively, within the box (see example

below). The abstract must be submitted in Word format and emailed as an attachment.

Abstracts not meeting these format requirements will NOT be considered for presentation.

All abstract submissions must also include the following information: name of presenter, institution, department, mailing address, telephone, email and general topic.

Please send all abstracts and direct all questions to: William Murtaugh at 240.485.2764 or william.murtaugh@aphl.org.

Abstracts must be **received by March 27, 2015** to ensure consideration for poster sessions in this meeting. You will be notified by **April 24, 2015** of the status of your submission.

Guidelines for Posters

Poster presentations will be limited to a maximum of eight feet wide by four feet high (8'w x 4'h). Posters must be oriented and mounted horizontally.

Abstracts chosen for poster presentation shall be displayed during the times allotted for poster sessions.

Poster presenters **MUST** be at their posters during the assigned time to discuss their work with interested attendees.

Three outstanding posters will be selected. The authors will be given the opportunity to present their work in a special session, "Highlighting the Work of our Labs".

Sample abstract:

Newborn Screening with Tandem Mass Spectrometry: Examining its Cost Effectiveness in the Wisconsin Newborn Screening Panel

R.P. Insinga, R.H. Laessig, G.L. Hoffman, University of Wisconsin, Madison, Madison, WI

Objective: To examine the cost-effectiveness of tandem mass spectrometry (MS/MS) in a neonatal screening panel for 14 fatty acid oxidation and organic acidemia disorders in the Wisconsin Newborn Screening Program.

Study Design: Incremental cost-effectiveness (C-E) analysis using a hypothetical cohort of 100,000 infants. First, the cost-effectiveness of screening for medium-chain acyl-CoA dehydrogenase deficiency (MCAD) alone is analyzed. A threshold of \$50,000/QALY (quality adjusted life year) is used to determine whether screening for MCAD alone is cost-effective, or whether data on additional disorders would need to be incorporated into the analysis to arrive at a conclusion regarding the overall cost-effectiveness of MS/MS.

Results: Under very conservative assumptions, screening for MCAD alone yields an incremental C-E ratio of \$41,862/QALY. Employing more realistic assumptions, screening becomes even more cost-effective (\$6,008/QALY), and remains cost-effective so long as the incremental cost of screening remains under \$13.05/test. Adding the incremental costs of detecting the 13 other disorders on the screening panel still yields a result well within accepted norms for cost-effectiveness (\$15,252/QALY).

Conclusions: In Wisconsin, MS/MS screening for MCAD alone appears cost-effective. Future analyses should examine the cost-effectiveness of alternative follow-up regimens for MCAD and other panel disorders.