

\$75,000, the laboratory director can pay less than a clinical pathologist's \$140,000 (gross, not counting part B consult fees). Further it is as hard to find a clinical pathologist as it is a CLS. All that remains is for the DCLS to convince the house staff, nursing staff, other health professionals, and administrators that she is worth listening to. While MDs and nurses are comfortable with 'their own kind', they will listen to any professional who knows what he is doing and keeps them out of trouble. It's a matter of trust. Once the team recognizes the value of the DCLS, she is in.

Higher education is perhaps the most promising DCLS opportunity. Universities insist on doctorally prepared faculty, and anyone who reads the discussion boards knows we need more. There are too few CLSs with doctorates in related sciences such as pathology, microbiology, pharmacology, biochemistry, or education to fill the pipeline. Indeed, in their haste to fill positions with PhDs, universities have taken the questionable step of employing non-CLS PhDs, scientists who can ostensibly write grants but who possess a peripheral knowledge of the profession; a short-term, often damaging solution. Conversely, a DCLS in education would have to have a competitive and sustained research record.

The final possibility is the in vitro diagnostics and the ref-

erence laboratory industries. Employing business models, instrument and reagent manufacturers perceive the need for professional spokespersons to address clinical customers. Reference laboratories and pharmaceutical distributors are also moving in this direction. There is little tradition, but a growing trend toward physicians and non-CLS PhDs. The DCLS would be an excellent fit in this niche, but would have to prove their worth.

In the end, the DCLS concept could work if we:

- find a way to create acceptable communication among DCLS, medical, surgical, pharmacy, and nursing practitioners.
- estimate the number of potential DCLS positions and learn who currently occupies them.
- develop a welcome for the DCLS in positions currently occupied by clinical pathologists and PhD basic scientists.
- develop a business plan to illustrate that a DCLS will be productive enough in cost analysis, utilization review, outcomes assessment, and risk reduction to be fiscally attractive to all size institutions.
- assess the potential for establishing DCLS research tracks that fit within the higher education structure.
- market aggressively.

*George A Fritsma MS MT(ASCP), Continuing Education Editor.*

## Decisions, Decisions, Decisions

SUSAN LECLAIR

We live in a world with simply too many of them. In the latter half of the last century, the wish was for choice. Now that we have it, we have come to the realization that choice demands decision making. And so we choose sometimes after thoughtful consideration, sometimes with no thought what so ever.

In the world of decision making, one can see the choice as one of duty. Admiral Farragut's order "Damn the torpedoes... Full speed ahead." is a decision borne of duty. But one can also see choice as a matter of consequences. How many times has someone said, "The greater good for the greater number." A person who is consistent in their approach to life chooses only one of those principles. As we all know, humans are rarely consistent in their decision making.

The House of Delegates makes decisions for the society and ultimately then for the profession. Some years those choices

seem to be less onerous than other years. This year there will be discussion and debate about many things but one of the choices will be about the future of the profession. There will be a position paper concerning the creation of a new practitioner and the development of a new way of educating them.

Where do you stand on the question of a doctorate in clinical laboratory science? What would you be able to do with it? Who would pay for it? How would one get one? Who would be for it? Against it? The House of Delegates represents every member and therefore every member should be engaged in this conversation in order that the delegates reflect the understanding and will of the membership. In this issue there are two articles which explore the various aspects of this debate. You have a choice. Now all you have to do is make it.

*Susan Leclair is Editor-in-Chief of Clin Lab Sci.*