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*This chart represents common types of submissions to Clinical Chemistry.

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- Double-spaced text, 1-inch margin, 12-point font size in Arial, Helvetica, or Times New Roman
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- A MIQE checklist is required for all studies using quantitative real-time PCR experiments; a STARD checklist is required for all studies or trials of the diagnostic accuracy or performance of a diagnostic test; a CONSORT diagram is required for all randomized and Phase III trials; a MIAME checklist is required for all studies that present data for microarray experiments.
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Clinical Chemistry is pleased to announce a special upcoming theme issue on Cancer edited by Drs. Eleftherios P. Diamandis, Robert C. Bast and Carlos Lopez-Otin titled, “Conquering Cancer in Our Lifetime: New Diagnostic and Therapeutic Trends.” Clinical Chemistry, published by the American Association for Clinical Chemistry, is the most highly cited forum for peer-reviewed, original research in the fields of clinical chemistry and laboratory medicine.

The purpose of this issue is to highlight recent advances in diagnosis and therapy of cancer and will include diverse themes such as cancer genomics, proteomics, chemoprevention, early diagnosis, biomarker discovery and validation, drug resistance, cancer stem cells, cancer epigenetics, antiangiogenic therapies, mechanisms of cancer metastasis, and the tumor microenvironment.

Clinical Chemistry invites authors to submit original articles related to cancer to be considered for publication in this special issue. Manuscripts are most likely to be favorably received if they address novel technologies to diagnose, treat or prevent cancer or its complications.

Potential topics of interest include:

- Discovery and validation on novel biomarkers for early diagnosis, prognosis, and monitoring of cancer therapies
- Role of cancer genomics, proteomics, and epigenetics in personalized medicine
- Mechanisms of cancer metastasis and the tumor microenvironment
- Cancer chemoprevention
- Drug resistance and how it can be overcome
- The cancer stem cell hypothesis and its application to diagnostics and therapeutics
- Cancer subclassification by using genomics, proteomics, metabolomics, and other omics
- Novel approaches for therapeutics, diagnosis and monitoring, such as circulating cancer cells, and circulating free DNA and micro-RNAs

Be a part of this exciting issue!

Submissions must be received through our online submission system at http://submit.clinchem.org no later than July 1, 2012. Your cover letter should express your interest in submitting your paper for consideration for the Cancer theme issue. Journal guidelines for submission apply as described in the Information for Authors on the submission website.
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Mass Spectrometry in the Clinical Lab: Best Practices and Current Applications

September 6-7, 2012
Chicago, IL

Mass spectrometry is fast becoming the analytical method of choice for many clinical assays. Attend this conference to find out if mass spec has a place in your lab, and learn about clinical applications where it is now being routinely used.

Our leading lab experts will show you:
- Advantages and challenges of mass spec
- Keys to implementing mass spec tools in the clinical lab
- New guidelines for MS method development and validation
- Pros and cons of mass spec vs. immunoassay

In addition, conference faculty will examine some of the applications already in use in the clinical lab, including:
- Therapeutic drug monitoring
- Toxicology screening and confirmation
- Steroid, thyroid, and vitamin D analyses
…and offer a look at emerging applications in microbiology, molecular diagnostics and pharmacogenomics.

Don’t miss this informative program! Early bird registration ends August 16.

For more information or to register, please visit the AACC web site at www.aacc.org.
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Promoting a Culture of Quality and Consistency in Critical and Point-of-Care Testing

24th International Symposium October 4-6, 2012
Hilton Prague Hotel Prague, The Czech Republic

Join the world’s leading clinicians, POCT practitioners, and technology developers.

Explore a range of timely issues:
- Benefits and Outcomes of Tight Glycemic Protocols in Critical Care Patients
- Understanding the Sources of Error and Limitations in Point-of-Care Testing
- Point-of-Care Testing Beyond the Hospital
- Developing Effective Strategies to Achieve Quality POCT Results
- New Technologies in Point-of-Care Testing

Hear keynote speaker Maurice O’Kane, MD of Altnagelvin Hospital in Londonderry, UK discuss the current and emerging quality perspectives in point-of-care testing.

Network with colleagues and speakers at the opening reception, during dedicated viewing of the posters, and at the awards dinner and visit one of Europe’s most beautiful and vibrant cities.

Early registration discounts end August 10, 2012
See full program at http://www.aacc.org/events/meetings
For the first time in history, ACS and USPSTF have released consistent guidelines for cervical cancer screening. Previously, the USPSTF had indicated that the evidence was insufficient for it to recommend the combined use of cervical cytology and high-risk human papillomavirus (HPV) DNA testing ("co-testing"). Now, both groups include recommendations for co-testing in women age 30–65 years, stating that they should either be screened by cytology every 3 years or by co-testing every 5 years.

The groups’ willingness to lengthen the time between screenings when co-testing is performed speaks to the medical community’s confidence in today’s HPV testing technologies. A variety of molecular assays are now available for detecting HPV, and labs performing these assays in-house must determine which technology best fits their HPV testing needs.

**During this program, experts will address:**

- What the current guidelines for cervical cancer screening are and how they predict risk
- The major applications of HPV testing and the role it plays in these guidelines
- What it means to have a “clinically validated” HPV test
- The advantages and limitations of using today’s FDA-cleared HPV testing technologies
- Why traditional method validation protocols won’t work with new HPV testing technologies

**Program Faculty:**

*Mark H. Stoler, MD,* Professor of Pathology, Cytology and Gynecology; Associate Director of Surgical Pathology and Cytopathology; and Director, Gynecological Pathology Fellowship Program, University of Virginia, Charlottesville, VA

*Frederick S. Nolte, PhD,* Professor, Director of Clinical Laboratories, and Director of Molecular Pathology, Department of Pathology & Laboratory Medicine, Medical University of South Carolina, Charleston, SC

This program is approved by AACC for 1.5 Category 1 ACCENT credit hours, and supported by an educational grant from Roche Diagnostics.

*Stay current with the latest developments in HPV testing. Register today!*

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Go to www.aacc.org and under “Events” select “Conferences and Events” and choose this webinar. Once on the webinar page, click “Register” to register online or print a registration form.
A Unique Opportunity

This international conference brings together outstanding leaders in the field of cardiovascular medicine. The two-day program will cover all major areas of cardiovascular disease (CVD) including prevention, diagnosis, and management. This is a unique opportunity to hear from, and interact with, leading cardiac specialists and investigators in both clinical practice and the research arena.

Leading-Edge Topics

- International trends in CVD
- Biomarkers in the prevention of CVD
- Genomics, proteomics and biomarkers of CVD
- Biomarkers in the diagnosis and management of CVD

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  Harvard Medical School
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  DeCode Genetics
- Jacques Genest, MD
  McGill University Health Center
- David Morrow, MD
  Harvard Medical School
- K. Srinath Reddy, MD
  Public Health Foundation of India

Abstracts are welcome on all areas of cardiovascular disease prevention, diagnosis and treatment. The abstract submission deadline is July 1, 2012.

This program is offered under the auspices of the IFCC and is co-sponsored by the Asian Pacific Federation of Clinical Biochemistry and Laboratory Medicine, Indonesian Heart Association, Japan Atherosclerosis Society, Japan Society of Clinical Chemistry, Singapore Association of Clinical Biochemistry, Singapore Cardiac Society and Taiwan Society of Cardiology.

Generous corporate funding for this program has been received from Denka Seiken Co., Ltd., Health Diagnostic Laboratory, Inc., Randox Cardiology, and Roche Diagnostics.

For information on additional corporate partnership opportunities, please contact Jean Rhame at jrhame@aacc.org.
Clinical Case Study
For July 2012
A 24-Year-Old Man With Previously Diagnosed Hemophilia
Authors: Francesca Khani¹ and Mikhail Roshal²
¹New York Presbyterian Hospital/Weill Cornell Medical College, New York, NY
²Weill Cornell Medical College, New York, NY
Immediate access available on:
30 June 2012 at 17:00hr GMT-8
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Pediatric Reference Intervals, 7th Edition

Edited by Steven J. Soldin, Edward C. Wong, Carlo Brugnara, and Offie P. Soldin
2011, 304 pages, softcover
ISBN 9871594251016
Product # 6116
Price only $84; AACC Member $67

The seventh edition of Pediatric Reference Intervals is a valuable reference providing instant and accurate reference intervals for over 250 chemistry and hematology analytes in an alphabetized, user-friendly format. New analytes to this edition include C-peptide, haptoglobin, insulin, hemoglobin A, hemoglobin A2, hemoglobin F, immature platelet fraction, and reticulocyte hemoglobin equivalent. Reference intervals for steroids, free thyroxine, and free triiodothyronine measured by tandem mass spectrometry have been added, as well as reference intervals employing new platforms such as the Abbott Architect® ci8200 and the Roche cobas® 6000 analyzer.

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Improving the Efficiency of Critical Value Reporting: The Clinician/Lab Partnership

Finding ways to make your critical value reporting more efficient requires a systems approach—one in which laboratorians, clinicians and others involved in the process collaborate. During this webinar, two laboratory experts explain what they’ve done in their hospital to create efficiencies in the critical value reporting process. Dr. Gordon Schiff, Associate Director of the Center for Patient Safety Research and Practice at Harvard, will provide the physician’s perspective on critical values reporting, discussing approaches you can take to find and fix the vulnerabilities in your critical value reporting systems.

Attend this program and know:
- Where to find the “failure mode” areas in your process that are prone to error
- The physician’s and lab director’s perspective on striking the appropriate balance for reporting critical values, managing the “subcritical” value, and reporting critical results from sendout tests
- The advantages and disadvantages of using clinical decision support and other electronic tools to improve critical result reporting
- How current regulations and accreditation requirements affect the way labs build their critical value reporting processes
- Strategies for measuring the effectiveness of your critical value reporting system and improving its efficiency

Program Faculty:
Gordon Schiff, MD, Associate Director, Center for Patient Safety Research and Practice; Internist, Division of General Internal Medicine, Brigham and Women’s Hospital; and Associate Professor of Medicine, Harvard Medical School, Boston, MA

Corinne R. Fantz, PhD, Co-director of the Core Laboratory, Emory Crawford Long Hospital, Director of Point-of-Care, Emory Medical Laboratories, and Associate Professor, Pathology and Laboratory Medicine, Emory University School of Medicine, Atlanta, GA

Crystal Evans, MT(ASCP), Regulatory Coordinator, Department of Pathology and Laboratory Medicine, Emory University Hospital, Atlanta, GA

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Learn what you can do to make the process of critical value reporting work better for your lab and your clinicians. Register today!
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Lab statistics aren’t sexy, but performing the right calculations to produce clinically appropriate and correctly interpreted test results can be life-altering for patients. For example, using statistics to adjust for biological variation in serial troponin results can mean the difference between a patient being diagnosed with an AMI and getting the appropriate care, or that same patient being sent home with a “missed” acute cardiac episode, putting them at further risk of a second adverse event.

As cardiac markers and other laboratory assays improve and are better able to detect very low analyte concentrations, calculating and understanding the impact of biological variation on test results is imperative for labs.

Attend this program and know:
- How to incorporate data on biological variation into your quality control goals
- The effects of biological variation on test precision and accuracy
- Tips for selecting and applying QC rules that will help you meet your QC goals
- How biological variation can influence the results of common laboratory tests
- Strategies for measuring reference change values (RCVs) and reducing RCVs that are too high

Program Faculty:

*Alan H.B. Wu, PhD, DABCC, Chief of Clinical Chemistry and Toxicology, San Francisco General Hospital; Professor of Laboratory Medicine, University of California, San Francisco, CA*

*Roy Gerona, PhD, Research Scientist, Department of Laboratory Medicine, San Francisco General Hospital and the University of California, San Francisco, CA*

This program is approved by AACC for 1.5 Category 1 ACCENT credit hours.

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