Public Health Laboratory Services: Public vs. Outsourcing

DOH Bureau of Laboratories provides 24/7 availability for testing agents of concern such as rabies, suspicious "white" powders, "Do Not Board" directives for infectious TB patients and other public health emergency events.

DOH Bureau of Laboratories (BOL) Option	Outsourcing Options
Rabies testing performed	No rabies testing is performed in the private sector
Influenza surveillance performed for the detection of novel strains of influenza virus ¹ (BOL is a collaborating laboratory for the global WHO/CDC Influenza Strain Surveillance Network)	No influenza surveillance is performed in the private sector
Arbovirus surveillance (West Nile Virus, Eastern Equine Encephalitis Virus, St. Louis Encephalitis Virus, and other encephalitis viruses) performed ²	No arbovirus surveillance is performed in the private sector
Definitive testing for bioterrorism agents performed ³	No definitive testing for bioterrorism agents is performed in the private sector
Definitive testing for chemical terrorism agents performed ⁴	No definitive testing for chemical terrorism agents is performed in the private sector
Provide surge capacity testing for Centers for Disease Control and Prevention (CDC) for chemical terrorism agents ⁵	No testing is performed in the private sector for surge capacity for CDC
Testing performed in response to outbreaks of food borne and waterborne illnesses ⁶	No testing is performed in response to outbreaks of food borne and waterborne illnesses in the private sector
Laboratory testing is performed to detect 34 genetic metabolic disorders in all newborn children. ⁷	No laboratory testing is performed to detect genetic metabolic disorders in newborn children in the private sector.

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³ Only public health laboratories, and not private sector laboratories, have access to CDC Laboratory Response Network (LRN) testing protocols and reagents for bioterrorism.

Only public health laboratories, and not private sector laboratories, have access to influenza testing reagents that are provided by the Centers for Disease Control and Prevention.

² Only public health laboratories, and not private sector laboratories, have access to arbovirus testing reagents that are provided by the Centers for Disease Control and Prevention.

⁴ Only public health laboratories, and not private sector laboratories, have access to CDC LRN testing protocols and reagents for chemical terrorism.

⁵ The LRN requires that Level 1 public health chemical terrorism laboratories provide surge capacity as needed.

⁶ Only public health laboratories, and not private sector laboratories, have access to USDA/FDA Food Emergency Response Network testing protocols and reagents.

⁷ 383.14 F.S. mandates that tests and screenings must be performed by the State Public Health Laboratory, in coordination with Children's Medical Services.

DOH Bureau of Laboratories (BOL) Option	Outsourcing Options
Pulsed field gel electrophoresis (PFGE) performed for molecular detection of outbreaks, including <i>Salmonella</i> , <i>Escherichia coli</i> O157:H7, <i>Listeria</i> , and contributed into the national PulseNet database. ⁸	No PFGE is performed to detect outbreak clusters and contributed into the national PulseNet database by the private sector.
Once a novel test is implemented at the BOL, the entire state has access to this advanced testing.	Oftentimes, novel technology is delayed and statewide access hampered for all residents of Florida, especially those in rural areas
Definitive testing for multidrug and extensively drug resistant <i>Mycobacterium tuberculosis</i> is performed	Definitive testing for multidrug and extensively drug resistant <i>Mycobacterium tuberculosis</i> is rarely performed in the private sector
Surge testing for foodborne and waterborne analysis for the Department of Agriculture and Consumer Services and the Department of Environmental Protection, respectively	No surge testing is performed for foodborne and waterborne analysis in the private sector
Testing in support of outbreak investigations, such as Salmonella typing, and Department of Health programs. ⁹	No testing in support of outbreak investigations and Department of Health programs in the private sector with complete data reported to the programs. As an example, HIV was only available initially in the public health laboratoryas it became a kit-based test, then the private sector provides more testing for patient care.
Reference and confirmatory testing a variety of diseases ¹⁰	Private sector refers testing to the BOL for tests not frequently seen or mandated by Rule 64D-3, <i>F.A.C.</i> , Table of Notifiable Diseases or Conditions
Required to be the gatekeeper for sending specimens to the CDC for very high complexity testing	Specimens are referred to CDC for very high complexity testing not performed by the private sector.

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Only public health laboratories, and not private sector laboratories, have access to PFGE testing protocols and proficiency testing that are provided by the Centers for Disease Control and Prevention.

⁹ Only public health laboratories, not private sector laboratories, have access to Salmonella typing reagents that are provided by the Centers for Disease Control and Prevention.

¹⁰Includes isolates or specimens for confirmation: Ehrlichiosis, botulism, brucellosis, California serogroup viruses, cholera, cyclosporiasis, dengue, diptheria, eastern equine encephalitis virus, Enteric diseases due to *Escherichia coli* O157:H7, glanders (*Burkholderia mallei*), *Haemophilus influenzae* hantavirus infection, influenza due to novel or pandemic strains, malaria, measles, melioidosis (*Burkholderia pseudomallei*), meningococcal disease, plague (*Yersinia pestis*), poliomyelitis, psittacosis, Q fever, Rocky Mountain spotted fever, rubella, St. Louis encephalitis, SARS-CoV, smallpox, *Staphylococcus aureaus* community associated mortality, *Staphylococcus aureaus* with resistance to vancomycin, *Staphylococcus* enterotoxin B, tularemia, typhoid fever, typhus fever, vaccinia, Venezuelan equine encephalitis, Vibriosis,(noncholera), viral hemorrhagic fevers, West Nile virus, Western equine encephalitis, yellow fever