The Public Health Laboratories (PHL), Microbiology Laboratory provides laboratory-testing services to health care providers and local health agencies across the state. The laboratory is supported by GF-S funds, as well as Federal grants to provide state-of-the-art testing for communicable diseases. Federal funds support our ability to react to emergency situations that require additional resources, effort, and testing in the event of a disease outbreak, food outbreak, or shellfish poisoning. In addition, these funds support our ability to respond to a bioterrorism or other public health threat event.

**Services**

- **Tuberculosis (TB) detection**: TB identification is crucial for prevention and control of its spread to the general population. WAC 246-101-205 requires TB isolates be sent to PHL for archiving and drug resistance testing. As a TB reference laboratory for the state, we provide confirmatory testing and work closely with the state and local health jurisdiction programs to aid them in controlling the spread of this infection within the community. The PHL also provides rapid drug resistance screening (on a limited basis) at the request of State TB controllers.

- **Food safety and outbreak investigation**: The PHL supports the work of the food safety program and communicable disease epidemiology in determining the causes and sources of foodborne disease outbreaks. The ability to test both patient and food/environmental samples and to provide DNA verification that the organism infecting a patient is the same as that in the food is key to identifying the source of an outbreak and to ultimately prevent the spread to others. The Shellfish Program depends on the laboratory to monitor the *Vibrio* levels in shellfish beds assuring that the product that is sent to the market is safe. No other laboratory in our state performs this service.

- **Sexually Transmitted Disease (STD)**: The PHL provides testing to screen and confirm sexually transmitted diseases such as Syphilis, Chlamydia, Gonorrhea, and HIV. Control of the spread of STDs is a community health concern. Early detection and treatment can prevent the spread of these diseases and the complications from them.

- **Virology and molecular surveillance**: Infectious disease outbreaks such as measles, mumps or influenza take a huge toll on the public and on the public health care system. The PHL performs testing that is directed by WAC 246-101. The molecular section supports the work of most lab sections within the PHL including foodborne disease investigations, special bacteriology, and TB detection and elimination. The molecular lab has recently developed the ability to perform whole genome sequencing of pathogenic organisms. This technology has the potential to drastically improve disease diagnostic and surveillance activities.

- **Reference and special pathogens**: This PHL provides support to clinical labs throughout the state to identify or confirm the identity of difficult-to-identify bacterial pathogens. Additionally, this lab is responsible for the confirmation of drug resistance in a wide range of pathogens. As bacterial drug resistance becomes more common, the PHL reference lab continues to provide important data for the control of Health Care Associated Infections.

**Stakeholders**

- Washington State citizens
- Local health jurisdictions
- Public health programs (STD, TB, OSWP, etc.)
- Federal agencies such as the U.S. CDC, U.S. Dept. of Agriculture, and FDA
- Health care providers, health care clinics, clinical laboratories and hospitals
2013-15 biennium

Communicable Diseases Microbiology Fiscal Information

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<th>GF-S</th>
<th>Federal</th>
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Recent Funding History

2007-09 biennium:
- One-time GF-S reduction of $128,000 in response to OFM’s request (ESHB 1694)

2009-11 biennium:
- One-time GF-S reduction of $140,000 related to public health labs efficiencies

2011-13 biennium:
- Ongoing GF-S reduction of $280,000 in response to OFM’s 10 percent reduction request

In 2011, federal grant awards have been reduced significantly, some by as much as 56 percent (i.e., Food Emergency Response Network (FERN) – 56 percent; Tuberculosis Elimination and laboratory grant – 36 percent; Public Health Emergency Preparedness and Response (PHEPR) – 15 percent)