INSIDE PUBLIC HEALTH LABORATORIES: TRACKING THEIR VALUE

The data below are taken from APHL’s 2016 Return on Investment Pilot Study, in which 11 public health laboratories (PHLs) provided data on expenditures and time allocation of full-time employees for overall laboratory activities, as well as those related to newborn screening, PulseNet, tuberculosis, influenza and safe drinking water.

### ALLOCATION OF TECHNICAL PHL STAFF

- **DISEASE PREVENTION, CONTROL AND SURVEILLANCE** – 37%
- **ENVIRONMENTAL HEALTH AND PROTECTION** – 14%
- **REFERENCE AND SPECIALIZED TESTING** – 9%
- **PUBLIC HEALTH PREPAREDNESS AND RESPONSE** – 8%
- **INTEGRATED DATA MANAGEMENT** – 8%
- **FOOD SAFETY** – 5%
- **COMMUNICATION** – 5%
- **TRAINING AND EDUCATION** – 5%
- **LABORATORY IMPROVEMENT AND REGULATION** – 4%
- **RELATED RESEARCH** – 2%
- **POLICY DEVELOPMENT** – 2%

### TESTS RUN

The testing capacity of a single lab can range enormously and is influenced by factors such as staffing, budget, and the type and volume of tests required. For example, one laboratorian may run 663 PulseNet tests in the same amount of time it takes to run 61,654 for newborn screening. The cost of those tests can also vary widely.

Depending on the size and focus area of the PHL, on average...

1 LABORATORIAN RUNS BETWEEN 79–18,040 TESTS A YEAR

$10,000 PAYS FOR BETWEEN 7–950 TESTS A YEAR