This year, every political pundit is focused on the U.S. Presidential campaign, namely the incumbent Republican team vs. the Democratic ticket (yet to be named), and the recently announced Independent candidate. The incumbent, as well as each prospective candidate, is on the stump, raising campaign funds, spouting rhetoric from podiums in universities, town squares, and televised debates, and attempting to persuade citizens to give their votes to him. But it is not always the well-known candidate with spin-doctors who garners the most votes. Remember Harry Truman? He fooled all the experts when he won the Presidential election in 1948, and was photographed with the famous Chicago Tribune headline, “Dewey Defeats Truman.”

Generally, when the voter selects his candidate on Election Day, his critical question is, “What can this person do for me and for my country?” Mr. Citizen USA has had months of studying speeches, attending rallies, analyzing policies, reading reporters’ road blog online, and preparing his own opinion about the various politicians and their parties. This effort, expended on such a weighty decision, is not unlike that effort which each multitalented clinical laboratory professional expends in his quest to become the top candidate in his field. When we asked you, our readers, to share career-related information with us, the goal for each of you seems not to be “What can this laboratory do for me,” but rather “What can I bring to this laboratory?” A total of 1,368 of you sent in your statistics without even having the promise of the winning title of “President” as an incentive! Here is the outcome for 2003.

Our representative clinical lab pro works for an organization with 21 to 50 employees (25%), where the annual volume of testing is 100,001–500,000. She is a graduate of a college or university (61%) and is certified in her field (91%). She participates in a continuing education program with more than 10 CE classes yearly (30%). She has worked in the clinical laboratory field for more than 20 years (66%) and has been with her current employer for all those years (33%).

There were wide variations in salary among our respondents. No doubt some of the salary differences relate to competency level, business conditions, or personality factors, and

Continues on page 26
it is not possible to evaluate these from responses to a questionnaire. Several easily defined factors, however, seem to contribute to different pay structures. These include education, geographic location, job function, and the length of time a person has been in the clinical laboratory profession.

**Candidate differentiators**

**✓ Education**

Generally, education is a significant differentiator in the salary structure. The typical employee with a high school diploma makes about $31,690 less than one with a post-graduate college degree (Figure 1). Even the employee with a bachelor's degree is likely to experience a $21,785 shortfall as compared to her post-graduate counterpart. The range between a pathologist and a medical technologist was $98,126.

**✓ Geographic area**

Those in the Northeast and Pacific regions get the highest salaries ($65,714 to $75,130), while the ones in the South-east, Central, and Mountain parts of the United States do not fluctuate as much ($59,214 to $62,940) (Figure 2).

**✓ Job function**

Understandably, a person’s primary job function is a significant salary differentiator. As physicians, pathologists are the leading contenders with an average salary of $144,323 (Figure 3). They are followed by lab directors and managers/administrators at average yearly salaries of $84,196 to $64,105, respectively. The “campaign coffers” of medical technologists average $46,197 yearly.

**✓ Years in the industry**

In general, salary increases the longer our clinical lab “candidate” stays in her profession (Figure 4). The average pay in the first three years is $51,564, increasing incrementally to $66,493 in the 20+-year time period.

**Campaign promises**

Our average clinical laboratory “candidate” says her employer makes good on its benefit promises. As part of her contract, she is provided with healthcare insurance (98%), 401(k) (80%), life insurance (88%), dental coverage (88%), disability insurance (77%); and bonuses (20%) were part of her 2003 annual compensation. She expects a salary increase of 2% to 4% (61%) this year, and believes that her job is very secure (49%) with which she is somewhat satisfied (30%).

She finds that there is a moderate impact on her laboratory because of the shortage of medical personnel (44%), which has so far not made it necessary to outsource (84%). Her lab had, however, automated and/or further automated new procedures last year (61%), and intends to continue automating in the coming year (65%).

Accolades go to the healthcare specialists who work in labs throughout North America, who will likely never have to deliver a political speech or struggle on and off the “stump” bus, chasing the national campaign trail. These diligent workers govern their laboratories despite uphill battles over budgets, Medicare reimbursements, and workplace safety — as many “issues” as there have been candidates for election this year. Their dedication to the clinical laboratory profession brings a resounding, “job well done” from patients and other medical professionals. MLO congratulates your victory! *Oliver Wendell Holmes, Jr.*