



Michael (Mike) Glass retired in April 2014 following a career of nearly 45 years with the Department of Health. The majority of his career was spent with the Newborn Screening Program where he began in the laboratory then spent nearly 20 years as the program's director. He enjoyed a long and successful history of bringing new processes, technology and new conditions into Washington's Newborn Screening Program.

When he began the program was screening for a single disorder: phenylketonuria (PKU). He was in supervisory, then management, then the director's role throughout the growth and development of the program beginning with the introduction of radio immunoassay (RIA) technology to screen babies for congenital hypothyroidism in the 1970s. In the 1980s he oversaw the development and implementation of the nation's first universal screening test for congenital adrenal hyperplasia. The addition of isoelectric focusing, high performance liquid chromatography (HPLC) followed in the early 1990s.

Under his leadership Washington became the first newborn screening program in the country to adopt PCR/DNA methods to improve the sensitivity and specificity of screening tests. Mike was awarded the first of the annual Governor's Distinguished Management Sustaining Leadership Awards in 1992. Mike retired in 2000 but was soon back part-time working on major policy issues affecting the program including significant work with the Board of Health in reviewing privacy protections for babies and parents impacted by the screening program and a comprehensive review of candidate conditions for addition to the screening panel. Then, in 2002 he applied for and was awarded the Director position once more.

Following this, directed by the Board's decision to add the conditions to the screening panel, he oversaw the expansion of the program to include biotinidase deficiency, galactosemia, cystic fibrosis, and 17 disorders of amino acid, fatty acid, and organic acid metabolism. The later conditions required successful adaptation of the equipment, training, and protocols needed to implement the complex technology of tandem mass spectrometry (MS/MS). During his tenure he participated in, and facilitated numerous research projects aimed at improving child health through the use of the dried blood spot specimens that are collected for routine screening. At the time of his retirement, he was co-investigator of a highly successful project demonstrating the feasibility of adapting a unique MS/MS technology for detecting lysosomal storage diseases to use for detecting these diseases through universal newborn screening. Over this expansion and development he also had primary responsibility and great success shepherding the policy, political and legal processes required to add new conditions to Washington's screening panel.

The Washington program is somewhat unique in that all of the state components, including laboratory and program follow-up, are under a single administrative unit which he directed since the separate components were merged in 1993. Thus, he has a keen appreciation and understanding of the importance of each part of the system to achieving success in saving babies through the newborn screening processes. Under his leadership Washington developed a comprehensive newborn screening program that is respected throughout the country and beyond.