America's Blood Centers®
It's About Life.

# ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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**2024 #25** **August 2, 2024**

**INSIDE:**



## Interorganizational Task Force on Domestic Disasters and Acts of Terrorism Activates in Response to Ransomware Event

ABC member OneBlood announced this week that it was the target of a ransomware event. In a July 31st statement, the blood center explained that, "OneBlood is working closely with cyber security specialists, and also federal, state, and local agencies as part of their comprehensive response to the situation. OneBlood takes the security of our network extremely seriously. Our team reacted quickly to assess our systems and began an investigation to confirm the full nature and scope of the event. Our comprehensive response efforts are ongoing, and we are working diligently to restore full functionality to our systems as expeditiously as possible," said Susan Forbes, senior vice president of corporate communications and public relations at OneBlood, in the statement.

The Association for the Advancement of Blood & Biotherapies (AABB) Interorganizational Task Force on Domestic Disasters and Acts of Terrorism "activated" in the wake of the ransomware event. A July 31st Task Force statement noted that, "[b]lood centers across the country are providing additional support to OneBlood during this time, sending thousands of units of blood and platelets to ensure patient needs continue to be met. In addition, OneBlood and the Task Force are exploring short- and mid-term solutions to meet blood supply needs as these issues get resolved. Hospitals should contact their primary blood supplier with questions. The blood community remains committed to collaborating to ensure patient blood needs are met during this time, but summer months often see reductions in blood donations. Eligible individuals are encouraged to schedule an appointment to donate to help ensure a readily available blood supply across the country."

ABC commends the response of its member blood centers and the blood community in ensuring patient demand is met. We will continue to provide support through the Task Force and will pass along updates as they are made available.

(Source: OneBlood Statement, 7/31/24)

## CMS FY 2025 Hospice Final Rule Available

The Centers for Medicare & Medicaid Services (CMS) has issued the fiscal year (FY) 2025 "Hospice Wage Index and Payment Rate Update, Hospice Conditions of Participation Updates, and Hospice Quality Reporting Program Requirements" final rule. It updates, "the hospice wage index, payment rates, and aggregate cap amount for FY 2025."

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CMS FY 2025 Hospice Final Rule Available (continued from page 1)

Additionally, the agency explained in the final rule that it, "summarizes comments received [in the proposed rule] regarding potential implementation of a separate payment mechanism to account for high intensity palliative care services." The proposed rule previously solicited comments concerning potential implementation of a separate payment mechanism to account for high intensity palliative care services, including blood transfusions. It also included a request for information (RFI) explaining that CMS is considering a major potential shift away from a closed hospice bundled payment to allow patient access to services like blood transfusions. America's Blood Centers (ABC), the Association for the Advancement of Blood & Biotherapies (AABB), and the American Red Cross previously submitted joint comments to CMS regarding the proposed rule.

CMS stated in final rule that the while agency continues to review and weigh feedback from commenters to the proposed rule, "[w]e will consider all comments and recommendations received on this rule and will continue to welcome thoughts regarding these issues through our hospice policy mailbox.' The final rule will be officially published in the *Federal Register* on August 6th.

(Source: CMS Final Rule, 7/30/24)

## WORD IN WASHINGTON

**The U.S. Food and Drug Administration (FDA) has developed frequently asked questions (FAQs) regarding laboratory developed tests (LDTs).** The agency explained that the FAQs are, "the most common questions FDA has received through ldtfinalrule@fda.hhs.gov related to LDTs. To ensure we are answering generally applicable questions in a manner that is transparent, we intend to respond to questions submitted to the mailbox, as appropriate, in a public manner, such as in webinars, guidances, this FAQ page, and other resources over the course of the phaseout period. FDA intends to update this FAQ page periodically. If you cannot find the answer you are looking for, please contact FDA through the mailbox at ldtfinalrule@fda.hhs.gov." The page includes questions segmented into the following LDTs topics:

- Definitions and General Oversight;
- Phaseout Policy and Enforcement Discretion Policies;
- Labeling;
- Premarket Review;
- Investigational Use;
- Specific Test Categories or Technologies; [and]
- Resources and Interactions with FDA.

(Source: FDA Announcement, 7/22/24)

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WORD IN WASHINGTON (continued from page 2)

**FDA has announced a September 12th virtual webcast at 1 p.m. EDT titled, "FDA Grand Rounds - Advancing blood safety and patient health in HIV/AIDS through FDA's research on viral genome surveillance, diagnostic technologies, and biomarker discovery."** This event will feature Indira K Hewlett, PhD presenting on, "FDA's regulatory research efforts to advance effectiveness of testing through:

- development of standards;
- valuation of novel detection methodologies to improve virus detection; and,
- identification of biomarkers for latency in the context of Pre-Exposure Prophylaxis (PrEP) and Anti-retroviral therapy (ART) which have been widely implemented."

Learning objectives for the webcast include:

- "describe and provide background on HIV biology and infection;
- discuss studies on HIV genomic surveillance and novel diagnostic technologies; [and]
- [d]iscuss biomarker studies for early detection in the context of PrEP and ART."

Registration is open and more information is available here.

(Source: FDA Announcement, 7/25/24)

**The FDA's Centers for Biologics Evaluation and Research (CBER) Office of Therapeutic Products (OTP) is hosting a September 5th virtual Town Hall at 11 a.m. EDT regarding "Cell Therapy CMC Readiness for Late-Stage investigational new drug applications (INDs)."** Registration is open. The town hall will, "answer questions related to CMC data and information needed to support late-stage INDs for cell therapy and tissue-engineered products."

(Source: FDA Announcement, 7/25/24)

## RESEARCH IN BRIEF

**Cost-Effective Malaria Screening in Australian Blood Donors.** A study in *Vox Sanguinis*, "aim[ed] to conduct a cost-effectiveness analysis of potential malaria screening strategies in Australia." The investigators explained that in their study, "'[a]t-risk' donors refer to all donors disclosing an increased risk of malaria (i.e., both 'visitors' to endemic areas and 'residents', defined as those who have spent more than

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ABC advocates for and advances policies that promote the role of independent blood centers in providing life-saving blood products and recognizes the continuous need for a safe and robust blood supply. ABC exists to advocate for laws and regulations recognizing the essential role that independent blood centers play in the health care system; promote partnerships, policies, and programs that increase awareness about the need for blood donation; and serve as a thought leader in the advancement of evidence-based medical and scientific solutions related to health and safety.

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RESEARCH IN BRIEF (continued from page 3)

six months in malaria-endemic areas)." They noted that, "[a] decision tree model was developed to assess the cost-effectiveness of alternative strategies," one was status quo. "Malaria testing was estimated to cost $7.50 Australian Dollars (AUD) [and] [t]he impact of transfusion-transmitted malaria (TTM) infection was quantified using disability-adjusted life years (DALYs). DALYs are calculated as the sum of years of life lost (YLL) and years lived with disability (YLD)." For the study, "[e]ach pathway in the decision tree was associated with cost and health outcome (DALYs) pay-offs." Incremental cost-effectiveness ratios (ICERs) were defined as where effectiveness was measured by DALYs and the ICER was expressed as the additional cost to avert one DALY. If the ICER falls below the cost-effectiveness threshold, then the screening strategy is considered cost-effective." The researchers found that, "[u]sing Strategy 1 (status quo) as the reference, implementing screening Strategy 2a (28-day deferral for all; no testing), 3a (120-day deferral for all; testing residents), or 3b (28-day deferral for all; testing residents) would result in gains of 1,003, 79, and 419 donors, respectively. In contrast, implementing Strategy 2b (120-day/3-year deferral for visitors/residents; no testing) would lead to a loss of 8,157 donors." They added that, "[b]ased on donations in 2020, strategy 2a was the most cost-effective malaria screening strategy. Variables such as the probability of severe malaria and the costs of treating TTM had minimal impact on the cost-effectiveness results [due] to the extremely low residual risks, with total costs being predominantly recruitment costs…[A]threshold analysis demonstrated that Strategy 2a remains the only cost-effective strategy when the recruitment cost was $12 AUD per donor or above." The authors further explained that, "Strategy 2a showed a 100 percent probability of being cost-effective until the willingness-to-pay threshold reached $100,000 AUD per DALY averted. Beyond this threshold, the probability of Strategy 2a being cost-effective decreased, while the probability of Strategy 3b being cost-effective increased…The probabilities of cost-effectiveness for Strateg[y] 1 (status quo) remained at 0 percent." The study concluded that, "the current malaria screening strategy in Australia is not cost-effective compared with no testing or selective testing with screening questions. In [the] low-prevalence population, partial or total removal of malaria testing would achieve significant cost savings without compromising blood recipient health."

**Citation**: Cheng, Q., Hoad, V.C., Bentley, P., Harley, R., Schenberg, K., and Wiseman, V. "Optimal malarial screening strategy in Australian blood donors: A cost-effectiveness analysis." *Vox Sang*. 2024.

*Contributed by Richard Gammon, MD, Medical Director at OneBlood*

**NEW on Coll*ABO*rate**

COLLABORATE

SHARE STRATEGIC ADVICE | SOLVE CHALLENGES | DEVELOP NEW APPROACHES

**Recent discussion topics on the ABC Coll*ABO*rate Online Member Community include:**

- Donor Services Training Turnaround Time (MEMBER RESOURCES)
- Medical Director Signature Requirements (MEMBER RESOURCES)
- Minimum Donor Weight (COLLECTIONS & DONOR SERVICES)
- Platelet RBC Loss Deferral Period (COLLECTIONS & DONOR SERVICES)
- Donor Services Training Turnaround Time (EMPLOYEE TRAINING & DEVELOPMENT)
- Annual Regulatory and Safety Training (MEMBER EMPLOYEE TRAINING & DEVELOPMENT)
- AABB Standard 1.4 Risk Assessment and 1.4.1 Mitigation Strategies (QUALITY BYTES)
- Platelet Crossmatching (TECHNICAL DIRECTORS)
- Hematology Proficiency Testing Program (TECHNICAL DIRECTORS)

ABC members are encouraged to login and join the conversations today!

America's Blood Centers®
It's About *Life.*

# INSIDE ABC

*The programs and services described in the Inside ABC section are available to ABC member blood centers and their staffs only, unless otherwise specified.*

## ABC Workforce Trends Survey Is Open

The new America's Blood Centers (ABC) Workforce Trends Survey has launched and will remain open until August 23rd. Instructions regarding how to access the survey have been distributed to authorized individuals. This valuable benchmarking survey is the most comprehensive source of information available on workforce trends at blood centers. The survey analyzes overall trends in compensation, benefits, and human resources (HR) policies and provides specific data for 74 different blood center employee roles. The survey also provides insights into employee turnover and retention for the preceding calendar year, analyzing trends overall as well as by department and length of service. This survey combines the previous Compensation & Benefits and Employee Turnover & Retention surveys. Results are complimentary to participants. Non-participants may purchase the report here. Please contact us with any questions or to add/change authorized individuals.

## SMT Journal Club Webinar Set for August 16th

The next ABC Scientific, Medical, and Technical Journal Club Webinar will occur on August 16th at 12 p.m. EDT. The webinar will feature a review of the following articles:

- Traumatic subcutaneous emphysema following blood donation: A case report (*Transfusion*);
- Survey of policies at U.S. hospitals on the selection of RhD type of low-titer O whole blood for use in trauma resuscitation (*Transfusion*); and
- Clinical outcomes, blood utilization, and ethical considerations for pediatric patients in a bloodless medicine and surgery program (*Anesthesia & Analgesia*).

This webinar is eligible for 1.0 continuing medical education (CME) credit hours upon completion of the activity and evaluation. Additional information including the articles and a link to registration are available to ABC members here. Contact us with any questions.

## Register for ABC WELC Rise & Lead Workshop

Registration is open for the ABC Women's Executive Leadership Community's (WELC) Rise & Lead Workshop. This event will take place November 6th -7th in San Antonio, Texas at the Hyatt Regency Hill Country Resort. The workshop will ignite meaningful conversations and cultivate diverse perspectives. This event goes beyond traditional conferences by encouraging dynamic conversations that spark connections and drive personal and professional growth. At the Rise & Lead Workshop, you will delve into topics that matter, participate in interactive networking sessions, and walk away with tangible, real-life strategies to become a more resilient leader in today's ever-evolving world. Elevate your leadership journey with us! A preliminary agenda is available. Book your room by October 9th to secure the group rate.

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Rise & Lead
A WOMEN'S LEADERSHIP WORKSHOP

INSIDE ABC (continued from page 5)

## ABC Economic Outlook Survey Report Available

The ABC Economic Outlook Survey results are in! ABC member blood centers that participated in the survey can access the results and have the ability to download final trend reports and create customized reports based on selected filters. This survey is a new resource that consolidated the previous ABC Financial Ratio and Median Service Fee surveys while offering a comprehensive look at blood center finances, including 19 of the most frequently used ratios for benchmarking the financial health of an organization as well as median service fees for 30 different blood products and blood center procedures. ABC member blood centers that were non-participants may purchase the report here. Please contact us with questions.

## PEOPLE

Carter BloodCare has named **Richard Gammon, MD** as its new chief medical officer, following the retirement of Laurie Sutor, MD, MBA. Dr. Gammon joins Carter BloodCare from OneBlood in Orlando, Fla., where he has served as medical director since 2012. He also holds prominent leadership positions in national and international organizations, including America's Blood Centers, the Association for the Advancement of Blood & Biotherapies (AABB), and the International Society of Blood Transfusion (ISBT). Dr. Gammon is widely published and has been the principal investigator on studies that explored multiple aspects of blood banking and transfusion medicine.

(Source: Carter BloodCare Announcement, 7/31/24)

*Contributed by James Black, Senior Public Relations Specialist at Carter BloodCare*

## MEMBER NEWS

**San Diego Blood Bank** recently collected more than 3,000 pints of blood as part of the 48th Robert A. Heinlein Blood Drive at Comic-Con International exceeding its goal. We are so thankful to continue this incredible tradition of turning fans into heroes," said San Diego Blood Bank Chief Executive Officer (CEO) Doug Morton in a news release. "This event not only celebrates the spirit of Comic-Con but also underscores the importance of blood donation in saving lives during summer — one of the toughest times to collect blood," said David Glanzer, a spokesperson for Comic-Con in the news release. "We are very happy to continue our long tradition of helping the San Diego Blood Bank meet its critical needs. The many attendees and fans who give blood for such a worthy cause is both an inspiration and a motivating factor for others to take part as well. We are happy to once again be a part of this wonderful effort." According to the blood bank, "[s]ince 1976, The Robert A. Heinlein Blood Drive has hosted this drive in partnership with the COMIC-CON® convention. Over the past 48 years, donors at Comic-Con have donated over 80,000 pints of blood, potentially impacting more than 240,000 lives."

(San Diego Blood Bank News Release, 7/28/24)

## GLOBAL NEWS

**NHS Blood and Transplant (NHSBT), the national blood provider for England and transplant services for the United Kingdom (UK), issued a national blood shortage "Amber Alert" on July 25th in the wake of a, "recent cyber attack which has impacted London hospitals and reduced collections due to high levels of unfilled appointments at donor cent[ers] in town and city cent[ers], [and] has caused stocks of blood to drop to unprecedentedly low levels."** The NHSBT communication indicated

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GLOBAL NEWS (continued from page 6)

that, "national stocks of O Negative are 1.6 days and overall national stocks of blood across all types is 4.3 days. [The Amber Alert] triggers hospitals being able to implement their emergency measures to minimi[z]e usage, move staff to laboratories to vet the use of all O type blood, and use patient blood management systems to minimi[z]e use of O type blood." *PA Media* reported this week that, "blood donations have doubled since the NHS issued an amber alert for a national shortage of O type [blood.] Health minister Baroness Merron told peers in Westminster that O negative blood stocks have, as a result, risen from 1.7 to 2.9 days, with around four days being the normal level. Since the alert, 25,000 new donors have registered and website traffic has increased almost fourfold, with booked appointments doubling."

(Source: NHSBT Communication, 7/25/24)

**The World Health Organization (WHO) and CEPI, the Coalition for Epidemic Preparedness Innovations, are urging nations to, "strengthen and accelerate global research to prepare for the next pandemic."** In an August 1st joint news release, [the organizations] emphasized the importance of expanding research to encompass entire families of pathogens that can infect humans–regardless of their perceived pandemic risk–as well as focusing on individual pathogens. The approach proposes using prototype pathogens as guides or pathfinders to develop the knowledge base for entire pathogen families." Additionally, CEPI and the WHO expressed the need for, "globally coordinated, collaborative research to prepare for potential pandemics." A report has been developed and published by the WHO titled, "Pathogens prioritization: a scientific framework for epidemic and pandemic research preparedness." It emphasizes the importance of, "a broader-based approach by researchers and countries. This approach aims to create broadly applicable knowledge, tools and countermeasures that can be rapidly adapted to emerging threats. This strategy also aims to speed up surveillance and research to understand how pathogens transmit and infect humans and how the immune system responds to them…WHO is engaging research institutions across the world to establish a Collaborative Open Research Consortium (CORC) for each pathogen family, with a WHO Collaborating Cent[er] acting as the research hub for each family. These CORCs around the world will involve researchers, developers, funders, regulators, trial experts and others, with the aim to promote greater research collaboration and equitable participation, particularly from places where the pathogens are known to or highly likely to circulate.

(Source: WHO & CEPI Joint News Release, 8/1/24)

**The European Commission (EC) has granted Pfizer Inc. conditional marketing authorization for a gene therapy (Durveqtix®) to treat moderately severe to severe hemophilia B severe and moderately severe hemophilia B (congenital factor IX deficiency) in adult patients without a history of factor IX inhibitors and without detectable antibodies to variant AAV serotype Rh74.** [The gene therapy] is designed to enable people living with hemophilia B to produce factor IX (FIX) themselves via a one-time dose, rather than multiple intravenous FIX infusions weekly or biweekly with the current standard of care." According to a news release, "[the] conditional marketing authorization is valid in all 27 European Union (EU) member states, as well as in Iceland, Liechtenstein, and Norway. The EC approval follows recent regulatory approvals by the U.S. Food and Drug Administration (FDA) and Health Canada, where it is marketed as Beqvez™…The conditional marketing authorization is based on results from the pivotal phase III [study] evaluating the efficacy and safety of [the gene therapy] in adult male participants (age 18–62) with moderately severe to severe hemophilia B. [It] met its primary efficacy endpoint of non-inferiority and demonstrated a statistically significant decrease in annualized bleeding rate (ABR) for total bleeds (treated and untreated) post-Durveqtix infusion versus prophylaxis regimen with FIX, administered as part of usual care. Efficacy, based on ABR, also remained stable during year two to year four after treatment. Durveqtix was generally well-tolerated, with a safety profile consistent with [p]hase I/II results."

(Source: Pfizer Inc. News Release, 7/25/24) ♦

## COMPANY NEWS

**Pfizer Inc.** recently announced "positive topline results" from a phase III study "evaluating" the ability of an investigational gene therapy candidate (giroctocogene fitelparvovec) to treat moderately severe to severe hemophilia A. According to a company news release, "[t]he AFFINE study achieved its primary objective of non-inferiority, as well as superiority, of total annualized bleeding rate (ABR) from Week 12 through at least 15 months of follow up post-infusion compared with routine Factor VIII (FVIII) replacement prophylaxis treatment. Following a single 3e13 vg/kg dose, giroctocogene fitelparvovec demonstrated a statistically significant reduction in mean total ABR compared to the pre-infusion period (1.24 vs 4.73; one-sided p-value=0.0040)." The company explained that, "[k]ey secondary endpoints as defined by the trial protocol were met and also demonstrated superiority compared to prophylaxis. 84 percent of participants maintained FVIII activity >5 percent at 15 months post-infusion (one-sided p-value = 0.0086) with the majority of participants having FVIII activity ≥15 percent, and the mean treated ABR showed a statistically significant 98.3 percent reduction from 4.08 in the pre-infusion period to 0.07 post-infusion (from Week 12 up to at least 15 months [15-44 months]; one-sided p-value < 0.0001). Throughout the study, among all dosed participants, one participant (1.3 percent) returned to prophylaxis post-infusion." The study found that the investigational gene therapy "was generally well tolerated," according to the news release. "Serious adverse events were reported in 15 patients (20 percent), including 13 events reported by 10 patients (13.3 percent) assessed as related to treatment. Treatment-related adverse events generally resolved in response to clinical management."

(Source: Pfizer Inc. News Release, 7/24/24)

**NMDP BioTherapies**[SM] (formerly Be The Match BioTheapies) and the **NMDP BioTherapies Cord Blood Bank Alliance** (CBBA) have announced the availability of, "pre-identified cord blood units that are optimized for manufacture of cord-derived cell therapies, and in particular cord-derived NK cell therapies." According to a news release, "[t]he identification and supply of these units leverages the over 200,000 cord blood units in the inventory of the CBBA as well as NMDP BioTherapies' cord unit search platform, through which individual cord blood units that meet specific requirements can be rapidly identified." Through the CBBA, "cord blood banks with decades of experience managing the development, production, and distribution of allogeneic products in a regulated environment [are brought together]. Initially, the CBBA included eight NMDP member banks that have demonstrated commitment to serving the needs of patients and providing high quality cord blood units for the development and commercialization of emerging cell and gene therapies."

(Source: NMDP BioTherapies News Release, 7/18/24)

## CALENDAR

***Note to subscribers:*** *Submissions for a free listing in this calendar (published weekly) are welcome. Send information to newsletter@americasblood.org. (For a more detailed announcement in the weekly "Meetings" section of the newsletter, please include program information.)*

**2024**

Aug. 12-14. **National Institutes of Health (NIH) National Heart, Lung, and Blood Institute's (NHLBI) Annual Sickle Cell Disease Research Meeting. (Hybrid) Bethesda, Md.** More information available here.

Aug. 16. **America's Blood Centers (ABC) Scientific, Medical, and Technical (SMT) Journal Club Webinar.** More information and a link to registration available here.

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CALENDAR (continued from page 8)

Aug. 21. **ADRP Webinar — Riding the Wave: Political Partnerships and State Legislation.** Registration is open. More information available here.

Aug. 29. **ADRP Webinar Sponsored by Terumo Blood and Cell Technologies — Empowering Lifesavers: Innovations in Blood Donor Recruitment and Retention.** Registration is open. More information available here.

Sept. 3-6. **American Society for Clinical Pathology (ASCP) Annual Meeting. Chicago, Ill.** Registration is open. More information is available here.

Sept. 5. **U.S Food and Drug Administration (FDA) Center for Biologics Evaluation and Research (CBER) Office of Therapeutic Products (OTP) Town Hall: Cell Therapy Chemistry, Manufacturing, and Controls (CMC) Readiness for Late-Stage Investigational New Drug Applications (INDs) (Virtual).** Registration is open. More information is available here.

Sept. 12. **FDA Grand Rounds – Advancing Blood Safety and Patient Health in HIV/AIDS through FDA's Research on Viral Genome Surveillance, Diagnostic Technologies, and Biomarker Discovery (Webcast).** Registration is open. More information available here.

Sept. 18-19. **2024 ADRP Master Class: Bring in the Coach — The Path to Effective Leadership (Virtual).** Registration is open. More information available here.

Sept 26. **ABC Women's Executive Leadership Community (WELC) Webinar.** More information coming soon.

Sept. 30-Oct. 3. **American Association of Tissue Banks (AATB) Annual Meeting. Denver, Colo.** Registration is open. More information available here.

Oct. 16-17. **Biomedical Excellence for Safer Transfusion (BEST) Fall Meeting. Galveston, Texas.** More information available here.

Oct. 19-22. **Association for the Advancement of Blood & Biotherapies (AABB) Annual Meeting. Houston, Texas.** More information available here.

Nov. 6-7. **ABC Women's Executive Leadership Community (WELC) Workshop. San Antonio, Texas.** Registration is open. More information is available here.

Nov. 13. **2024 ADRP International Showcase.** More information coming soon.

Nov 19-20. **Plasma Protein Forum. Washington, D.C.** More information available here.

**2025**

Mar. 10-12. **ABC Annual Meeting. Arlington, Va.** More information is coming soon.

May 6-8. **2025 ADRP Annual Conference. Oklahoma City, O.K.** More information is coming soon.

May 20-21. **International Plasma Protein Congress. Warsaw, Poland.** More information is coming soon.

Oct. 12-15. **AATB Annual Meeting. Atlanta, Ga.** More information is coming soon.

Oct. 25-28. **AABB Annual Meeting. San Diego, Calif.** More information is coming soon.

## CLASSIFIED ADVERTISING

Classified advertisements, including notices of positions available and wanted, are published free of charge for a maximum of three weeks per position per calendar year for ABC members. There are charges for non-members: $139 per placement for *ABC Newsletter* subscribers and $279 for non-subscribers. A six (6) percent processing fee will be applied to all credit card payments. Notices ordinarily are limited to 150 words. To place an ad, e-mail: newsletter@americasblood.org

## POSITIONS

**Transfusion Lab Supervisor Needed!** Join Florida's leading blood center, **OneBlood,** as a Blood Bank Lab Supervisor in Lakeland, FL. Bring your leadership, technical expertise, and management experience to support the transfusion testing procedures on patient and/or donor samples. Qualified candidates should possess three (3) or more years' experience in a clinical laboratory, preferably blood banking environment, including one (1) or more years' experience in supervision and management experience, as well as a valid and current Florida Clinical Laboratory Technologist license in Immunohematology or Blood Banking; Supervisor license strongly preferred. To apply and view a complete Job Description of this Lab Supervisor position, visit www.oneblood.org/careers. OneBlood, Inc. is an Equal Opportunity Employer/Vet/Disability.

**IRL Supervisor.** Bloodworks Northwest, a recognized leader in transfusion medicine, currently has an opening for an IRL Supervisor in the Immunohematology Reference Laboratory. Key responsibilities include supervising departmental staff, ensuring the management of departmental projects, and participating in interdepartmental projects according to established priorities and timelines. Coordinating quality review and management of errors. Providing technical expertise in IRL testing and the development and implementation of new methods and as needed and perform clinical laboratory testing. Requirements include: Must qualify as General Supervisor, High Complexity Testing, under CLIA personnel requirements found in Subpart M of the Code of Federal Regulations. Certification as a Specialist in Blood Banking (SBB) is required. Certification as a Medical Laboratory Scientist (MLS) is preferred. Five years of laboratory technical experience with at two years of experience in immunohematology reference testing is required or an equivalent combination of education and experience. Three years of laboratory supervisor or Lead experience is preferred. Demonstrated expertise in immunohematology reference testing. Basic knowledge of molecular techniques is preferred. We offer competitive benefits: Medical, dental, vision, life insurance, retirement plan, subsidized back-up childcare program, subsidized transit program, educational reimbursement and more! Interested candidates should apply directly on our website at www.bloodworksnw.org/careers

**Executive Director.** The National Blood Collaborative (NBC) is seeking an experienced and dynamic Executive Director to lead our organization. This role reports directly to the Board of Directors. NBC, established in 2012, is a unique collaboration owned by nine independent blood centers, focusing on innovation in the blood and biotherapies industry. Visit www.nationalbloodcollaborative.org for more info. As the Executive Director, you will be responsible for the strategic direction and operational leadership of NBC. This role requires a self-directed individual capable of developing operational plans and implementing sales strategies, marketing communications, and public relations functions with minimal direction from the Board of Directors. Join us and lead NBC to new heights in the blood products and cellular therapies industry! Email your resume to dmorton@nationalbloodcollaborative.org with your salary requirements. Resumes are confidential. NBC is an EOE/AAE.

**Marketing Executive.** LifeSouth Community Blood Centers is looking for a highly skilled leader with a solid understanding of marketing principles and techniques, a data-driven approach, and a passion for innovation, to join the team as Marketing Executive in Gainesville, FL. This position is responsible for the overall marketing strategy across the organization. This position requires active communication with executive leadership and department directors within the organization to ensure adequate planning and execution of strategic marketing plans. This position is dedicated to advancing the organization's objectives in blood donation, cord blood services, cellular therapy, new business development, and meeting patient needs. Join our team and help us continue our dedication to making sure the blood is there when you or your family is in need. Visit our careers page to learn more about this position, and apply here!

**Laboratory Education Coordinator.** LifeSouth Community Blood Centers is looking for a team-oriented, goal-driven individual with a passion for education to join the team as a Laboratory Education Coordinator in Gainesville, FL. This position is responsible for the overall execution and development of LifeSouth's Blood Banking and Transfusion Medical education programs. Additional responsibilities include assisting with the training of laboratory employees, assessing competencies, and maintaining training materials. Join our team and help us continue our dedication to making sure the blood is there when you or your family is in need. Visit our careers page to learn more about this position, and apply here!

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POSITIONS (continued from page 10)

**Supervisor, Immunohematology Reference Lab (San Diego Blood Bank).** The San Diego Blood Bank is currently seeking a motivated, knowledgeable professional to lead the Immunohematology Reference Lab. This person will oversee the daily operation of the department as well as support the greater Lab Management Team following safety, cGMP, and Quality Plan. Additionally, the ideal candidate will supervise the flow of samples, blood, and blood components through the department from satellite centers, mobile collection vehicles, hospitals, blood banks, and laboratories. **Qualifications** include a minimum of 2 years in blood bank related fields to include leadership experience and IRL experience. **Certification/Licensure** required include MLS(ASCP)CM/MT(ASCP) or equivalent experience and a California Clinical Laboratory Scientist License (CLS). Certification as a Specialist in Blood Bank (SBB) or equivalent is preferred. For a full description of this job posting and to apply, visit: Careers | San Diego Blood Bank (recruitingbypaycor.com)

**Immunohematology Reference Laboratory CLS (San Diego Blood Bank).** Under the direction of the department leadership, the Medical Laboratory Scientist I will assist the Immunohematology Reference Laboratory in daily operations according to cGMP compliant policies and Standard Operating Procedures implemented by the San Diego Blood Bank (SDBB). The ideal candidate will successfully complete/pass an initial training program resulting in the ability to provide guidance and expertise for the laboratory to meet the needs of SDBB customers, in accordance with accepted standards and regulations. Requirements: Bachelor's degree, MLS/MT (ASCP)CM or equivalent experience, Clinical Laboratory Scientist (CLS). Certification as a Specialist in Blood Banking (SBB) preferred. For a full description of this job posting and to apply, visit: Careers | San Diego Blood Bank (recruitingbypaycor.com)

**Immunohematology Reference Lab Medical Technologist.** LifeSouth Community Blood Centers is looking for an experienced Laboratory Medical Technologist, with a passion for making a difference, to join our Immunohematology Reference Laboratory team in Atlanta, GA. The position is responsible for following established policies and procedures, identifying problems that may adversely affect test performance or reporting of test results, and either correct the problems or immediately notify a supervisor, manager, or director. The IRL Medical Technologist will resolve immunohematology and compatibility problems to provide the safest donor blood for the patients in our community. We focus on providing the best possible customer service. Join our team and help us continue our dedication to making sure the blood is there when you or your family is in need. Visit our careers page to learn more about this position, and apply here!

**Immunohematology Reference Lab Medical Technologist.** LifeSouth Community Blood Centers is looking for an experienced Laboratory Medical Technologist, with a passion for making a difference, to join our Immunohematology Reference Laboratory team in Jacksonville, FL. The position is responsible for following established policies and procedures, identifying problems that may adversely affect test performance or reporting of test results, and either correct the problems or immediately notify a supervisor, manager, or director. This individual will resolve complex immunohematology and compatibility problems to provide the safest donor blood for the patients in our community. We focus on providing the best possible customer service. Join our team and help us continue our dedication to making sure the blood is there when you or your family is in need. Visit our careers page to learn more about this position, and apply here!

Massachusetts General Hospital
Founding Member, Mass General Brigham

**Assistant/Associate Director, Blood Transfusion Service (Massachusetts General Hospital; Boston, Massachusetts).** The Department of Pathology at the Massachusetts General Hospital (MGH), a founding hospital of Mass General Brigham, and a major teaching affiliate of the Harvard Medical School, seeks a full-time, early- or mid-career, academically oriented transfusion medicine physician. The successful candidate will combine clinical and teaching activities with a research program in a field relevant to transfusion medicine, hematology, or hemostasis. The Blood Transfusion Service at MGH encompasses an FDA-licensed donor center, therapeutic apheresis, an outpatient transfusion/infusion clinic, a transfusion service, and progenitor cell collection and processing. We collaborate closely with colleagues in bone marrow and solid organ transplantation, CAR-T cell therapy, cardiac surgery, trauma and critical care, neurology, and pediatrics. Our faculty also work closely with transfusion medicine faculty within the MGB network. Service and teaching responsibilities will be shared with two full- and several part-time staff physicians. Candidates must be BC/BE in Transfusion Medicine, with primary training in either Pathology or Hematology/Oncology (adult or pediatric). Academic rank as Associate Professor, Assistant Professor or Instructor and salary will be commensurate with experience and accomplishments. Interested candidates should send a personal statement with research interest, three potential referees and Curriculum Vitae to: Dr. Robert Makar; Director, Blood Transfusion Service; Department of Pathology; Massachusetts General Hospital; 55 Fruit Street, GRJ 148; Boston, MA 02114. Email: rmakar@mgh.harvard.edu C/O Diane Savickas dsavickas@mgb.org. We are an equal opportunity employer, and all qualified applicants will receive consideration for employment

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POSITIONS (continued from page 11)

without regard to race, color, religion, sex, national origin, disability status, protected veteran status, gender identity, sexual orientation, pregnancy and pregnancy-related conditions or any other characteristic protected by law.

HARVARD MEDICAL SCHOOL
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