

2024 #27

August 16, 2024

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## FDA Grants EUA to OctaplasLG Powder

The U.S. Food and Drug Administration (FDA) recently announced that it has [granted](#) an emergency use authorization (EUA) on August 8<sup>th</sup> to Octapharma Pharmazeutika Produktionsgesellschaft mbH for use of octaplasLG Powder (blood group types A and AB). The agency [announcement](#) explained that the EUA is for, “U.S. military forces for the treatment of hemorrhage or coagulopathy during an emergency involving agents of military combat (e.g., firearms, projectiles, and explosive devices) when plasma is not available for use or when the use of plasma is not practical.” According to the agency, “octaplasLG powder is a powdered freeze-dried product that can be used following reconstitution (adding water back to the powder) in settings where refrigeration is not available, thus enabling the rapid availability of plasma for use at the point of injury.”

FDA noted that, “[h]emorrhage, sometimes accompanied by coagulopathy (a condition that affects the blood’s ability to clot), is a leading cause of death among combat trauma casualties. Plasma contains proteins that may be effective at helping clot blood and can be used for the management of hemorrhage and coagulopathy. However, its use in combat settings is severely limited by logistical and operational challenges such as the need for refrigeration and, in the case of frozen plasma, a long thawing period.”

(Source: [FDA EUA](#), 8/8/24) ♦

## WHO Declares Mpox Outbreak a Public Health Emergency

On August 14<sup>th</sup>, the World Health Organization (WHO) Director-General Dr. Tedros Adhanom Ghebreyesus, PhD [designated](#) the current surge of mpox in the Democratic Republic of the Congo (DRC) and other African nations, “constitutes a public health emergency of international concern (PHEIC) under the International Health Regulations (2005) (IHR).” The PHEIC designation has been issued for the second time in two years and comes in the wake of, “over 100 laboratory-confirmed cases of clade 1b [in the past month] in four countries neighb[o]ring the DRC that have not reported mpox before: Burundi, Kenya, Rwanda, and Uganda. Experts believe the true number of cases to be higher as a large proportion of clinically compatible cases have not been tested.”

Chair of the IHR Emergency Committee Professor Dimie Ogoina explained that, “[t]he current upsurge of mpox in parts of Africa, along with the spread of a new sexually transmissible strain of the [mpox] virus, is an emergency, not only for Africa, but for the entire globe. Mpox, originating in Africa, was neglected there,

(continued on page 2)

## WHO Declare mpox Outbreak a Public Health Emergency (continued from page 1)

and later caused a global outbreak in 2022. It is time to act decisively to prevent history from repeating itself.”

The U.S. Department of Health and Human Services (HHS) issued an August 14<sup>th</sup> [statement](#) that said, “[t]he risk to the general public in the United States from clade I mpox circulating in the DRC is very low, and there are no known cases in the United States at this time. Due to efforts over the last nine months, the United States is well prepared to rapidly detect, contain, and manage clade I cases should they be identified domestically. The United States has a robust surveillance system in place, including through clinical testing and wastewater analysis. We continue to encourage those at high risk to get vaccinated with the JYNNEOS mpox vaccine, which has been demonstrated to be safe and highly effective at preventing severe disease from mpox. Those who have already had clade II mpox or are fully vaccinated against mpox are expected to be protected against severe illness from clade I mpox. [The] Centers for Disease Control and Prevention (CDC) has issued an updated [Health Alert Network advisory](#) urging clinicians to consider clade I mpox in people who have been in DRC or neighboring countries in the previous 21 days; clinicians are also asked to submit specimens for clade-specific testing for these patients if they have symptoms consistent with mpox. Given the geographic spread of clade I mpox, the U.S. CDC issued an updated Travel Health Notice on Aug. 7<sup>th</sup> recommending travelers to DRC and neighboring countries practice enhanced precautions.”

The WHO noted that, “[i]n July 2022, the multi-country outbreak of mpox was declared a PHEIC as it spread rapidly via sexual contact across a range of countries where the virus had not been seen before. That PHEIC was declared over in May 2023 after there had been a sustained decline in global cases.”

The U.S. Food and Drug Administration (FDA) previously published a communication in [August 2022](#) titled “Information for Blood Establishments Regarding the [Mpox] Virus and Blood Donation.” Within the communication, the agency stated that at that time, “[w]orldwide, there have been no reports of transmission of [mpox] virus through blood transfusion and the risk of transfusion-transmission remains theoretical. The levels of virus in the blood of an infected or exposed individual have not been well characterized.” Considerations for blood establishments referenced by FDA included, “routine measures used to determine blood donor eligibility prevent individuals with symptomatic infections from donating blood; given the robustness of the existing safeguards for blood safety FDA does not recommend that blood establishments ask donors additional, specific questions about possible exposure to monkeypox virus; FDA does not recommend using laboratory diagnostic tests to screen blood donors for monkeypox virus; and FDA will continue to monitor cases of monkeypox in the U.S. and world-wide and the available information about potential risk of transfusion-transmitted [mpox] virus.”

(Source: WHO [Announcement](#), 8/14/24) 

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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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## STATE ADVOCACY BRIEFS

**Illinois House Bill 4271 has been [signed](#) into law and will go into effect on January 1st.** The bill states that, “any person 17 years of age or older may donate blood and have the blood typed, if the donation is completely voluntary, without the necessity of obtaining the permission or authorization of his or her parent or guardian.”

(Source: [Illinois House Bill 4271](#), 4/16/24) 💧

## RESEARCH IN BRIEF

**RBC Antigens in Tunisian Donors and Their Effects on Recipients.** A [study](#) published in *Laboratory Medicine*, “aimed to evaluate the distribution of common Rhesus, Kell, Duffy, Kidd, MNS, Colton, and Dombrock antigens and their expressions among Tunisian blood donors.” The authors noted that, “[i]n total, 77 blood donors were found to be positive for the O blood type and chosen for simultaneous extended genotyping by single specific primer–polymerase chain reaction (SSP-PCR).” They explained that the, “genotyping of the 19 selected common blood antigens showed the presence of all known, with relative dominance of some variants, such as *RH\*5*, *KEL\*2*, *FY\*2*, and *CO\*1*.” With regard to genotypes, the analysis showed the absence of the homozygous state of the *KEL\*1* and *CO\*2* alleles.” The study found that there was a, “complete linkage disequilibrium (LD) between the *RH\*2/RH\*4* and *RH\*3/RH\*5* loci and the *FY\*Null/ FY\*Exp* and *FY\*A/FY\*B* loci.” The researchers stated that the, “extended genotyping performed in this work allowed [the study] to deduce the distribution of various combined expressions of the target RBC antigens.” For example, the frequency of O;RH:1;KEL:1 phenotype was 0.078. It also allowed evaluating, “the importance of some vital combinations for emergency transfusions.” Also, for example, if the original blood phenotype of the recipient is RH:-1, with a frequency of 0.09 and multiplied by the transfused red blood cell unit RH:1, frequency of 0.91, the risk of alloimmunization is 0.082 (8.2 per 100). The authors explained that, “[t]he first key finding of the study was that among type O blood donors, about 2.6 percent are positive for the most immunogenic extended phenotype O;RH:1;KEL:1;RH:3;RH:4;FY:2;JK:1;MNS:3. In fact, according to descending order of immunogenicity of RBC antigens, this phenotype combines the six most immunogenic antigens.” Additionally, they noted that, “[t]he second key finding of the study was that sensitization to MNS:3, FY:1, and RH:3 seems to be a potential factor for alloimmunization after transfusion with type O blood. The study showed that the probabilities (percentage) of simple alloimmunizations against these antigens in the O blood type population are 24.5 per 100, 18.5 per 100, and 18 per 100, respectively. Moreover, the probability that multiple alloimmunization against RH:1; KEL:1 or RH:1;KEL:1; RH:3 phenotypes may occur are 7 per 1,000 and 2 per 1,000, respectively.” The authors concluded that, “[t]hese findings show that there is a risk of alloimmunization against common RBC antigens in persons with type O blood or using type O blood.” They added that this study, “is very important in transfusion medicine because it provides information on the RBC antigens and phenotypes that are probably most involved in alloimmunization after type O blood transfusion.”

**Citation:** Sellami, M.S., Aïssa, W., Ferchichi, H., *et al.* “[Common RBC antigens in O type Tunisian blood donors and their importance in alloimmunization](#).” *Laboratory Medicine*.” 2024.

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



## WORD IN WASHINGTON

The U.S. Food and Drug Administration (FDA) is [hosting](#) a webinar on September 24<sup>th</sup> titled “**Labeling Requirements for *In Vitro* Diagnostic Products (IVD), Including Laboratory Developed Tests (LDTs), Under 21 CFR 809.10(b).**” The webinar will take place at 1 p.m. EDT and will, “provide information on how to comply with labeling requirements for IVDs, including LDTs. The focus of this webinar will be on labeling requirements for test systems, under 21 CFR 809.10(b) and will not cover labeling requirements for other types of IVDs such as collection devices and general-purpose reagents.” Earlier this year, the agency, “issued a final rule amending the FDA's regulations to make explicit that in vitro diagnostic products (IVDs) are devices under the Federal Food, Drug, and Cosmetic Act (FD&C Act) including when the manufacturer of the IVD is a laboratory. Along with that amendment, the FDA outlined a policy to phase out, over the course of four years, its general enforcement discretion approach to laboratory developed tests (LDTs). FDA expects compliance with labeling requirements for most IVDs offered as LDTs by May 6, 2025 (Stage 2 of the phaseout policy).” A Zoom link to join the webinar is [available](#).

(Source: FDA [Announcement](#), 8/14/24)

FDA has announced that [registration](#) is open for the “[2024 Center for Biologics Evaluation and Research \(CBER\) Science Symposium](#).” This hybrid event will take place September 16<sup>th</sup>-18<sup>th</sup> from 9:30 a.m.-4:00 p.m. EDT at FDA’s White Oak campus in Silver Spring, Md. and virtually. The purpose of the symposium is to, “discuss scientific topics related to the regulation of biologics and highlight science conducted at CBER by showcasing how scientific research informs regulatory decision making, and to provide a forum for developing collaborations within FDA and with external organizations. The symposium will include presentations by experts from academic institutions, government agencies and research institutions. [Topics include:]

- emerging and re-emerging diseases;
- advanced manufacturing and analytics, including new and emerging technologies;
- immune response to vaccination;
- methods and biomarker discovery for product safety and quality;
- advances in computational science supporting biologics’ evaluation; and
- cell, tissue, and gene therapy.

A meeting agenda is [available](#).

(Source: FDA [Announcement](#), 8/9/24)

FDA has published an August 13<sup>th</sup> [communication](#) that, “updates advice to manufacturers of **COVID-19 vaccines for 2024-25.**” The agency is recommending if “feasible [that] manufacturers use the KP.2 Strain of JN.1-Lineage.” The communication explained that, “[b]ased on the totality of the evidence, on June 6, 2024, FDA initially advised the manufacturers of the licensed and authorized COVID-19 vaccines that the COVID-19 vaccines (2024-2025 Formula) for use in the United States beginning in fall 2024 should be monovalent JN.1 vaccines. FDA has continued to monitor the circulating strains of SARS-CoV-2. Based on the most current available data, along with the recent rise in cases of COVID-19 in areas of the country, the agency has further determined that the preferred JN.1-lineage for the COVID-19 vaccines (2024-2025 Formula) is the KP.2 strain, if feasible. This change is intended to ensure that the COVID-19 vaccines (2024-2025 Formula) more closely match circulating SARS-CoV-2 strains. FDA has communicated this change to the manufacturers of the licensed and authorized COVID-19 vaccines. The agency does not anticipate that a change to KP.2 will delay the availability of the vaccines for the United States. FDA will continue to monitor the safety and effectiveness of the COVID-19 vaccines and the evolution of the SARS-CoV-2 virus.”

(Source: FDA [Communication](#), 8/13/24) 💧





**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 Attends NCSL Legislative Summit

America's Blood Centers (ABC) staff recently took part in the National Conference of State Legislatures (NCSL) [Legislative Summit](#) in Louisville, Ky. Over the course of two days, ABC's Vice President of Government Affairs Diane Calmus, JD and Director of Regulatory Affairs and Public Policy Justine Coffey, JD, LLM had the opportunity to speak face-to-face with state officials and their staffs and educate them about the need for state legislation that ensures a safe and available blood supply, and blood transfusions that are available when needed by patients.



### Upcoming August ADRP Webinars

ADRP is hosting two webinars next month! [Registration](#) is open for the August 21<sup>st</sup> webinar titled "[Riding the Wave: Political Partnerships and State Legislation](#)" at 12:30 p.m. EDT. This event will provide tools that blood centers can use to enhance their government and media relations efforts during an election year, while providing insights on what blood centers can do to leverage such partnerships. ABC Vice President of Government Affairs Diane Calmus, JD and ImpactLife Regional Development Manager & Government Relations Manager Jim Watts are featured speakers for this event.

The "[Empowering Lifesavers: Innovations in Blood Donor Recruitment and Retention](#)" webinar will take place on August 29<sup>th</sup> at 12:30 a.m. EDT to accommodate the schedule of presenters in Asia (a recording of this webinar will also be available to all registrants.) The event will be co-hosted and sponsored by Terumo Blood and Cell Technologies (Terumo BCT) and will feature:

- Dr. Anand Deshpande – Head of the Department of Transfusion Medicine at P.D. Hinduja Hospital in Mumbai, India;
- Luxi Zhang – Frequent Blood Donor and Active Blood Donor Advocate in Shenzhen, China;
- Theresa Pina – Vice President of Operations for Gulf Coast Regional Blood Center in Houston, Texas and ADRP Immediate Past President; and
- Prakash Menon – Group Director of the Blood Donor Progra[m] at the Singapore Red Cross.

This event includes leading blood centers from the Asia-Pacific (APAC) region sharing their innovative approaches and best practices. Aimed at blood center management, collection managers, and recruiters, this collaborative effort seeks to inspire and educate on enhancing donor recruitment and retention. Terumo BCT and ADRP unite to leverage their expertise and provide actionable insights for blood centers worldwide. [Registration](#) for this webinar is complimentary. Be part of the conversation that shapes the future of blood donation.

### ABC Workforce Trends Survey Is Open

The new America's Blood Centers (ABC) Workforce Trends Survey has launched and will remain open until August 23<sup>rd</sup>. 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

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## INSIDE ABC (continued from page 5)

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.

### **Speakers Announced for 2024 ADRP Master Class**

The schedule of speakers is now [available](#) for the 2024 ADRP Master Class: “Bring in the Coach — The Path to Effective Leadership!” [Register now](#) and do not miss your shot to grow and learn. This virtual event taking place September 18<sup>th</sup>-19<sup>th</sup> will include:

- Health Psychologist Nicole Eull;
- Leadership Coach Jonathan R. Parker;
- Leadership Expert William B. Henry; and
- Business Strategy and Development Leader Dr. Meghan Kinter.

The [2024 Master Class](#) promises an interactive journey filled with powerful insights, practical tools, and actionable strategies. Gain the skills you need to enhance communication, build effective teamwork, and boost emotional intelligence. This is your opportunity to leave the bench and master effective leadership. Secure your spot today and equip yourself with the knowledge and expertise needed to lead your team to victory. When we thrive, patients thrive. Grab your clipboard, [register today](#), and get ready to elevate your team to new heights!

### **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](#), 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.

### **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 6<sup>th</sup> -7<sup>th</sup> 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 9<sup>th</sup> to secure the group rate. ♦

**Rise & Lead**  
A WOMEN’S LEADERSHIP WORKSHOP

## MEMBER NEWS

The Iron Research Laboratory at Lindsley F. Kimball Research Institute (LFKRI) within **New York Blood Center Enterprises (NYBCe)** has been, “[named](#) a recipient of the prestigious Cooley’s Anemia Foundation Medical Research Fellowship.” This marks the third straight year that it has received this recognition. According to the NYBCe announcement, “Shobana Navaneethalakrishnan, PhD, a postdoctoral research fellow at the Iron Research Lab, has recently been honored with the prestigious fellowship. This accolade follows the recognition of NYBCe’s Francesca Vinchi, PhD, Assistant Professor and Head of the Laboratory of Iron Research, who was a recipient in previous years. The current fellowship award will fund research on beta-thalassemia, a group of inherited blood disorders characterized by anemia with low hemoglobin and red blood cells...Within the awarded project, Dr. Navaneethalakrishnan will explore the role of heme and iron-activated macrophages in the pathophysiology of beta-thalassemia, with the aim to uncover novel cellular and molecular mechanisms contributing to the disease.” Dr. Vinchi added in the announcement, “[u]ltimately, the study will provide insights for the development of innovative therapeutic strategies targeting inflammation and activated macrophages to improve beta-thalassemia patient outcomes.” The Cooley’s Anemia Foundation is, “dedicated to serving individuals afflicted with various forms of thalassemia, most notably Cooley’s anemia/thalassemia major.”

(Source: NYBCe [Announcement](#), 8/1/24) ◆

## GLOBAL NEWS

A paper [published](#) in *PLoS One* sought to determine, “**the frequency and patterns of self-reported high-risk behaviors among first-time and repeat replacement blood donors.**” The authors explained that, “[d]ocumenting this data will provide blood centers in Ghana with a baseline information, to: help identify high-risk donor groups, determine the effect of sociodemographic factors on high-risk donor practices, and to unravel the relationship between donation frequency, blood hemoglobin level and some anthropometric variables. Also, this study would help to understand the health educational needs of prospective blood donors in the study setting.” The study included 1,317 donors between the ages of 17 and 60 who donated Ghana’s National Blood Service between January 2017 and December 2020. The researchers found that, “[t]he frequency of blood donation was significantly associated with age, sex, occupation, and residence of the donors, with first-time donors younger than repeat donors. Deferral from blood donation, drug addiction, body modification, multiple sexual partners, and positive STIs were frequent among male- than female donors, whereas, vaccination was frequent among females than males.” Additionally, the paper explained that, “[a]n increased proportion of first-time replacement- than repeat donors reported being unwell, deferred from donating, drug addicts, had body modifications, had multiple sexual partners, were positive for STIs, and were pregnant during the screening. Hemoglobin, weight, and diastolic BP were significantly reduced among first-time donors.”

**Citation:** Osei-Boakye, F., Nkansah, C., and Appiah, S.K. “[Self-reported high-risk behavior among first-time and repeat replacement blood donors; a four-year retrospective study of patterns.](#)” *PLoS ONE*. 2024

**Authorities in England have “[recommend\[ed\]](#) **exagamglogene autotemcel (Casgevy) for people 12 years and over with severe beta-thalass[e]mia who need regular blood transfusions to manage their condition and when a blood and bone marrow transplant is suitable but no donor is available.**”** The National Institute for Health and Care Excellence (NICE), who provides national guidance and advice to improve health and social care, noted that treatment, “will be available through the Innovative Medicines Fund so that more data about its clinical and cost-effectiveness can be collected. This means it will be funded immediately to accelerate rollout for up to 460 people eligible for the treatment.” The United Kingdom (UK) Medicines and Healthcare products Regulatory Agency previously [authorized](#) Casgevy in November 2023.

(Source: NICE [Announcement](#), 8/8/24) ◆

## COMPANY NEWS

**Terumo Blood and Cell Technologies (Terumo BCT) and Charles River Laboratories** have [announced](#) the publication of data, “from a collaborative project demonstrating the versatility of Terumo BCT’s Finia™ automated fill and finish system in a range of cell and gene therapy (CGT) workflows.” According to a company news release, “[the] results demonstrate [that] Finia could adapt to process large volumes in series. A 304 mL product containing equal parts expanded cells and cryopreservation media was processed on Finia in four consecutive runs, resulting in 16 product bags — a four-fold increase in capacity, with a total process time of two hours. The system produced highly accurate final volumes, limited impact to cell viability and functionality, and reduced hands-on time. Finia’s ability to control temperature for both inputs and the final product limits cell exposure to the cryoprotectant dimethyl sulfoxide (DMSO) which is used commonly in cryoprotectant medias.” The data has been [published](#) in *Cytotherapy*.

(Source: Terumo BCT [News Release](#), 8/15/14)

**Bavarian Nordic** recently [announced](#) that the U.S. Food and Drug Administration (FDA) has “accepted and granted Priority Review for biologics license application (BLA)” of its chikungunya vaccine candidate. According to a news release, the vaccine candidate is designed for, “immunization to prevent disease caused by chikungunya virus infection in individuals 12 years of age and older. The Priority Review designation means the FDA is targeting completion of its review within six months, compared to 10 months under standard review, and thus has assigned a Prescription Drug User Free Act (PDUFA) target action date of February 14<sup>th</sup>.” The company also noted in the news release that the vaccine candidate is, “currently also under accelerated assessment review with the European Medicines Agency (EMA), potentially supporting approval of the vaccine by the European Commission in the first half of 2025.”

(Source: Bavarian Nordic [News Release](#), 8/13/24) ◆

## CALENDAR

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

### 2024

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](#).

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**CALENDAR** (continued from page 8)

Sept. 12-14. **Society for the Advancement of Patient Blood Management (SABM) 2024 Annual Meeting. Phoenix, Ariz.** [Registration](#) is open. More information available [here](#).

Sept. 16-18. **2024 FDA CBER Science Symposium (Hybrid), Silver Spring, Md.** [Registration](#) is open. More information available [here](#).

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

Sept. 24. **FDA Webinar: Labeling Requirements for *In Vitro* Diagnostic Products (IVD), Including Laboratory Developed Tests (LDTs), Under 21 CFR 809.10(b).** 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. **Trauma Hemostasis & Oxygenation Research (THOR) Network Emergency Transfusion in Females with Childbearing Potential: Mitigating the Risks of Hemolytic Disease of the Fetus and Newborn Meeting. Bethesda, Md.** [Registration](#) is open. More information available [here](#).

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](mailto:newsletter@americasblood.org)

## POSITIONS

**Technical Director.** The Northern California Community Blood Bank seeks a skilled leader and laboratory professional to join our team as Technical Director. Located in the magnificent Northern California coastal redwoods, Eureka is the market and cultural center of a beautiful region filled with iconic redwoods and stunningly beautiful, rugged remote ocean landscapes. Our blood bank offers a low-stress environment, excellent work-life balance, and the opportunity to join a supportive, inclusive team and an organization with a vibrant community relationship. The Technical Director has overall responsibility for the Laboratory and all activities related to the production of blood products. This position supervises Laboratory Staff performing component production, inventory control, distribution, and reference immunohematology, ensuring that all details of blood product manufacture are compliant with regulatory and standard-setting agencies. A qualified candidate must meet CLIA General supervisor qualifications and hold a California Clinical Laboratory Scientist License (CLS). Experience as a technologist performing high complexity testing in a clinical laboratory and familiarity with standard laboratory methods and techniques is required. For details and to apply, visit [www.nccbb.net/employment.html](http://www.nccbb.net/employment.html).

Manager, Blood Services. ARUP Laboratories is looking for a result driven Manager to lead our Donor Centers. ARUP is a national nonprofit and academic reference laboratory at the forefront of diagnostic medicine. We are a CAP, ISO 15189, and CLIA-certified diagnostic lab with 40 years of experience supporting clients through unparalleled quality and service. This is a unique manager opportunity that will provide leadership and direction over all aspects of recruitment, mobile and in-center whole blood and platelet collections and component processing and distribution. This position will drive strategic planning, navigate challenges, and lead an already strong leadership team to achieve goals and objectives. Meeting the future growth needs of our health system will be a driving force for this position. Incumbent should have strong leadership skills, be experienced in a blood center, and demonstrate a passion for commitment to organizational goals. In addition, incumbent will formulate strategic goals, develop, and manage budgets, and effectively coach and manage their teams to success. We offer exceptional benefits, competitive pay, and beautiful facilities to work in. Prospective candidates may be eligible for applicable relocation assistance. Interested candidates can apply at [www.aruplab.com/careers](http://www.aruplab.com/careers)

**Medical Laboratory Scientist (MLS)/Technologist (MLT).** This role at LIFELINE Blood Services performs lab procedures such as compatibility testing, reference lab work, specimen processing, test performance, and reporting test results. Also, may perform computer aided labeling, component production, and distribution. Responsible for maintenance and storage of blood components including temperature monitoring, labeling

of blood, biohazard disposal, Quality Control and Preventative Maintenance, bexWISE Process and bexWISE Affirm Operation, component preparation, packing recovered plasma, daily orders, blood shipments and returns, shipping recovered plasma, inventory control, resource management, importing and exporting, irradiation of Blood Products. Laboratory Duties include qualifications of Apheresis Platelets and Plasma, lot release, sending tubes to testing lab, RRC program, and management of Soot. RRC Duties include pulling retention samples to send to Ortho Diagnostics for antigen typing and recruit new donors for the RRC program based on the needs of the manufacturers. EDUCATION: MLS, Bachelor's degree in Medical Technology, Clinical Laboratory Science or chemical, physical, or biological science and Current State of Tennessee licensure. Apply for Medical Laboratory Scientist/Technologist by clicking [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 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!](#)

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**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!](#)

**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!](#)

**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](http://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](http://www.bloodworksnw.org/careers)

**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 \(recruitingbypaycor.com\)](http://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

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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 \(recruitingbypaycor.com\)](#)



**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](mailto:rmakar@mgh.harvard.edu) C/O Diane Savickas [dsavickas@mgb.org](mailto:dsavickas@mgb.org). We are an equal opportunity employer, and all qualified applicants will receive consideration for employment 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.



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