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ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

Visit ABC's Web site at: www.americasblood.org

2025 #22 **July 14, 2025**

INSIDE:

Please Note: The *ABC Newsletter* will not be published on July 21st. We will resume regular publication on Monday, July28th. Thank you for your continued interest.

ABC Responds to HHS RFI for Unnecessary Regulations

America's Blood Centers (ABC) has submitted a comment letter to the U.S. Department of Health and Human Services (HHS) in response to a Request for Information (RFI) to identify and eliminate outdated or unnecessary regulations. The letter addressed to HHS Secretary Kennedy outlines and prioritizes 12 recommendations regarding regulations and guidance that ABC urges the agency to modify or repeal. The recommendations from ABC include:

- "[m]inimizing the duplicative data currently required by the U.S. Food and Drug Administration (FDA) and allowing the immediate implementation of all types of apheresis product collections at new fixed site locations" by amending the guidances 'Recommendations for Collecting Red Blood Cells by Automated Apheresis Methods;' and 'Collection of Platelets by Automated Methods;'"
- removing the hepatitis B surface antigen (HBsAg) testing requirement for whole blood and blood components intended for transfusion in the guidance titled: "Use of Nucleic Acid Tests on Pooled and Individual Samples from Donors of Whole Blood and Blood Components, Including Source Plasma, to Reduce the Risk of Transmission of Hepatitis B Virus;"
- revising the guidance titled "'Use of Serological Tests to Reduce the Risk of Transfusion-Transmitted Human T-Lymphotropic Virus Types I and II (HTLV-I/II)' to require one-time donor testing for antibodies to HTLV-I/II coupled with effective leukoreduction in donations of whole blood and blood components intended for transfusion;"
- withdrawing the draft guidance titled "'Recommendations to Reduce the Risk of Transfusion-Transmitted Malaria' to ensure there are no requirements for malaria testing of blood donations at this time;"
- promoting innovation and blood product availability by reducing the "platelet content requirement (PCR) from 3 x 10^{11}/unit to 2.5 x 10^{11}/unit to expand platelet supply availability and align with international standards;"
- eliminating the current expiration requirement for recovered plasma to allow blood centers, "to convert plasma collected through apheresis methods from transfusable to recovered plasma for further manufacturing;"
- encouraging FDA to, "reduce undue burdens associated with refrigeration requirements beyond eight hours, and allow for the processing of more platelet products, and more platelets in inventory, [by allowing] blood to be held at room temperature for up to 24 hours prior to processing into components, in line with current evidence and international standards;

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ABC Responds to HHS RFI for Unnecessary Regulations (continued from page 1)

- FDA should allow source plasma to be held at room temperature for up to 24 hours prior to freezing, in line with international standards. The 24-hour hold is more flexible for blood centers' operation, as they can use staff more efficiently in manufacturing plasma (e.g. they can batch plasma and freeze it all at the same time instead of one at a time as it is collected). Additionally, a 24-hour hold is more effective for blood inventory management;
- FDA should quickly move to modify the criteria for use of cold-stored platelets (CSP), based upon the data obtained from the CHIlled Platelet Study (CHIPS) [permitting CSP] for any use, or at the discretion of the transfusing physician;
- FDA should allow a qualified physician's designee to perform a donor physical assessment and documentation for blood pressure and pulse, when a donor's measurements fall outside of the required measurements, to determine whether a donor is permitted to donate. Allowing a qualified physician's designee to perform these functions would maintain the health of the donor, while allowing the physician to perform other essential clinical and medical functions of blood collection and patient safety oversight;"
- FDA is urged in the comments to develop, "a pre-approved framework for commonly requested variances or alternative procedures to expedite innovation and pilot testing;" and
- the comment letter encourages FDA to, "allow the determination of donor eligibility within 24 hours before collection."

The full letter is available on the ABC website. We thank all members for their input in the development of the comment letter. ABC will continue to provide updates on its advocacy efforts as they become available. Please contact ABC's Director of Regulatory Affairs Justine Coffey, JD, LLM with questions or comments.

The HHS RFI was part of a broader federal effort to reduce regulatory burdens and increase transparency, in alignment with President Trump's Executive Order 14192 titled, "Unleashing Prosperity Through Deregulation." Through the Executive Order, HHS intends to implement:

- "[t]he 10-to-1 rule: For every new regulation introduced, at least ten existing regulations must be eliminated;
- [r]egulatory cost cap: The total cost of all new regulations in fiscal year 2025 must be significantly less than zero;
- [e]xpanded scope: The order applies not only to formal regulations but also to guidance documents, memoranda, policy statements, and similar directives; [and]
- [r]adical transparency: HHS will publish annual reports detailing estimated regulatory costs and the specific rules being offset, promoting greater transparency and accountability."

(Sources: ABC Comment Letter, 7/10/25; HHS RFI, 5/13/25)

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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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WORD IN WASHINGTON

The Senate Health, Education, Labor, and Pensions (HELP) Committee has advanced the nomination of Susan Monarez, PhD as director of the Centers for Disease Control and Prevention (CDC) to the full Senate. Dr. Monarez is currently the agency's acting director and has previously served as deputy director of the Advanced Research Projects Agency for Health (ARPA-H).

(Source: Senate HELP Committee Announcement, 7/9/25)

The Senate HELP Committee will hold a nomination hearing this week for Assistant Secretary for Health at the U.S. Department of Health and Human Services (HHS) nominee Brian Christine on July 16th. Dr. Christine is a urologic surgeon at Urology Centers of Alabama.

(Source: Senate HELP Committee Announcement, 7/9/25)

BRIEFLY NOTED

The College of American Pathologists (CAP) has issued a statement regarding, "Blood Labeling for Vaccination Status." The July 10th communication explained that, "[s]tudies confirm that blood from vaccinated donors is safe, and there is no evidence SARS-CoV-2 can be transmitted via transfusion. Segregating blood products would reduce availability, increase costs, and result in greater waste — particularly for short-shelf-life products like platelets. There is also no validated test to determine vaccination status through blood, making such labeling inaccurate and impractical. CAP joins leading health organizations, including the U.S. Food and Drug Administration, the Association for the Advancement of Blood & Biotherapies, America's Blood Centers, and the American Red Cross, in affirming that blood from vaccinated donors is safe and that the blood supply must remain science-driven, not politicized." CAP President Donald S. Karcher, MD, FCAP added in the statement, "there is no scientific basis for labeling blood by vaccine status. Such mandates would endanger patient care and strain a system already working to meet urgent clinical needs."

(Source: CAP Statement, 7/10/25)

A review titled "Blood transfusion strategies for major bleeding in trauma" has been published in *Cochrane Database of Systematic Reviews.* The reviewers aimed to, "assess the beneficial and harmful effects of transfusion strategies started within 24 hours of traumatic injury in adults (aged 16 years and over) with major bleeding [and they included] 18 randomized controlled trials with 5,041 participants in the review." The comparisons described in the review are:

- prehospital transfusion strategies;
- in-hospital transfusion strategies;
- whole blood versus individual blood products; and
- goal-directed blood transfusion strategy of viscoelastic h[e]mostatic assay (VHA) versus conventional laboratory coagulation tests (CCT) to guide h[e]mostatic therapy.

The authors explained that the review found that, "[o]verall, none of the transfusion strategies tested in the studies reduced the overall risk of death, whether this was measured after 24 hours or after 30 days. However, we are not very confident in the results, and future studies might change this conclusion. Similarly, none of the transfusion strategies showed different rates of harmful blood clots, but we are uncertain if this is accurate." Limitations of their review included, "the studies we identified were very different from each other (e.g. in the way they measured results), which made it hard to draw firm conclusions about which transfusion strategy worked best. More research is needed to fully answer our questions about the best way

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BRIEFLY NOTED (continued from page 3)

to treat major bleeding after trauma."

Citation: Brunskill, S.J., Disegna, A., Wong, H., *et al.* "Blood transfusion strategies for major bleeding in trauma (Review)." *Cochrane Database of Systematic Reviews*. 2025.

PEOPLE

Vitalant has announced that Vitalant Research Institute's **Brian Custer, PhD, MPH** and **Michael Busch, MD, PhD** have been recognized by ScholarGPS with the prestigious designation of "Highly Ranked Scholars – Lifetime." According to the announcement, the recognition, "place[es] them in the top 0.05 percent of all scholars globally based on their career-long contributions. This exceptional recognition highlights their lasting impact on scientific research. In addition, Dr. Busch was named a 2024 'Top Scholar.' Dr. Custer serves as director of the Vitalant Research Institute and senior vice president of research and scientific programs. Dr. Busch is director emeritus of the Research Institute and vice president of research and scientific programs." ScholarGPS is, "an online analytics platform ranking scholars, research institutions, universities and academic programs."

(Source: Vitalant Announcement, 7/1/25)

MEMBER NEWS

America's Blood Centers is pleased to welcome its 50th organizational member in **Children's National Hospital** (Washington, D.C.) as a hospital-based blood center associate member. Children's National Hospital is ranked one of the top 10 pediatric hospitals in the nation by *U.S. News & World Report*, tied for #1 in the Mid-Atlantic region, and achieving top 10 honors in cancer, diabetes and endocrinology, gastroenterology and GI surgery, neonatology, nephrology, neurology and neurosurgery, and orthopedics. Contact ABC's member services for additional information about hospital-associate membership.

Researchers at **Carter BloodCare** have announced the publication of a brief communication in the *Journal of Clinical Lipidology* highlighting a pilot study that, "explores the feasibility of large-scale non-fasting triglyceride level screening at blood donation centers." Highlights of the pilot include, "triglyceride levels were measured in 10,176 blood donors at Carter BloodCare North Texas and found 39.2 percent with moderate and 2.4 percent with severe hypertriglyceridemia. Predictors of elevated triglycerides included age, male gender, blood pressure, and body mass index, with increased odds in Hispanic and Asian individuals compared to White individuals. Survey results from 50 donors with severe hypertriglyceridemia showed 69 percent had positive intent to seek medical care. The study highlights the potential of blood donation centers to serve as platforms for public health screening, and scaling low-cost, non-fasting triglyceride screening is feasible."

Citation: Abe, C, Decicco, E., Eason, S., *et al*. "Non-fasting triglyceride screening in volunteer blood donors: A pilot program." *Journal of Clinical Lipidology*. 2024.

Community Blood Center of the Ozarks (CBCO) is celebrating 30 years of lifesaving service. Founded in 1995 as a local solution to overcome challenges from being dependent on a national provider, CBCO is the exclusive provider of blood, platelets, and plasma to over 40 hospitals across southwest Missouri, northwest Arkansas, and southeast Kansas. For 30 years, CBCO has proudly served the region and remains committed to its mission of saving lives, made possible through the generosity and support of our community's blood donors, donor groups and community partners.

(Source: CBCO Announcement, 7/11/24)

Contributed by Michelle Teter, Media Relations Representative at CBCO

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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 Economic Outlook Survey Report Available

America's Blood Centers (ABC) recently announced that the ABC Economic Outlook Survey Report has been released. The report is complimentary to participants and instructions on accessing it have been distributed to the designated contact. Non-participating ABC members may purchase the report. The ABC Economic Outlook Survey provides 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. Please contact us with questions.

Introducing the *ABC Advocacy Alert*: A New LinkedIn Newsletter

ABC has launched a new advocacy newsletter on LinkedIn (*ABC Advocacy Alert*) to highlight breaking news of interest to the blood community. The first edition was published on July 2nd and features updates on President Trump's key domestic legislation highlighting changes to Medicaid and clean energy funding.

2025 ADRP Annual Conference Compendium Available

ADRP has released the *2025 ADRP Annual Conference Compendium*. This resource is designed to help distill key insights from the conference's sessions, serving as a unique tool to assist you with topics such as data-driven mobile collections, innovative donor registration approaches, artificial intelligence- (AI) powered social media strategies, and much more. Other highlights include detailed case studies; think tank summaries; and the latest trends in donor relations. A link to download the complimentary compendium has been emailed to conference attendees (contact us if you did not receive it).

Those who did not attend the 2025 ADRP Annual Conference may purchase the compendium. Whether you're new to blood banking or an experienced professional, the compendium is an essential tool for any blood center professional looking to optimize their center's operations and make a greater impact.

Register for the July ABC Webinar: "Emerging Infectious Diseases & Malaria Risks: Updates for Blood Centers"

Registration is open for the Tuesday, July 29th ABC Webinar: "Emerging Infectious Diseases & Malaria Risks: Updates for Blood Centers." This event will take place at 3 p.m. EDT and featured speakers include ABC Chief Medical Officer Jed Gorlin, MBA, MD and OneBlood Chief Medical Officer Rita Reik, MD, FCAP. Additional information and a link to registration are available to ABC members here. Please contact us with any questions.

(Source: MCN 25-033, 6/24/25)

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SAVE THE DATE: ABC WELC *Rise & Lead Workshop* November 13th-14th

ABC is excited to announce that the 2025 ABC Women's Executive Leadership Community (WELC) *Rise & Lead Workshop* will take place November 13th-14th in San Antonio, Texas at the Westin Riverwalk. Book now to secure the discounted rate. Registration will open in August. This workshop is designed for women in leadership positions, emerging leaders, and professionals seeking personal and professional growth. It also welcomes individuals who want to cultivate diverse perspectives. Attendees will engage in an intimate, engaging, and interactive environment focused on networking, mentorship, and meaningful discussions on leadership and growth. Please contact us with questions.

Registration Is Open: 2025 ADRP Master Class September 24th-25th

Mark your calendars and register ADRP for the 2025 ADRP Master Class taking place September 24th-25th. This year's theme is "Building Brighter Experiences: Empowering Customers, Engaging Employees." In today's competitive market, organizations that prioritize both employee and customer experience gain a significant edge. A motivated and engaged workforce leads to improved customer interactions, higher satisfaction, and long-term brand loyalty. The customer experience starts with the employee experience. This year's featured speaker is Janice Honeycutt Herring, a former Regional Director of Operations, United Blood Services, now Vitalant. With 30+ years of experience in organizational change and leadership development, Janice will bring unparalleled insights to the blood banking industry. She is the founder and chief executive officer of Firecracker Leadership. Stay tuned for more information! Please contact us with questions.

RESEARCH IN BRIEF

ABO Mismatched Platelets/Plasma and the Risk of Alpha-Gal-Syndrome. A study published in *Transfusion* sought as the primary goal to, "quantify the potential risk [of transfusion-related alpha-gal syndrome (TRAGS)] to patients by measuring the frequency of Groups B and AB plasma and platelet transfusions to Group O patients." The authors described that a secondary goal, "was to assess the potential increase in wastage if a transfusion service were to adopt a policy of not issuing Groups B and AB plasma/platelets to Group O recipients." The paper explained that, "[p]articipating sites calculated the total numbers of platelet and plasma transfusions during a two-year period [and] Groups B and AB plasma and platelets transfused to Group O patients were considered to pose a potential risk for TRAGS." The study noted that, "[a] total of 14 sites from 10 countries contributed data…Group AB plasma was transfused to non-group AB patients in 65 percent (range 31–91) of transfusion[s] [while]Group O patients received Group AB for an average of 9.9 percent (range 2.8–29.2) of plasma transfusions and Group B for 3.2 percent (0–12.8). The impact on inventory if Group B or AB plasma transfusions to Group O patients were prohibited was modeled using a worst-case scenario where all such transfusions would result in product wastage. In this scenario, Group AB plasma to Group O patients represented an average of 4.5 percent (range 0.9–14.6) of the total plasma transfusion[s], while Group B plasma represented 1.4 percent (range 0–5.1)." The authors explained that, "[o]verall, sites provided ABO-identical platelet transfusions 68 percent (range 56–93) of the time…Group O patients received Group B for an average of 4.1 percent (0–14.2) of platelet transfusions and Group AB for 1.5 percent (range 0–5.9). The impact on inventory if Group B or AB platelet transfusions to Group O patients were prohibited was modeled using a worst-case scenario where all such transfusions would result in product wastage." The paper found that, "[i]n this scenario, Group B platelets to Group O patients represented an average of 1.8 percent (range 0–6.7) of the total platelet transfusion[s], while Group AB

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RESEARCH IN BRIEF (continued from 6)

platelets represented 0.6 percent (range 0–2.7).” The authors concluded that, “[t]his study verifies that currently, Group O patients may receive Group B or AB plasma and/or platelet transfusions at many institutions around the world. These transfusion practices may increase the risk for TRAGS, a newly described potential complication of transfusion where Group O patients with alpha-gal syndrome may experience severe allergic transfusion reactions following exposure to Group B or AB plasma and/or platelet transfusions.”

Citation: Dunbar, N.M., Kaufman, R.M., Bary, K.S., *et al*. “ABO-mismatched platelet and plasma transfusion practices and the potential for transfusion-related alpha-gal syndrome: The Biomedical Excellence for Safer Transfusion Collaborative Study.” *Transfusion*. 2025

Contributed by Richard Gammon, MD

GLOBAL NEWS

The Ministry of Health and Welfare in Sweden has announced that government funding is being provided to additional regions throughout the country to implement nucleic acid testing (NAT). A recent news release indicated that, “[i]nitially, funds were given to the Region Skåne to begin work on implementing NAT for infection screening of blood donors. Now the government is [revising that plan] so that [national funding will be] dispersed to the Region Jämtland Härjedalen and Region Kronoberg” to meet the goal of country-wide adoption of NAT. Additionally, the news noted that Sweden aims to, “meet international requirements for infection safety in order to be able to cooperate with other countries [when it comes to supply] blood in times of war and disasters. The introduction of NAT testing is an important step in harmonizing Sweden’s blood supply regulations with international standards. It is also a step towards more people, regardless of sexual orientation, being able to donate blood in the future, which can further increase the number of blood donors and ensure a stable blood supply.”

(Source: Ministry of Health and Welfare News Release, 7/2/25)

Singapore is raising its upper age limit for first-time blood donors from age 60 to 65. Channel News Asia (CNA) reported that the country’s Health Minister Ong Ye Kung stated that, “the move aims to expand the donor pool amid rising demand and an aging population.” The news outlet also explained that, “[the] decision reflects longer life expectancy and data showing fewer adverse reactions among older donors. ‘There is no reason to believe that once you cross 60 years old, suddenly the adverse reaction prevalence rate is going to shoot up,’” according to a statement attributed to the Health Minister at a World Blood Donor Day event. “Singapore’s new limit brings it in line with countries such as the United Kingdom and South Korea. Currently, only repeat donors can give blood beyond age 60, if they meet health criteria.”

(Source: *Malay Mail*, “Health minister: Singapore to raise first-time blood donor age limit to 65 from 2026,” 6/28/25)

The European Centre for Disease Prevention and Control (ECDC) has launched a, “new series of weekly surveillance updates to help public health authorities monitor mosquito-borne diseases in a timely way.” According to the agency, “[t]he reports cover chikungunya, dengue, Zika, and West Nile viruses, providing a comprehensive view of the evolving situation across European countries.” Additionally, ECDC is, “also publishing new public health guidance on locally acquired *Aedes*-borne diseases in Europe. The document outlines practical surveillance, prevention, and control measures for chikungunya virus disease, dengue, and Zika virus disease, with recommendations tailored to four risk levels based on vector presence, environmental conditions, and recent transmission. A similar guidance for West Nile virus

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GLOBAL NEWS (continued from page 7)

is also available. The guidance also includes criteria for risk classification, actions for each level, and strategies for vector management, outbreak response, and public awareness."

(Source: ECDC Announcement, 7/1/25)

The European Blood Alliance (EBA) has entered a strategic partnership with the Coalition of Blood for Africa (CoBA). The partnership between the organizations will focus on:

- [r]esearch to improve blood safety;
- [a]wareness creation of blood safety by recruitment and retention of Voluntary Non-Remunerated Blood Donors (VNRBD); [and]
- [r]aising awareness of the fundamental importance of adequate, safe, and sustainable blood systems through high level advocacy with policy makers."

(Source: EBA Announcement, 6/30/25)

The European Medicines Agency (EMA) has issued a July 11th communication stating that it has finished reviewing and lifted the temporary restriction on Valneva's chikungunya vaccine (Ixchiq) for adults 65 and older. The agency explained that the, "committee concluded that, for people of all ages, the vaccine should only be given when there is a significant risk of chikungunya infection and after a careful consideration of the benefits and risks." The temporary restriction had been in place since May when reports of serious adverse events in elderly individuals surfaced. "Many of the people affected also had other illnesses and the exact cause of these adverse events and their relationship with the vaccine [had not been determined at that time.] Given that studies on Ixchiq mainly involved people below 65 years of age and the vast majority of serious cases concerned people 65 years of age and above, the Committee [temporarily recommended restricting] the use of vaccine [while a review was conducted].

(Source: EMA Announcement, 7/11/25) ♦

COMPANY NEWS

Cerus Corporation has published an update on its regulatory submission of the CE mark application with European regulatory authorities for Intercept Red Blood Cells (RBCs). According to a company news release, the regulatory review is "advancing ahead of plan and th[e] TÜV-SÜD, [the] Notified Body, has completed their review of the clinical module and transferred information to the State Institute for Drug Control (SÚKL) in the Czech Republic, for consultation." Cerus noted in the news release that, "[r]eaching this meaningful milestone enables SÚKL to initiate its review of the active pharmaceutical ingredient (API) module." Additionally, the company explained the significance of this milestone stating, "[i]mportantly, the clinical module that has now been successfully reviewed by TÜV-SÜD included the positive results from the U.S. Phase 3 ReCePI clinical trial, expanding Cerus' CE Mark submission to cover all patient indications for RBC transfusion. SÚKL will now review the API module in the application, before the submission goes back to TÜV-SÜD for completion of manufacturing facility audits and certification prior to CE Mark decision. Under the European Medical Device Regulation (MDR), the CE Mark submission review process for Class III devices such as the Intercept RBC system is rigorous and involves both Notified Bodies and Competent Authorities. The Notified Body evaluates multiple aspects including the manufacturer's quality system and technical documentation to ensure adherence to European regulations. The Competent Authority is responsible for reviewing the active pharmaceutical ingredient manufacturing and safety."

(Source: Cerus Corporation News Release, 7/2/25)

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COMPANY NEWS (continued from page 8)

The **Delta Development Team (DDT)** recently announced that it has been, "selected for a $1.57 million Tactical Funding Increase (TACFI) opportunity by AFWERX, the innovation arm of the Department of the Air Force and a directorate within the Air Force Research Laboratory." According to a news release, "[t]he phase IIB award represents a partnership between DDT, AFWERX, the 59th Medical Wing's Office of the Chief Scientist, the Center for Sustainment of Trauma and Readiness Skills (C-STARS), and Air Mobility Command [and this] funding will accelerate the development of DDT's groundbreaking Total Blood System (TBS)." DDT explained in the announcement that the TBS, "is designed to overcome key challenges in blood management, such as the need for high volumes of cold-stored blood, transport durability during enroute care, and inefficiencies in long-term blood storage. By providing a more efficient, reliable, and safe system for blood storage and transport, TBS is set to enable whole blood transfusions for military personnel and patients suffering from traumatic injuries — ultimately saving lives in critical care situations."

(Source: DDT News Release, 4/18/25)

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.)*

2025

July 29. **America's Blood Centers (ABC) Webinar: "Emerging Infectious Diseases & Malaria Risks: Updates for Blood Centers."** A link to registration and more information are available to ABC members here.

Sept. 10-12. **6th European Conference on Donor Health and Management (ECDHM). Wijk aan Zee, the Netherlands.** Registration is open. More information available here.

Sept. 17-19. **58th Annual Conference of the German Society for Transfusion Medicine and Immunohematology (DGTI). Manheim, Germany.** Registration is open. More information is available here.

Sept. 24-25. **2025 ADRP Master Class: "Building Brighter Experiences: Empowering Customers, Engaging Employees (Virtual).** Registration is open. More information is available here.

Sept. 30-Oct. 1. **3rd Annual European Blood Alliance (EBA) and the International Society of Blood Transfusion (ISBT) Rare Blood Provision Workshop. Bilbao, Spain.** Registration is open. More information is available here.

Oct. 12-15. **American Association of Tissue Banks (AATB) Annual Meeting. Atlanta, Ga.** Registration is open. More information available here.

Oct. 14-15. **International Protein Forum. Old Town Alexandria, Va.** Registration is open. More information is available here.

Oct. 25-28. **AABB Annual Meeting. San Diego, Calif.** Registration is open. More information is available here.

Oct. 26-29. **Blood 2025 and the ISBT 36th Regional Congress. Perth, Australia.** More information available here.

Nov. 12. **2025 ADRP International Showcase.** More information coming soon.

Nov. 13-14. **2025 ABC Women's Executive Leadership Community (WELC) *Rise & Lead Workshop*.** More information available here.

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Nov. 13-14**. EBA Benchmarking Workshop. Amsterdam, Netherlands.** More information coming soon.

Nov. 17-20. **American Society for Clinical Pathology (ASCP) Annual Meeting. Atlanta, Ga.** Registration is open. More information available here.

2026

Feb. 11-12. **4th Biennial International Plasma and Fractionation Association (IPFA) & EBA Symposium on Plasma Collection and Supply. Leuven, Belgium.** More information is available here.

Mar. 9-12. **2026 ABC Annual Meeting. Tucson, Ariz.** More information coming soon.

May 12-14. **2026 ADRP Annual Conference. Minneapolis, Minn.** More information 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

Vice President, Divisional Operations (Rhode Island Blood Center). Rhode Island Blood Center is looking for a strategic, results driven Divisional Vice President to join our leadership team. This key leadership role will oversee the blood collection operations in Rhode Island while ensuring alignment with New York Blood Center Enterprise (NYBCe) strategy. This leader will optimize performance through local teams, leveraging enterprise resources to meet collection targets, enhance donor recruitment, cultivate corporate and community relationships, and maintain regulatory compliance. A strong community connection and deep knowledge of divisional dynamics are critical to success in this role. The Divisional Vice President will ensure seamless communication within the division and collaboration across the enterprise. We offer competitive pay and a comprehensive benefits package. For a complete listing of required qualifications and to apply, click here to visit our careers page.

Donor Recruitment Manager. Vitalant is seeking a results-driven, customer-focused and business-minded **Donor Recruitment Manager** to play a vital role in our community while significantly contributing to our life-saving mission. Your impact as a Donor Recruitment Manager is vital. You will contribute to Vitalant's life-saving mission by overseeing the donor-recruitment team to successfully achieve annual and monthly goals through effective donor recruitment. Achieve recruitment objectives by developing market penetration plans, recruitment strategies, to increase blood donations. **What to Expect: Schedule:** Monday - Friday Days, occasional evenings and weekends. Our comprehensive total rewards support you, your family, and your future with: Medical, dental, and vision insurance, 401K + 5% company match, Tuition assistance up to $5k per year, Free basic life and AD&D insurance, Free short-and-long-term disability insurance, Paid time off, Employee Resource Groups, and Recognition and perks. **As a Recruitment Manager, you'll get to:** Be innovative in developing special recruitment programs to address business needs. Assist in implementing strategic marketing plans, territory alignment, and goal setting. Monitor center resource allocation and scheduling. Build relationships with both internal staff and customers to maintain goal objectives. Ensure adherence to recruitment processes. Please click here to apply.

Medical Director. OneBlood, a nationally recognized blood center collecting over one million donations annually, is seeking an experienced, board-certified Blood Center **Medical Director**. This physician leader will join our team of Transfusion Medicine experts and play a pivotal role in advancing donor and patient safety, transfusion services, therapeutic apheresis, and research collaborations. Our position, located in the state of Florida, includes a competitive salary & benefits package, performance incentives, retirement plan with company contribution plus a company match, vehicle stipend, company-paid holidays, much more. Qualifications include a MD or DO degree, valid/current Florida Medical Doctor license, a minimum of one year of transfusion medicine experience, as well as board subspecialty certification in Blood Banking/Transfusion Medicine recognized by the American Board of Pathology (ABP)

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or equivalent, required. For a complete listing of required qualifications and job description and to apply, visit our ***Careers*** page at www.oneblood.org and search Medical Director to learn more.

Reference Laboratory Technologist. Be part of something bigger; change the world with us by joining **ImpactLife's** team. We are seeking a full-time **Medical Laboratory Scientist/Medical Technologist** to join our Blood Banking team. As a Reference Lab Tech with ImpactLife, you will work in our accredited immunohematology reference laboratory, performing specialized testing to serve local hospital clients. For more information including job details, benefits, and compensation click here: Join Us!

Vice President, Blood Services (Eastern and Western Area - Remote). Vitalant is looking for a bold, visionary leader to join our Blood Services Leadership Team as the **Vice President, Eastern Area**. This is a high-impact role, that will focus on deep community and customer engagement, mobile blood drive success, resource management for both mobile and fixed sites, with local facility and fleet oversight. This position works in a highly collaborative manner with leadership throughout the organization to ensure strategic and collection goals are met. **We're Looking for a Proven Senior Leader Who Can:** Translate enterprise strategy into local execution. Build and lead high-performing teams of senior and mid-level leaders. Cultivate a culture of accountability, learning, and cross-functional partnership. Balance operational excellence with innovation and adaptability. Inspire trust, transparency, and connection across regions and stakeholder groups. What You Can Expect: In this high-impact leadership role, you'll receive a competitive compensation and total rewards package including a robust performance-based bonus plan—reflecting your years of experience and the vital influence this position has on our mission and long-term success. If you're ready to make a measurable impact on public health through quality leadership, we invite you to join us. Interested applicants www.vitalant.org/careers.

Associate Medical Director/Medical Director. Serve as the physician face of Versiti and Versiti Ohio, translating complex medical issues to educate other physicians, support staff and the public. Opportunities in educational initiatives and clinical/applied research are available within Versiti and with our affiliated health systems. As part of the Versiti physician team you will have the opportunity to participate in clinical research projects with investigators at our world-renowned diagnostic laboratory and blood research institute. Joining our Medical Science Institute transfusion medicine physician team will provide you with a uniquely diverse and collaborative experience. Requirements: MD or DO Degree. Board certified/eligible in Blood Banking/Transfusion Medicine. At least three years of experience in blood center/transfusion medicine practice preferred. Licensed or eligible for an Ohio and Indiana; other state licenses may be required. Driver's License in good standing. Please click here to read the full job description and apply.