



ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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2025 #24

August 4, 2025

INSIDE:

- CBER Director Resigns —
CDER Head Named
Acting Director2
- WORD IN WASHINGTON
.....3
- BRIEFLY NOTED.....4
- INFECTIOUS DISEASE
UPDATES4
- ABC Workforce Trends
Survey Opens.....5
- ABC Offers Stop the Bleed
Virtual Trainings for
Members5
- Register for the August 7th
ABC Advocacy Forum ..5
- Register for the SMT
Journal Club Webinar on
August 29th6
- Registration Opens for
August ADRP Webinar:
“Building Lifesavers:
Internal6
- Preparedness and
External Engagement for
High School Donors”6
- “Emerging Infectious
Diseases & Malaria
Risks: Updates for Blood
Centers” Webinar
Recording Available6
- Full Schedule Available for
2025 ADRP Master
Class September 24th-
25th6
- SAVE THE DATE: ABC
WELC *Rise & Lead*
Workshop November
13th-14th7
- MEMBER NEWS.....7
- GLOBAL NEWS8
- COMPANY NEWS9
- CALENDAR.....10
- POSITIONS.....11

CMS Releases Final Rule for FY 2026 Hospital IPPS

The Centers for Medicare & Medicaid Services (CMS) has [published](#) the fiscal year (FY) 2026 final rule for Hospital Inpatient Prospective Payment Systems. The final rule includes a 3.3 percent rate increase which is reduced by a 0.7 percent productivity adjustment resulting in a payment rate increase of 2.6 percent for hospitals over FY 2025. This is 0.2 percent higher than the 2.4 percent rate increase in the proposed rule published in April. Hospitals are not reimbursed separately for blood products. Each year, CMS must reassess the payment rate to reflect hospital reporting of the price of goods and services used to treat all Medicare patients (known as the market basket).

The agency also responded in the final rule to comments regarding an, “Octapharma USA, Inc. application [submitted] for new technology add-on payments for Fibryga® for FY 2026.” CMS stated that, “[w]e appreciate the additional information from the applicant and commenter with respect to whether Fibryga® is substantially similar to existing technologies. However, we disagree with the applicant and commenter that Fibryga® has a new mechanism of action compared to cryoprecipitate and Intercept® Fibrinogen Complex.”

Additionally, CMS explained that, “[regarding] whether a technology is assigned to the same or a different Medicare Severity Diagnosis Related Group (MS-DRG), we agree with the applicant’s assertion in its application that it is not expected that the use of Fibryga® will affect the MS-DRG assignment...In regard to the third criterion, whether a technology treats the same or similar type of disease and patient populations, we disagree that the use of Fibryga® and Intercept® Fibrinogen Complex involves different patient populations or disease types...As we stated previously and in the FY 2022 IPPS/LTCH PPS final rule ([86 FR 45149](#)), the 5-day shelf life post-thaw of Intercept® Fibrinogen Complex makes it immediately available in a ready-to-transfuse form as a fibrinogen source.”

The agency concluded in the final rule discussion on Octapharma’s application for new technology add-on payments for Fibryga® that, “[b]ecause Fibryga® meets all three of the substantial similarity criteria, we believe Fibryga® is substantially similar to the Intercept® Fibrinogen Complex. Therefore, we consider the beginning of the newness period for Fibryga® to begin on the date the Intercept® Fibrinogen Complex became commercially available for the treatment and control of bleeding, including massive hemorrhage, associated with fibrinogen deficiency. Since Intercept® Fibrinogen Complex has been on the U.S. market since May 5th, 2021, the 3-year anniversary date of its entry onto the market occurred prior to FY 2026, and

(continued on page 2)



CMS Releases Final Rule for FY 2026 Hospital IPPS (continued from 1)

therefore, Fibryga® does not meet the newness criterion and is not eligible for new technology add-on payments for FY 2026.”

The final rule was [published](#) today, August 4th, in the *Federal Register*. Additional resources and information regarding the final rule are available on the CMS [website](#). ABC member blood centers are encouraged to provide any feedback or questions to ABC Vice President of Government Affairs [Diane Calmus, JD](#). ABC will continue to provide updates on its advocacy efforts as they become available.

(Source: CMS [Final Rule](#), 8/4/25) ♦

CBER Director Resigns — CDER Head Named Acting Director



Vinay Prasad, MD, MPH [resigned](#) as director of the U.S. Food and Drug Administration’s (FDA) Center for Biologics Evaluation and Research (CBER) on July 29th. He succeeded Peter Marks, MD, PhD in May following his departure from the agency in April 2025. Dr. Prasad also served as a top adviser to FDA Commissioner Martin Makary, MD, MPH in his role as FDA Chief Medical and Scientific Officer. A spokesperson for the U.S. Department of Health and Human Services (HHS) told *STAT News*, “Dr. Prasad did not want to be a distraction to the great work of the FDA in the Trump administration and has decided to return to California and spend more time with his family. We thank him for his service and the many important reforms

he was able to achieve in his time at FDA.”

George Tidmarsh, MD, PhD, recently [named](#) director of the Center for Drug Evaluation and Research (CDER) at FDA, will [serve](#) as CBER’s Acting Director while the search begins for a new CBER director. [Dr. Tidmarsh](#) has over 30 years of experience in biotechnology, clinical medicine, and regulatory science. He earned his, “medical degree and doctorate in cancer biology from Stanford, where he completed his residency training in pediatrics. He went on to complete two subspecialty programs at Stanford, one in pediatric oncology and another in neonatology.”



(Sources: *STAT News*, “[Vinay Prasad, a powerful FDA official, departs after controversy over rare disease drug](#),” 7/29/25; *STAT News*, “[FDA names drug regulator Tidmarsh acting head of biologics center after Prasad’s exit](#),” 7/30/25) ♦

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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



Susan Monarez, PhD has been [confirmed and sworn in](#) as director of the U.S. Centers for Disease Control and Prevention (CDC). According to an agency news release, Dr. Monarez will, “lead [CDC] in its renewed mission to prevent disease and defend against health threats at home and abroad — advancing President Trump’s and HHS Secretary Kennedy’s broader vision to ‘Make America Healthy Again.’” She most recently served as, “acting director of the CDC and deputy director for the Advanced Research Projects Agency for Health (ARPA-H), where she transformed the U.S. Department of Health and Human Services (HHS) operating division’s data collection, disease detection, and treatment technologies. [Dr. Monarez] has held previous leadership and advisory roles with Biomedical Advanced Research and Development Authority (BARDA) at HHS, the Department of Homeland Security (DHS), the White House’s Office of Science and Technology Policy, and the National Security Council. [She] earned her PhD in microbiology and immunology from the University of Wisconsin–Madison, where she conducted research on developing technologies aimed at the prevention, diagnosis, and treatment of infectious diseases. [Dr. Monarez] completed her post-doctoral research fellowship at the Stanford University School of Medicine.”

(Source: CDC [News Release](#), 7/31/25)

The U.S. Food and Drug Administration’s (FDA) Center for Biologics Evaluation and Research (CBER) Office of Therapeutic Products (OTP) has [announced](#) that a virtual public listening meeting regarding “Leveraging Knowledge for Facilitating the Development and Review of Cell and Gene Therapies” will take place on September 18th from 10 a.m. to 4 p.m. EDT. [Registration](#) is open. The meeting aims to, “solicit perspectives from cell and gene therapy (CGT) manufacturers and other stakeholders on leveraging prior knowledge and experience to facilitate product development and application review.” The FDA has noted that, “speakers will be asked to share how internal prior and public knowledge can be leveraged to help advance development and regulation of CGT products. The meeting will be divided into three sessions. Speakers in all sessions are asked to consider the following questions when crafting their remarks, and are encouraged to discuss examples specific to the session of interest and recommendations from a chemistry, manufacturing, and controls (CMC), nonclinical, or clinical perspective:

- [w]hat types of data and information are Sponsors willing to share that will be useful for advancing CGT product development and regulatory review?
- What data leveraging is possible between external partners (such as CMOs, CDMOs, and licensees) while considering various aspects of product lifecycle?
- How can data and information be effectively integrated and leveraged across multiple disciplines to enhance the development, manufacturing, and safety assessment of CGT products?
- What mechanisms could be used to facilitate data and information sharing?”

Requests to speak may be made during the registration process. FDA has also opened a, “[docket](#) and is accepting electronic or written comments which must be submitted no later than 11:59 p.m. EDT on October 17th.”

(Source: FDA [Announcement](#), 7/24/25) 💧



BRIEFLY NOTED

A U.S. District Court for the Central District of Illinois recently ruled that text messages are not subject to the Telephone Consumer Protection Act's (TCPA) Do-Not-Call (DNC) requirements, according to a [report](#) by Polsinelli Law Firm. A communication published by Polsinelli on July 29th listed key takeaways as:

- “[c]ompanies sued for TCPA violations should consider challenging the allegations at the outset by moving to dismiss, rather than conceding based on out-of-date precedent and answering the complaint;
- [t]he TCPA is in a particularly volatile state as more courts are beginning to see merit in challenges to Federal Communications Commission (FCC) Orders. These changes follow the Supreme Court’s rulings in *Loper Bright and McLaughlin*, and the Eleventh Circuit’s ruling striking down the FCC’s proposed ‘one-to-one consent’ rule, holding that the FCC had exceeded its statutory authority by imposing additional restrictions that were not supported by the TCPA’s text. *Ins. Mktg. Coalition Ltd. v. Fed. Commun. Comm’n*, 127 F.4th 303 (11th Cir. 2025);
- [t]hese rulings suggest further vulnerability of FCC interpretations of the TCPA, including the FCC’s rulings that ‘express consent’ means ‘written consent’ and that intermediate telephone carriers might be liable for ‘making’ calls; [and]
- [a] split has developed among district courts in Oregon and Illinois with respect to how the TCPA applies to text messages, so while defendants might be emboldened to challenge text-related TCPA claims, there is no guarantee these challenges will be successful. Best practices regarding compliance with the TCPA should remain the same.”

(Source: Polsinelli Law Firm [Communication](#), 7/29/25) 💧

INFECTIOUS DISEASE UPDATES

CHIKUNGUNYA

The U.S. Centers for Disease Control and Prevention (CDC) has [issued](#) a level two travel notice for individuals to “practice enhanced precautions” when traveling to China’s Guangdong Province due to an outbreak of chikungunya. The agency is recommending vaccination for travelers visiting the area. “Two chikungunya vaccines are licensed in the U.S.: [a] live-attenuated vaccine (Ixhiq) for use in adults aged ≥18 years; [and a] virus-like particle vaccine (Vimkunya) for use in adolescents and adults aged ≥12 years. According to CDC, “chikungunya disease is caused by the chikungunya virus and is spread to humans through mosquito bites.” *Newsweek* reported that China’s health authorities [estimated](#) approximately 5,000 chikungunya infections in Guangdong province. [Transfusion-transmission](#) of chikungunya has not been described and any risk to the blood supply is believed to be theoretical.

(Source: CDC [Travel Notice](#), 8/1/25)

MEASLES

The CDC has [published](#) an update regarding measles outbreaks. As of the July 29th, there have been 29 measles outbreaks (defined as three or more related cases) in the U.S. this year resulting in 1,333 confirmed cases, 169 hospitalizations (13 percent) and three confirmed deaths, the first in the U.S. since 2015. According to the agency the cases have been reported by 40 jurisdictions: Alaska, Arkansas, Arizona, California, Colorado, Florida, Georgia, Hawaii, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maryland, Michigan, Minnesota, Missouri, Montana, Nebraska, New Jersey, New Mexico, New York City, New York State, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, and Wyoming with 87 percent of cases (1,156 of 1,333) being outbreak-associated. In 2024, the U.S. reported 285 total cases. Last week on July 28th, Canada [reported](#) that it has confirmed 3,878 measles cases. [Transfusion-transmission](#) of measles has never been demonstrated, and any risk to the blood supply is believed to be theoretical.

(Sources: CDC [Update](#), 7/30/25) 💧



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 Opens

America's Blood Centers (ABC) has launched its Workforce Trends Survey. 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. We encourage all members to participate. The survey analyzes overall trends in compensation, benefits, and human resources (HR) policies and provides specific data for 74 different blood center employee roles. It 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. The survey combines the previous Compensation & Benefits and Employee Turnover & Retention surveys. Please [contact us](#) with any questions or to add/change authorized individuals.

ABC Offers Stop the Bleed Virtual Trainings for Members

ABC is pleased to announce an opportunity to help certify ABC members as Stop the Bleed Trainers. As part of a national [partnership](#) between ABC and Stop the Bleed, ABC will host three virtual training sessions taking place on:

- August 6th at 2 p.m. EDT
- August 12th at 4 p.m. EDT; and
- August 21st at 2 p.m. EDT.

Registration is open to ABC members. Additional information and links to register for the training are available [here](#). During these training sessions, Stop the Bleed Senior Manager Jimm Dodd, MPAS, MA, U.S. Army (Ret.), will spend the first 30 minutes covering new marketing resources available to blood centers. He will also discuss the rollout of a new Stop the Bleed portal, including instructions for logging into the portal, navigating the system, and guidance through the instructor registration process, before leading a training session. Participants are asked to complete the [online pre-training activity](#) prior to attending a virtual session. Please [contact us](#) with questions.

Register for the August 7th ABC Advocacy Forum

Registration is open for the America's Blood Centers (ABC) Advocacy Forum webinar: "How to Host an Advocacy Focused Meeting or Tour in Your Blood Center." This virtual event will be held at 2 p.m. EDT on Thursday, August 7th as ABC members will gain insights on how to advocate within your blood center, how to coordinate with Congressional offices, what asks you should make, and best practices to further grow the relationship." ABC staff will also provide new and updated advocacy resources that blood centers can use to best prepare for these kinds of events. Additional information and a link to registration are available to ABC members [here](#). Please [contact us](#) with any questions.

(continued on page 6)

INSIDE ABC (continued from 5)

Register for the SMT Journal Club Webinar on August 29th

Registration is open for the next ABC Scientific, Medical, and Technical (SMT) Journal Club webinar on August 29th at 12 p.m. EDT. The webinar is complimentary for all ABC members as this virtual event will review two scientific/medical articles followed by open discussion by participants, presenters, and article authors. The articles to be reviewed are listed below:

- [Fatal hemolytic disease of the newborn due to anti-B isohemagglutinin: An unfamiliar presentation of a familiar disease](#) (*Transfusion*); and
- [Food and inhaled allergens may play a more prominent role in allergic transfusion reactions than previously recognized](#) (*Transfusion*).

A Continuing Medical Education (CME) credit (1.0) is now offered for all ABC SMT Journal Club webinars upon completion of the activity and evaluation. Additional information and a link to registration are available to ABC members [here](#). Please [contact us](#) with any questions.

Registration Opens for August ADRP Webinar: “Building Lifesavers: Internal Preparedness and External Engagement for High School Donors”

[Register](#) for the Wednesday, August 27th at 1 p.m. EDT titled: “[Building Lifesavers: Internal Preparedness and External Engagement for High School Donors](#).” Don’t miss the chance to explore insights and tips for, “educating and empowering both internal team members as well as external partners in the high school blood donation journey. Learn how to enhance staff readiness, support coordinators, and guide young donors through the process with confidence.” The webinar also will feature a review of ABC’s & ADRP’s [Vein to Vein](#) program, a powerful tool to enrich donor education and engagement. Please [contact us](#) with questions.

“Emerging Infectious Diseases & Malaria Risks: Updates for Blood Centers” Webinar Recording Available

A recording of the July 29th ABC Webinar: “Emerging Infectious Diseases & Malaria Risks: Updates for Blood Centers” is [available](#) for ABC members. This event featured ABC Chief Medical Officer Jed Gorlin, MBA, MD and OneBlood Chief Medical Officer Rita Reik, MD, FCAP. Please [contact us](#) with any questions.

Full Schedule Available for 2025 ADRP Master Class September 24th-25th

[Register](#) for the [2025 ADRP Master Class](#) taking place September 24th-25th. The [complete two-day schedule](#) has now been released. This year’s theme is “Building Brighter Experiences: Empowering Customers, Engaging Employees.” [See why you should attend](#). 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. Don’t miss keynote speakers [Janice Honeycutt Hering](#) and [Dave Murray](#) help attendees identify the components of a culture that promotes satisfaction and engagement, while discussing and sharing insights for taking small steps to make your donor experience the most significant competitive advantage for your organization. Please [contact us](#) with questions.

(continued on page 7)

INSIDE ABC (continued from 6)

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

Rise & Lead

A WOMEN'S LEADERSHIP WORKSHOP

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 this month. 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. 💧

MEMBER NEWS

San Diego Blood Bank [collected](#) approximately 3,300 pints of blood as part of the 49th Robert A. Heinlein Blood Drive at Comic-Con International. "We are deeply honored to celebrate the incredible success of the 49th Annual Robert A. Heinlein Blood Drive," said San Diego Blood Bank Chief Executive Officer (CEO) Doug Morton in a news release. "This outstanding achievement reflects the spirit of generosity and community that defines this long-standing tradition. We are profoundly grateful for our enduring partnership with Comic-Con and for every donor who rolled up their sleeves to make a difference." David Glanzer, a spokesperson for Comic-Con added in the news release, "[w]e 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 San Diego Blood Bank, the partnership has resulted in, "more than 93,000 pints of blood have been donated by Comic-Con attendees, exhibitors, professionals, volunteers, and staff, potentially impacting more than 279,000 lives over the course of the last 49 years."

(San Diego Blood Bank [News Release](#), 7/27/25)

New York Blood Center (NYBC) recently [partnered](#) with Paramount and cast members of SHOWTIME's *Dexter Resurrection* series to raise awareness of the ongoing need for blood donations. According to an NYBC announcement, the Empire State Building was lit up bright red on the evening of July 8th to, "symboliz[e] both the iconic aesthetic of the *Dexter* series and the urgent need for blood donations during the summer, when donations drop and trauma cases increase. [NYBC also] hosted a public blood drive on the 52nd floor of the Empire State Building," on July 8th. Michael C. Hall, James Remar, David Zayas, Jack Alcott, and Kadia Saraf from the *Dexter Resurrection* cast joined NYBC representatives to support the importance of blood donation.



(Source: NYBC [Announcement](#), 7/11/25) 💧

GLOBAL NEWS

The Times of India is [reporting](#) the discovery of the first-ever CRIB antigen found in a female patient from Karnataka, India. The news outlet explained that the, “finding came to light when she was admitted for cardiac surgery and her blood type was found to be incompatible with all available O positive donor units, despite being categorized as O Rh+. The case was escalated to the Rotary Bangalore TTK Blood Centre and later to the International Blood Group Reference Laboratory (IBGRL) in the United Kingdom, leading to the identification of [the new CRIB antigen.” Following ten months of additional research and molecular testing, “international experts identified a new antigen in the Cromer (CR) blood group system. In recognition of its origin, the antigen was officially named CRIB — with ‘CR’ representing Cromer and ‘IB’ for Bengaluru (Bangalore), India.”

(Source: *The Times of India*, “[World’s first rare blood group found in Bangalore woman, marking a historic medical discovery](#),” 8/3/25)

NHS Blood and Transplant, the national blood provider for England and transplant services for the United Kingdom (UK), has [announced](#) that 77,000 blood donors have been genotyped, “a groundbreaking step towards personalized, precision-matched blood.” According to NHSBT, this is the, “first time that blood groups have been DNA tested on this scale in the UK and could mark the beginning of a significant change in how blood is matched [with the goal of] reducing transfusion-related side effects and reducing the risk of reactions from transfusions.” The work is part of the STRIDES National Institute for Health and Care Research (NIHR) BioResource study carried out by the NIHR Blood and Transplant Research Unit in Donor Health and Behaviour, [which] was created to improve donor experience and to establish the STRIDES NIHR BioResource. Kate Downes, director of the Genomics Program at NHSBT added in the news release, “[h]aving the ability to genotype 77,000 donors as a part of the NIHR STRIDES BioResource study is extremely significant — this inventory of blood will enhance our capacity to find units with rare blood groups for difficult to match patients as well as provide better matched units for patients who have an increased risk of transfusion reactions, aiding us in our mission to save and improve even more lives.”

(Source: NHSBT [News Release](#), 7/23/25)

Donor eligibility criteria has been [revised](#) for individuals in Australia who are cancer survivors, according to the Australian Red Cross Lifeblood if, “they have written confirmation from their doctor that they are in remission and meet all other health criteria.” A July 25th announcement explained that, “[those who] have fully recovered from many cancers can now donate blood and plasma in Australia 12 months after finishing treatment.” Previously, cancer survivors were deferred for five years. Data published by the Kirby Institute, “revealed that over half (54 percent) of the population believed having cancer made people ineligible to give blood for life. Another 28 percent of the population were unsure, highlighting a large misconception that could be hindering donations. [Additional research from Lifeblood found that the,] five-year wait could be safely reduced to 12 months, with international evidence showing it’s not necessary for donor or patient safety. Large-scale studies have confirmed that cancer is not transmissible through blood transfusion. As with all changes to blood donation rules, this change has been approved by the Therapeutic Goods Administration (TGA),” the country’s regulatory authority.

(Source: Australian Red Cross Lifeblood [Announcement](#), 7/25/25)

The European Medicines Agency (EMA) and the Heads of Medicines Agencies (HMA) [published](#) recommendations last month in response to vulnerabilities and gaps in the anti-D immunoglobulins supply chain. The recommendations include:

(continued on page 9)

GLOBAL NEWS (continued from page 8)

- “European Union (EU) Member States are recommended to create plans to secure the supply of anti-D immunoglobulins in the EU, guided by relevant safety, legal, ethical, and regulatory aspects. These plans should also focus on reducing unnecessary use, for example through non-invasive pre-natal screening;
- [c]ountries should support development and validation of alternatives to these medicines through research and funding and create prioritization guidelines to manage shortage;
- [i]n addition, they should implement communication campaigns to increase awareness of plasma collection for the development of plasma-derived medicinal products, such as anti-D immunoglobulins;
- [t]he European Commission is encouraged to identify measures to ensure supply continuity of these medicines and support and coordinate Member States’ activities. Policy measures set out in the proposed Critical Medicines Act could be leveraged, such as joint procurement of manufacturing services to establish or increase supply of these medicines to the EU; [and]
- industry should ensure the adequate supply of anti-D immunoglobulins in Europe, including through investments in optimizing manufacturing capacity and developing alternatives to plasma-derived anti-D immunoglobulins.”

(Source: EMA & HMA [Announcement](#), 7/4/25) 💧

COMPANY NEWS

Cerus Corporation recently announced that it has been [awarded](#), “an additional \$7.2 million contract amendment by the U.S. Department of Defense (DoD) Industrial Base Analysis and Sustainment (IBAS) program for the development of lyophilized Pathogen Reduced, Cryoprecipitated Fibrinogen Complex (commonly referred to as Intercept Fibrinogen Complex, or IFC, and, as lyophilized, LyoIFC) to treat bleeding due to trauma.” According to a company news release, the funds will be used for a, “randomized study comparing the use of pre-thawed IFC to conventional cryoprecipitated antihemophilic factor (CRYO-AHF) in trauma associated hemorrhagic shock patients. [It will be a two-cohort,] 320 patient study using hospital cluster randomized treatment blocks for trauma associated hemorrhagic shock. Patients must be admitted to hospital in less than 60 minutes from trauma injury, have an admission fibrinogen < 200 mg/dL (low fibrinogen also called hypofibrinogenemia) determined by point of care testing. During IFC treatment blocks, patients will receive IFC within 60 minutes of hospital admission. During conventional treatment blocks, patients will receive CRYO-AHF when ordered.” Cerus added in the news release that primary objectives of the study include to:

- “[d]etermine the ability of IFC to increase low plasma fibrinogen concentration in trauma patients;
- [c]haracterize the safety of IFC in patients with hypofibrinogenemia, including sub-analyses in patients with blunt versus penetrating trauma; and
- [d]etermine the proportion of trauma associated hemorrhagic shock patients admitted with hypofibrinogenemia as determined by rapid point of care testing.”

Cerus had previously received an estimated \$18 million in funding from the DoD contract. The company plans to begin enrollment in the study by the mid-way point of 2026.

(Source: Cerus Corporation [News Release](#), 7/21/25)

Abbott and the **Big Ten Conference** are [partnering](#) for season two of the “We Give Blood” campaign that pits students, fans, and alumni of Big Ten Conference schools in a friendly blood drive competition throughout the college football season. In the campaign’s inaugural year, “We Give Blood” inspired, “[n]early 20,000 Big Ten students, alumni, and fans across the country [to donate] blood as part of the competition,”

(continued on page 10)

COMPANY NEWS (continued from page 9)

according to an Abbott [news release](#). “With each donation saving up to three lives, the competition helped save as many as 60,000 lives. The competition did its part to help alleviate current nationwide blood shortages and educate people about the need for blood while inspiring blood donations across the country” The blood drive competition aimed to, “help build the next generation of blood donors during a time when the nation is experiencing one of the biggest blood short-ages in a generation and has seen the rate of donors between 19- and 24-years-old drop by nearly a third in recent years. More than half of donors [of the] ‘We Give Blood’ campus blood drives donated blood for the first time.” The University of Nebraska-Lincoln [won](#) season one of “We Give Blood” and [received](#) a \$1 million contribution from Abbott.

(Source: Abbott & Big Ten Conference [Announcement](#), 7/30/25) ♦

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

August 6. **America’s Blood Centers (ABC) Stop the Bleed Training Session (Virtual)**. A link to registration and more information are available to ABC members [here](#).

August 7. **ABC Advocacy Forum Webinar: “How to Host an Advocacy Focused Meeting or Tour in Your Blood Center.”** A link to registration and more information are available to ABC members [here](#).

August 12. **ABC Stop the Bleed Training Session (Virtual)**. A link to registration and more information are available to ABC members [here](#).

August 21. **ABC Stop the Bleed Training Session (Virtual)**. A link to registration and more information are available to ABC members [here](#).

August 29. **ABC Scientific, Medical, and Technical (SMT) Journal Club Webinar**. More information will be available soon.

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)**. Mannheim, 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. 28. **U.S. Food and Drug Administration (FDA) Center for Biologics Evaluation and Research (CBER) Office of Therapeutic Products (OTP) Public Listening Meeting: “Leveraging Knowledge for Facilitating the Development and Review of Cell and Gene Therapies” (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](#).

(continued on page 11)

CALENDAR (continued from page 10)

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 is coming soon.

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

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

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

Director of Technical Services (LIFELINE Blood Services). The Director of Technical Services manages and supervises technical staff including laboratory, distribution, and components. The Director of Technical Services must meet the regulatory responsibilities and demonstrate active involvement in the laboratory’s operation and be available to the laboratory staff onsite, phone, or electronic consultation. The Director of Technical Services is responsible for the overall operation and administration of the laboratory, including the employment of competent qualified personnel. Even though there is the option to delegate some responsibilities, the Director is ultimately responsible and must ensure that all the duties are properly performed and applicable CLIA regulations are met. It is the responsibility of the Director of Technical Services to ensure that your laboratory develops and uses a quality system approach to laboratory testing that provides accurate and reliable test results. Refer to Code of Federal Regulations Title 42 Part 493, Laboratory Requirements. Education: Medical Technologist with Bachelor’s Degree in Medical Technology or chemical, physical, or biological science. Individual must hold a

Current State of Tennessee Supervisor License. A Specialist in Blood Bank (SBB) certification is preferred. Experience: Five years of experience as a working Medical Technologist. Three years of Management or Supervisory experience. as a Specialist in Blood Bank preferred. Has a working knowledge of cGMP, AABB, CLIA and CFR blood banking requirements. Click [here](#) to view the full job description and apply.

Lead Quality Control Specialist. Gulf Coast Blood is seeking a Lead Quality Control Specialist! This key role supports quality assurance by preparing and testing blood component samples to ensure safety and effectiveness for patients and hospitals throughout the Texas Gulf Coast region. It’s ideal for detail-driven individuals who uphold high standards and contribute meaningfully to patient outcomes. Showcase your expertise by performing advanced quality control testing, managing lab operations in the absence of supervisors, and responding to critical

(continued on page 12)

POSITIONS (continued from page 11)

situations such as positive bacterial cultures. You'll initiate recall procedures, track and trend QC results, train new hires, coordinate workflow, and recommend process improvements, all while ensuring compliance with lab standards and supporting patient safety. **Why join us?** We offer a competitive salary, full benefits, free parking at the Texas Medical Center, and opportunities for a sign-on bonus and relocation assistance to support a smooth transition. Enjoy professional development and career advancement opportunities while making a meaningful difference every day. **Qualifications:** MT/MLS certification (ASCP or equivalent) with at least two years of hematology experience. Flow cytometry experience is a plus. This role operates Monday through Friday, 7:00 AM to 3:00 PM. If you embody integrity, commitment, and respect, [apply now](#) and help make a difference!

Consultation & Reference Lab Tech III – Weekend Shift. Gulf Coast Blood is seeking a Consultation & Reference Lab Tech III – Weekend Shift! This key role supports advanced testing and preparation of special blood components for patients and donors, serving over 170 hospitals across the Texas Gulf Coast region. Ideal for detail-oriented professionals who value precision, quality, and meaningful community impact. Showcase your expertise by performing advanced antibody identification, compatibility testing, and donor serological testing to support life-saving transfusions. You'll prepare consultation reports, process sample requests, maintain specialized blood component inventory, perform quality control, and ensure compliance with all lab standards, directly impacting patient care. **Why join us?** We offer a competitive salary, full benefits, free parking at the Texas Medical Center, and opportunities for a sign-on bonus and relocation assistance to support a smooth transition. Enjoy professional development and career advancement opportunities while making a meaningful difference every day. **Qualifications:** MT/MLS certification (ASCP or equivalent) and at least two years of recent blood banking experience. New graduates are also encouraged to apply. This full-time role operates Friday through Sunday, 7:00 a.m. to 7:00 p.m.. If you embody integrity, commitment, and respect, we encourage you to [apply now](#) and help make a difference!

Consultation & Reference Lab Tech III – Night Shift. Gulf Coast Blood is seeking a Consultation & Reference Lab Tech III – Night Shift! This key role supports advanced testing and preparation of special blood components for patients and donors, serving over 170 hospitals across the Texas Gulf Coast region. Ideal for detail-oriented professionals who value precision, quality, and meaningful community impact. Showcase your expertise by performing advanced antibody identification, compatibility testing, and donor serological testing to support life-saving transfusions. You'll prepare consultation reports, process sample requests, maintain

specialized blood component inventory, perform quality control, and ensure compliance with all lab standards, directly impacting patient care. **Why join us?** We offer a competitive salary, full benefits, free parking at the Texas Medical Center, and opportunities for a sign-on bonus and relocation assistance to support a smooth transition. Enjoy professional development and career advancement opportunities while making a meaningful difference every day. **Qualifications:** MT/MLS certification (ASCP or equivalent) and at least two years of recent blood banking experience. New graduates are also encouraged to apply. This position operates Wednesday through Saturday, 10:00 p.m. to 8:00 a.m. If you embody integrity, commitment, and respect, we encourage you to [apply now](#) and help make a difference!

Consultation & Reference Lab Tech III – Evening Shift. Gulf Coast Blood is seeking a Consultation & Reference Lab Tech III – Evening Shift! This key role supports advanced testing and preparation of special blood components for patients and donors, serving over 170 hospitals across the Texas Gulf Coast region. Ideal for detail-oriented professionals who value precision, quality, and meaningful community impact. Showcase your expertise by performing advanced antibody identification, compatibility testing, and donor serological testing to support life-saving transfusions. You'll prepare consultation reports, process sample requests, maintain specialized blood component inventory, perform quality control, and ensure compliance with all lab standards, directly impacting patient care. **Why join us?** We offer a competitive salary, full benefits, free parking at the Texas Medical Center, and opportunities for a sign-on bonus and relocation assistance to support a smooth transition. Enjoy professional development and career advancement opportunities while making a meaningful difference every day. **Qualifications:** MT/MLS certification (ASCP or equivalent) and at least two years of recent blood banking experience. New graduates are also encouraged to apply. This full-time role operates from Sunday through Wednesday, 11:00 AM to 9:00 PM. If you embody integrity, commitment, and respect, we encourage you to [apply now](#) and help make a difference!

Manager, Regional Development. Be part of something bigger; change the world with us by joining **ImpactLife's team**. We are seeking a **Manager, Regional Development**, to lead donor engagement and blood drive development efforts across Central Illinois. In this key leadership role, you'll guide a dynamic regional team in growing our mission to connect donors and patients through life-saving blood collections. This role requires direct supervision of a regional team. This position can be located at our Peoria, Springfield, or Urbana, Illinois locations. For more information including job details, benefits, and compensation click here: [Change the World With Us](#).

(continued on page 13)

POSITIONS (continued from page 12)

Cell Therapy Technologist (Carter BloodCare). The Cell Therapy Technologist 1 (CTT1) participates in activities in the Cellular Therapy Laboratory. These activities include, but may not be limited to, cellular therapy (CT) processing, performing and troubleshooting quality control of reagents and equipment, participating in educational instruction of students and new employees, familiarity and full compliance with all CT and general laboratory regulations, and participating in design and implementation of new methodology for processing CT products. A CTT1 ensures daily operations within the department meet and follow all established guidelines and provide excellence in service and patient care. Ability to work a flexible schedule, long and/or odd hours with little notice. Regular full-time attendance is required during normal working hours. This position requires a valid driver's license. **Education:** MT (ASCP), MLS(ASCP) or equivalent, or eligible with certification obtained within 90 days of hire. Bachelor of Science Degree in Clinical Laboratory Science, Medical Laboratory Science, Medical Technology, or a related field in laboratory science. **Experience:** Minimum of one year of experience as an MT/MLS. Equal Opportunity Employer: Disability/Veteran. Apply at www.carterbloodcare.org, click Careers & search for job Cell Therapy Tech or Cell Therapy Technologist.

Instructor – Phlebotomy (Carter BloodCare). Under the direction of the Education Coordinator, the Instructor is responsible for the training and continuing education of the Collection Services staff in all procedures involved in the blood collection process (i.e., medical history, donor lookup, phlebotomy, quality control, apheresis, CPR). This position ensures trainees receive applicable clinical experience, safely perform all required skills, and successfully complete competency testing. The Instructor plans for and guides the learning process to help students achieve the objectives required within the allotted time. This position maintains open communication with supervisory staff and informs them of employee progress. This position creates schedules, inputs data, and runs reports. Adequate transportation is necessary to travel to and from all donor centers/mobile drives to perform competency evaluations and retraining in a timely and efficient manner. This position adheres to all regulations and requirements set forth by the Food and Drug Administration (FDA), American Association of Blood Banks (AABB), CBC, and departmental policies and procedures. This position must be available to work any shift, including nights and weekends. Regular full-time attendance is required during normal working hours. Education: High School Diploma or equivalent. Experience: Six (6) months of supervisory experience required. Minimum of one year of blood banking, preferred. Six (6) months of apheresis experience, preferred. Teaching experience (professional and informal), preferred. Equal Opportunity Employer: Disability/Veteran. www.carterbloodcare.org, click Careers & search for job #49098. 💧