

2025 #28

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## 2026 Call for Applicants Opens: ABC Executive Fellows Program

America's Blood Centers (ABC) in partnership with Vanderbilt University's Owen School of Management is now [accepting applications](#) until October 27<sup>th</sup> for the [Executive Fellows Program \(EFP\)](#). This groundbreaking



**Executive  
Fellows  
Program**  
An Initiative of America's Blood Centers

initiative offers industry-specific, best-in-class leadership training to blood community executives, elevating individuals, organizations, and the nation's blood supply. "Participating in the ABC Fellowship program has been an incredible journey highlighted by the unforgettable experience," said Mahtab Khan, a 2025 executive fellow. "[The media] training and health economics was fantastic learning that will last a lifetime."

The program will accept an annual cohort of up to 25 fellows who will participate in:

- "a week-long leadership residency at Vanderbilt;
- three additional in-person learning immersions;
- virtual seminars taught by Vanderbilt faculty;
- a 360-leadership assessment;
- individual executive coaching; and
- a capstone project presented at ABC Annual Meeting 2027.

The EFP strives to accept participants from a wide variety of backgrounds and leadership roles. Final selections for the 2026 cohort will occur by December 2025. An independent selection committee is responsible for choosing each year's cohort. Senior leaders from ABC member blood centers, hospital-associate members, affiliate organizations, and industry partners are encouraged to apply. "I appreciate the diverse group of talented individuals that were selected for the first cohort," explained Jennifer Lindberg, 2025 executive fellow. "I have enjoyed getting to know everyone and building relationships that will last and be so valuable for the years to come."

The Foundation for America's Blood Centers (FABC) is pleased to announce up to \$20,000 in partial scholarships for individuals employed by ABC active member blood centers. Additional information regarding tuition rates is available [here](#).

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### 2026 Call for Applicants Opens: ABC Executive Fellows Program (continued from page 1)

Through the EFP, individuals will be uniquely equipped with the business acumen and executive skill set needed to succeed in the blood community's ever-evolving environment. Key dates for the program include:

- March 12<sup>th</sup>, 2026: In-person cohort kickoff and learning immersion, Tuscon, Ariz.;
- June 2026: ABC Advocacy Summit, Washington, D.C.;
- October 2026: In-person Leadership Residency, Nashville, Tenn.; and
- March 2027: In-person learning immersion, 2027 ABC Annual Meeting.

Additional information on the EFP can be found on the program's [website](#). Please [contact us](#) with questions.



### **FDA Revokes COVID-19 Convalescent Plasma Emergency Use Authorization**

The U.S. Food and Drug Administration (FDA) has revoked the emergency use authorization (EUA) for COVID-19 convalescent plasma (CCP) for transfusion as of August 27<sup>th</sup>, 2025. According to the agency, Revocation notices for COVID-19 drug and biological product EUAs are available at [Emergency Use Authorization--Archived Information](#).


Additionally, FDA's associated guidance document titled, "[Investigational COVID-19 Convalescent Plasma](#)," dated October 2023, has been withdrawn. The agency's guidance document titled, "[Recommendations for Investigational and Licensed COVID-19 Convalescent Plasma](#)," dated July 2024, provides the current recommendations to blood establishments for the submission of a Biologics License Application (BLA) to manufacture CCP. This guidance also provides FDA's recommendations for Investigational New Drug applications (INDs) for investigational CCP for transfusion.

Blood centers should refer to the July 2024 guidance for details about CCP. Other items of note include:

- FDA revoked the EUA for CCP because a variety of circumstances have changed, including that FDA has received supplemental BLAs to manufacture licensed CCP for the treatment of COVID-19 patients with immunosuppressive disease or receiving immunosuppressive treatments.
- Licensed CCP is available. The distribution of CCP that is not covered in an approved BLA must be under an applicable IND (21 CFR 312).
- FDA does not intend to object to the use of any remaining CCP inventory that was distributed before the revocation of the EUA, as outlined in Section IV of the July 2024 guidance document.

FDA is encouraging blood establishments interested in manufacturing licensed or investigational CCP to refer to its guidance document: "[Recommendations for Investigational and Licensed COVID-19 Convalescent Plasma](#)," dated July 2024.

Blood establishments with questions about their regulatory submissions should contact FDA's Office of Blood Research and Review (OBRR) at the Center for Biologics Evaluation and Research (CBER) directly through the Regulatory Project Managers. For general questions, blood establishments may send questions to FDA's OBRR/Blood and Plasma Branch mailbox at: [cberobrrbpbinquiries@fda.hhs.gov](mailto:cberobrrbpbinquiries@fda.hhs.gov).

(Source: FDA Announcement, 8/27/25) 

## Platelet Transfusion 2025 AABB and ICTMG International Clinical Practice Guidelines Published

Authors of a special communication [published](#) in *JAMA* provide “updated recommendations” from the 2025 Association for the Advancement of Blood & Biotherapies (AABB) and the International Collaboration for Transfusion Medicine Guidelines (ICTMG) international clinical practice guidelines for platelet transfusion. The guidelines are meant to serve as, “practical advice on appropriate use of platelets.” The paper noted that the, “primary perspective is the individual patient/family, including medical, psychological, and financial impacts. A secondary perspective is public health, including security of the blood supply. [A systematic review] informed recommendations, with searches of randomized clinical trials (RCTs) and observational studies evaluating platelet transfusions published from 1950 to April 2024.” The authors further explained that, “[w]hile placing a high value on mortality reduction, the panel accepted the remaining possibility of a small increase in mortality or bleeding with a restrictive strategy.” The paper found that, “that restrictive platelet transfusion strategies probably did not result in important increases in mortality (Absolute risk differences (ARD) ARD, -0.4 percent [95 percent CI, -2.2 percent to 1.7 percent]), World Health Organization (WHO) grade 2-4 bleeding (ARD, 6.8 percent [95 percent CI, 0.9 percent to 12.8 percent]), or WHO grade 3-4 bleeding (ARD, 0.3 percent [95 percent CI, -1.4 percent to 2.4 percent]).” Recommendations from the panel included: “Recommendation 1.1: in nonbleeding patients with hypoproliferative thrombocytopenia actively receiving chemotherapy or undergoing allogeneic stem cell transplant, platelet transfusion should be administered when the platelet count is less than  $10 \times 10^3/\mu\text{L}$  (strong recommendation, moderate-certainty evidence); Recommendation 1.2: in preterm neonates without major bleeding, platelet transfusion should be administered when the platelet count is less than  $25 \times 10^3/\mu\text{L}$  (strong recommendation, high-certainty evidence); Recommendation 1.3: in patients undergoing lumbar puncture, platelet transfusion should be administered when the platelet count is less than  $20 \times 10^3/\mu\text{L}$  (strong recommendation, moderate-certainty evidence); and Recommendation 1.4: in patients with Dengue-related consumptive thrombocytopenia in the absence of major bleeding, the panel recommends no platelet transfusion (strong recommendation, moderate-certainty evidence).” The paper concluded that while, “[r]estrictive transfusion strategies should be implemented, [r]ecommendations may not apply to all individual patient scenarios, as noted in the good practice statement, and for conditional recommendations, clinicians should carefully consider the individual patient’s values and preferences in the decision.” Limitations of the paper acknowledged by the authors included, “[p]atients with thrombocytopenia are heterogeneous for factors relevant to bleeding risk, which may not be captured by inclusion criteria in trials or baseline features of enrolled patients; [e]vidence in some settings was very low certainty; and [b]aseline risk was not always clear when there was variation in event rates across studies.”

**Citation:** Metcalf, R.A., Nahirniak, S., Guyatt, G., *et al.* “[Platelet Transfusion 2025 AABB and ICTMG International Clinical Practice Guidelines](#).” *JAMA*. 2025. ♦

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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.

### America’s Blood Centers

Chief Executive Officer: Kate Fry  
Chief Medical Officer: Jed Gorlin  
Editor: Mack Benton  
Subscriptions Manager: Leslie Maundy  
**Annual Subscription Rate: \$420**

Send subscription queries to [memberservices@americasblood.org](mailto:memberservices@americasblood.org)  
America’s Blood Centers  
1717 K St. NW, Suite 900, Washington, DC 20006  
Phone: (202) 393-5725  
Send news tips to [newsletter@americasblood.org](mailto:newsletter@americasblood.org).

## MEMBER NEWS

**San Diego Blood Bank** turns 75 this year and is celebrating its anniversary this month. According to an [announcement](#), the blood bank opened its doors in 1950. “For 75 years, San Diego Blood Bank has been here for our community — because our community has always been here for us,” said San Diego Blood Bank Chief Executive Officer (CEO) Douglas Morton in a news release. “Every pint donated is a story of compassion. As we look ahead, we’re investing in innovation and access so that every patient who needs blood can receive it — today, tomorrow, and for the next 75 years.” The announcement also noted that, “San Diego Blood Bank has collected more than 5.5 million pints of blood from volunteer blood donors and currently impacts as many as 150,000 patient lives each year. [The organization participates in] and has led cutting-edge research initiatives such as cell therapy and regenerative medicine, Precision Blood™ medical research, and cord blood banking.”

(Source: San Diego Blood Bank [Announcement](#), 9/8/25)



On August 4<sup>th</sup>, **SunCoast Blood Centers** [officially opened](#) its Parrish center location, which is the organization’s 6<sup>th</sup> [fixed-site](#). The blood center held a ribbon-cutting recognition ceremony to mark the milestone achievement. An announcement added that, “SunCoast CEO Scott Bush expressed appreciation for the Manatee Chamber of Commerce and all who turned out for this special occasion. He spoke to the rapid growth of the Parrish community and the critical, ongoing need for blood donors as the local population surges. This new center stands ready to meet that challenge, providing even more opportunities for community

members to give where they live and make a life-changing difference.” The event included, “supporters, donors, and [blood center] partners” as the organization thanked all who joined them and continue to support the work and mission of the blood center.

SunCoast also recently held its Foxbrook Community Blood Drive at the home of blood center CEO Scott Bush. According to an [announcement](#) from the blood bank, the event drew, “donors from throughout the Suncoast region. Attendees enjoyed a vibrant atmosphere complete with axe throwing, basketball shootouts, ping pong, a DJ, raffles, a breakfast food truck, carrots for the resident horses, and live college football viewing. These unique attractions elevated the event beyond a typical blood drive, making it a memorable experience for the whole community.” The announcement explained that Mr. Bush chose to host the event to, “demonstrate his commitment to saving lives and expanding SunCoast’s reach [and to set an example of] what can be accomplished when leadership becomes directly involved in frontline community efforts.”



(Sources: SunCoast Blood Centers Announcements, [9/4/25](#); [8/30/25](#)) 💧







**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.*

### Register Today for the **Rise & Lead Workshop November 13<sup>th</sup>-14<sup>th</sup>**

## Rise & Lead

A WOMEN'S LEADERSHIP WORKSHOP

[Registration](#) is open for the America's Blood Centers (ABC) 2025 ABC Women's Executive Leadership Community (WELC) [Rise & Lead Workshop](#) taking place November 13<sup>th</sup>-14<sup>th</sup> in San Antonio, Texas at the Westin Riverwalk. [Book now](#) to secure the discounted rate. Check out the [schedule](#) as this workshop is designed for women in leadership positions, emerging leaders, and professionals seeking personal and career 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.

### Time Running Out to Register for 2025 ADRP Master Class September 24<sup>th</sup>-25<sup>th</sup>

[Register](#) for the [2025 ADRP Master Class](#) taking place September 24<sup>th</sup>-25<sup>th</sup>. The [complete two-day schedule](#) is available. 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.

### Recording & Slides Available: SMT Journal Club Webinar

A [recording and slides](#) from the August 29<sup>th</sup> ABC Scientific, Medical, and Technical (SMT) Journal Club webinar on are available to ABC members. This virtual event featured the review of two scientific/medical articles followed by open discussion by participants, presenters, and the article authors. The articles included:

- [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 offered for those who attended the live webinar or watched the recording. The CME credit may be claimed by completing the evaluation by September 26<sup>th</sup>. Additional information is available to ABC members [here](#). Please [contact us](#) with any questions.

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## Patient Story Video Available to ABC Members as a Part of Childhood Cancer Awareness Month

With the arrival of Childhood Cancer Awareness Month, [ABC Corporate Partner Council](#) member Cerus Corporation has made a [patient story video available](#) for ABC members to use in their donor recruitment efforts. The video features Cal Miller, who faced a rare form of lymphoma and required many platelet transfusions. ABC members can use this resource in external communications, including social media channels, and brand it with your blood center's logo. Please include a brief acknowledgement that the video was provided by Cerus, with a simple URL link to [www.cerus.com](http://www.cerus.com). More Childhood Cancer Awareness Month resources are also [available](#) in the [ADRP Resource Library](#). Contact us with any [questions](#). ♦

## RESEARCH IN BRIEF

**Machine Learning Digital Microscopy Personalizes Assessment RBC Storage Lesions.** A [study](#) in *Vox Sanguinis*, “present[ed] a method for evaluating storage damage in red blood cells (RBCs) using [machine learning and] optical microscopy images of smears.” The authors explained that, “[s]uspensions of RBCs were collected from [60] blood donors. [The study] systematically evaluated eight different machine learning algorithms: logistic regression (LR), support vector machine (SVM), K-nearest neighbors (KNN), random forest (RF), extra trees, extreme gradient boosting (XGBoost), light gradient boosting machine (LightGBM), and multilayer perceptron (MLP) with scikit-learn (v1.0.2). [Six convolutional neural network (CNN) architectures] were evaluated: DenseNet-121, InceptionV3, MnasNet, MobileNetV3-Large, ResNet101 and ShuffleNetV2 (2X).” The paper noted that, “[t]raditional machine learning methods achieved unsatisfactory accuracy rates of 0.47–0.59, effectively recognizing only young RBCs (storage time 3–10 days) while struggling with other storage stages. Receiver operating characteristic (ROC) analysis showed area under curve (AUC) >0.95 for young RBCs but poor performance for aged and highly aged cells. [CNN-based models] significantly outperformed traditional methods, with the best results from DenseNet-121 (internal/external: 0.85/0.80), InceptionV3 (0.86/0.83), and ResNet101 (0.84/0.80).” Confusion matrices revealed that deep learning models excelled at identifying young RBCs (>0.95) and showed relatively high accuracy for aged/highly aged RBCs but exhibited confusion between middle-aged and critical stages...In contrast, for features extracted by CellProfiler, although there are general boundaries across different storage times, they are not clear.” The researchers also noted that, “the study conducted comprehensive whole-slide image (WSI) analysis using hard voting integration of patch-level predictions. [This approach significantly reduced local prediction errors, achieving WSI-level accuracies] of 86/92, 88/92, and 85/92 for internal testing and 170/182, 173/182, and 160/182 for external testing with DenseNet-121, InceptionV3 and ResNet101, respectively.” The study found that, “[d]eep learning model (DenseNet-121, InceptionV3 and ResNet101) validation on cytopspin preparations revealed decreased accuracy, particularly for middle-aged and critical stages, with AUC values of 0.74–0.85. This indicated poor robustness to preparation method variations. To address this limitation, [the authors] developed the RBC morphology ensemble learning model (RBC-MELM).” They noted that the, “RBC-MELM demonstrated excellent performance on blood smear datasets, achieving microaverage and macroaverage AUCs of 0.98 and 0.97 for internal testing, and both at 0.97 for external testing. When applied to cytopspin datasets, RBC-MELM maintained accuracies of 0.98 and 0.94 for young and aged RBCs, and 0.82 for highly aged RBCs, with microaverage and macroaverage AUCs of 0.95 and 0.93.” The authors concluded that, “[t]he main advantages of this study include: this is the first method capable of evaluating RBC aging during storage under optical microscopy, compatible with both cell spins and smears” Second, this method avoids the subjectivity of human judgement and enables precise morphological assessment using deep learning.”

**Citation:** Deng, J., Zhuo, H., Wang, C., *et al.* “[Machine learning-enhanced digital microscopy for personalized assessment of red blood cell storage lesions](#).” *Vox Sanguinis*. 2025.

Contributed by Richard Gammon, MD ♦



## GLOBAL NEWS

Researchers at the University of Manchester have [authored](#) a paper [published](#) in *Cryobiology* that describes a novel approach to washing red blood cells. The paper explains that, “refrigerated red blood cells have a shelf life of just 42 days, creating logistical challenges for maintaining a reliable blood supply — especially in crisis situations or remote regions. To allow blood to be banked for future use, cryopreservation (freezing) is an essential technology. Currently, glycerol is used as a cryoprotectant — a substance which protects the blood from cold stress by preventing ice from forming within the cells. However, it comes with a major drawback: a laborious and time-consuming thawing and washing process that can take over an hour per unit of blood. This delay can be life-threatening in emergencies and complicates its use in, for example, crisis or military situations. The new method reported today, addresses this washing speed problem. By combining three cryoprotectants — polyampholytes (a type of polymer), DMSO (a cryoprotectant typically used for stem cells), and trehalose (a sugar) — the researchers have developed a formulation (PaDT) that not only preserves red blood cells effectively but also reduces the post-thaw wash-out time by over 50 minutes compared to glycerol. The PaDT formulation leverages the unique properties of its three components:

- Polyampholytes: unique polymeric cryoprotectants which have many beneficial properties including preventing ice forming inside cells;
- DMSO: a permeating cryoprotectant that enters cells quickly replacing water molecules, stopping ice from forming; [and]
- Trehalose: a sugar found in extremophiles like tardigrades; trehalose protects cells from dehydration and stabilizes proteins and membranes.

Together, these agents work to protect RBCs during freezing and allow for a simplified, low toxicity thawing process.” The researchers further explained that, “[w]ith this new method frozen blood could be stockpiled and rapidly deployed in disaster zones, on the battlefield, or in rural hospitals – without the need for constant donations or complex equipment. [They are] exploring how this method can be integrated into automated systems for large-scale blood processing. They are also investigating its potential for preserving other cell types, including stem cells and platelets.”

(Source: University of Manchester [News Release](#), 9/4/25)

*Ynet* has [published](#) an article highlighting the work of RedC Biotech, a startup working to develop red blood cell substitutes. Specifically, the founder of the startup, Dr. Ari Gargir, is attempting to, “cultivate red blood cells in large bioreactors, potentially generating hundreds of transfusion-ready units at a time. The company’s goal is to provide a reliable and cost-effective supply of blood to hospitals worldwide, bypassing the limits of human donation.” RedC Biothech’s process uses stem cells, “which can divide and expand indefinitely under the right conditions. If they’re getting the right cues and the right signals, they can become every cell type in the body. [In their lab,] stem cells are stored at temperatures below minus 150 degrees Celsius. When thawed and cultivated, each dot visible on a culture plate represents a single cell that grows into millions,” reported *Ynet*.

(Source: *Ynet*, “[Israeli startup RedC Biotech aims to replace donors with lab-grown blood from stem cells](#)”



## COMPANY NEWS

Grifols recently [published](#) data in *eClinicalMedicine* regarding [results](#) from a randomized, active-controlled, partially blinded, non-inferiority phase III clinical trial of its fibrinogen concentrate (FC) (BT524). The authors of the paper reported that study includes 15 hospitals in Europe and, “eligible patients ( $\geq 18$

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## COMPANY NEWS (continued from page 7)

years), undergoing major spinal surgery or cytoreductive surgery for pseudomyxoma peritonei, with clinically relevant intraoperative blood loss were randomised by an interactive web response system (1:1) to receive intravenous FC (2–4 g) compared to fresh frozen plasma (FFP) (15 mL/kg body weight) or cryoprecipitate (Cryo) (10 units); doses were repeated as needed. The primary endpoint was intraoperative blood loss from the time of decision to treat until the end of surgery with a non-inferiority margin of 150 mL, assessed in the per-protocol analysis set (PPS). Safety was assessed in all patients who received at least one dose of trial drug.” The researchers found that, “the adjusted mean of intraoperative blood loss was 1381 mL (95 percent confidence interval [CI] 1187–1574) in the BT524 group and 1,660 mL (95 percent CI 1461–1860) in the FFP/cryoprecipitate group, resulting in a difference of blood loss of 279 mL between the study groups. BT524 demonstrated a positive safety profile and a statistically significant lower incidence of thromboembolic events (TEEs).” The paper concludes that, “[i]n patients undergoing major spinal or cytoreductive surgery for pseudomyxoma peritonei (PMP), FC was non-inferior to FFP/Cryo for the management of clinically relevant intraoperative bleeding. The efficacy and safety advantages observed in this trial support the emerging adoption of first-line use of FC in treatment guidelines.”

(Source: Grifols [News Release](#), 6/19/25)

## Fresenius Kabi and the Association for the Advancement of Blood & Biotherapies (AABB) have [announced](#) that the annual Blood Collectors Week celebration is taking place this week from September 7<sup>th</sup>-14<sup>th</sup>. 2025 marks the 20<sup>th</sup> anniversary milestone since the inception of Blood Collectors Week.



“This 20-year milestone is a tribute to the people behind every blood donation — those who guide the process with care, expertise, and purpose,” said Eddie Kubo, senior vice president of Commercial Operations for Transfusion and Cell Therapies in North America at Fresenius Kabi, in the news release. “We’re honored to stand alongside these professionals who work every day to ensure that patients have access to the blood and components they need to survive and heal.” The joint news release also added that the initiative was co-created and is sponsored by the organizations and recognizes the, “individuals who serve as the essential link between donors and patients — including phlebotomists, apheresis operators, donor recruiters, technicians, drivers, and medical directors — whose dedication ensures a safe and consistent blood supply for patients in need.” More than [200 collection sites](#) across the U.S. “are expected” to take part in the year’s celebration. Fresenius Kabi and AABB are encouraging blood collection professionals, “to share what drives their passion for their work and to connect with peers [by] following @bloodcollectors on X (formerly Twitter) and using the hashtags #BloodCollectorsWeek and #SavingLives to show support and gratitude.”

(Source: Fresenius Kabi & AABB [News Release](#), 9/7/25) 💧

## 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.)

### 2025

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. **58<sup>th</sup> Annual Conference of the German Society for Transfusion Medicine and Immunohematology (DGTI)**. Mannheim, Germany. [Registration](#) is open. More information is available [here](#).

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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. **3<sup>rd</sup> 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 36<sup>th</sup> 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.** [Registration](#) is open. 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. **4<sup>th</sup> 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](mailto:newsletter@americasblood.org)

## POSITIONS

**Chief Scientific Officer.** A national search is underway to recruit a recognized executive with exceptional vision and leadership abilities to become the next Chief Scientific Officer (CSO) of Gulf Coast Blood, headquartered in Houston, Texas. Reporting to the CEO, the CSO serves

as the senior medical and scientific leader of Gulf Coast Blood. They are responsible for ensuring the highest standards in quality, clinical and operational excellence, and innovation across all laboratory and blood services, in addition to ensuring compliance with regulatory and accreditation standards. As a physician and strategic

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## POSITIONS (continued from page 9)

thought leader, the CSO drives the organization's quality and continuous improvement agenda while also serving as the medical expert to advise on future investments in the blood research investment fund which will advance translational initiatives. The CSO also oversees the scientific coordination of research partnerships, leads the medical advisory committee, serves as a part of the diligence team, and champions laboratory strategy and performance. This role is instrumental in aligning operational excellence with a forward-looking research and innovation agenda that supports the mission to save and sustain lives. To be considered for the role, inquiries, nominations, and applications (detailed CV for now) should be submitted electronically in confidence, to: [charlotte.fredericks@kornferry.com](mailto:charlotte.fredericks@kornferry.com).

**Chief Information Officer.** Carter BloodCare seeks a strategic and innovative Chief Information Officer (CIO). As CIO, you will shape and lead our technology vision, ensuring that our IT strategy aligns with organizational growth, operational excellence, and our lifesaving mission. As a member of the Senior Management team, you will act as a strategic liaison between technology and executive leadership to communicate IT needs and initiatives. The CIO provides quality and compliance, responsible for ensuring the integrity and efficiency of our information systems, administration, governance, data quality and the security of computer systems. The CIO oversees outsourced software, support services and the fulfillment of contractual obligations. The CIO provides necessary vision to each business entity, ensuring proper operational controls, compliance, business, and reporting procedures in support of our mission. Ideal candidates will have at least three years of management experience in a strategic technology role, with an additional five years of experience in IT or data management. You will also have a proven track record of digital transformation and a passion for mentorship and team development. If you are ready to lead with vision, build with integrity, and innovate for a greater good, let's connect. Together, we can ensure technology plays a vital role in saving lives. Apply at <https://www.carterbloodcare.org/who-weare/careers/>.

**Director of Marketing and Public Relations.** This position leads all marketing, branding, communication, and public relations efforts for Central California Blood Center (CCBC). As a key member of CCBC's Senior Management Team, this position collaborates closely with internal departments and external partners to maintain and enhance CCBC's positive public image. This position plays a vital role in advancing awareness of the volunteer blood donor program and the need for a safe, stable blood supply throughout the Central Valley and surrounding communities. Skills: a proven track record in directing marketing best practices including creative and production needs; experience in community development

and event management is required; knowledge of CRM, SEO and digital marketing platforms/strategies as well as a proven track record in staff development; and verbal/written and interpersonal communication skills (including public speaking/on camera appearances) are required. Learn more and apply [here](#).

**Medical Director.** Central California Blood Center is seeking a Medical Director who shall work to promote the mission of Central California Blood Center (CCBC) while being responsible for overseeing the medical activities of the organization. This scope of duties will be accomplished within 20-25 hours per week remotely and/or in person at CCBC's headquarters in Fresno, Calif. The Medical Director oversees all processes and SOPs of CCBC relating to donor selection, eligibility, collection, processing, testing and distribution of blood products, donor safety and other roles guided or mandated by local, state, federal, and international regulatory agencies. Qualifications and skills: must be a Doctor of Medicine Degree or Doctor of Osteopathic Medicine Degree, with a license in good standing; must be licensed in the State of California with sub-specialty training in Hematology (IM) or Transfusion Medicine (Pathology); excellent verbal and written communication skills; must be proficient in Microsoft Office products and virtual meeting technology platforms; strong people skills; superior leadership skills; and superb judgment, problem-solving and cognitive skills. Learn more and apply [here](#).

**Director of Donor Outreach & Collections.** For over 75 years, SunCoast Blood Centers has been the region's nonprofit community blood bank and the exclusive supplier of blood products to local hospitals. Located on Florida's beautiful Treasure Coast, we are committed to saving lives, advancing research, and supporting the health of our community. Take the lead in shaping the future of donor recruitment at SunCoast Blood Centers. Oversee our Contact Center, Mobile Recruitment, and Concierge Program teams, developing bold, innovative strategies that not only meet but surpass our blood collection goals. This high-impact role requires a Bachelor's degree (Master's preferred), 5+ years in recruitment or related fields with at least 3 years in leadership, and exceptional skills in leadership, public speaking, and project management. Click [here](#) to apply.

**Clinical Services Apheresis LPN.** For over 75 years, SunCoast Blood Centers has been the region's nonprofit community blood bank and the exclusive supplier of blood products to local hospitals. Located on Florida's beautiful Treasure Coast, we are committed to saving lives, advancing research, and supporting the health of our community. Join our Clinical Services and Research

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**POSITIONS** (continued from page 10)

team in Sarasota and play a vital role in patient care and medical advancement. In this specialized position, you'll perform therapeutic apheresis procedures for hospital patients and contribute to groundbreaking research collections. Candidates must hold a current Florida LPN with IV certification, have 1–2 years of hospital patient care experience, and demonstrate proven expertise in apheresis. Click [here](#) to apply. 💧