

2025 #30

September 22, 2025

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**Please Note:** The ABC Newsletter will not be published on September 29<sup>th</sup>. We will resume regular publication on Monday, October 6<sup>th</sup>. Thank you for your continued interest.

## Prehospital Blood Coalition Responds to AHRQ Prehospital EMS Blood Transfusion Draft Report

The Prehospital Blood Transfusion Coalition (PHBTC), of which America's Blood Centers (ABC) is a member, submitted [comments](#) in response to the Agency for Healthcare Research and Quality (AHRQ) [draft report](#) titled "Prehospital EMS Blood Transfusion and Fluid Interventions for Hemorrhagic Shock."

As a result of feedback from ABC and its member blood centers, the September 17<sup>th</sup> PHBTC comments, "strongly encourage the [AHRQ draft report] authors to strengthen the manuscript by emphasizing the role of blood centers as key stakeholders." The comments also advocated that, "[the] inclusion of blood centers should be explicit across all relevant sections, underscoring the importance of the blood center's role."

Additionally, the coalition response described the AHRQ draft report's limitations as:

- "provid[ing] vast statistical analysis without any suggestion of clinical significance or importance;"
- a lack of clarity by the authors regarding crystalloid as a saline solution;
- the lack of a comprehensive definition of crystalloids; and
- contradictory statements and inconsistencies throughout the draft report that need further clarification."

The PHBTC comments also noted the significance of, "the absence of a number of [peer-reviewed research] articles [that we felt are] specifically important to the scope of the [AHRQ draft report.] In particular, the original [PAMPer article](#) [published in *The New England Journal of Medicine (NEJM)*] by Sperry *et al.* was not referenced, although secondary analyses of that article are referred to and referenced in the [draft report.] The primary Sperry paper is one of the most important trauma papers published in the last 20 years. It is prehospital, randomized, multicenter, pragmatic, reflecting everyday practice, [and has been] published in the *NEJM* and specifically addresses the questions [in] this draft report. It is inconceivable that this primary paper is omitted. [Its exclusion] calls into question the entire draft report."

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## PHBTC Responds to AHRQ Prehospital EMS Blood Transfusion Draft Report (continued from page 1)

Finally, the PHBTC comments further explained that, [t]here are two prehospital prospective multicenter randomized studies ([TOWAR](#) and [SWiFT](#)) that have been completed and [are nearing] publication that will significantly affect the results of [the AHRQ draft] report. While we obviously do not know the results of these studies, we strongly feel that you should include the results of these studies. We hope you will postpone completion of this [draft] report until publication of those studies. Doing so prevents your report from being obsolete immediately upon publication.”

The AHRQ comment period closed on September 18<sup>th</sup>. The draft report from AHRQ aimed to conduct a systematic review to, “asses[s] the effectiveness and potential harms of blood transfusion and fluid interventions for hemorrhagic shock in the prehospital setting. [The peer reviewers] examined four interventions — whole blood, packed red blood cells (PRBC), plasma, and crystalloid fluids — comparing their benefits and harms when used for resuscitation as well as different transfusion strategies across traumatic and non-traumatic conditions.”

Improving patient access to [blood transfusions on ambulances](#) is a top priority in ABC’s [Advocacy Agenda](#). ABC will continue to provide updates on its advocacy efforts as they become available. Previously, ABC [responded](#) to an AHRQ [request](#) for “Supplemental Evidence and Data Submission on Prehospital EMS Blood Transfusion and Fluid Interventions for Hemorrhagic Shock.”

In those comments to AHRQ, ABC highlighted the important role that its member blood centers play in prehospital blood transfusion programs nationwide and described impediments to implementing and maintaining such programs. ABC also explained in the comments that, [t]he most consistent barrier for ABC member blood centers regarding prehospital blood transfusion programs, “is [a] lack of funding [with] operational costs at blood centers already [being] strained. [While additional barriers] that contribute to the reluctance by blood centers to implement a prehospital blood program are the risk of product wastage and the logistical burdens of rotating product between locations to prevent wastage.”

(Source: AHRQ [Comments](#), 9/17/25) 💧



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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

Sen. Amy Klobuchar (D-Minn.), an advocate of blood donation and the important work of community blood centers, recently filmed a public service announcement (PSA) raising awareness for Sickle Cell Awareness Month and the vital role of blood donations for sickle cell disease patients. In the PSA, Sen. Klobuchar specifically states that, “because of the nature of their disease, sickle patients, both kids and adults, need blood transfusions over the course of their



lives. That’s why [this] Sickle Cell Awareness Month, I’m joining America’s Blood Centers (ABC) and Memorial Blood Centers [a division of New York Blood Center, Inc.] in urging everyone [eligible] to donate blood. While about 60 percent of the population is eligible to donate, only 3 percent do so each year. We need more people to give blood.” The PSA is available on multiple social media platforms including:

- [Facebook](#);
- [Instagram](#);
- [TikTok](#); and
- [X](#).

(Source: Sen. Amy Klobuchar Announcement & Memorial Blood Centers Announcement, 9/22/25)

The U.S. Food and Drug Administration (FDA) has [rescinded](#) the laboratory developed tests (LDT) final rule. The agency announced that, “on September 19<sup>th</sup>, FDA [issued](#) a final rule reverting to the text of the regulation as it existed prior to the effective date of the May 2024 final rule.” Earlier this year, a federal judge in Texas [struck down](#) the FDA LDT final rule at that time. ABC has advocated with both the FDA and Congress for an [exemption](#) for LDTs used by blood centers from reforms to diagnostics regulation and made this a priority in its 2025 [Advocacy Agenda](#). In an April 1<sup>st</sup> statement, ABC Chief Executive Officer Kate Fry, MBA, CAE said, “[t]he court’s ruling marks a significant victory for the laboratory community and the patients they serve, protecting *in vitro* diagnostic products (IVDs) from unprecedented regulatory scrutiny. ABC has long advocated that FDA does not have the authority to regulate laboratory developed tests. FDA’s final rule would have delayed patient care, increased costs, stifled innovation, and resulted in resource diversion — all of which would have compromise[d] the efficiency and effectiveness of blood center operations. We will continue to oppose any effort that unnecessarily restricts access to life-saving tests for patients in need.”

(Source: FDA [Announcement](#), 9/19/25) 💧

## BRIEFLY NOTED

The Joint Commission and the Coalition for Health AI (CHAI) recently [announced](#) the release, “[of] the first installment of their work together — [Guidance on Responsible Use of AI in Healthcare](#) — which will serve as internal governance to help U.S. health systems safely and effectively implement artificial intelligence (AI) at scale. This guidance represents the first of many milestones to result from their strategic partnership, launched June 2025.” According to a news release from the agencies, “[t]he guidance, which features high-level recommendations for the Responsible Use of AI and is designed to be accessible, applicable, and adaptable for healthcare organizations at any stage of their AI journey. Specifically, it establishes that policies, appropriate local validation, monitoring, and use, to be flexibly interpreted and integrated into existing or new processes as deemed appropriate for the context of any organization. This guidance is meant to provide transparency into the Joint Commission-CHAI process, and community feedback on this guidance will be incorporated into future outputs. [Additionally, a] series of products are

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### BRIEFLY NOTED (continued from 3)

slated to launch later this year and into 2026. The next release will be governance playbooks, after a series of workshops are conducted to ensure hospitals and health systems of all sizes and regions are contributing to its development. These playbooks will be built on the original guidance, incorporating the feedback received from the community, and providing more practical and applied details. Following that, [the] Joint Commission will develop a voluntary AI certification based on the final set of playbooks and open it to its more than 22,000 accredited and certified healthcare organizations nationwide.”

(Source: Joint Commission and CHAI [News Release](#), 9/17/25) 💧

## **INFECTIOUS DISEASES UPDATE**

### **MEASLES**

The Pan American Health Organization (PAHO) has published a communication, “urging countries in the Americas to strengthen vaccination efforts, improve surveillance, and accelerate outbreak response following a rise in measles cases in the region. As of September 12<sup>th</sup> 11,313 cases and 23 deaths have been confirmed in 10 countries — a 31-fold increase compared to the 358 cases reported in the same period in 2024, according to PAHO’s [latest epidemiological update](#). The agency explained that, “10 countries have reported cases this year, with Canada (4,849 cases, 1 death), Mexico (4,553 cases, 19 deaths), and the United States (1,454 cases, 3 deaths) accounting for 96 percent of total cases in the region. Additional cases have been reported in Bolivia (320), Brazil (28), Argentina (35), Belize (34), Paraguay (35), Peru (4), and Costa Rica (1). The outbreaks have primarily affected communities with low vaccination coverage or resistance to vaccination. The most affected group was children under one year of age (6.6 cases per 100,000 population), followed by children aged 1 to 4 years (3.6 per 100,000). Over 71 percent of confirmed cases were unvaccinated, while vaccination status was unknown in an additional 18 percent. Data indicates regional transmission initially driven by imported cases, with 71 percent classified as importation-related and 16 percent as imported cases. [Globally,] the World Health Organization (WHO) has reported 164,582 confirmed measles cases in 173 countries as of September 9<sup>th</sup>, based on a total of 360,321 suspected cases. The most affected regions are the Eastern Mediterranean (34 percent), Africa (23 percent), and Europe (18 percent).” PAHO is recommending that nations, “[a]chieve vaccination coverage of at least 95 percent with two doses of measles-containing vaccine in every municipality.” [Transfusion-transmission](#) of measles has never been demonstrated, and any risk to the blood supply is believed to be theoretical.

(Source: PAHO [Communication](#), 9/19/25)

### **WEST NILE VIRUS**

The *Associated Press* [reported](#) this week that data from the U.S. Centers for Disease Control and Prevention (CDC) indicate that, “West Nile virus infections are intense so far this year, with case counts running 40 percent higher than normal. More than 770 cases, including about 490 severe cases, were reported as of early September, according to CDC data. About 550 cases — 350 of them severe — are usually reported by this time of year. Health officials are ramping up warnings to the public, because most cases of the mosquito-borne disease are reported in August and September.” According to the Association for the Advancement of Blood & Biotherapies (AABB), West Nile virus is transmissible through blood transfusion, “particularly during the viremic phase of infection when individuals show no symptoms. [FDA has approved nucleic acid testing (NAT) assays] for West Nile virus RNA in donors of blood, organs, cells, and tissue as well as non-heart-beating donors. These assays are designed for both individual donor testing (ID-NAT) and testing in minipools (MP-NAT) containing up to 6 or 16 donations, depending on the system used.”

(Source: *Associated Press*, “[West Nile virus cases running higher than normal, prompting health warnings](#),” 9/10/25) 💧



**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 by the October 21<sup>st</sup> deadline. 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.

### Last Chance to Register for the 2025 ADRP Master Class September 24<sup>th</sup>-25<sup>th</sup>

[Register](#) for the [2025 ADRP Master Class](#) taking place this week 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.

### ABC Executive Fellows Program Call for Applicants Closes October 27<sup>th</sup>

[Apply](#) to participate in the 2026 [ABC Executive Fellows Program \(EFP\)](#) by the October 27<sup>th</sup> deadline. ABC is partnering with Vanderbilt University's Owen School of Management. This groundbreaking initiative offers industry-specific, best-in-class leadership training to blood community executives, elevating individuals, organizations, and the nation's blood supply. 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.



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### INSIDE ABC (continued from 5)

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. 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](#).

### **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. 💧

### **MEMBER NEWS**

**Rhode Island Blood Center**, a division of **New York Blood Center, Inc.** has [partnered](#) with the Cumberland Emergency Medical Services (EMS) to, "laun[ch] the [state's] first program to give blood transfusions to trauma patients before they reach the hospital," according to WJAR NBC-10. "Trauma is the leading cause of death nationwide and one of the biggest reasons is uncontrolled bleeding," stated Cumberland EMS Medical Director Dr. Nicholas Valentini in the article. "And the numbers are pretty stark. Research shows that for every single minute that a transfusion is delayed, mortality increases by about 2 percent. It's not just trauma patients who will benefit. Whole blood will make a difference in post-partum hemorrhage, in gastrointestinal bleeding, in surgical complications and in a wide range of traumatic and medical emergencies that we experience in the field every single day." Cumberland EMS will be the first responders in Rhode Island using prehospital blood transfusions at this time, "but if the program proves successful, it could expand to other agencies in Rhode Island," reported WJAR NBC-10. "As far as billing and insurance coverage, health officials said no costs from these pre-hospital blood transfusions will be passed on to the patients in Cumberland."

(Source: WJAR NBC-10 "[Cumberland EMS, Rhode Island Blood Center launch pre-hospital blood transfusion program](#)," 9/18/25) 💧

### **GLOBAL NEWS**

A paper [published](#) in the *Canadian Medical Association Journal (CMAJ)* provides a synopsis of the history, potential benefits, risks, barriers to access, and future of prehospital blood products, specifically freeze dried plasma. Key points include:

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## GLOBAL NEWS (continued from page 6)

- “dried plasma supports hemostatic processes comparably to frozen plasma without requiring refrigeration, allowing for easier storage and transport while maintaining a two-year shelf-life;
- dried plasma may effectively extend the critical first hour after traumatic injury, often called the “golden hour” of trauma care, by providing earlier access to blood-based resuscitation as a bridge to full-spectrum transfusion and surgical care;
- Canadian Blood Services, in collaboration with the Canadian Armed Forces, is developing dried plasma using Canadian donors to expand access to blood-based resuscitation;
- Canadian Armed Forces have implemented dried plasma in austere environments; civilian integration is now feasible, especially for prehospital and rural trauma care; [and]
- pilot programs, training, and national-scale evaluation are needed to integrate dried plasma into civilian trauma systems.”

**Citation:** Prifti, V., Dion, P.-M., Beckett, A., and Singh, K. “[Dried plasma for trauma resuscitation: from Canadian Armed Forces to civilian prehospital and rural settings.](#)” *CMAJ*. 2025.

**The Health Sciences Authority (HSA) and the Singapore Red Cross (SRC) recently [held](#), “their inaugural National Blood Dialogue, bringing together nearly 500 young voices under the theme ‘Let’s Talk Drip: Your Voice, Your Impact’ to empower youth in shaping Singapore’s blood donation future.”** An announcement from the HSA noted that the event featured discussions on sustainability of the nation’s blood supply, a youth competition that awarded funding for creative ideas to raise awareness and inspire the next generation of blood donors, and government officials and media personalities discussing the importance of regular blood donation. According to the HSA, Singapore has experienced declining donations among young donors by, “50 percent over the past decade, falling from 20,400 donors in 2014 to just 10,800 in 2024. HSA and SRC aims to reverse this trend by growing youth donors to 15,000 by 2030. Through extensive engagement with young people, SRC has identified key barriers preventing youth participation, including:

- limited exposure and awareness about blood donation processes; [and]
- competing priorities that position blood donation as optional rather than essential amidst academic and work pressures as well as social activities.”

(Source: HSA [News Release](#), 9/19/25) 💧

## COMPANY NEWS

The **American Society of Hematology (ASH)** recently [highlighted](#) the results of two studies published in *Blood Advances* that found that, “[t]reatment with exagamglogene autotemcel (exa-cel) led to robust and sustained improvements in quality of life for patients with severe sickle cell disease (SCD) or transfusion-dependent beta thalassemia.” A news release from the organization explained that, “[p]articipants in both studies reported clinically meaningful improvements in overall quality of life, including physical, social/family, functional, and emotional well-being. Sustained improvements were observed starting as early as six months following exa-cel infusion. [The researchers] used patient-reported outcome data from the CLIMB-SCD-121, CLIMB-THAL-111, and 13-year follow-up study, CLIMB-131, to evaluate quality-of-life improvements. Patients had at least 16 months of follow-up; median duration was 33.6 months in the SCD study and 38.4 months in the beta thalassemia study. The CLIMB-SCD-121 trial data included 42 adolescents and adults with severe SCD treated with exa-cel, and the CLIMB-THAL-111 trial data included 54 adolescents and adults with transfusion-dependent beta thalassemia. [In the SCD study post-treatment,] cores across all domains exceeded population norms and surpassed thresholds for minimal clinically important difference (MCID) — the smallest change patients perceive as meaningful — indicating that

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## COMPANY NEWS (continued from page 7)

patients experienced substantial, personally important improvements. Specifically, for adults, results from the ASCQ-Me quality of life scale, which is designed to measure SCD outcomes, showed the greatest non-pain improvements in social impact (+16.5), emotional impact (+8.5), and sleep impact (+5.7). For adolescents, PedsQL scores indicated improvements in school functioning (+45), social functioning (+18.3), and emotional functioning (+16.7) after infusion. [In the beta thalassemia study, at] 48 months past infusion, adults had a mean score improvement of 14.0 from a baseline of 82.2 at infusion. For adolescents, baseline at infusion was 81.3, with a mean score improvement of 6.1 at month 24. For both adults and adolescents, treatment with exa-cel led to clinically meaningful improvements across all domains and surpassed MCID thresholds.” The FDA approved CRISPR-based gene therapy is a one-time treatment that, “removes a patient’s own blood-forming stem cells and edits them to produce healthy hemoglobin before being infused again into the patient.”

(Source: ASH [News Release](#), 8/27/25)

**Lion TCR** has [announced](#) that an investigational new drug (IND) application for its advanced therapy to treat chronic hepatitis B (CHB) has been approved by the U.S. Food and Drug Administration (FDA). According to a company news release, the company will begin, “phase Ib/II clinical trials for its proprietary [investigational advanced] therapy, LioCyx-M004, in patients with CHB. This approval represents the third major regulatory milestone for the same product candidate, which previously received both Fast Track and Orphan Drug Designations for the treatment of hepatitis B virus-related hepatocellular carcinoma (HBV-HCC).” The investigational therapy is described as, “an innovative autologous cell therapy engineered using mRNA to encode T-cell receptors that specifically target hepatitis B virus antigens. Preclinical and early clinical studies have demonstrated the therapy’s ability to reduce viral antigen load and promote T-cell-mediated clearance of infected cells, while maintaining a favorable safety profile to date.”

(Source: Lion TCR [News Release](#), 9/14/25)

A September 18<sup>th</sup> [news release](#) from **bluebird bio, Inc.** noted that the company has rebranded as **Genetix Biotherapeutics Inc.** According to the announcement, the company is “returning to its foundational roots” with its strategic priorities being:

- “Strengthening Qualified Treatment Center (QTC) Partnerships: expanding our footprint to make it easier for patients to obtain care and supporting the essential work of QTCs through targeted initiatives;
- Expanding Manufacturing Capacity: planning to substantially increase our manufacturing capacity within the next year to meet growing demand;
- Enhancing Manufacturing Capabilities: making investments to enhance our manufacturing capabilities, including the ability to cryopreserve patient stem cells, which will significantly improve the treatment experience; [and]
- Lovo-cel Clinical Development: continue executing the ongoing, fully enrolled lovo-cel (lovotibeglogene autotemcel) HGB-210 Phase 3 study, an open-label, multi-site, single-dose trial in adults and pediatric patients with sickle cell disease.”

Genetix began in 1992 as Genetix Pharmaceuticals before rebranding as bluebird bio in 2010. According to the news release, bluebird bio was, “the first and only company to secure FDA approval for three gene therapies” including lovo-cel to treat SCD.

(Source: Genetix Biotherapeutics Inc. [News Release](#), 9/18/25) ♦



## 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. 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. 22. **FDA CBER OTP Town Hall: "Gene Therapy Manufacturing CMC and Facility Readiness for BLAs and Post-licensure Changes" (Virtual).** [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.** [Registration](#) is open. 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

**Medical Director.** Blood Assurance is seeking to fill a job opening for **Medical Director** based in our downtown Chattanooga home office. The Medical Director will provide medical and professional guidance to employees of the company and to area medical professionals. Minimum qualifications for consideration include: MD degree required; board certification or eligibility in pathology required (board certification must be secured within 1 year of hire); Transfusion Medicine board certification or eligibility preferred. Must be licensed to practice medicine in the states of our fixed facilities if required by that state (state licensure can be secured after hire). Blood bank management and advanced therapy experience preferred. Success in this role will require advanced skills in all of the following areas: verbal and written leadership communications with a servant-leadership philosophy, staff management/development, customer service, conflict resolution, decision-making, strategic planning, collaborative teamwork, flexibility, and adaptability. Proficiency in making Board room presentations and resolving complex medical issues is also required. We offer many benefits including: Health/Dental/Vision Insurance, Flexible Spending Account, Employee Assistance Program for you and your family, Company Paid Time Off, 401K with Company Match, Wellness Program, and Relocation Assistance. Qualified candidates are encouraged to submit an online application for consideration at [www.bloodassurance.org](http://www.bloodassurance.org). Blood Assurance is an Equal Opportunity Employer and a Tobacco Free Workplace.

**Hematology - Quality Control Specialist. Gulf Coast Blood is seeking a Hematology - 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 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!

**Assistant Lab Manager, RRPL. Gulf Coast Blood is seeking an Assistant Lab Manager, RRPL!** This key role leads operations in the Research and Recovered Product Laboratory, overseeing staff, blood component production, and research products to ensure quality, compliance, and timely delivery. Ideal for organized, detail-driven leaders who uphold high standards and contribute meaningfully to patient care and research. Lead the RRPL team to deliver high-quality blood components and research products while maintaining cGMP, AABB, and FDA compliance. Manage lab operations, optimize workflows, and allocate resources to meet client needs and production goals. Serve as the primary liaison for internal systems, client communications, and quality audits, using data-driven insights to track KPIs and enhance productivity. **Why join us?** Competitive pay, full benefits, career advancement opportunities, and the chance to make a tangible difference in patient outcomes and research. **Qualifications:** Bachelor's in Biology, Chemistry, or related field with three years of lab or blood. Component manufacturing experience (plasma a plus). MT/MLS (ASCP or equivalent) strongly preferred. Minimum two years of supervisory or management experience. Strong knowledge of quality concepts, cGMP, AABB, and FDA regulations. If you embody Commitment, Integrity, and Respect, [apply now](#) to help save lives every day!

**Medical Director (Miller-Keystone Blood Center (MKBC)).** Are you a mission-driven leader seeking to integrate patient care with public health while improving work-life balance? Join MKBC, where we save lives daily by supplying blood to hospitals across Pennsylvania (PA) and New Jersey (NJ). As **Medical Director**, you'll lead clinical oversight for transfusion medicine and ensure the safety, quality, and regulatory compliance of our blood services. You'll guide donor eligibility, review protocols, supervise lab operations, advise on complex medical issues, and collaborate with hospitals and public health partners. You'll also support staff education, represent MKBC in professional forums, and provide executive leadership to promote excellence and innovation. **Requirements:** M.D. or D.O. with Board Certification in Clinical Pathology, Internal Medicine, or Hematology. Board Certified or Eligible in Transfusion Medicine. Five to seven plus years in healthcare with a focus in blood banking. Medical licensure in PA & NJ. Strong knowledge of AABB, FDA, CLIA, and cGMP standards. **Benefits include:** Medical/Dental/Vision, FSA, Life Insurance, Disability, PTO, Retirement Plan & more. Make a lasting impact—apply today to join our lifesaving mission and see the full position description here <https://hcsc.isolvedhire.com/jobs/1583606>.

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## POSITIONS (continued from page 10)

**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 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).

**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](#). 💧