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ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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2025 #33 **October 27, 2025**

INSIDE:

Bipartisan *BLOOD Centers Act* Introduced

Reps. Tony Wied (R-Wis.) and Kim Schrier (D-Wash.) have introduced the "*Boosting Lifesaving Operations, Opening Donation (BLOOD) Centers Act*." This bipartisan bill aims to, "help improve the quantity of our nation's blood supply and streamline the opening of new blood centers."

According to a news release, the *BLOOD Centers Act* would, "require the U.S. Food and Drug Administration (FDA) to establish an expedited supplemental Biologics License Application (BLA) process for blood centers with three existing BLA licenses or one or more BLA licensed location with an additional industry accreditation that exceeds FDA standards. Additionally, it requires the FDA to approve the supplemental BLA application within 30 days unless a blood center has shown a systemic failure to meet standards ensuring 'safety, purity, and potency' of their blood products or specific concerns about the location of the supplemental application."

America's Blood Centers (ABC) Chief Executive Officer Kate Fry, MBA, CAE stated in the news release, "America's Blood Centers applauds Rep. Wied and Rep. Schrier for introducing legislation to modernize regulations that impede patient access to life-saving blood products. Current licensure requirements impose redundant FDA reviews every time a new collection site opens, even when the same equipment, staff, and procedures are already approved and in use. By streamlining this process, this legislation will eliminate inefficiencies, help new donation sites open in a timely manner, and ensure patients have access to the safe and available blood supply they depend on."

Congressman Wied added in the news release, "[a]t a time when our nation's blood supply has reached a critical low, we must do everything we can to cut through red tape to ensure that people who are willing to donate can do so easily and swiftly. That is why I am proud to introduce the bipartisan *BLOOD Centers Act* to expedite the ability of blood centers to open new locations and collect life-saving blood for those who need it." Congresswoman Schrier, MD explained in the news release, "[a]s a doctor, I know that donated blood products save lives in dire situations. Redundant regulation and red tape make it harder for blood centers to get blood products where they are needed, when they are needed. I'm proud to join my colleagues in introducing this bipartisan legislation to reduce unnecessary administrative hurdles without compromising patient safety."

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Bipartisan *BLOOD Centers Act* Introduced (continued from page 1)

ABC has long advocated for modernization of the licensure process and it is a priority of the 2025 ABC Advocacy Agenda, which promotes the value of blood to patients, communities, and the healthcare system. The agenda highlights how outdated regulations slow the opening of new sites today and impose unnecessary delays when nothing substantive changes in safety or quality. We will continue to provide updates on the bill and our advocacy efforts as they become available.

(Source: Rep. Tony Wied News Release, 10/17/25)

Stanford Blood Center Granted FDA Approval to Distribute Licensed CCP

On October 15th, Stanford Blood Center announced that it has become the second blood center in the nation and the first in California to receive approval of its biologics license application (BLA) for the distribution of COVID-19 convalescent plasma (CCP) for the treatment of immunocompromised patients. "This FDA approval reaffirms our commitment to providing patients with what they need, when they need it, a core value of our organization," said Harpreet Sandhu, MBA, chief executive officer at Stanford Blood Center, in a news release from the organization. "By securing licensure, we are able to continue supporting immunocompromised patients across the nation who can benefit from convalescent plasma therapy." The FDA approval authorizes Stanford Blood Center to, "collect and manufacture CCP at its locations and distribute the product to hospitals and blood centers in California and beyond, enabling greater collaboration and support nationwide. Treatment using CCP has been shown to be safe and effective, supporting FDA licensure." Stanford Blood Center noted in the news release that, [it] was one of the first U.S. blood centers to begin collecting CCP early in the COVID-19 pandemic and has played a key role in research and patient care efforts to evaluate and optimize its use. With this licensure, the organization will continue to manufacture high-titer CCP as part of its broader mission to advance transfusion medicine and provide lifesaving blood products to patients in need. [The FDA] revoked the Emergency Use Authorization (EUA) for CCP, noting that the emergency conditions that justified its initial use were no longer in effect."

(Source: Stanford Blood Center News Release, 10/15/25)

WORD IN WASHINGTON

Dr. Brian Christine has been confirmed by the U.S. Senate as the assistant secretary for Health (ASH) within the U.S. Department for Health and Human Services (HHS). Dr. Christine was nominated by President Trump in March and is a urologic surgeon at Urology Centers of Alabama. He succeeds Dorothy Fink, MD who has been acting ASH and previously served as deputy assistant secretary for Women's Health and director of the Office on Women's Health in the Office of the Assistant Secretary for Health (OASH).

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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 (continued from page 2)

The Senate Health, Education, Labor, and Pensions (HELP) Committee recently announced that it will hold a confirmation hearing on Thursday, October 30th regarding the nomination of Casey Means, MD for U.S. Surgeon General. Dr. Means received her, undergraduate and medical degrees from Stanford University, has held research positions at the National Institutes of Health, New York University, and Oregon Health & Science University," according to a report from *NBC News*.

(Source: Senate HELP Committee Announcement, 10/23/25)

The U.S. Food and Drug Administration (FDA) has published a communication highlighting labeling changes, "to strengthen the warnings that tranexamic acid injection should be administered only intravenously (into the vein)." The agency noted that, "[t]ranexamic acid injection products are not to be administered intrathecally (into the spine) or as an epidural injection." The FDA explained that it is taking action after, "having identified and evaluated medication error cases of inadvertent neuraxial (intrathecal or epidural) administration of tranexamic acid. In these cases, tranexamic acid was erroneously administered neuraxially instead of the intended local anesthetic (e.g., bupivacaine, lidocaine, mepivacaine, and ropivacaine), which resulted in serious patient outcomes, including prolonged hospitalization and death. Medical practice-level and facility-level human factors (e.g., storing tranexamic acid injection close to local anesthetics and failing to verify the product before administration) contributed to the medication errors." The changes to prescribing information for tranexamic acid injection that FDA is requiring include:

- "[a]dd a Boxed Warning to communicate the risk of medication errors involving inadvertent neuraxial administration of tranexamic acid injection;
- [a]dd a statement to indicate that tranexamic acid injection is contraindicated as a neuraxial injection; [and]
- [u]pdate the Dosage and Administration section to clarify that tranexamic acid injection is only to be administered intravenously and to provide instructions for preparing and administering the diluted solution."

Additionally, the agency has recommended that, "the container labels for tranexamic acid injection prominently display the product name and intravenous route of administration. [Tranexamic acid injection] is indicated for short-term use (2 to 8 days) in patients with hemophilia to reduce or prevent hemorrhage and reduce the need for replacement therapy during and following tooth extraction."

(Source: FDA Announcement, 10/21/25)

FDA has approved "Labeling Changes that Include a Boxed Warning for Immune Effector Cell-associated Enterocolitis Following Treatment with Ciltacabtagene Autoleucel (CARVYKTI, Janssen Biotech, Inc.)." According to an agency communication, "FDA has approved updates to the Clinical Studies section of the prescribing information to include overall survival (OS) data from CARTITUDE-4 trial, a randomized, open-label, multicenter controlled study in adult patients with relapsed and lenalidomide-refractory multiple myeloma, who previously received at least one prior line of therapy including a proteasome inhibitor and an immunomodulatory agent. With an estimated median follow-up of 33.6 months, a prespecified second interim analysis showed a statistically significant improvement in OS in the CARVYKTI arm compared to the standard therapy arm. FDA has determined that the overall benefit of CARVYKTI continues to outweigh the potential risks for the approved use, including overall survival benefit in patients treated with CARVYKTI." The labeling changes came in the wake of FDA, "receiv[ing] reports of immune effector cell-associated enterocolitis (IEC-EC) in patients who received treatment with CARVYKTI. [IEC-EC occurred] weeks to months following CARVYKTI infusion. [IEC-EC was] associated with fatal outcomes from gut perforation and sepsis."

(Source: FDA Communication, 11/10/25)

INFECTIOUS DISEASE UPDATES

CHIKUNGUNYA

On October 14th, the New York State Department of Health reported that, "a case of locally acquired chikungunya has been confirmed in the state. Laboratory testing at the Department's Wadsworth Center confirmed the case in Nassau County on Long Island. This marks the first locally acquired case of chikungunya reported in New York State. No locally acquired cases have been reported in the U.S. and its territories since 2019." Additionally, the Department of Health explained that, "[a]n investigation suggests that the individual likely contracted the virus following a bite from an infected mosquito. While the case is classified as locally acquired based on current information, the precise source of exposure is not known. The *Aedes* (*A.*) *albopictus* mosquito, known to transmit chikungunya, is present in parts of downstate New York. Local transmission can occur when an *A. albopictus* mosquito bites an infected traveler, becomes infected and bites another person. The disease cannot be spread directly from one person to another. [Chikungunya is a mosquito-borne disease] most common in tropical and subtropical regions. Symptoms include fever and joint pain, headache, muscle pain, joint swelling, or rash." Transfusion-transmission of chikungunya has not been documented and any risk to the blood supply is believed to be theoretical.

(Source: New York Department of Health Announcement, 10/14/25)

EBOLA

On October 19th, the World Health Organization (WHO) announced that the, "last Ebola patient in the Democratic Republic of the Congo (DRC) was discharged today, marking an important milestone in the efforts to end the outbreak. The recovery kicks off a 42-day countdown to declaring the outbreak over if no further cases are confirmed." According to the organization, "[i]f no new cases are detected, the outbreak will be declared over in early December 2025." The U.S. Centers for Disease Control and Prevention (CDC) published an update October 17th noting that the, "DRC is experiencing an outbreak of Ebola virus disease (Ebola) in the country's Kasai Province. As of October 15th, there are 64 people with confirmed or probable Ebola, which includes 45 deaths. [This is] the 16th Ebola outbreak in the DRC. There have been no reported cases of Ebola in the United States related to this outbreak and the risk to people in the United States is low." The CDC has not classified the affected region as having "widespread transmission of Ebola virus," which would trigger donor interventions in the U.S. The U.S. Food and Drug Administration (FDA) guidance requires that, "in the event that one or more countries is classified by CDC as having widespread transmission of Ebola virus, your donor history questionnaire (DHQ), including your full-length and abbreviated DHQ, and accompanying materials, must incorporate elements to assess prospective donors for symptoms of recent or current illness with Ebola virus infection or disease, and travel to, or residence in, an area endemic for Ebola virus in accordance with 21 CFR 630.10(e)(2)."

(Sources: WHO Announcement, 10/19/25; CDC Update, 10/17/25)

BRIEFLY NOTED

A report from the *Associated Press* noted that, "[a] group of Democratic state governors has launched a new alliance aimed at coordinating their public health efforts." According to the article, the governors are, "framing it as a way to share data, messages about threats, emergency preparedness, and public health policy — and as a rebuke to President Donald Trump's administration, which they say isn't doing its job in public health. [The Governors Public Health Alliance] bills itself as a 'nonpartisan coordinating hub,' but the initial members are all Democrats — the governors of 14 states plus Guam. [The new alliance isn't] intended to supplant those efforts, or the coordination already done by the Association of State and Territorial Health Officials."

(Source: *Associated Press*, "Democratic governors form a public health alliance in rebuke of Trump administration," 10/15/25)

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INSIDE ABC

The programs and services described in the Inside ABC section are available to ABC member blood centers and their staffs only, unless otherwise specified.

Input Requested: Participate in the ABC Strategic Planning Survey

America's Blood Centers (ABC) has launched a Strategic Planning Survey and invites all members to complete this brief survey prior to the October 31st deadline. Multiple submissions per blood center are welcome as this is an opportunity for individuals to inform the strategic direction of ABC in future years. The ABC Board of Directors will meet later this year to develop ABC's next Strategic Plan (for fiscal years 2027-2030). To ensure a full breadth of perspectives are captured during the planning process, we hope you will participate in this short survey designed to capture your valuable insights about the association. Please contact us with any questions or if you have trouble accessing the survey.

ABC Member Prehospital Blood Utilization Survey Deadline Extension

ABC has extended the deadline for the ABC Member Prehospital Blood Utilization Survey to November 3rd. We encourage all members to take part in this annual survey that collects and provides statistically significant information to member blood centers and supports ABC's prehospital blood advocacy efforts. The opportunity for prehospital blood transfusion to save lives has become increasingly popular. As part of ABC's Advocacy Agenda, we have developed partnerships with EMS organizations and government agencies by way of the Prehospital Blood Transfusion Coalition (PHBTC) to address the barriers limiting widespread availability of prehospital blood transfusions, including scope of practice and reimbursement. As a member of the PHBTC, ABC is focused on improving the access of this lifesaving initiative to those who need it. Please contact us with questions or if you have trouble accessing the survey.

Time Is Running Out: Register for the *Rise & Lead Workshop* November 13th-14th

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 13th-14th in San Antonio, Texas at the Westin Riverwalk. 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.

ABC Executive Fellows Program Call for Applicants Closes on November 7th

Executive Fellows Program
An Initiative of America's Blood Centers

Apply to participate in the 2026 ABC Executive Fellows Program (EFP) by the November 7th 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:

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- "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. 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.

Input Requested: ADRP Member Satisfaction Survey

Take part in shaping the future of ADRP by completing the ADRP Member Satisfaction Survey! We encourage all ADRP members to participate as this is your opportunity to let your voice be heard, as your input will help shape our strategic priorities for the next three years. ADRP values and welcomes all member feedback and asks you to please complete the survey by Tuesday, November 11th. If you have any questions or have trouble accessing the survey, please contact us.

2025 International Showcase Set for November 12th

Registration is now open for the 2025 ADRP International Showcase and complimentary for all blood center staff! This virtual event will take place on Wednesday, November 12th at 1 p.m. EST and includes blood community professionals worldwide taking part in our annual forum to share, connect, and learn from each other! Stay tuned for additional details in the coming weeks as the International Showcase is a unique, cross-cultural exchange that fosters new connections and perspectives on donor motivation and retention strategies that can potentially be adaptable across the global blood community. A recording of this event will be made available to all registrants.

MEMBER NEWS

Mississippi Blood Services (MBS) (Flowood, Miss.) has joined the **National Blood Testing Cooperative.** The blood bank becomes the organization's 19th member. "We are excited to join the National Blood Testing Cooperative and to work alongside other community-based centers that share our values," said Christopher Swafford, chief executive officer (CEO) of MBS in the news release. "This partnership allows us to ensure continued testing excellence, cost efficiency, and long-term stability — all of which directly benefit the donors and patients we serve." According to the news release, NBTC formed in 2020, "to provid[e] cost-effective, high-quality infectious disease testing services for community blood centers. NBTC ensures operational sustainability and innovation through shared ownership, transparency, and collaboration." NBTC President and CEO Wendy Trivisonno added, "[w]e're thrilled to welcome Mississippi Blood Services to the NBTC family. MBS has a long history of service and commitment to donors and hospitals throughout the region. Their participation strengthens the cooperative model and helps us continue

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MEMBER NEWS (continued from 6)

to deliver on our mission of ensuring sustainable and reliable testing solutions for community blood centers nationwide"

(Source: NBTC News Release, 10/8/25)

The Blood Connection (TBC) (Greenville, S.C.) recently announced that it has become, "the sole supplier of blood products for Sovah Health (Danville, Va.) [as of] October 1st [and] also assumes operations of the Sovah Health Blood Donor Center, located at 159 Executive Drive, Suite K, establishing its first permanent location in Southside Virginia and second in the state." According to a news release, "[t]his partnership ensures patients at Sovah Health (Danville, Va.) continue to receive a safe, reliable blood supply, collected from donors in their own community. Sovah joins over 130 hospitals, EMS, and med-flight organizations that rely on TBC for lifesaving blood products." Delisa K. English, president and CEO of TBC, added in the news release, "[w]e are honored to partner with Sovah Health to support the people of Danville and the greater Southside Virginia region. Our team is proud to stand alongside Sovah's trauma teams and surgeons to save lives while making it easier for local donors to give where they live."

(Source: TBC News Release, 10/17/25) ♦

GLOBAL NEWS

NHS England and the Driver and Vehicle Licensing Agency (DVLA) have partnered on a new initiative to encourage young drivers to give blood. Through the collaboration, "[a] link to register as a blood donor now appears in digital correspondence sent to individuals following driving licen[s]e applications with a message explaining that blood donation saves lives. It will reach around 9,500 people across the country every day." DVLA Chief Executive Tim Moss explained in the announcement, "[w]e're proud to support NHS Blood and Transplant in encouraging more young people to become blood donors. With millions of driving licen[s]e applications processed each year, DVLA is in a unique position to help raise awareness and make it easier for people to take that first step. This simple addition to our digital services could help save lives. Younger donors are vital to the future of the blood supply, and we're pleased to play a part in helping more of them get involved." Altaf Kazi, assistant partnerships director for NHS Blood and Transplant added in the announcement, "[a]t 17 you can both learn to drive and start giving blood, so this new partnership with the DVLA is a fantastic opportunity for the NHS to reach more younger people who have a lifetime of donating ahead of them. More than half of our regular donors are [over 45 years of age]. We need more young people to become regular donors to ensure lifesaving blood is there for patients who need it now and in the future."

(Source NHS England Announcement, 10/14/25)

A report in *Ynet Global* describes the experience of Magen David Adom, Israel's national blood provider, supplying Israel's Army with low-titer group O whole blood. According to the article, "the use of low-titer O whole blood has dramatically reduced battlefield mortality rates." Moshe Tzadok, manager of the automated blood-typing unit at Magen David Adom told the news organization, "20 years ago, when they used packed red blood cells, the mortality rate was about 15 percent of injured soldiers in the field. Now, according to the army, it dropped to 7 percent."

(Source: *Ynet Global*, "Two years since October 7: MDA's whole blood system cut battlefield deaths in half," 10/20/25)

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GLOBAL NEWS (continued from page 7)

The *Bangkok Post* is reporting that, "LGBTQ+ advocates have urged the Thai Red Cross's National Blood Cent[er] to revise its blood donation application form following an Administrative Court ruling which upheld the ban on LGBTQ+ blood donations as non-discriminatory for public safety." According to the news agency, "[t]he current form asks donors to declare biological sex and gender with options of woman, man, transwoman, and transman. The form also asks about sexual behavi[o]r including having sexual contact with the same biological sex or opposite biological sex. The form asks about partner's risk characteristics, and HIV treatment or prevention history, including PrEP or PEP. Those identified as high-risk may be refused, prompting some to falsify their responses." Advocates are urging that the form should be revised to, "focus on individual risk behavi[o]rs rather than identity, with detailed questions on sexual practices, drug use, and HIV or sexually transmitted infection protection. [Such] specificity would encourage honesty and accountability among donors."

(Source: *Bangkok Post*, "Court ruling sets off blood screening row," 10/20/25)

The World Health Organization (WHO), the International Federation of Gynecology and Obstetrics (FIGO), and the International Confederation of Midwives (ICM) have issued new guidelines, "calling for a major shift in how postpartum haemorrhage (PPH) is prevented, diagnosed and treated." According to the organizations, the recommendations, "introduce new objective diagnostic criteria for detecting PPH, based on the largest study on the topic to date — also published today in *The Lancet*." The guidelines urge the, "immediate deployment of the MOTIVE bundle of actions once PPH has been diagnosed. This includes:

- Massage of the uterus;
- Oxytocic drugs to stimulate contractions;
- Tranexamic acid (TXA) to reduce bleeding;
- Intravenous fluids;
- Vaginal and genital tract examination; and
- Escalation of care if bleeding persists.

In rare cases where bleeding continues, the guidelines recommend effective interventions such as surgery or blood transfusion to safely stabilize a woman's condition until further treatment becomes available."

(Source: WHO, FIGO, and ICM Announcement, 10/5/25)

The United Kingdom's (UK) Medicines and Healthcare products Regulatory Agency (MHRA) has announced, "[e]nhanced collaboration with the U.S. on med tech regulation with accelerated innovation, strengthened patient safety, and reduced transatlantic barriers to market access." According to the announcement, MHRA's newly formed National Commission on Regulation of Artificial Intelligence (AI) in Healthcare will, "shape recommendations on regulating AI-driven medical technologies, contributing to international alignment, and accelerating safe access to AI in healthcare and across the UK's NHS. [The MHRA confirms] that planned international reliance routes will allow medical devices approved by trusted regulators, including the U.S. Food and Drug Administration (FDA), to gain faster access to the UK market. This includes products cleared through the 510(k), De Novo, and Premarket Approval (PMA) pathways, with a proportionate approach balancing rapid access with robust patient safeguards. The medtech regulatory reforms in Great Britain are intended to enter legislation in 2026 and open new reliance routes from 2027, further strengthening the global medtech ecosystem."

(Source: MHRA Announcement, 10/8/25)

COMPANY NEWS

Hemanext Inc. has announced that it has been awarded a three-year grant by the National Institutes of Health for the, "Efficacy of Hypoxic Red Blood Cells Processed with the Hemanext ONE® System in Patients with Sickle Cell Anemia" project. A company news release explained that the project aims to, "support and strengthen the clinical efforts of hypoxically stored red blood cells (HRBC) in the United States. [The awarded clinical trial] will be a multi-center, randomized, controlled study with a cross-over design and will include patients seven years old and older. The primary objective will evaluate the efficacy of HRBC by measuring the rate of decline in [the percentage of] Hemoglobin A and assessing HRBC's impact on reducing the patients' transfusion burden. Furthermore, the study will evaluate transfusion-related outcomes, including a comprehensive array of clinical and laboratory parameters and quality of life assessments. Dr. Laurel Omert will be the contact Principal Investigator (PI) with Dr. Biree Andemariam and Dr. Enrico Novelli as co-PIs." The Hemanext ONE® system previously received, "marketing authorization for commercial distribution via the De Novo process by the U.S. Food and Drug Administration in 2023 and has been CE marked since 2021." The news release noted that, NIH's Small Business Innovation Research Grant (SBIR) Phase II is designed to, "provid[e] competitive funding to small businesses with high-impact ideas that have a strong potential for public health benefit."

Hemanext Inc. also recently named Shane Ray as chief commercial officer (CCO). According to a company news release, Mr. Ray will, "will lead the global commercial strategy and execution for Hemanext ONE®. [He has] over 20 years of global leadership experience in the med-tech industry, [and] brings a proven track record in commercialization, strategic marketing, and business development for high-growth medical device companies. Previously, Mr. Ray held the position of North American president and global chief marketing officer at curasan, Inc, a global tech company focused on regenerative medicine, primarily in bone replacement materials. He also held senior leadership roles at RTI Surgical and Pioneer Surgical Technology, directing sales and marketing initiatives across orthobiologics, sports medicine, and the spinal therapeutic area, among others."

(Sources: Hemanext Inc. News Releases, 10/14/25; 9/24/25)

WellSky has released additional findings from a national healthcare workforce study conducted in partnership with the **Center for Generational Kinetics**. The study sought to, "provid[e] a roadmap for healthcare leaders who are looking for ways to improve recruitment and retention efforts." Highlights from the announcement included:

- "[h]ealthcare workers are stressed and overwhelmed. 51 percent of nurses reported that they've sought mental health support due to the stress of their work and 44 percent of healthcare workers and nurses named staffing shortages as the top barrier preventing them from performing at their highest level. Gen Z (47 percent) and younger Millennials (42 percent) were significantly more likely than older Millennials (29 percent) or Gen X (29 percent) to name emotional stress as a primary barrier preventing them from doing their best work. A little over half of all survey participants (55 percent) believe AI can help reduce healthcare worker burnout;
- [h]ealthcare roles are perceived as physically and emotionally demanding. 67 percent of healthcare workers, 63 percent of nurses, and 61 percent of non-healthcare workers see the physical and emotional demands of healthcare as one of the biggest disadvantages of working in the field. 83 percent of all survey participants said they believe healthcare workers shoulder an unfair burden for the problems facing today's healthcare system; [and]

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- [h]ealthcare workers feel they need broader support. According to the study, nearly half (46 percent) of healthcare workers and nurses ranked financial compensation among the top three things that would motivate them to take on more patient care without getting burned out. The need for support extends beyond the walls of the organization: A resounding majority (92 percent) indicated that the government should make support for healthcare jobs and caregivers a national priority."

(Source: WellSky News Release, 9/30/25)

Terumo Blood and Cell Technologies (Terumo BCT) recently announced the publication of the U.S. Reveos™ clinical studies in *Transfusion*. The manuscript titled, "*In vitro* and *in vivo* evaluation of leukoreduced red blood cells after automated separation of whole blood" and written by Rebecca L. Sedjo, Gina K. Aga, Elissa J. Flaumenhaft, Moritz Stolla, Larry J. Dumont, Susanne Marschner, *et al*., provides comprehensive insights into the performance of leukoreduced red blood cells following automated whole blood separation. The full article is available in *Transfusion* as the paper concluded that the, "Reveos System met [the] U.S. Food and Drug Administration's criteria for red blood cell component *in vitro* quality and *in vivo* 24-hour recovery after 42-day storage."

Citation: Sedjo, R.L., Aga, G.K., Flaumenhaft, E.J., Stolla, M., Dumont, L.J., Marschner, S., *et al*. "In vitro and in vivo evaluation of leukoreduced red blood cells after automated separation of whole blood." *Transfusion*. 2025.

Fresenius Kabi has unveiled the 2025 inductees into the Fresenius Kabi National Blood Donation Hall of Fame. According to a company news release, this year's inductees include 13 individuals nominated by, "blood centers across the U.S. [The] honorees have demonstrated extraordinary commitment to donating blood or for inspiring others to give. Each inductee has made a remarkable contribution to the nation's blood supply, whether through a lifetime of donations or through advocacy that has motivated entire communities to give." The 2025 Fresenius Kabi National Blood Donation Hall of Fame inductees nominated by members of America's Blood Centers are:

- Daniel Rogers (OneBlood);
- Carol Weaver (Versiti Blood Center of Indiana);
- Tammy Vickers and Traci Harper (OneBlood);
- Brenna Teerlink (ImpactLife);
- Mindy Sue Jones (Versiti Blood Center of Ohio);
- Gerald H. Yamane (Blood Bank of Hawaii);
- Latorra Garland (Carter BloodCare);
- Jeremy Hurley (Our Blood Institute);
- Sarah Fuller (Vitalant); and
- Blake Laveriere (Rhode Island Blood Center, an operating division of New York Blood Center Enterprises).

(Source: Fresenius Kabi News Release, 10/22/25)

The **American Hospital Association (AHA)** has asked the U.S. Department of Commerce to, "take a balanced approach to ensuring dependable and affordable access to personal protective equipment, medical consumables and medical equipment as it considers future tariff and trade policy." In the October 17th comments, the organization stated that, "[i]n the short term, we are concerned that tariffs on these critical goods — and any retaliatory action from the countries on which tariffs are imposed — could inadvertently disrupt

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the availability of diagnostic and treatment tools and hinder access to PPE that is essential to protecting the workforce and patients. [Tariffs and retaliatory actions] from other nations also could significantly raise hospital costs." AHA urged the administration to, "consider establishing a tariff exception process for certain goods — especially those in shortage — and to explore ways to strengthen the domestic supply chain and become less reliant on international sources."

(Source: AHA Comments, 10/17/25)

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

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

Nov. 6-7. **National Institutes of Health's (NIH) National Heart, Lung, and Blood Institute (NHLBI) Cardiopulmonary Complications of Hematopoietic Stem Cell Transplantation (HCT) and Gene Therapy Workshop (Hybrid).** Registration is open. More information is available here.

Nov. 12. **2025 ADRP International Showcase.** Registration is open. More information is available here.

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

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**. 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.

June 8-9. **2026 ABC Advocacy Workshop. Washington, D.C.** More information is coming soon.

Oct. 4-7. **American Association of Tissue Banks (AATB) Annual Meeting. San Francisco, Calf.** More information available here.

Oct. 17-19. **Association for the Advancement of Blood & Biotherapies (AABB) Annual Meeting. Atlanta, Ga.** More information is coming soon.

CLASSIFIED ADVERTISING

POSITIONS

Medical Technologists Needed for IRL! OneBlood is currently recruiting for Medical Technologists to work in our Immunohematology Reference Lab in Ft. Lauderdale, Florida. This position will perform basic through advanced serologic testing on patient and/or donor samples and interpret results in accordance with regulatory guidelines and organizational policies and procedures. Applicants must have a bachelor's degree in a biological science or related scientific field from an accredited college or university or an equivalent combination of education, certification, training, and/or experience. Applicants must also have a valid and current Florida Clinical Laboratory Technologist license, or eligible, in Immunohematology or Blood Banking. To apply and view a complete Job Description of these positions, go to www.oneblood.org and click on the **Careers** tab. OneBlood, Inc. is an Equal Opportunity Employer/Vet/Disability.

Quality Supervisor – Blood Bank and Transfusion Services (ARUP Laboratories, Salt Lake City, UT). ARUP Laboratories is seeking a results-driven Quality Supervisor to lead quality initiatives and provide regulatory expertise within our Blood Bank and Transfusion Services. As a national nonprofit and academic reference laboratory, ARUP is at the forefront of diagnostic medicine. We are FDA, CAP-, CLIA-, and ISO 15189-certified, with over 40 years of experience delivering exceptional quality and service. This is a unique opportunity to oversee and enhance quality systems in transfusion medicine. The Quality Supervisor will drive implementation of quality processes, standardization efforts, and best practices across the department. Key Responsibilities: Lead and coordinate quality initiatives for Blood Bank and Transfusion Services. Support internal and external audits, risk assessments, and continuous improvement efforts. Serve as a liaison between ARUP and University of Utah staff to address quality issues and lead CAPA (Corrective and Preventive Actions). Oversee staff development, performance management, and promotions. What We're Looking For: Strong leadership and communication skills. Experience in blood banking and/or transfusion services. A passion for quality and a commitment to organizational excellence. Interested candidates can apply at https://www.aruplab.com/careers.

Director of Donor Services and Donor Recruitment (Fresno, CA). The Central California Blood Center (CCBC) provides blood and services to patients who receive care at over 20 hospitals and their network of facilities in Central California. CCBC has five donor collection centers in Central California and currently employs over 150 team members. This position is responsible for the strategic operational oversight of all processes and procedures related to blood collection activities (including resource management, training programs, and process improvement management and initiatives) and volunteer blood donor recruitment strategies for mobile and donor center blood collections to ensure the organization maintains a robust, quality-focused blood supply. Through direct or delegated oversight, ensures financial viability, operational feasibility, and customer, donor, and team member desirability of business decisions. Creates and fosters a collaborative environment that supports the organization's goals and objectives. Serves as a member of the organization's senior management team responsible for guiding the organization's mission of saving lives. To view the full job description and apply, please click here. **The deadline to apply is October 31, 2025.**

Cell Therapy Technologist (Carter BloodCare). The Cellular Therapy Technologist (CTT) 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 CTT 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 (MLS).

Manager of Product Quality Control (Carter BloodCare). The Manager of Product Quality Control will be responsible for all Product Quality Control related activities of the blood center. These activities may include, but are not limited to, equipment/instrument maintenance and quality control, product testing, review of testing results, review of donor center activities, as related to Product Quality Control testing, training, and education of Product Quality Control testing staff. The Manager will monitor budget and other administrative activities for the department, as assigned by the Technical Director. Additionally, the position will be actively involved in strategic planning and collaborating with other blood centers on projects and other corporate initiatives. The

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Manager will report to the Technical Director. Regular full-time attendance is required during normal working hours. **Education:** Bachelor of Science Degree, or related field. MT (ASCP), MLS (ASCP) or equivalent. **Experience:** Minimum three (3) years general laboratory experience, required. Minimum one (1) year of blood banking, required. Minimum one (1) year of supervisory experience, preferred. Previous management experience, preferred. Equal Opportunity Employer: Disability/Veteran. Apply at www.carterbloodcare.org, click Careers & search for job Manager of Product Quality Control (MLS).

Senior Manager of Technical Operations (Carter BloodCare). The Senior Manager of Technical Operations (SMTO) provides leadership and oversight across Distribution/Hospital Services, Product Quality Control (PQC), Component Production, and Testing and Labeling departments in North, East, and Central Texas. The SMTO serves as a key operational leader with delegated authority from the Technical Director, ensuring continuity of operations, consistency of processes, and compliance with all regulatory standards. The SMTO directly supervises managers across all departments and locations, guiding daily operations, hiring, and developing staff, managing training programs, and ensuring high performance standards. In partnership with the Technical Director, the SMTO leads the implementation of departmental procedures, validations, and regulatory requirements. Periodic travel between assigned work areas in North, East and Central Texas is required. **Education:** Bachelor of Science Degree or related field. MT (ASCP), MLS (ASCP) or equivalent. **Experience:** Minimum of four (4) years of experience in blood bank management or supervisory position with an emphasis on inventory management and hospital services. Equal Opportunity Employer: Disability/Veteran. Apply at www.carterbloodcare.org, click Careers & search for job Senior Manager of Technical Operations (MLS).

Director of Laboratory and Technical Services. The Blood Bank of Alaska is looking for a Director of Laboratory and Technical Services. The Director of Laboratory and Technical Services is responsible for ensuring alignment of organizational goals and compliance with regulatory guidelines within the laboratory environment. This position participates as a member of the blood bank's management team in planning, program formulation, and decision making with reference to the role, functions and technical support of the blood collection and processing operations throughout the Blood Bank of Alaska. Ensures all procedures are followed and promotes a positive work environment. This position is full-time exempt. The Blood Bank of Alaska offers competitive wages and an exceptional benefits plan. We offer medical, dental, vision, life, and short/long-term disability programs to qualified employees. Paid time off (PTO), paid sick leave (PSL), holidays and a 401 (k) program are also available. The Blood Bank is an equal opportunity employer. Qualified applicants are considered for employment without regard to race, color, religion, national origin, age, disability, marital/veteran status, or any other legally protected status. Interested candidates can please apply online at: https://bloodbankofalaska.apscareerportal.com. A complete job description can be found there as well.

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 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. 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

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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.