



# A B C N E W S L E T T E R

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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2025 #39

December 22, 2025

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**Please Note:** The *ABC Newsletter* will not be published on Dec. 29<sup>th</sup> and Jan. 5<sup>th</sup>. We will resume regular publication on Monday, Jan 12<sup>th</sup>. Thank you for your continued interest.



## Blood Community Encourages Donations As National Blood Donor Month Arrives

America's Blood Centers (ABC), the Association for Advancement of Blood & Biotherapies (AABB), and the American Red Cross have published a news release encouraging all eligible individuals to schedule an appointment to donate blood this January during National Blood Donor Month and to make regular donation appointments throughout the year. In the news release, the blood community also thanks donors and noted that, “[a]s the winter months bring colder weather, the celebration of holidays, severe storms, illnesses, and increased travel, donor turnout is often lower, even as patient needs remain constant. [The blood community encourages] eligible [individuals] to donate blood during National Blood Donor Month and to make regular donation appointments throughout the year. [Organizations and those who are unable] to donate can support the effort by hosting blood drives. The blood community invites current and potential donors to learn more about this month and access key resources at [www.BloodDonorMonth.org](http://www.BloodDonorMonth.org).”

Kate Fry, MBA, CAE, chief executive officer of ABC stated in the news release, “[t]his National Blood Donor Month, we celebrate the extraordinary generosity of the nearly seven million Americans who donate blood each year. Their decision is more than an act of kindness, it is a lifeline for patients facing emergencies, chronic conditions, and serious health challenges. We urge all eligible individuals to make time to donate blood in January and throughout the year to help ensure patients have the blood products they need, when they need them.”

President Richard Nixon first declared January as National Blood Donor Month in 1969, “to honor the selfless contributions of volunteer blood donors and encourage lifesaving donations during a time when supplies traditionally decline.”

(Source: Blood Community [News Release](#), 12/17/25) 

## WORD IN WASHINGTON



Congressman Seth Magaziner (D-R.I.) recently [donated](#) blood at Rhode Island Blood Center (RIBC), a division of New York Blood Center Enterprises and a member of America's Blood Centers, in the wake of the Brown University shooting and encouraged eligible individuals to [schedule an appointment to give blood](#). RIBC reported that an estimated 330 individuals donated blood at RIBC donor centers in the aftermath of the shooting, according to a December 15<sup>th</sup> [article](#) published in the *Rhode Island Current*. The news outlet noted that was, “more than triple the 100-person average for a Sunday. More than one third of Sunday’s donations came from first-time donors. Another

650 people booked appointments for future donations, compared with the typical 75 appointments scheduled on a Sunday. By Monday afternoon, another 200 people gave blood donations at the Providence donation center,” reported the publication.

(Sources: Rep. Seth Magaziner [X Post](#), 12/15/25; *Rhode Island Current*, “[Rhode Island Blood Center reports record donations after Brown University shooting](#),” 12/15/25)

The Centers for Disease Control and Prevention (CDC) [published](#) a December 5<sup>th</sup> notice in the *Federal Register* that, “invites comment on a proposed information collection project titled the 2025 National Blood Collection and Utilization Survey (NBCUS). The NBCUS gathers information from blood collection centers and acute healthcare facilities about blood collections and transfusions in the U.S.” Comments are due by February 3<sup>rd</sup> as the notice also explained that, “CDC will take over NBCUS data collection activities from the U.S. Department of Health and Human Services (HHS)/the Office of the Assistant Secretary for Health (OASH) and requests Office of Management and Budget (OMB) approval for an estimated 4,612 annual burden hours.”

(Source: *Federal Register Notice*, 12/5/25)

The U.S. Food and Drug Administration (FDA) has [announced](#) approval of the first cellular therapy (Omisirge) to treat severe aplastic anemia (SAA). According to the agency, “Omisirge is indicated for adults and pediatric patients 12 years and older with hematologic malignancies and now is approved for adults and pediatric patients six years and older with SAA following reduced intensity conditioning and for whom a compatible donor is not available. [SAA is a rare,] life-threatening blood disorder where the bone marrow fails to produce enough red blood cells, white blood cells and platelets. Treatment for SAA depends on age and usually consists of either immunosuppressive therapy and/or hematopoietic stem cell transplant preferably from a matched sibling or matched related donor. [The safety and effectiveness of] Omisirge was assessed based on an ongoing, open-label, prospective, single arm study evaluating use of Omisirge in patients six years and older with severe aplastic anemia. Omisirge provided early and sustained neutrophil engraftment in 12 of 14 patients in the efficacy population with a median time to neutrophil recovery of 11 days (range seven to 20 days). The most common side effects associated with Omisirge include febrile neutropenia, viral and bacterial infections, hyperglycemia, immune thrombocytopenia and pneumonia. Autoimmune cytopenias have occurred in 25 percent of patients.”

(Source: FDA [News Release](#), 12/8/25)

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WORD IN WASHINGTON (continued from 2)

**A December 15<sup>th</sup> FDA [news release](#) stated that the agency has, “removed a key limitation on the use of real-world evidence (RWE) used in drug and device application reviews.** In new guidance for certain types of medical device submissions, the agency states it will accept RWE without requiring that identifiable individual patient data collected from real-world data sources always be submitted in a marketing submission. The FDA similarly intends to consider updating its guidance for drugs and biologics. Historically, the FDA has insisted that any RWE submitted to the agency include private, confidential information at the individual patient level. This approach makes it impractical to use most large databases with valuable macro-level data. The FDA is responding to the position of many sponsors and data scientists that meaningful information can be extracted from some big data sources without private, individual information. FDA reviewers will now consider the strength of submitted RWE on an application-by-application basis. [This policy change opens] the door to using de-identified databases containing millions of patient records — including national cancer registries like the National Cancer Institute’s Surveillance, Epidemiology, and End Results, hospital systems databases, insurance claims databases, and electronic health record networks — resources that have grown exponentially but remained limited for use under previous FDA policy. These comprehensive datasets track patient outcomes across diverse populations and real-world treatment settings, offering insights that traditional clinical trials cannot capture.”

(Source: FDA [News Release](#), 12/15/25)

**The Medical Technology Enterprise Consortium (MTEC) has announced that the Platelet and Platelet-like Products State of the Technology Meeting will take place in Washington, D.C., February 17<sup>th</sup>-19<sup>th</sup>.** [Registration](#) is open and complimentary for this event hosted by the Administration for Strategic Preparedness and Response’s Biomedical Advanced Research and Development Authority (BARDA), Radiological and Nuclear Medical Countermeasures Program, in collaboration with the Defense Health Agency (DHA), Research and Engineering, Combat Casualty Care Portfolio and the Medical Technology Enterprise Consortium (MTEC). According to the announcement, “[t]he meeting will focus on advancing platelet and platelet-like products to meet critical military and civilian needs in combat and disaster scenarios, while providing insights into government funding opportunities and fostering discussions on emerging technologies such as extracellular vesicles, synthetic nanoparticles, and clinical trial updates.”

(Source: MTEC [Announcement](#), 10/24/25) ♦



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

## 2026 Annual Meeting Registration is Open

Register and join us in Tucson, Ariz. for the [2026 America's Blood Centers \(ABC\) Annual Meeting](#)! Don't miss out on being part of the conversation at this premier gathering March 9<sup>th</sup>-12<sup>th</sup> at the Loews Ventana Canyon Resort. Be sure to [book your hotel reservation](#) early to secure the group rate before Friday, February 13<sup>th</sup>. View the [preliminary schedule](#) as the ABC Annual Meeting unites leaders from blood centers, industry, and government, fostering connections and exploring the latest in advocacy, operations, science, medicine, quality, regulatory, and more. New in 2026, we are pleased to announce a Quality and Regulatory track! This series of sessions, developed for quality and regulatory professionals, will provide attendees with actionable insights and the opportunity to collaborate with peers facing similar challenges fostering idea and information sharing. Please [contact us](#) with any questions.

## Executive Compensation Survey Results Are Available

The results of the Executive Compensation Survey are in! Authorized individuals from participating blood centers received an email on December 3<sup>rd</sup> from [benchmarking@americasblood.org](mailto:benchmarking@americasblood.org) with instructions to access the survey data. If you participated and did not receive the results email, please [contact us](#). Non-participants can purchase the results by clicking [here](#). The Executive Compensation Survey serves as a resource for blood center chief executive officers (CEOs) and their boards in setting executive salaries/benefits, as well as meeting the Internal Revenue Service (IRS) Form 990 requirements to demonstrate comparability of executive compensation.

## FINAL CALL: 2026 ADRP Annual Conference Abstract Submission Deadline 1/5

Time is running out to [take part](#) in the call for 2026 ADRP Annual Conference presenters! You are encouraged to please share your knowledge, insights, and expertise with ADRP's global community in Minneapolis, Minn. May 14<sup>th</sup>-16<sup>th</sup>. The submission form can be started and revisited at your convenience prior to the January 5<sup>th</sup> submission deadline. Sessions include abstract presentations and discussions (60 minutes), quick hits (25 minutes), and digital posters! Abstracts should include data and research findings, case studies, practical pilots, and innovative policy and practices. Desired topics include:

- donor recruitment, engagement, and retention;
- collaboration between blood center departments for best outcomes;
- collections: technical and operational topics;
- social media applications in blood centers/TikTok use/social interaction;
- marketing initiatives, earned media and public relations strategies;
- first-time donors;
- donor journey/donor management;
- social sciences and donor behaviors;
- artificial intelligence (AI) practices, policies, and implementations;
- industry innovations; and
- cellular therapies/biotherapies.

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Please [contact us](#) with any questions.

## Workforce Trends Survey Report Available

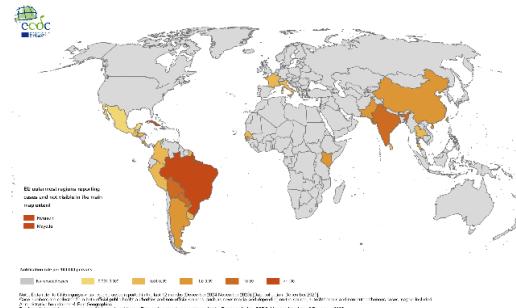
ABC has published the [2025 Workforce Trends Survey Report](#). This resource offers deep insights into compensation, benefits, human resources policies, turnover and retention rates, and workforce trends specific to blood centers. Those ABC member blood centers who participated in the Workforce Trends Survey can purchase the report at a discounted price (code required and has been emailed to authorized individuals) of \$450 while non-participating blood centers can purchase the report at the full price of \$900. This survey combines the previous Compensation & Benefits and Employee Turnover & Retention surveys. Please [contact us](#) with questions. 

## INFECTIOUS DISEASES UPDATE

## CHIKUNGUNYA

The European Centre for Disease Prevention and Control is [reporting](#) that globally in 2025 thus far, there have been 485,908 chikungunya virus disease (CHIKVD) cases and 229 associated deaths. “From November 14<sup>th</sup> to December 12<sup>th</sup>, 26,818 cases have been detected, including 83 associated deaths, from 12 countries. Cases reported in November have decreased by 39.4 percent compared to October, when 44,295 were reported. Deaths have increased in November when compared to the previous month, when one death was reported. Mexico has reported CHIKVD cases in November and for the first time in 2025. Currently, 14 countries have ongoing CHIKV outbreaks (time window of last 60 days). Of these, the majority are in the Americas and Asia.” [Transfusion-transmission](#) of chikungunya has not been documented and any risk to the blood supply is believed to be theoretical.





(Source: European Centre for Disease Prevention and Control [Update](#), 12/22/25)

## INFLUENZA

The Pan American Health Organization (PAHO) recently urged, “countries in the Americas to adjust their health service preparedness and response plans as the Northern Hemisphere enters the season of increased influenza and other respiratory virus circulation.” The December 8<sup>th</sup> communication referenced a recent PAHO epidemiological alert that explained, “according to data reported through the end of November, global influenza activity, driven by influenza A viruses, continues to rise. A sustained increase is being observed, particularly in North America, while activity remains relatively low in the rest of the Americas. In the Caribbean and Central America, influenza A(H1N1)pdm09 predominates, while in Canada and the United States, there is greater circulation of the A(H3N2) subtype, including a progressive increase in sub-clade K, already widely detected in Europe and Asia. Although no significant increase in severity has been observed so far, A(H3N2)-dominated seasons tend to affect older adults more severely. Preliminary evidence suggests that the current vaccine maintains protection levels similar to previous seasons, particularly in preventing severe cases and hospitalizations.”

(Source: PAHO [Communication](#), 12/8/25) 

## PEOPLE



**Delisa English, MBA**, president and chief executive officer (CEO) of The Blood Connection, has been, “named to the inaugural South Carolina 500 list, recognizing the most influential leaders shaping the state’s future through service, leadership and impact.” She stated in communication announcing the recognition, “I’m honored and humbled to be recognized along with so many leaders here in South Carolina. Transfusion medicine is demanding and relentless, but saving lives is immensely meaningful. I’m grateful every day that I get to wake up and tackle the challenges that get in the way of a reliable and safe local blood supply with my colleagues at The Blood Connection.” Ms. English has led The Blood Connection since 2013. Under her leadership, the blood center has experienced, “substantial growth not only in blood product collections, geographic growth and hospital partners, but also in community investments. Today, TBC serves 130+ healthcare partners across the Carolinas, Georgia, and Virginia; operates 22 community donation centers and 60+ bloodmobiles, and provides employment for nearly 900 [individuals.]”

(The Blood Connection Communication, 12/17/25) ♦

## MEMBER NEWS

**Héma-Québec** and Transplant Québec have [announced](#) the launch of a collaborative process that, “reflects a shared commitment to streamlining processes, creating synergies, and improving the efficiency of organ and tissue donation services in Québec, for the benefit of patients, their loved ones, families, health-care professionals, and the Québec public.” According to the announcement, “[s]taff positions will be maintained under all models being considered, as employees’ expertise is highly valued and widely recognized. Both organizations will draw on their respective expertise and best practices to explore collaborative approaches that support a solution benefiting all parties. This work aims to strengthen performance and service quality while upholding the highest standards of safety, transparency, and compassion. As part of this process, the implementation timeline will include a phase of discussion and consultation with patient groups, as well as with health-care system partners involved in organ donation and transplantation, with the goal of developing a solution that benefits everyone and ultimately saves more lives. The discussions will lead to recommendations that will be submitted to the Government of Québec and will help guide the next steps, in a spirit of openness and collaboration.”

(Source: Héma-Québec [News Release](#), 12/15/25)

**New York Blood Center (NYBC)** recently [held](#) a ribbon-cutting ceremony for the opening of its first donor center in Queens. According to a blood center announcement, “[t]he new Queens donor center marks NYBC’s sixth donor center in New York City and represents a major investment in expanding donation access in the borough that is home to the most diverse population in the country. [NYBC was joined] by Deputy Queens Borough President Ebony Young, New York City Council Member Lynn Schulman, Dr. Toni Eyssallenne of the NYC Department of Health and Mental Hygiene, and other community partners for [the] ribbon-cutting event and celebration of the new, state-of-the-art facility.” Jeannie Mascolino, vice president of Divisional Blood Operations at NYBC added in the announcement, “Queens is known as the World’s Borough for a reason – its diversity is unmatched. That diversity is essential to a strong blood supply, especially for patients who need closely matched blood,



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## MEMBER NEWS (continued from 6)

such as those with sickle cell disease or thalassemia. We're thrilled to open our first donor center in Queens and grateful to the local leaders who helped make this day possible."

(Source: NYBC [Announcement](#), 12/12/25) ♦

## GLOBAL NEWS

**Australian Red Cross Lifeblood has [issued](#) a “thank you” communication to the community for its response in the wake of the Bondi Beach mass casualty shooting.** According to the organization, “close to 50,000 people donat[ed] blood or plasma in the past week, and more than 120,000 book[ed] future appointments.” Lifeblood Chief Executive Officer Stephen Cornelissen stated in the communication, “I want to thank every person who donated, booked an appointment, encouraged someone else to give, or reached out with offers of support. The need for blood is ongoing, with hospitals requiring blood every single day for trauma patients, cancer treatment, and life-saving surgeries. Every donation counts and maintaining a steady supply ensures patients receive the care they need — not just today, but in the weeks ahead.”

(Source: Lifeblood [Communication](#), 12/18/25)

**The United Kingdom (UK)’s Advisory Committee on the Safety of Blood, Tissues and Organs (SaBTO) has [published](#) an independent report titled, “Executive summary: hepatitis E virus (HEV) transmission by blood transfusion - review of current screening effectiveness.”** The report noted that, “[d]ietary exposure to HEV from uncooked pork is the primary source of HEV infection in the UK, including of blood and organ donors. There is little immediate prospect of HEV infection being reduced or removed from pork production in the UK or elsewhere. With current screening, it was calculated that the proportion of donations with undetected HEV RNA per year was 0.004 percent (95 percent confidence interval (CI) 0.0025 percent to 0.0059 percent) for apheresis donations, and 0.003 percent (95 percent CI 0.0027 percent to 0.0034 percent) for whole blood donations. The predicted infectivity of blood components depended on their residual plasma content. Plasma content was predicted to range from 33 percent (apheresis platelets) to 4 percent for red cells. [It was estimated] that approximately 6 platelet, plasma and red cell recipients are infected per year from donations missed by current screening, with an estimated impact of 5.9 quality-adjusted life years (QALYs) per year.” The committee outlined six recommendations including:

- “[t]he increased cost of testing individual donations for HEV (£11 million per year) was over 60 times greater than its calculated health economic benefit (£176,000) based on a QALY value of £30,000. This economic calculation shows that testing individual donations for HEV RNA is not conventionally cost-effective, and if decisions to implement changes in testing are based purely on this health economic metric, the working group does not recommend any change to current screening practice.
- The working group recogni[z]es the existence of less easily quantified factors such as reputational damage to the blood services if further incidents of HEV transmission occur with continuation of the less sensitive testing in ‘minipools’. Consequently, we advise that SaBTO evaluates risk tolerability as it applies to HEV screening and the extent to which conventional cost effectiveness calculations can be applied in the area of transfusion safety.
- SaBTO should develop a communications plan for the report, for example by writing to relevant royal colleges to raise awareness of HEV infection in the management of patients. Early diagnosis and initiation of appropriate treatment may substantially reduce HEV-associated morbidity and mortality. Some members of the HEV Working Group co-authored a review in 2023 on maintaining the microbiological safety of the UK blood supply that may contribute to greater awareness of transfusion-transmitted infections.

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## GLOBAL NEWS (continued from 7)

- Each year, SaBTO should review the reported incidence of HEV infections in the wider community using epidemiological data provided by the UK Health Security Agency (UKHSA), and NAT positivity rates in UK blood and platelet donors. Changes in HEV incidence can be evaluated against the economic model developed in this report and the QALY costs can be reviewed. Large increases in HEV incidence should prompt a re-evaluation of HEV testing strategies by the UK blood services - NHS Blood and Transplant (NHSBT), the Scottish National Blood Transfusion Service (SNBTS), the Welsh Blood Service (WBS) and the Northern Irish Blood Transfusion Service (NIBTS).
- Evaluation of current testing should be mindful of donation testing strategies by blood services in other countries and their HEV transmission risk evaluations.
- A review of the effect of potential changes in the parameters used in the current report should be undertaken in five years.”

(Source: SaBTO [Report](#), 12/8/25)

**The World Health Organization (WHO) recently highlighted advancements in blood safety and quality assurance in India in collaboration with India's Blood Transfusion Service.** The article described how the nation's blood transfusion service has, “evolved into a nationally regulated, technology-enabled, and policy-driven system.” According to the WHO, “India's annual blood collection increased from 12.6 million units in 2023 to 14.6 million units in 2024, with further growth expected in 2025. Voluntary blood donation accounted for 74.55 percent of total collections, reflecting strong public participation and the impact of effective awareness campaigns.” Dr Krishan Kumar, director of the National Blood Transfusion Council noted in the article, “India's blood services have come a long way. From manual registers to real-time digital platforms, the transformation reflects our commitment to modernizing infrastructure and improving service delivery. Voluntary donation is no longer just a campaign; it is a culture we are nurturing across communities. Our focus remains on strengthening quality assurance, empowering blood cent[ers], and ensuring that every unit of blood reaches those who need it most, safely and efficiently.”

(Source: WHO, “[India strengthens blood safety for universal access and quality-assured blood services](#),” 12/17/25) ♦

## **COMPANY NEWS**

The U.S. Food and Drug Administration (FDA) has cleared **Roche Diagnostics** Elecsys Syphilis assay for the qualitative detection of total antibodies (IgG and IgM) to *Treponema pallidum* in human serum and plasma. According to [Roche](#), the assay is intended to, “screen individual human donors, including volunteer donors of whole blood, blood components, and source plasma. This test is also intended to be used to screen organ, tissue and cell donors, when donor samples are obtained while the donor's heart is still beating. It is not intended for use on cord blood specimens. The electrochemiluminescence immunoassay (ECLIA) is intended for use with the cobas pro serology solution equipped with cobas e 801 analytical unit.”

(Source: FDA [Letter](#), 12/10/25)

The FDA recently announced that it has finished its review and approved a premarket approval application 180-day supplement (PMA) from **Cerus Corp.** for the Intercept Blood System for Platelets. According to the FDA letter, package insert labeling changes include the, “[a]ddition of 5-day Intercept platelet *in vivo* recovery and survival data from study CLI00164 and [u]pdates to hemovigilance data.”

(Source: FDA Letter, 11/28/25)

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COMPANY NEWS (continued from 8)

**Title21 Health Solutions** has [joined](#) the **Blood and Cells Advocacy Roster (BCAR)**. In addition to Title21 Health Solutions, the BCAR steering committee includes America's Blood Centers (ABC), the Association for the Advancement of Blood & Biotherapies (AABB), BioBridge Global, Blood Centers of America (BCA), Terumo Blood and Cell Technologies, and Vitalant. "As innovators in regulatory and compliance software working in the blood industry, Title21 brings a vital technology perspective to our collective voice," stated BCAR Founder Michelle Boxall in the announcement. BCAR is an industry collaboration between blood and tissue collection networks, related technology providers, biotherapy communities, and other stakeholders that communicates the importance of blood and increasing patient access to life-saving blood and advanced therapies.

(Source: *PharmaTimes*, "[Title21 Health Solutions joins the Blood and Cells Advocacy Roster](#)," 12/16/25)

**Valneva SE** has [reported](#), "positive final antibody persistence and safety data for its Phase II clinical trial evaluating the safety and immunogenicity of two different dose levels of its single-shot chikungunya vaccine, IXCHIQ®, in 304 children, twelve months after vaccination." A company news release explained that, "[a] full dose (licensed IXCHIQ® formulation and presentation) elicited a higher immune response in children aged one to eleven years at Day 360 post vaccination compared to a half dose. Overall, the immunological response profile was in line with what was previously observed in adults and adolescents. The strong immune response was confirmed in chikungunya virus (CHIKV)-naïve children with a 94.7 percent seroresponse rate (full dose) at Day 360. The vaccine was well tolerated in children aged one to eleven years regardless of the dose or previous CHIKV infection. No safety concerns were identified."

(Source: Valneva SE [News Release](#), 12/10/25)

**Grifols** has [received](#) U.S. Food and Drug Administration approval for its fibrinogen concentrate, FESILTYTM (fibrinogen, human-chmt) to treat, "acute bleeding episodes in pediatric and adult patients with congenital fibrinogen deficiency (CFD), including hypo- or afibrinogenemia." A company news release explained that the fibrinogen concentrate, "will be commercialized in the U.S. by Grifols and is expected to be available during the first half of 2026. [FDA approval] was based on evidence from the clinical study "A Prospective, Open-label, Phase I/III Study Investigating Pharmacokinetic Properties of BT524 and Efficacy and Safety of BT524 in the Treatment and Prophylaxis of Bleeding in Patients With Congenital Fibrinogen Deficiency. [The U.S. is] the second country to approve this new fibrinogen concentrate. It was first approved in Germany in November where it is being commercialized by Biotest under the brand Prufibry®. Approvals in additional European markets are expected in 2026."

(Source: Grifols [News Release](#), 12/19/25)

The **American Hospital Association (AHA)** has [announced](#) that president and chief executive officer (CEO) Rick Pollack is retiring at the end of 2026. An AHA news release stated that his career at the organization spans 43 years and "[u]nder Mr. Pollack's leadership, the AHA steered hospitals through the COVID-19 pandemic, securing critical resources and regulatory flexibility to keep hospitals and health systems open and caring for patients during the most challenging public health crisis of recent time. [He] launched bold initiatives to strengthen the health care workforce, advance quality and patient safety, and fortify cybersecurity defenses through partnerships with the Federal Bureau of Investigation and other government agencies. Mr. Pollack has transformed the AHA into one of the nation's most respected and effective advocacy organizations, building a sophisticated political and grassroots network in every congressional district. A recognized champion for expanding health care access, [he] has provided leadership in supporting broad-based national coalitions that improved coverage for millions of patients." AHA's Board is working with WittKieffer, "to conduct a national search for Pollack's successor as part of a planned transition."

(Source: AHA [News Release](#), 12/10/25) ♦

## 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.)

### 2026

**Jan 20. America's Blood Centers (ABC) Back to QA Basics Webinar Series Part III: Blood Center Notification Process.** Please [contact us](#) for a link to registration and more information.

**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](#).

**Feb. 23. U.S. Food and Drug Administration (FDA) Public Meeting: FDA Rare Disease Day 2026 (Virtual).** [Registration](#) is open. More information is available [here](#).

**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](#).

**April 19. American Hospital Association (AHA) Annual Membership Meeting.** Washington, D.C. [Registration](#) is open. More information is available [here](#).

**Mar. 9-12. 2026 ABC Annual Meeting.** Tucson, Ariz. [Registration](#) is open. More information available [here](#).

**May 12-14. 2026 ADRP Annual Conference.** Minneapolis, Minn. [Registration](#) is open. More information is available [here](#).

**May 20-21. IPFA/Paul-Ehrlich Institut[e] (PEI) 32<sup>nd</sup> International Workshop on Surveillance and Screening of Blood-borne Pathogens.** Bilbao, Spain. [Registration](#) is open. More information available [here](#).

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

**June 20-24. International Society of Blood Transfusion (ISBT) 39<sup>th</sup> International Congress.** Kuala Lumpur, Malaysia. [Registration](#) is open. More information available [here](#).

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

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

**Nov. 17-20. American Society for Clinical Pathology (ASCP) and Canadian Association of Pathologists- Association Canadienne des Pathologues (CAP-ACP) Joint Annual Meeting.** Montreal, QC . [Registration](#) is open. More information available [here](#). ♦



## 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

**Senior Vice President, Legal Affairs (Fort Lauderdale, Fla).** OneBlood seeks an accomplished Senior Vice President, Legal Affairs to design, build, and lead its in-house legal function. Reporting to the CEO, this executive will serve as a trusted advisor to senior leadership, shaping legal strategy, governance, compliance, and enterprise risk management within a complex healthcare and nonprofit environment. Responsibilities include overseeing healthcare regulatory compliance (including HIPAA and FDA matters), developing policies and contracting frameworks, and supporting strategic initiatives such as expansion projects, joint ventures, and major vendor agreements. The role requires a J.D., 10+ years of combined law firm and in-house experience, deep healthcare and nonprofit expertise, and admission to (or eligibility for) the Florida Bar. This is a unique opportunity to build a high-impact legal function aligned with a mission-driven organization. [Apply here](#).

**Client Solutions Engineer. BBCS is Hiring: Client Solutions Engineer!** Blood Bank Computer Systems (BBCS) is seeking a **Client Solutions Engineer** to support client implementations and ongoing success across the blood and biologics industry. This **client-facing, solutions-focused** role partners closely with Client Success and Implementation teams to help organizations understand how the **ForLife® and Forcyte™ platforms** support operational efficiency, regulatory compliance, and best practices throughout the blood donation lifecycle. The Client Solutions Engineer serves as a trusted advisor, delivering workflow expertise, product demonstrations, and solution guidance—this is **not a software development role**. Responsibilities include leading platform demonstrations, supporting implementation discussions, assisting with workflow design and process improvement, participating in troubleshooting efforts, and providing structured product feedback to internal teams. The role also requires staying current on operational and regulatory changes impacting blood and biologics organizations. **Position Details:** Full-time, salaried exempt role. Reports to the Vice President of Client Success. Interested candidates are encouraged to **learn more and apply online:** <https://bbcsinc.com/jobs/solutions-engineer/>. For questions, candidates may contact [hr@bbcsinc.com](mailto:hr@bbcsinc.com).

**Director of Hospital Services (Fresno, CA).** This position is a senior leadership role responsible for overseeing the manufacturing, distribution, testing, and coordination of quality blood products and services to hospital partners. This role is responsible for ensuring hospital partners have access to quality products and services in a

24/7 capacity. This leadership position is responsible for guaranteeing products and services are following all regulatory requirements designed to create and maintain a safe blood supply through the management and oversight of three separate and distinct business units. **For more**

**information, go to:** <https://talent.paylocity.com/Talent/Jobs/Details/3539641>. The deadline to apply is Friday, January 16, 2026.

**Medical Laboratory Technologist (MEDIC Regional Blood Center - Knoxville, TN).** We are seeking a highly skilled and detail-oriented Medical Laboratory Technologist to join our reference laboratory team. The ideal candidate will possess extensive experience in clinical laboratory procedures, laboratory management, and advanced diagnostic techniques. This role offers an exciting opportunity to contribute to cutting-edge research, clinical trials, and patient diagnostics by performing precise laboratory tests and ensuring the integrity of specimen processing. The successful applicant will demonstrate strong data management skills, proficiency in various laboratory techniques, and a thorough understanding of medical terminology and physiology. **Essential Duties & Responsibilities:** Operate and maintain laboratory equipment in a safe, clean, and orderly manner. Perform routine and special laboratory procedures for testing blood products, including but not limited to donor testing, quality control testing, component preparation, suitability of returned components, screening for antigen-negative blood, and labeling of blood components. Perform as a batch review and release technologist to verify the acceptability of blood products for transfusion and manufacturing use. **Required:** Medical Technologist license valid in TN. Bachelor's degree in a related field. **Preferred:** Minimum of two years of blood banking experience. **Next Steps:** If you would like to apply, please click [here](#).

**Reference Lab Supervisor.** OneBlood is currently recruiting for a Lab Supervisor in our AABB-Accredited Immunohematology Reference Laboratory in Orlando, FL. This position provides leadership and technical expertise, coordinates workflow and staff scheduling, and performs training and quality activities for the staff responsible for performing basic through advanced testing procedures on patient and/or donor samples. Applicants must have a bachelor's degree in medical technology, biological science or related scientific field from an accredited college or university. Three or more years in a

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clinical laboratory, preferably blood banking environment, or an equivalent combination of education, certification, training, and/or experience. Applicants must have a valid and current Florida Clinical Laboratory Technologist license in Immunohematology or Blood Banking; Florida Supervisor license and SBB certification preferred. To apply and view a complete Job Description of this position, go to [www.oneblood.org](http://www.oneblood.org) and click on the **Careers** tab. OneBlood, Inc. is an Equal Opportunity Employer/Vet/Disability.

**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). 