

2026 #3

January 26, 2026

INSIDE:

WORD IN WASHINGTON	3
STATE ADVOCACY BRIEFS	4
PEOPLE	5
2026 ABC Annual Meeting Registration is Open	6
Register for the ADRP 3-Part Webinar Series on Planning, Supplementing, and Maximizing Staffing and Production	6
Executive Compensation Survey Results Are Available	6
INFECTIOUS DISEASES UPDATE	7
MEMBER NEWS	7
GLOBAL NEWS	8
COMPANY NEWS	8
CALENDAR	10
POSITIONS	11

Blood Community Urges Donations as Winter Weather Disrupts Operations

America's Blood Centers, the Association for the Advancement of Blood & Biotherapies (AABB), and the American Red Cross issued a January 23rd [joint statement](#) encouraging individuals to schedule appointments to donate blood given the potential impact of winter weather disrupting operations across the country. "Blood donations are needed now before severe winter weather hits. The [blood community] is joining together to urge individuals to contact their local blood center and make an appointment to donate blood today," noted the statement.

The communication further explained that, "[severe winter weather] across large portions of the country is threatening to further disrupt blood donations at a time when supplies are already critically low in some regions. Winter storms can force the cancellation of blood drives, limit donor access, delay transportation of blood products, and interrupt deliveries to hospitals, sometimes for days. These weather-related disruptions are compounding other seasonal challenges, including a severe flu season that has impacted many regular donors."

(Source: Blood Community [Statement](#), 1/23/26) ♦

Donation-induced Protein and Iron Depletion in High Frequency Plasma Donors

A paper [published](#) in *Transfusion Medicine Reviews*, "investigate[d] associations of plasma donation frequencies with total protein, Hb and ferritin levels, and examined the association of ferritin levels in plasma donors with low-Hb deferral at subsequent donation attempts. Furthermore, [the study] estimated the contribution of high or very high-frequency donors to the total amount of collected plasma." The authors hypothesized that, "high or very high-frequency plasma donations may lead to depletion of protein and iron levels."

The researchers in the Netherlands explained that the study included, "all donors with successful plasma donations in 2019 who donated only plasma in two preceding years (i.e., 730 days), and who provided written informed consent at the Donor Health Questionnaire to use their data for scientific research, prior to donating. Data, including Hb measurements, from the last donation in 2019 of these donors were extracted from the blood bank information system e-Progesa (MAK Systems, Paris, France). For ferritin analyses, measurements were available in a subset of

(continued on page 2)

Donation-induced Protein and Iron Depletion in High Frequency Plasma Donors (continued from page 1)

donors with a successful donation from February 25th to March 1st, 2019 and that donated only plasma in two preceding years (N=953). For this subpopulation, all measurements (including Hb measurements) were from these donations in February. To verify the representativeness of this subpopulation, the characteristics of these donations were compared with the characteristics of the study population (N=42,390)."

The paper noted that, "[i]n total, 42,390 donors (22,513 males, 7,013 pre and 12,864 postmenopausal females) were included in the analyses. A subpopulation of 953 donors, 578 (61 percent) males and 102 (11 percent) pre and 273 (29 percent) postmenopausal females, were included in the ferritin analysis. Both age, mean Hb-levels and the duration of their donor career, as measured by years registered as a donor, did not differ from the total study population. Female donors donated less frequently than male donors in the preceding two years (yearly 4-6 donations for females and 7-8 donations for males). The plasma volume collected per donation from the total study population, which is the median volume collected per donation in 2019, is slightly higher than in the ferritin subpopulation since the protocols concerning the target volume changed in the second half of 2019."

The researchers found that, "[m]ale donors had similar protein levels, but higher Hb levels and ferritin level compared to female donors. Total protein (TP) was significantly lower with higher number of plasma donations, but the level of TP remained well within the normal range (60-80 g/L [37]). For male donors, TP on average decreased by 0.11 g/L and for premenopausal by 0.24 g/L and 0.16 g/L for postmenopausal female donors with every donation. The significant decrease in TP levels was confirmed by linear regression analyses, showing a significant negative association between numbers of plasma donations in the previous two years and the TP levels in males and both pre and postmenopausal females. The relative decreases in ferritin levels with increasing number of plasma donations is larger than for protein. [Median ferritin] levels for male donors was 50 ng/mL and for female donors 26 ng/mL for pre and 31 ng/mL for postmenopausal females; 41 (7 percent) of the male donors, 30 (29 percent) of pre and 42 (15 percent) of postmenopausal females are iron deficient (ferritin <15 ng/mL) and of the iron deficient donors 29 (3 males and 26 females) were low frequency- (LF) donors. Male very high frequency- (VHF) donors had about half the ferritin levels of male LF-donors. On average, ferritin levels decreased by 3.8 ng/mL in males; 2.5 ng/mL in premenopausal females and 2.1 ng/mL in postmenopausal females with every donation. The significant decrease in ferritin was also confirmed by linear regression analyses, showing a significant negative association between numbers of plasma donations in the previous two years and the ferritin levels in males and both pre and postmenopausal females."

(continued on page 3)

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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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Donation-induced Protein and Iron Depletion in High Frequency Plasma Donors (continued from page 2)

The authors concluded that, “[i]n this study we show that in plasma donors a higher donation frequency in two preceding years is statistically significantly associated with lower protein and ferritin levels. Total protein levels significantly decreased with the number of plasma donations, both for male and female donors. Although in this study the protein level decreases significantly with higher donation frequency, levels remain well above the recommended threshold. This is in line with our deferral rate for low protein, which at 0.09 percent of total protein tests is very low, especially compared to countries with higher plasma donation frequencies such as in the U.S., where low protein levels are one of the major reasons for deferral. From the present study it is not clear whether all proteins are lowered equally or that it is mainly albumin. We found that high and VHF plasma donors, even at the relatively LF of >12 donations per year in a setting with voluntary, nonremunerated donors, show decreased protein levels and are at risk for iron depletion and subsequent low-Hb deferral. The relatively large contribution of these donors to the total amount of collected plasma, together with the increasing pressure for more plasma collections, emphasizes the importance of better understanding and mitigating health risks associated with high-frequency plasma donations. Depending on procedures already in place, measures to consider include enhanced protein (and IgG) and iron monitoring, saline replacement procedures, or plasma, rather than whole blood, sampling for laboratory tests, and activities to motivate more donors to donate at medium frequencies in order to become less reliant on VHF donations.” Limitations of the study acknowledged by the authors included, “donation frequencies are largely dependent on donors’ self-selection and their more objective eligibility to donate. This ‘Healthy Donor Effect’ most likely led to an underestimation of negative health effects of high-frequency donations; very high donation frequencies (>18 per year) are still relatively rare in comparison to maximum allowed frequencies (26/year in the Netherlands vs 104/year in the U.S.)”

Citation: Prinsze, F., Vrielink, H., Paalvast, Y. *et al.* “[Donation-Induced Protein and Iron Depletion in High-Frequency Plasma Donors](#).” *Transfusion Medicine Reviews*. 2026. 💧

WORD IN WASHINGTON

As part of the congressional outreach efforts of America’s Blood Centers (ABC) and its member blood centers, multiple members of Congress have promoted blood donation, made floor speeches, and recognized donors in honor of National Blood Donor Month. Most recently on January 21st, Congressman Tony Wied (R-Wis.) [voiced](#) his support for the blood supply during [National Blood Donor Month](#) and urged his colleagues to sign on to [H.R. 5791](#), The BLOOD Centers Act, that he [introduced](#) with bipartisan support. Also, on January 22nd, Congressman Ben Cline (R-Va.) highlighted the importance of giving blood, urging first-time donors to donate. We previously reported on Senator Chuck Grassley’s (R-Iowa) [floor speech](#) and Congressman George Latimer (D-N.Y.) acknowledging National Blood Donor Month and commending donors during a [floor speech](#) earlier this month. ABC continues to encourage its member blood centers to use National Blood Donor Month as an opportunity to contact your members of Congress and urge their support for blood donation.

The U.S. Department of Health and Human Services (HHS) and U.S. Department of State have announced that the U.S. has [completed](#), “its withdrawal from the World Health Organization (WHO) due to the organization’s mishandling of the COVID-19 pandemic that arose out of Wuhan, China, its failure to adopt urgently needed reforms, and its inability to demonstrate independence from the inappropriate political influence of WHO member states.” The news release from HHS also explained that, “going forward, the U.S. government will continue its global health leadership through existing and new engagements directly with other countries, the private sector, non-governmental organizations, and faith-based entities. U.S.-led efforts will prioritize emergency response, biosecurity coordination, and health innovation to protect America first while delivering benefits to partners around the world.”

(Source: HHS [News Release](#), 1/22/26)

(continued on page 4)

WORD IN WASHINGTON (continued from page 3)

Nicole C. Kleinstreuer, PhD has been [appointed](#) as National Institutes of Health (NIH) Deputy Director for Program Coordination, Planning, and Strategic Initiatives. She had been serving in the role in an “acting capacity” since April, according to the announcement. In this role, Dr. Kleinstreuer leads, “the Division of Program Coordination, Planning, and Strategic Initiatives (DPCPSI) within the NIH Office of the Director. DPCPSI houses NIH-wide programmatic research and strategic policy initiatives, including the NIH Common Fund and offices focused on women’s health, data science, AIDS research, disease prevention, behavioral and social sciences, nutrition research, dietary supplements, and tribal health, among others. Dr. Kleinstreuer is internationally recognized for her leadership in developing innovative, human-relevant research strategies that improve public health protection. She has led interagency and international efforts to promote new approach methodologies (NAMs), advance human-based innovation, and integrate computational modeling, artificial intelligence, and systems modeling into regulatory science and biomedical research.”



(Source: NIH [Announcement](#), 1/14/26) 💧

STATE ADVOCACY BRIEFS

Following a targeted effort by the ABC Council of States to increase the number of states recognizing January as National Blood Donor Month, measures have now been introduced in [California](#), [Colorado](#), [Illinois](#), [Missouri](#), [South Dakota](#), [Tennessee](#), and [Wisconsin](#), to recognize January as National Blood Donor Month. In [Washington](#), the resolution was introduced and adopted. This powerful awareness of blood donations and blood centers within state legislatures comes in contrast to last year when only two states introduced such resolutions. An ABC [toolkit](#) is available to help in your efforts, please [contact us](#) with any questions.

[HB 3196](#), “An Act Relating to Blood Bank,” has been introduced in [Oklahoma](#). The bill would establish a COVID-19 blood bank that “shall only receive and store unvaccinated blood untainted from the COVID-19 shots.” Additionally, [HB 3426](#), a bill that would repeal a law providing an employer tax credit for each employee that donates blood at an employer sponsored blood drive, was introduced. The tax credit is currently authorized for tax years 2022 through 2027. If passed, the law repealing the tax credit would go into effect on January 1st, 2028.

[Arizona HB 2247](#), would require a physician to notify a patient of the option for a directed or autologous blood donation, and requires the physician to contact a blood bank to obtain and complete the necessary paperwork in a timely manner.

[Florida S 1534](#), would require blood banks to comply with a physician’s order for an autologous or directed blood donation for a named patient. Florida already has a directed donation law; however, this bill would go a step further by explicitly requiring blood centers to collect directed donations and permitting blood banks to charge a fee to cover the associated costs.

(continued on page 5)



STATE ADVOCACY BRIEFS (continued from page 4)

Illinois [HB 4346](#), would require a blood bank that facilitates autologous or directed blood donations to comply with a physician's order prescribing for an individual an autologous or directed blood donation, and the blood bank may charge a fee.

Iowa [SF 2049](#) and [HF 2084](#), would require a blood bank or hospital that facilitates autologous or directed blood donations to comply with an individual's request, based on a physician's order for a procedure that may require a blood transfusion, for an autologous or directed blood donation. Blood banks and hospitals may charge a fee.

Oklahoma [HB 3833](#), would require a hospital or blood bank to comply with a physician's written order for a patient to use autologous or directed blood donations for a scheduled medical procedure. A hospital or blood bank may charge a fee.

Tennessee [SB 1947](#), would require a blood bank to comply with a physician's order for an autologous blood donation or directed blood donation for a specific patient. A blood bank may charge a reasonable fee.

America's Blood Centers continues to work directly with member blood centers at the state level to defeat directed donation measures and will continue to provide updates. 💧

PEOPLE

Vitalant recently announced that **Charlie Wilcox** has retired after more than 50 years in blood banking. He began his career in 1974 as a donor recruiter with the Community Blood Center of Greater Kansas City. He then moved on to senior management positions in blood centers in Portland, Ore.; Wichita Falls, Texas; Peoria, Ill.; Nashville, Tenn.; Chicago, Ill.; and Los Angeles, Calif. He advanced to a vice president role for the American Red Cross Heritage Division, headquartered in Baltimore, M.D., and culminated his career by leading the Northeast Division of Vitalant, based in Pittsburgh, Penn. Charlie and his wife Angie are retiring in Covina, Calif.



(Source: Vitalant Announcement, 1/21/26)

Contributed by Nick Gehrig, Vice President of Communications at Vitalant



Hope Dorn, MBA has been named vice president of Operational Services at Miller-Keystone Blood Center (MKBC). According to a January 22nd news release, she will continue to, “oversee Hospital Services and Distribution, including inventory management, product distribution, and customer service for MKBC’s hospital partners. She also assumes responsibility for the MKBC’s Donor Collections department (encompassing whole blood, automated, and special collections), as well as operations of the Testing laboratory, Component laboratory, and Immunohematology Reference Laboratory, an AABB (Association for the Advancement of Blood & Biotherapies) accredited facility specializing in the identification and resolution of red cell transfusion compatibility issues.” Ms. Dorn joined MKBC in 2007, “as a Medical Technologist in the blood processing laboratory. She was subsequently promoted to Senior Technologist, then to Distribution and Inventory Manager; since 2023, she served as Director of Hospital Services. [Ms. Dorn] holds a Master of Business Administration degree from Southern New Hampshire University.”

(Source: MKBC News Release, 1/22/26) 💧



America's Blood Centers®
It's About *Life.*

INSIDE ABC

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

2026 ABC 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 9th-12th at the Loews Ventana Canyon Resort. Be sure to [book your hotel reservation](#) early to secure the group rate before Friday, February 13th. View the [program](#) 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, replacing the previous standalone ABC Quality and Technical Workshop. 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. Please [contact us](#) with any questions.

Register for the ADRP 3-Part Webinar Series on Planning, Supplementing, and Maximizing Staffing and Production

[Registration](#) is open for the next set of ADRP webinars titled "Doing More with Less: A 3-Part Series on Planning, Supplementing, & Maximizing Staffing and Production!" Part two will take place on February 18th at 1 p.m. EST and is titled "Maximizing Use of Volunteers for Scalability and Donor Experience to Supplement Staffing Resources." Speakers include:

- Susan Alexander-Wilson (We Are Blood)
- Sundee Busby, (Our Blood Institute); and
- Tara Scott (Our Blood Institute).

Session three will take place on March 18th at 1 p.m. EDT and is titled "Production Planning and Readiness: Aligning DR and DS for Efficient Use of Resources." Speakers include:

- Kaila DiNallo (Versiti); and
- Julie Eaton (Vitalant).

A recording of the webinar will be available for all registrants. Please [contact us](#) with questions.

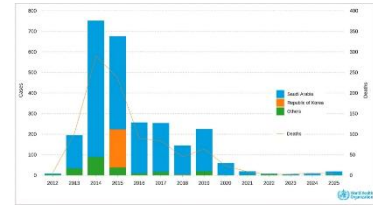
Executive Compensation Survey Results Are Available

The results of the Executive Compensation Survey are in! Authorized individuals from participating blood centers received an email on December 3rd from 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. 💧

INFECTIOUS DISEASES UPDATE

Middle East Respiratory Syndrome Coronavirus (MERS-CoV)

The World Health Organization (WHO) has [published](#) a global update regarding MERS-CoV for January 1st, 2025- December 21st, 2025. The data reported to the WHO indicated that, “a total of 19 cases of Middle (MERS-CoV) including four deaths [occurred] globally. Of the 19 cases, 17 were reported by the Kingdom of Saudi Arabia (KSA), and two were reported from France. Between June 4th and December 21st, the Ministry of Health (MoH) of KSA reported a total of seven cases of MERS-CoV infection, including two deaths. In addition, at the beginning of December 2025, the National IHR Focal Point (IHR NFP) for France also reported two MERS-CoV travel-associated cases; involving individuals with recent travel to countries in the Arabian Peninsula. The notification of these latest cases does not change the overall risk assessment, which remains moderate at both the global and regional levels.” The WHO noted that, “the virus continues to pose a threat in countries where it is circulating in dromedary camels, with regular spillover into the human population. WHO recommends implementation of targeted infection, prevention, and control (IPC) measures to prevent the spread of health care-associated infections of MERS-CoV and onward human transmission.” There are no reported cases of MERS-CoV transmission via blood transfusion nor any other coronavirus.



(Source: WHO [Global Update](#), 12/24/25) 💧

MEMBER NEWS

Kentucky Blood Center (KBC) has [announced](#) changes to its donor eligibility criteria for cancer patients. According to the announcement, “[i]n accordance with U.S. Food and Drug Administration guidelines, and with insight from extensive collection, validation and analysis, KBC Medical Director Dr. Dennis Williams has determined there is no further need for a lengthy deferral for donors who have completed treatment for certain cancers, including organ cancers and melanoma. Many donors who were previously issued longtime deferrals from a cancer diagnosis will now be eligible to donate blood one year after completing treatment for cancer. Donors diagnosed with hematologic cancers that affect the blood cells, bone marrow, or the lymphatic system will remain permanently ineligible to give blood out an abundance of caution. Certain medications for cancer treatments may still prohibit a donor from donating, and additional health requirements must be met.” Dr. Williams added in the announcement, “[w]e are pleased to update our donor eligibility requirements. There is no evidence that cancers are transmitted by blood transfusion. While there are certain cancers and treatments that will still impact donation, we are excited to offer a wider opportunity for those who wish to give blood to do so.”

(Source: KBC [News Release](#), 1/14/26)

OSF Healthcare and Eureka-Goodfield Emergency Medical Services (EMS) have [partnered](#) with **ImpactLife** for ground ambulances, “to carry blood components on board, allowing patients to receive transfusions before reaching the hospital.” According to the news release, the prehospital blood initiative began earlier this month as the EMS ground ambulances, “received two units of type O-positive red blood cells and two units of plasma from the ImpactLife distribution hub in Peoria. Two Eureka-Goodfield EMS ambulances will now always carry red blood cells and plasma.” The initiative makes Eureka-Goodfield the first ground ambulance service in Illinois to carry blood components for prehospital blood transfusions. Matthew Jackson, MD, medical director of pre-hospital and EMS at OSF HealthCare, explained in the news release, “[b]leeding from an uncontrolled hemorrhage is a leading cause of preventable death among trauma patients. Every minute counts for these patients, so receiving blood products from trained first responders can

(continued on page 8)



MEMBER NEWS (continued from page 7)

significantly improve survival, reduce the length of hospital stays and help decrease the overall use of blood once patients arrive at the emergency department.”

(Source: OSF [News Release](#), 1/15/26)

Allegiance Mobile Health is [partnering](#) with **Coastal Bend Blood Center** on a prehospital whole blood transfusion program that will allow, “[p]aramedics [to] begin transfusing low-titer O-negative whole blood in the field, giving critically injured patients lifesaving treatment up to an hour sooner than hospital arrival.” In support of the program, Allegiance Mobile Health will also host blood drives with the blood center.

(Source: Delta Development Team [News Release](#), 1/7/26)

The Blood Connection recently celebrated the grand opening of its Simpsonville Community Blood Center location in Simpsonville, S.C. This facility will, “directly support[t] patients receiving care at Prisma Health, Bon Secours St. Francis, Spartanburg Regional, AnMed, Shriner’s Children’s Greenville and MedTrans Air Medical Transport and others,” according to the news release. “As hospitals across the Upstate work tirelessly to serve a growing population, access to a strong blood supply is critical,” said Delisa English, MBA, president and chief executive officer of The Blood Connection in the announcement. “The Simpsonville Community Blood Center is not just a new facility. It’s a promise that as this region expands, lifesaving care will keep pace. Our commitment to the Upstate is to ensure no patient is ever left waiting for blood when time matters most.”

(Source: The Blood Connection News Release, 1/22/26) 💧

GLOBAL NEWS

Banc de Sang i Teixits (the Blood Bank of Catalonia Spain) has [completed](#) implementation of revised donor eligibility criteria for individuals regarding variant Creutzfeldt-Jakob disease (vCJD), according to a report from *Catalan News*. The organization announced in December 2025 that it had “updated its protocols [to reflect]” the donor eligibility change after Spain’s regulatory authority removed the deferral for individuals, “who lived in the United Kingdom for more than 12 months between 1980 and 1996.” The change came in the wake of, “scientific reviews confirm[ing] that the risk [of vCJD was] extremely low.”

(Source: *Catalan News*, “[Brits in Catalonia donate blood after long-standing ban is lifted](#),” 1/13/26) 💧

COMPANY NEWS

Cerus Corp. has [announced](#) that the German Red Cross Blood Donation Service Baden-Württemberg – Hessen and its subsidiary organization, the German Red Cross Blood Donation Service North-East, have started a study to, “evaluate the routine use of pathogen-inactivated platelet concentrates utilizing the Intercept Blood System in a clinical setting.” According to a company news release, the study known as INITIATE is the first of its kind in Germany and has three main objectives:

- “[g]ain operational and clinical experience and confirm the safety profile of pathogen-inactivated platelet concentrates in routine transfusion practice.
- [a]ssess the feasibility of broader or system-wide introduction of pathogen inactivation in the German healthcare system.
- [b]egin implementation of the current recommendations of the expert committee ‘Arbeitskreis Blut’ at the Ministry of Health to introduce measures to further reduce the risk of transmission of infections through platelet concentrates.”

(continued on page 9)



COMPANY NEWS (continued from page 8)

Cerus also [noted](#) earlier this month in a separate announcement regarding the company's upcoming development and clinical milestones in 2026 that it anticipated:

- “[p]remarket [a]pproval (PMA) application submission to the U.S. Food and Drug Administration (FDA) for INT200, the next generation LED-based illumination device, expected in mid-2026;
- [r]esults from the Phase 3 RedeS study of the Intercept Blood System for Red Blood Cells (RBCs) in anemia patients expected in the second half of [the calendar year].”

(Sources: Cerus Corp. News Release, [1/22/26](#); [1/11/26](#))

The **Association for the Advancement of Blood & Biotherapies (AABB)** has [issued](#) an announcement that it is, “seeking public [comment](#) on proposed interim standards related to infectious disease testing for *Trypanosoma cruzi* (Chagas disease) and West Nile virus (WNV) for facilities located outside of the United States. The proposed interim standards would apply to the 34th edition of Standards for Blood Banks and Transfusion Services (BB/TS Standards) and the 12th edition of Standards for Cellular Therapy Services (CT Standards).” The comment deadline is February 22nd as the AABB Blood Banks and Transfusion Service Standards Committee and Cellular Therapies Standards Committee, “are proposing these interim standards to establish donor deferral periods for individuals who have traveled to WNV- and Chagas-endemic countries. The standards would apply to facilities in countries where this testing is not required by the local competent authority. Accredited facilities should note that these proposed additions would not apply to facilities in the United States or in countries where the competent authority already requires testing for these agents,” according to the announcement.

(Source: AABB [Announcement](#), 1/23/26)

A January 12th [communication](#) explained that the organization formerly known as the **American Association of Tissue Banks (AATB)** has transitioned, “from a 501(c)(3) nonprofit membership association to a 501(c)(6) trade association and now operates as the **Association for Advancing Tissue and Biologics (AATB)**,” as of January 1st, 2026. The announcement explained that the, “Association is governed by its own [Bylaws](#) and led by a [Board of Directors](#), enabling a stronger, more unified voice to advocate for the industry, while maintaining AATB’s long-standing commitment to safety, quality, and the availability of donated human tissue. [As part of this transition,] the original 501(c)(3) entity is now the AATB Foundation. The Foundation operates in support of the Association’s mission and is subordinate to the Association for Advancing Tissue and Biologics.” A comprehensive rebrand will be unveiled at the AATB Annual Meeting later this year.

(Source: AATB [Communication](#), 1/12/26) 💧



RESEARCH BRIEFS

America's Blood Centers welcomes contributions or briefs from guest authors for scientific/medical peer-reviewed published papers. The views/comments expressed in submitted articles from external parties are those of the author(s) and are not to be interpreted as the viewpoint of America's Blood Centers. If you are interested in contributing a brief for potential publication please contact us [here](#).

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.)

2026

Jan. 29-30. **National Institutes of Health (NIH) Cardiopulmonary Complications of Hematopoietic Stem Cell Transplantation (HCT) and Gene Therapy (Hybrid).** [Registration](#) is open. More information is available [here](#).

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](#).

Feb. 18. **ADRP "Doing More with Less: A 3-Part Series on Planning, Supplementing, & Maximizing Staffing and Production" Webinar Series Part II: Maximizing Use of Volunteers for Scalability and Donor Experience to Supplement Staffing Resources.** [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. **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. [Registration](#) is open. More information available [here](#).

Mar. 18. **ADRP "Doing More with Less: A 3-Part Series on Planning, Supplementing, & Maximizing Staffing and Production" Webinar Series Part III: Production Planning and Readiness: Aligning DR and DS for Efficient Use of Resources.** [Registration](#) is open. More information is 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) 32nd 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) 39th International Congress.** Kuala Lumpur, Malaysia. [Registration](#) is open. More information available [here](#).

Oct. 4-7. **Association for Advancing Tissue and Biologics (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 Pathologistes (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

POSITIONS

Quality Supervisor, Transfusion (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 Donor 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 division. Key Responsibilities: Lead and coordinate quality initiatives for Donor Services 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 donor services and/or transfusion services. A passion for quality and a commitment to organizational excellence. Interested candidates can apply at <https://www.aruplab.com/careers>.

Consultation & Reference RDP Specialist. Gulf Coast Blood is seeking a **Consultation & Reference RDP Specialist** to join our mission-driven team in Houston. In this important laboratory role, you will help prepare special blood components and support patient testing that directly impacts lifesaving transfusions. This position requires good judgment, diplomacy, and strong communication with both internal and external partners. In this role, you will evaluate and process special component requests per established guidelines, communicate with external customers regarding patient and rare donor needs, and provide technical support to Collections, Marketing, and Recruitment teams. You will also collaborate with Hospital Services and Business Development to optimize the utilization of antigen-typed inventory and support effective clinical outcomes. We offer a **competitive compensation and benefits package**, a Texas Medical Center location with free parking, opportunities for career advancement, and mentoring toward Specialist certification (SBB). You'll work alongside dedicated professionals committed to saving and sustaining lives. If you embody **Integrity, Commitment, and Respect**, and are ready to make a meaningful impact every day, we encourage you to apply now and help us support patients, donors, and healthcare partners throughout our region. [Apply Now!](#)

Consultation & Reference Tech III. Gulf Coast Blood is seeking a skilled **Consultation & Reference Tech III** to join our mission-driven laboratory team in Houston. In this critical role, you will prepare special blood components and perform advanced immunohematology testing

on both patient and donor samples. Your work will support over **170 hospitals and service partners** across the Texas Gulf Coast, directly contributing to lifesaving transfusion decisions and patient care. We're looking for professionals who work with precision, are naturally curious, and value quality. You'll demonstrate competency in core Tech II functions and perform moderately complex antibody identification, compatibility testing, and donor serological testing under the guidance of Specialists. You will also prepare consultation reports, evaluate and process sample requests, monitor blood component inventory, perform quality control and preventative maintenance, and follow all departmental SOPs and regulations. **Qualifications:** MT/MLS/SBB certification (ASCP or equivalent) required at time of hire. New graduates encouraged to apply. Recent Blood banking experience within an immunohematology reference laboratory (IRL) highly preferred. **Why join us?** We offer competitive pay and benefits, free parking at the Texas Medical Center, and opportunities for growth and advancement — all while making meaningful community impact every day. If you embody **Integrity, Commitment, and Respect**, apply now and help save lives with us! [Apply Now!](#)

Hematology – QC Specialist. Gulf Coast Blood is seeking a dedicated **Hematology – QC Specialist** to support our mission of providing safe, high-quality blood components to hospitals and patients across the Texas Gulf Coast region. This critical role operates within our Quality Control Laboratory and plays an essential part in ensuring blood products meet rigorous quality standards. As a Hematology – QC Specialist, you will prepare and test blood component samples, track and trend quality control results, and manage daily QC lab operations in the absence of supervisory staff. You'll communicate professionally with internal and external customers, especially during critical situations such as positive bacterial cultures, and initiate recall procedures when needed. You will also serve as a lead trainer and competency assessor, help coordinate workflow, and recommend process improvements to enhance efficiency and quality. **Qualifications:** We're looking for someone with **MT/MLS certification (ASCP or equivalent)** and **at least 2 years of hematology experience**. Strong organizational, communication, and team collaboration skills are essential, and experience with flow cytometry is a plus. **Why join us?** We offer a **competitive compensation and benefits package**, free parking at the Texas Medical Center, opportunities for career growth, and a supportive workplace focused on excellence and mission. [Apply Today!](#)

Assistant Manager for the Research and Recovered Product Laboratory. Gulf Coast Blood is seeking a dedicated **Assistant Manager for the Research and Recovered Product Laboratory (RRPL)** to help lead

(continued on page 12)

POSITIONS (continued from 11)

operations in our component production area. This impactful role supports the delivery of high-quality blood components and services used for research and manufacturing. In this role, you'll supervise laboratory staff, maintain policies and procedures, and oversee quality control practices. You will coordinate client requirements, manage product processing, packaging, distribution, and accurate documentation of manifests, tests, and billing records. Key responsibilities include resolving production challenges, ensuring compliance with cGMP and SOP requirements, administering staff training, supporting process improvements, and collaborating with information systems for tools and reporting. **Qualifications:** We welcome professionals with a degree in biology, chemistry, or related science, at least three years of recent laboratory or blood component manufacturing experience, and two or more years of supervisory experience. Familiarity with quality concepts, regulatory standards (cGMP, AABB, FDA), and workflow leadership is essential. **Why join us?** We offer competitive compensation and benefits, career advancement opportunities, and the chance to meaningfully support patient care and scientific progress. If you embody **Integrity, Commitment, and Respect**, apply now and help make a difference at Gulf Coast Blood. [Apply Today!](#)

Donor Recruitment Manager. Blood Assurance is seeking a **Donor Recruitment Manager** to lead field recruitment efforts that build new and existing business in our North Georgia, Northeast Alabama, and Western North Carolina region. Primary responsibilities include direct leadership of Account Managers in expanding blood drive activity on mobiles primarily, and in facilities as needed, based on growth strategy in a specific type of blood product recruitment and collection. Assist in developing long-term community business partnerships and coordinating internally with all leadership levels to support or expand Blood Assurance recruitment efforts. Work closely with Donor Services leadership to ensure recruitment and collection teams are working together toward meeting overall product collection goals. Qualified applicants will have: a Bachelor's degree, preferably in business, marketing, or a related field. Seven to 10 years of sales experience, preferably in blood banking. Three to 5 years of sales staff management. Advanced communication skills. Public presentation and networking skills. Advanced organizational, customer service, and teamwork skills. 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. Please visit [Careers — Blood Assurance](#) to view the full job description and apply.

Laboratory Services Manager. The Blood Bank of Alaska is looking for a Laboratory Services Manager. Under the general direction of the Director of Laboratory Services, this person is responsible for oversight of daily laboratory operations, ensuring that laboratory product QC and donor test results meet CLIA, AABB, and FDA compliance standards/regulations for the manufacture of blood products. The Laboratory Services Manager is also responsible for oversight of laboratory personnel. 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. Educational assistance, paid annual leave and 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, please apply online at: <https://bloodbankofalaska.apscareerportal.com>. A complete job description can be found there as well.

Quality Systems and Software Specialist. The Blood Bank of Alaska (BBA) is looking for a Quality Systems and Software Specialist. The person in this role is responsible for promoting organizational compliance with accrediting agency, state, and federal regulations. Managing the Blood Bank of Alaska's occurrence program, which includes performing investigations for occurrences. The Quality Systems and Software Specialist manages and performs internal audits, as well as facilitates changes to BBA's Standard Operating Procedures (SOPs). Acts as administrator for BBA's Blood Establishment Computer System (BECS) and any other applicable software programs. Also provides customer service to BBA's software users and manages as well as performs software upgrades and validations. 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. Educational assistance, paid annual leave and 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, please apply online at <https://bloodbankofalaska.apscareerportal.com>. A complete job description can be found there as well. 💧