

2026 #5

February 9, 2026

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New Data Published in *U.S. Blood Donation Statistics and Public Messaging Guide*

America's Blood Centers (ABC) and ADRP: The Association for Blood Donor Professionals have released version 3.0 of the [*U.S. Blood Donation Statistics and Public Messaging Guide*](#), which features the latest data from published research and credible public sources. The *Guide* expands coverage of key patient populations and includes new sections reflecting blood use and delivery in real-world emergency settings.

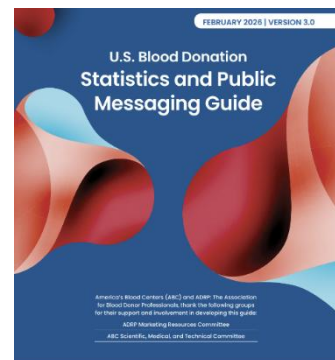
This edition of the *U.S. Blood Donation Statistics and Public Messaging Guide* highlights shifts in both donor participation and blood utilization, including changes in donation patterns following the COVID-19 pandemic, increased participation among younger donors, declines in donor deferral rates, and growth in donations from minorities since 2021. For the first time, emerging national data on prehospital blood transfusions are included, illustrating the growing role of blood transfusion in trauma care.

Also, new this year, users can search, filter, and share blood donation data thanks to new interactive features. The webpage allows individuals to search and filter national blood and donor statistics, quickly pull media-ready numbers, and download shareable graphics and infographics for social media, presentations, and community outreach.

ABC and ADRP thank members of the ABC Scientific, Medical, and Technical Committee, ABC Communications and Partnership Committee, and the ADRP Marketing Resource Committee for their help in developing this year's *Guide*. Please [contact us](#) with any questions. 💧

Thank You for Participating in NBDM 2026!

America's Blood Centers and ADRP thank you for your participation in [National Blood Donor Month](#) (NBDM) 2026 and making it a success. Our collective actions as a blood community resulted in news stories mentioning "National Blood Donor Month" generating more than 90 million in potential reach, compared to just over 60 million last year, a 50 percent increase in national visibility. We could not have achieved this without your participation and support and look forward to you joining us for NBDM 2027! 💧



Blood Donor Incentives: Gift Model Versus Honor Model Explored in China

Researchers in *BMJ* [published](#) a paper that, “aimed to address gaps in the evidence by evaluating a new hon[o]r model — a combination of social recognition and preferential treatments given to frequent donors through a quasi-experimental design in China. [The authors] aimed to characteri[z]e key features of the hon[o]r model, systematically assess the policy’s effects on total counts of blood donations and donor eligibility rates, understand challenges of retaining blood donors, and leverage these findings to provide new guidance for policy makers.” They defined the gift model as placing, “emphasis on voluntariness and altruistic sharing, often at the expense of providing adequate social recognition and benefits to blood donors.” Specifically, this study compared the merits of a new incentive policy known as the honor model which was designed to, “boost blood donation through a combination of social recognition and honorary access to preferential treatment in addition to the gift model.”

The authors explained that the, “honor model [is in addition to] the gift model, [thereby] granting preferential or honorary access to some public services (e.g, free access to bus transportation, park visits, outpatient consultations) to frequent blood donors. The aim of the hon[o]r model is to reward altruism through honorary non-monetary incentives, to validate [donors’] altruistic behavi[o]r and moral integrity, leading to broader social recognition.” The researchers noted that for this study, the honor model equated to, “the gift model plus an honorary award in the form of an hon[o]r card issued only to frequent blood donors who have donated more than 20 times.” The study period took place from 2012 to 2018. The researchers discovered that, “no statistically significant effects were generated at the time when the hon[o]r model was first introduced. However, statistically significant average treatment effects on the treated (ATT) estimates were observed [from the] second year of adopting the hon[o]r model and onwards. The magnitude of estimated effects and the significance level for those estimates increased over time.”

The study found that, “[s]pecifically, at period 1, the estimated ATT is 3.55 (95 percent CI 1.30 percent to 5.80 percent, $P=0.003$), indicating an average increase of 3.55 percent in the total count of blood donations attributable to the policy in provinces that were exposed to the policy. For periods 2 and 3, the estimated ATT is 3.65 percent (0.56 percent to 6.75 percent, $P=0.02$) and 4.42 percent (0.37 percent to 8.48 percent, $P=0.03$), respectively. By period 4, the ATT estimate reaches 7.70 percent (2.42 percent to 12.98 percent, $P=0.006$), suggesting an even greater impact on increasing the total count of blood donations. A similar pattern can be observed when examining the count of whole blood donations. Statistically significant ATT estimates are observed from period 1 to period 4, with a consistent increase in magnitude (period 0: 1.12 percent, 95 percent CI -0.25 percent to 2.49 percent; period 1: 3.34 percent, 1.11 percent to 5.56 percent, $P=0.005$; period 2: 3.45 percent, 0.31 percent to 6.59 percent, $P=0.03$; period 3: 4.26 percent, 0.11 percent to 8.42 percent, $P=0.05$; period 4: 7.23 percent, 1.90 percent to 12.56 percent, $P=0.01$).”

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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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Blood Donor Incentives: Gift Model Versus Honor Model Explored in China (continued from page 2)

The authors noted that blood safety was “not compromised,” and “no significant changes in blood donor eligibility rate occurred during the study period.” They also discovered that, “the results of city level analyses aligned with provincial level analyses, with an absolute increase in total count of blood donations and count of whole blood donations during 2012-2018. Statistically significant ATT estimates were observed during most periods after the intervention for total count of blood donations, with a consistent increase in magnitude (period 0: 1.55 percent, 95 percent CI –0.37 percent to 3.48 percent; period 1: 3.18 percent, 0.30 percent to 6.06 percent, $P=0.03$; period 2: 4.72 percent, 0.57 percent to 8.86 percent, $P=0.03$; period 3: 4.19 percent, –2.83 percent to 11.23 percent; period 4: 7.13 percent, –0.79 percent to 15.04 percent, $P=0.08$). [The researchers] observed a similar trend for count of whole blood donations at the city level, with an absolute increase in magnitude (period 0: 1.36 percent, 95 percent CI –0.64 percent to 3.35 percent; period 1: 2.97 percent, –0.07 percent to 6.00 percent, $P=0.06$; period 2: 4.59 percent, 0.32 percent to 8.87 percent, $P=0.04$; period 3: 4.39 percent, –2.96 percent to 11.73 percent; period 4: 7.35 percent, –1.36 percent to 16.07 percent, $P=0.10$).”

The paper concluded that, “[a]fter introducing the hon[o]r model, the total count of blood donations increased from 1.06 percent to 7.70 percent monotonically, and simultaneously, the count of whole blood donations increased from 1.12 percent to 7.23 percent. Previous studies from the U.S., Switzerland, and Italy showed that explicit incentives for blood donations, ranging from small coupons to a paid day off work, can increase blood donations, which aligns with our findings.” Additionally, the researchers urged that, “a new guiding model for blood donation to be established — the hon[o]r model (i.e., social recognition through an hon[o]r card and granting cardholders free access to some public services or other social incentives that are non-tradable, non-transferable, and hard to value). Policymakers in other countries should consider the feasibility and desirability of using the hon[o]r model and designing their own incentives to address potential blood shortage concerns.” Acknowledged limitations of the study included, “[the research] is limited by observations from only three provinces that implemented the hon[o]r model, and the intervention duration was relatively short in Jiangsu Province and Hebei Province; [the authors] decided to refrain from including the period after the COVID-19 outbreak in [the] study because the pandemic might have had an unexpected impact on blood donation performance, potentially leading to imprecise estimation of the impact of the hon[o]r model. [They] did not include data from before 2012 owing to limited availability; [and] our findings may be influenced by the early adopters within our setting.”

An accompanying [editorial](#) titled, “Incentives for Increasing Blood Donations” has also been published in *BMJ* by researchers in France that suggested, “[c]aution is still warranted when interpreting [the study] findings,” according to a [news release](#) from the *BMJ* Group. “However, the decision to reward altruistic activities, through non-financial or indirect incentives, means that this strategy is likely to be sustainable, as the cost to the healthcare system should remain moderate, they note. Subsequent economic evaluations could be necessary, they say. Nevertheless, they conclude that these findings ‘may herald a new hon[o]r paradigm for blood donation, or alternatively, a new non-cash model for rewarding it. Only time will tell.’”

Citations: Liu, Y., Pan, Y., Zheng, Z., *et al.* “[Impact of shifting blood donation policy from gift to honour model: staggered difference-in-differences analysis in China.](#)” *BMJ*. 2026.

Sanchez, S. and Gangand, V. “[Incentives for increasing blood donations.](#)” *BMJ*. 2026. 💧





BRIEFLY NOTED

The Massachusetts Department of Public Health, Office of Emergency Medical Services (Department) has [issued](#) the 2026.1 updated Statewide Treatment Protocols (STP), which now includes the addition of Low Titer O+ Whole Blood (LTOWB) or Packed Red Blood Cells (PRBC) Transfusion. “All ambulance and EFR services are required to train their EMS personnel in the updated STP. The updated STP may be used by a service once such training is complete, and the service is appropriately equipped, but in any event are mandatory as of June 1st.”

(Source: Massachusetts Department of Public Health [Announcement](#), 1/21/26) 💧

WORD IN WASHINGTON

U.S. Department of Health and Human Services (HHS) Assistant Secretary for Health (ASH) Admiral Brian Christine, MD [urged](#) individuals in the U.S. Public Health Service (USPHS) Commissioned Corps to schedule appointments to donate blood in a February 4th video. Admiral Christine stated in the video, “as a surgeon, I’ve seen firsthand how critical donated blood is to saving lives. Every two seconds, someone in the U.S. needs blood and right now, our blood donations are down. In many places we only have a one- to two-day supply in reserve. [As America’s] health responders, it is our responsibility to lead from the front in every aspect of public health, and this includes addressing our nation’s low blood supply. Donating blood is safe and simple and only takes about an hour. [I] recently donated and if you’re eligible, I challenge you to step forward and to do the same.” The USPHS is, “one of the nation’s uniformed services — a branch committed to the service of health.”

(Source: [HHS Video](#), 2/4/26)

U.S. National Highway Traffic Safety Administration (NHTSA) Administrator Jonathan Morrison recently raised awareness for and mentioned the importance of prehospital blood transfusions in a [speech](#) last week. During the February 4th remarks, he commented, “[o]ne of the most promising innovations in post-crash care is prehospital blood transfusion, which research shows decreases mortality among trauma patients with severe bleeding by 37 percent. Our behavioral safety group is looking at research and demonstration projects to explore and support how to make prehospital blood transfusion available to crash victims. Included in the Safe Streets and Roads for All [grants](#) package released just before Christmas was \$50 million for [transfusion programs](#) across the country to be administered by NHTSA. This comes on top of \$30 million last year to support 25 transfusion demonstration projects under a partnership with the Department of War. We think this is one of the most exciting innovations in post-crash care in recent years, and we’re all in.” As part of America’s Blood Center’s (ABC) [Advocacy Agenda](#), we have developed partnerships with EMS organizations and government agencies, including work with the Prehospital Blood Transfusion Coalition (PHBTC), to address the barriers limiting widespread availability of prehospital blood transfusions, including scope of practice and reimbursement. ABC is committed to improving access to pre-hospital blood transfusions and will continue to provide updates on our advocacy efforts as they become available.

(Source: NHTSA [Announcement](#), 2/4/26)

U.S. Food and Drug Administration (FDA) Center for Biologics Evaluation and Research (CBER) Director Vinay Prasad, MD coauthored a paper [published](#) in the *Annals of Internal Medicine* titled “The U.S. Food and Drug Administration’s Perspective on Chimeric Antigen Receptor T-Cell Therapies for Autoimmune and Rheumatic Conditions.” A [report](#) from *Fierce Biotech* explained that, “[w]hile interested in CAR-T therapies’ potential to achieve durable, drug-free remission in serious autoimmune conditions, the FDA is equally wary of their ‘unpredictable long-term toxicity.’ [The FDA] shares

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enthusiasm for this class of products [and will] carefully shepherd [the advancement of clinical studies] focused on the development, durability, and long-term safety of CAR T-cell therapies.”

Citation: Tariq, A, Kumar, V., and Prasad, V. “[The U.S. Food and Drug Administration’s Perspective on Chimeric Antigen Receptor T-Cell Therapies for Autoimmune and Rheumatic Conditions.](#)” *Annals of Internal Medicine.* 2026

(Source: Fierce Biotech, “[FDA signals tailored approach to ‘carefully shepherd’ CAR-T therapy for autoimmune diseases.](#)” 2/3/26) ♦

PEOPLE

Subhash Parameswaran, MBA has joined Carter BloodCare as chief information officer (CIO), after serving as senior director of Information Technology Applications for Creative Testing Solutions. This is Mr. Parameswaran’s second stint with Carter BloodCare; he previously served as a senior project manager from 1996 to 2002. He earned his Bachelor of Technology degree from the University of Calicut, where he specialized in computer science, and earned a Master of Business Administration from Southern Methodist University. Prior to serving as head of Technology at Creative Testing Solutions, Mr. Parameswaran held multiple roles, including head of Information Services at UST, a technology consulting firm, and software development manager at WellSky Inc. He brings more than 35 years of experience in technology leadership and information services to his new role, with expertise in medical device software management, research, and project management.



(Source: Carter BloodCare Announcement, 2/3/26)

Contributed by James Black, Senior Public Relations Specialist at Carter BloodCare



Edgar Engleman, MD, medical director at Stanford Blood Center (SBC) has been named the recipient of the Association for the Advancement of Blood & Biotherapies (AABB) 2026 Landsteiner-Alter Award, the organization’s highest scientific honor. This achievement celebrates individuals whose original research has profoundly influenced the fields of transfusion medicine or biotherapies on an international scale. Dr. Engleman’s distinguished career encompasses pioneering contributions to both blood safety and cellular immunotherapy — advances that have reshaped modern medical practice and improved outcomes for patients worldwide. He used his monoclonal antibody to CD4 to develop the first test to identify asymptomatic AIDS carriers, and SBC successfully screened blood donors with this test to prevent the transmission of AIDS via transfusion — years before HIV was discovered. A decade later, his research into immune cell biology and his experimental clinical trials performed on cancer patients at Stanford laid the groundwork for the first U.S. Food and Drug Administration–approved cellular therapy, a milestone that ushered cellular immunotherapies into mainstream cancer care and marked a new era in the treatment of malignancies. Reflecting on the honor, Dr. Engleman remarked, “receiving this award is a tremendous honor, and I’m deeply grateful for the support that made it possible. Without the support of SBC during much of my career, the work that formed the basis for this recognition could not have been accomplished,” according to the SBC announcement. AABB will formally honor Dr. Engleman at its Annual Meeting in October.

(Source SBC Announcement, 2/9/26)

Contributed by Jeff Schmidt, Communications and Public Relations Manager at Stanford Blood Center ♦



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 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.

Hear our keynote speaker [Lisa Goldstein](#), managing director of [Kaufman Hall](#), discuss "Navigating Disruption: How Hospital Industry Shifts Reshape Blood Center Strategy." She will explore:

- the key financial challenges hospitals are facing;
- lessons learned from recent industry disruptions; and
- how hospital pressures are reshaping reimbursement, partnerships, and expectations for blood centers.

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

ABC and the American Medical Technologists Partnership Webinar Set for February 10th

ABC and the [American Medical Technologists](#) (AMT) have announced a new partnership. This collaboration aims to further strengthen workforce development, professional training, and the shared work of both organizations with HOSA—Future Health Professionals. An informational webinar introducing the partnership and outlining additional details will take place on Tuesday, February 10th at 2 p.m. EST. Registration is open and free to ABC member blood centers and partners. Please [contact us](#) for more information or additional details about the partnership including a link to registration. Through this partnership, ABC member blood centers will be able to collaborate with local HOSA chapters to support the HOSA phlebotomy competition sponsored by AMT, offer no-cost training and certification opportunities for staff, and strengthen workforce pipelines by hosting externships for HOSA students and AMT applicants at community blood centers. The partnership expands on ABC's longstanding commitment to support member blood centers through education, certification pathways, and student engagement, while creating new, practical opportunities to develop and retain skilled phlebotomists.

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Call for 2026 ADRP Award Nominations Deadline Approaching

Recognize the work of individuals on your staff, donors, and organizations who go above and beyond with their exceptional service and leadership in support of blood donation by [submitting a nomination](#) for the 2026 ADRP Awards. This year's awards include:

- Franzmeier Lifetime Achievement Award;
- Ronald O. Gilcher, MD Award;
- Donor Experience Professional of the Year Award;
- Rolf Kovenetsky Leader of the Year Award;
- ADRP Volunteer of the Year Award;
- Media Partner Award;
- Blood Drive Partner of the Year Award; and
- School Partner of the Year Award.

Award winners will be honored during the [2026 ADRP Annual Conference](#) in Minneapolis, Minn. and receive a complimentary conference registration. Descriptions of each award are [available](#) and a listing of the [2025 award winners](#). Complete your nominations by Friday, February 13th.

Please [contact us](#) with 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.

Register for the 2026 ADRP Annual Conference

ADRP encourages you to [register](#) now for the [2026 ADRP Annual Conference](#) in Minneapolis, Minn., May 12th-14th, at the Hyatt Regency Minneapolis. Remember to [book your hotel](#) room by April 10th for the discounted rate. This conference offers a chance to learn about industry trends, share ideas, and connect with other donor recruitment, donor services, collections, marketing, and communications professionals. Join more than 300 of your peers by participating in pre-conference workshops, attending compelling educational sessions, engaging in roundtable discussions, and exploring an expansive exhibit hall filled with

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innovative solutions. Seize this extraordinary opportunity to learn, share, and grow within the blood community. Please [contact us](#) with any questions as we look forward to seeing you!

ADRP Trends in Donor Relations Study Is Now Open

ADRP is pleased to announce the launch of the *ADRP Trends in Donor Relations Study*. This survey is a strategic tool for blood centers to use in evaluating the performance of collection and recruitment operations and marketing strategies in comparison to your domestic and international colleagues. ADRP has partnered with a third-party company, [Dynamic Benchmarking](#), to improve the data collection and reporting experience. As always, our top priority is the confidentiality of your data. The information in this report will only be reported in aggregate and in accordance with anti-trust regulations.

A key feature of the reporting platform is the ability to view how your operations compare to others using a variety of dynamic filters, including blood center location, collection levels, and employee count. Only centers that participate in the survey will have access to this information. [Complete the survey](#) by April 1st and only submit one response per blood center, so please coordinate your responses accordingly. [Contact us](#) with any questions. 💧

MEMBER NEWS



LifeSouth Community Blood Centers recently celebrated the grand re-opening and ribbon cutting of their newly re-modeled operations building and donor center in Brooksville, Fla. on January 30th. The event included representation from the Greater Hernando Chamber of Commerce, leadership from local hospitals and emergency responders, and many long-time donors. LifeSouth began serving Hernando County almost 40 years ago by collecting and providing blood to local hospitals, and LifeSouth's location on Cortez Boulevard in Brooksville opened soon after welcoming generations of lifesaving blood donors. Over the

past year, the building underwent an extensive renovation and is now re-open. "We are excited to welcome the community and our blood donors back to our building, to an updated and inviting space for our donors and team," said Kim Kinsell, JD, MBA, president and chief executive officer at LifeSouth and president of America's Blood Centers, in the news release. "I'm so proud we are able to provide a beautiful and comfortable environment for our donors to continue giving." The location holds LifeSouth's donor room, district operations and distribution, and now features an updated layout with modern finishes. In addition, LifeSouth's bloodmobiles operate out of the location, deploying to blood drives across the area daily.

(Source: LifeSouth Community Blood Centers Announcement, 2/7/26)

Contributed by Brite Whitaker, Director of Communications and Outreach at LifeSouth Community Blood Centers 💧

GLOBAL NEWS

Australian Red Cross Lifeblood, the country's national blood provider, has issued a [statement](#) explaining that individual donor assessments (IDA) will be implemented on April 20th. The communication highlighted that, "men will no longer be asked in the pre-donation questionnaire if they've

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GLOBAL NEWS (continued from page 8)

recently had sex with a man. Instead, all donors will be asked the same sexual activity questions, regardless of gender. The changes will enable more people to donate blood, including [sexually active] gay and bisexual men and transgender people in long-term monogamous relationships, provided they meet all other eligibility criteria. This change follows the removal of sexual activity rules for plasma donations in July 2025, which has already resulted in an extra 6,437 donations and 2,709 new donors.”

(Source: Lifeblood [Statement](#), 2/2/26)

A short report [published](#) in *Vox Sanguinis* describes, “Dengue, chikungunya and Zika virus surveillance in blood donors in Brazil, 2019–2021.” The authors noted that, “[a] total of 5,616 minipools, comprising 101,088 donation samples, were tested. During the 2019-2020 outbreak season.” Their study discovered, “[a]lmost no evidence of Zika virus infection in donors was found during this study period. [Transfusion-transmitted chikungunya] remains a theoretical concern, but our study demonstrated that chikungunya virus RNAemic components were released for transfusion, representing a potential risk to the recipients. A study of transfusion-transmitted dengue at Hemope and Hemorio showed more than one-third risk of transmission after transfusing components derived from vir[e]mic donors but did not show additional clinical symptoms of dengue in the recipients. During our previous study, it was estimated that >300 dengue virus RNAemic components were released, but it is not known whether the RNAemia represents viraemia capable of causing infection in recipients. [Our findings] show continued detection of dengue RNAemia in blood donors during the second outbreak season, particularly in Hemoribeirão. Notably, this ongoing arbovirus circulation was not reflected in public health clinical case reports. These findings demonstrate the value of blood donor surveillance for arbovirus RNAemia as an adjunct to public health case surveillance when routine surveillance systems are under strain or facing resource constraints.”

Citation: Grebe, E., Buccheri, R., Montalvo, L., *et al.* “[Dengue, chikungunya and Zika virus surveillance in blood donors in Brazil, 2019–2021.](#)” *Vox Sanguinis*. 2025. 💧

COMPANY NEWS

An article published by *STAT* [reported](#) that **Vertex** is struggling to treat patients with its U.S. Food and Drug Administration (FDA) approved gene-editing therapy in part due to being unable to, “collect enough [stem] cells to create the treatment.” According to news outlet, “[t]o make Casgevy, doctors need to retrieve blood stem cells from patients and send them off to Vertex to be gene edited with CRISPR and then returned for re-infusion. But retrieval, that first, seemingly routine step, has been among the hardest. Some patients have had to come in for five different hospital stays. A small percentage have given up during the journey or been told by physicians that they are unlikely to ever have enough cells to be treated, devastating news for patients who were hoping to be cured. In some cases, doctors have sent off what they believe to be enough cells, only for Vertex to say the company was able to edit only a small percentage of them. [Hurdles with collecting enough stem cells] have lengthened and complicated what was already expected to be an arduous treatment journey — requiring a battery of health exams, insurance approvals, months waiting for the therapy to be manufactured, intensive chemotherapy to clear out unedited cells, and four to six weeks in the hospital to receive the final infusion. The process can exceed a year. The wait time for a slot at Vertex’s facilities fluctuates with demand but can stretch up to six months, doctors said, and it can take another six months to send back the finished therapy. Because they can’t predict how long it will take to collect sufficient cells, doctors say they can’t give firm timelines to patients on when they’ll be treated.”

(Source: *STAT*, “[Vertex’s CRISPR treatment for sickle cell disease hits unexpected roadblock](#),” 2/5/26)

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COMPANY NEWS (continued from page 9)

StemCyte, Inc. recently [announced](#) that the FDA has, “cleared an Expanded Access (EA) program for RegeneCyte®, the company’s FDA-licensed hematopoietic progenitor cell (HPC) therapy,” to treat Long COVID. The company noted in the news release that the, “EA program follows compelling data from StemCyte’s phase IIa clinical trials. In those studies, 85 percent of Long COVID patients treated with RegeneCyte® experienced a statistically significant resolution of chronic fatigue, compared to just 20 percent in the placebo group. By authorizing Expanded Access, the FDA is providing a vital pathway for patients who are severely impacted by the syndrome but may not meet the specific enrollment criteria for ongoing Phase III multicenter trials. [RegeneCyte®] is currently the only FDA-licensed cord blood product being evaluated in U.S. clinical trials for Long COVID.”

(Source: StemCyte, Inc. [News Release](#), 1/26/26) ♦

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

Feb. 10. America’s Blood Centers (ABC) and American Medical Technologists (AMT) Partnership Webinar. Please [contact us](#) for more information and a link to registration.

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](#).

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](#).

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CALENDAR (continued from page 10)

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

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POSITIONS

Director-Immunohematology Reference Laboratory.

The Director of Immunohematology Reference Laboratories oversees clinical laboratory operations with a focus on technical excellence, timely result delivery, client satisfaction, quality assurance, and operational efficiency. The role ensures proactive communication with clients and stakeholders, addresses concerns promptly, and promotes a service-oriented culture. It also ensures ongoing compliance with CLIA, NYS-DOH, AABB, and FDA standards, leads proficiency testing, and implements corrective actions. Operational duties include managing staffing, budgets, SOPs, equipment, and safety while fostering staff engagement and development. Education: Bachelor's degree in clinical laboratory science, Medical Technologist, Immunology, or a related field. Experience: Six or more years of relevant technical and service-related industry experience in a high-complexity laboratory or blood bank setting with four or more years of supervisory/managerial experience in a laboratory setting. Licenses / Certification: New York State Clinical laboratory technologist license required. SBB certification is required. Click [here](#) to apply.

Manager-Immunohematology Reference Laboratory.

This position is responsible for providing leadership and direction for the daily operations of the Immunohematology laboratory. The primary duties include overseeing the clinical laboratory testing procedures, timely result delivery, client satisfaction, and supervision of laboratory staff. As defined by CLIA/NYSDOH, this position is responsible for pre-analytic, analytic procedures, maintaining records of tests, and reporting test results in a high complexity laboratory. This position performs only those tests that are authorized by the CLIA/NYSDOH laboratory director and performs only those tests that require a degree of skill commensurate with the individual's education, training or experience, and technical abilities. Education: Bachelor's degree in clinical laboratory science, Medical Technologist, Immunohematology, or a related field. Experience: Six or more years of relevant technical and service-related industry experience in a high-complexity laboratory or

blood bank setting with two or more years of supervisory/managerial experience in a laboratory setting. Licenses / Certification: New York State Clinical laboratory technologist license required. SBB certification is preferred. Click [here](#) to apply.

Component Production Tech I. Gulf Coast Blood is seeking a dedicated **Component Production Tech I** to support our mission of providing safe, high-quality blood components to hospitals and patients across the Texas Gulf Coast region. The Component Production Technician plays a vital role in producing and labeling blood components in a highly regulated environment. This position performs detailed, sequential tasks following strict standard operating procedures to ensure accuracy, safety, and quality with the blood products. Daily responsibilities include organizing and documenting component production, weighing and loading products for centrifugation, applying labels, and storing components with complete precision. Success in this position requires comfort with repetitive tasks, long periods of standing, and strict adherence to safety and regulatory requirements. **Qualifications:** We are looking for someone who has a High School Diploma or GED. Experience in a regulated or laboratory environment is a plus. We are looking for someone who has strong attention to detail, is reliable, and has integrity. **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. This role has a great impact on saving lives! [Apply Today!](#)

Medical Apheresis Nurse. Gulf Coast Blood is seeking a dedicated **Medical Apheresis Nurse** to support our mission of providing safe, high-quality blood components to hospitals and patients across the Texas Gulf Coast region. As an Apheresis Nurse, you will provide donor and patient care through apheresis and leukapheresis procedures. This role includes phlebotomy,

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POSITIONS (continued from 11)

peripheral IV and central line care, medication administration and monitoring the donors receiving mobilizing agents. The nurse will monitor patients throughout the procedure. The nurse ensures documentation meets regulatory standards and maintains compliance with AABB, FDA, FACT, and internal policies. **Qualifications:** We're looking for someone who has graduated from an accredited nursing program and has a current RN license (Texas or compact) with at least 3 years of recent direct patient care experience. Apheresis or dialysis experience is preferred. BLS or ACLS certification is required. This role is mainly based out of the Houston Medical Center with occasional travel to The Woodlands facility. **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!](#)

Medical Apheresis LVN. Gulf Coast Blood is seeking a dedicated **Medical Apheresis LVN** to support our mission of providing safe, high-quality blood components to hospitals and patients across the Texas Gulf Coast region. As an Apheresis Nurse, you will provide donor and patient care through apheresis and leukapheresis procedures. This role includes phlebotomy, peripheral IV and central line care, medication administration and monitoring the donors receiving mobilizing agents. The nurse will monitor patients throughout the procedure. The nurse ensures documentation meets regulatory standards and maintains compliance with AABB, FDA, FACT, and internal policies. **Qualifications:** We're looking for someone who has graduated from an accredited vocational or nursing program with a current LVN license. Request at least three (3) years of recent direct patient care experience, preferably in acute care with strong peripheral IV skills. Apheresis or dialysis experience is strongly preferred. Must hold BLS or ACLS certification and have reliable transportation for travel to donor and group sites. **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!](#)

Director, Operations Logistics & Data Analytics. ImpactLife is seeking a talented, passionate individual to join our leadership team as the **Director, Operations Logistics & Data Analytics**. The Director is responsible for the leadership of a team that will ensure efficiency within the Operations Division of ImpactLife. Logistics oversight includes streamlining a structure and processes to provide optimal scheduling of both human and capital resources across the Donor Outreach and Collections functions. The Director will also be responsible for analysis of data to create actionable plans and support projects and process improvement initiatives. Qualifications include bachelor's degree with preference given to candidates with a graduate degree and minimum five (5)

years leadership experience in Supply Chain, Logistics, and/or Operations experience are required, blood center experience is helpful. This position will be located at one of ImpactLife's main hubs: Davenport, IA; Springfield or Urbana, IL; Earth City, MO; or Madison, WI. Candidates should expect some travel both within the ImpactLife geography as well as nationally. ImpactLife keeps our mission, vision, and values at the forefront. As a leader you will lead, inspire, and mentor with clear communication leading to collaboration within your team and across the organization remaining focused on achieving goals and fulfilling strategic initiatives. For more information including benefits and compensation, click here: [Join Us!](#)

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 <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

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POSITIONS (continued from 12)

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 are 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 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!](#) 💧