

2026 #9

March 30, 2026

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USDOT Issues Notice of Funding Opportunity Including Pre-hospital Blood Transfusions

The U.S. Department of Transportation has [issued a notice](#) of Funding Opportunity for the fiscal year 2026 “[Safe Streets and Roads](#)” program. Included in the notice is that the agency is seeking applications regarding Public Safety Infrastructure for post-crash care, emergency response coordination, and prehospital blood transfusion activities. A [webinar](#) regarding the Implementation Grants will take place on April 7th.

Applications must include, “carrying out projects and strategies identified in an Action Plan, and may include conducting planning, design, and development activities for projects and strategies identified in an Action Plan, and may also include, developing or updating an Action Plan.” The agency also noted that, “[p]ublic safety infrastructure activities are eligible for Implementation Grants such as Field Blood Delivery, Public Safety Dispatch, Digital Alert System, and Education Campaigns; these activities could also be eligible as a safety demonstration activity provided they meet the demonstration activity eligibility requirements. All applications must be submitted by 5 p.m. EDT on May 26th. Fiscal year 2025 grant [awards](#) from the agency totaled more than \$686 million including, “48 projects involv[ing] emergency medical services (EMS) and whole blood projects to improve post-crash care.” 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 prehospital blood transfusions and will continue to provide updates on our advocacy efforts as they become available.

(Source: USDOT [Announcement](#), 3/27/26) ◆

CBER Announces Public Webinar: “FDA Review of Biologics License Applications for Blood and Source Plasma”

The U.S. Food and Drug Administration’s (FDA) Center for Biologics Evaluation and Research (CBER) Office of Blood Research and Review (OBRR) will [host](#) a public webinar titled “FDA Review of Biologics License Applications for Blood and Source Plasma” on May 12th from 9 a.m. EDT to 2 p.m. [Registration](#) is open as this event is, “intended to provide blood establishments and other stakeholders with an overview of OBRR’s approach to the review of biologics license applications (BLAs) for the manufacture of blood and blood components, including Source

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CBER Announces Public Webinar: FDA Review of BLAs for Blood and Source Plasma (continued from page 1)

Plasma.” The objectives of the webinar include:

- “[e]xplain the process for submission and review of BLAs for blood and blood components, including Source Plasma;
- [d]escribe FDA regulatory requirements for the manufacture of blood and blood components;
- [d]escribe OBRR’s pre-license and pre-approval inspection process and common citations; [and]
- [a]ddress commonly asked questions from blood establishments and other stakeholders.”

The agenda is [available](#) as the webinar will feature, “OBRR staff giving presentations on select topics and addressing questions submitted by registrants.” America’s Blood Centers (ABC) has previously requested that FDA hold such an event to address challenges raised by ABC members.

(Source: FDA [Announcement](#), 3/18/26) 💧

SWIFT Trial Prehospital Blood Transfusion Results Published in *NEJM*

Researchers in the United Kingdom (UK) have [shared](#) the results of the Study of Whole Blood in Frontline Trauma (SWiFT) trial in *The New England Journal of Medicine*. The study took place from December 2022 through September 2024 and sought to, “determine whether prehospital transfusion of up to two units of whole blood was superior to standard blood components in reducing the risk of death or massive transfusion (defined as the administration of ≥ 10 units of blood components or products) within 24 hours in patients with life-threatening traumatic hemorrhage.” The phase III, multicenter, unblinded, randomized, controlled, superiority trial included 10 air ambulances that serviced 19 hospitals.

The authors of the paper noted that eligible study participants were, “[p]atients of any age with a traumatic injury leading to prehospital transfusion for the treatment of major hemorrhage. Patients were excluded if intravenous or intraosseous access could not be established, if they had a known objection to blood transfusion, or if they had received blood components or products before the arrival of the air ambulance service.” The stated primary outcome was, “a composite of death from any cause or massive transfusion (defined as ≥ 10 units of any blood components in adults, and ≥ 40 ml per kilogram of body weight in pediatric participants [< 16 years of age with a body weight of < 50 kg]) within 24 hours after randomization.”

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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.

America’s Blood Centers

Chief Executive Officer: Kate Fry

Chief Medical Officer: Jed Gorlin

Editor: Mack Benton

Subscriptions Manager: Leslie Maundy

Annual Subscription Rate: \$420

Send subscription queries to

memberservices@americasblood.org

America’s Blood Centers

1717 K St. NW, Suite 900, Washington, DC 20006

Phone: (202) 393-5725

Send news tips to newsletter@americasblood.org.

SWiFT Trial Prehospital Blood Transfusion Results Published in *NEJM* (continued from page 2)

The study included, “data on the primary outcome [for] 616 of the participants (96.1 percent; 314 in the whole-blood group and 302 in the standard-care group). In the adjusted modified intention-to-treat analysis, 48.7 percent of the participants in the whole-blood group and 47.7 percent of those in the standard-care group died or received a massive transfusion within 24 hours after randomization (adjusted relative risk, 1.02; 95 percent confidence interval [CI] 0.80 to 1.31; P=0.84).” Additionally, the researchers found that, “[t]he percentages of participants who had died from any cause at six hours, 24 hours, 30 days, and 90 days after randomization, as well as the percentage of participants who received massive transfusion within 24 hours, appeared to be similar in the two groups. [Slightly] more serious adverse events occurred in the standard-care group (37 events) than in the whole-blood group (31 events).”

The paper concluded that, “[a]mong participants with life-threatening hemorrhage, prehospital transfusion of up to two units of whole blood was not superior to standard transfusion with component therapy in reducing the risk of death or massive transfusion at 24 hours after randomization. The safety profile also appeared to be similar with whole blood and standard care.” The authors noted that the trial, “provides key evidence to inform the use of whole blood within civilian prehospital trauma systems. Decisions about adopting the use of whole blood must balance logistic advantages against supply constraints, cost, and the overall availability of blood.”

Limitations of the study acknowledged in the paper were: “the variability inherent to the prehospital environment and time-critical decision making may have influenced treatment delivery and adherence to the protocol; the pragmatic design, which relied on clinical judgment to initiate transfusion, may have introduced population heterogeneity and led to the inclusion of some patients without life-threatening hemorrhage; the pragmatic trial design was dependent on the routine use of the Trauma Audit and Research Network database for injury characteristics; a cyberattack on this database in 2023 resulted in some missing data.”

Citation: Smith, J.E., Cardigan, R., Sanderson, E., *et al.* “[Prehospital Whole Blood in Traumatic Hemorrhage — a Randomized Controlled Trial.](#)” *NEJM*. 2026. 💧

REGULATORY NEWS

The U.S. Food and Drug Administration (FDA) has [published](#) a proposed rule in the *Federal Register* titled “**Medical Devices; Radiology Devices; Classification of Blood Irradiators.**” According to the agency, “FDA is proposing to classify blood irradiator devices (product code MOT), unclassified pre-amendments devices, as follows: blood irradiator devices intended to prevent transfusion-associated graft-versus-host disease into class II (special controls) with premarket notification and blood irradiator devices intended to prevent metastasis into class III (premarket approval) to provide a reasonable assurance of safety and effectiveness of these devices.”

(Source: *Federal Register* [Proposed Rule](#), 3/18/26)

The FDA has [approved](#) the biologics license application (BLA) submission from **Grifols Diagnostic Solutions, Inc. for its Procleix Plasmodium Assay**. According to the FDA letter, the assay is a “qualitative *in vitro* nucleic acid amplification test (NAT) for the detection of RNA from Plasmodium species (*P. falciparum*, *P. knowlesi*, *P. malariae*, *P. ovale*, and *P. vivax*) in whole blood specimens performed on the Procleix Panther System. It is intended for use in screening individual human donors, including donors of whole blood and blood components, and in screening living donors of organ and tissue samples when specimens are obtained while the donor’s heart is still beating. It is not intended for use on cord blood specimens.

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REGULATORY NEWS (continued from page 3)

Whole blood donor samples are tested individually.” This is the 2nd NAT approved by the FDA for malaria.

(Source: FDA [Letter](#), 3/16/26)

The FDA has [published](#) in the *Federal Register* a “proposed rule titled “Effective Date of Requirement for Premarket Approval Applications for Blood Irradiators Intended To Prevent Metastasis.” Specifically, the agency is proposing, “to require the filing of a premarket approval application (PMA) for blood irradiators intended to irradiate intraoperatively salvaged blood for cancer patients undergoing surgery to assist in prevention of metastasis, which are unclassified, preamendments devices. FDA is summarizing its proposed findings regarding the degree of risk of illness or injury designed to be eliminated or reduced by requiring the devices to meet PMA requirements of the Federal Food, Drug, and Cosmetic Act (FD&C Act) and the benefits to the public from use of the devices.”

(Source: *Federal Register* [Proposed Amendment](#), 3/18/26) 💧

BRIEFLY NOTED

The Jehovah’s Witnesses Governing Body has “[clarified \[its\] position](#) on the use of a patient’s own blood in medical procedures.” The policy shift now permits Jehovah’s Witnesses to determine how their own blood is used in medical and surgical care. They are allowed to use their own blood to be removed, stored, and given back in medical procedures and surgical procedures.”

(Source: Jehovah’s Witnesses Governing Body [Update](#), 3/20/26) 💧

WORD IN WASHINGTON

The Congressional Sickle Disease (SCD) Caucus has [relaunched](#) according to announcement from Sick Cells. It is a, “bipartisan [forum] dedicated to advancing policies that improve the lives of individuals and families affected by sickle cell disease. [The caucus will] act as a central vehicle for congressional education, member engagement, and coordination with federal agencies and external stakeholders.” According to a March 16th news release, the SCD Caucus will be, “led by Rep. Glenn Ivey (D-Md.), who also serves on the House Appropriations Committee, and Rep. Rich McCormick (R-Ga.), a decorated veteran and emergency room physician. [The reestablishment] of the Sickle Cell Disease Caucus marks the beginning of a multi-year engagement strategy consisting of policy briefings, listening sessions, and stakeholder convenings throughout 2026 and beyond. [The SCD Caucus will] focus on three core priority areas: strengthening SCD education and awareness, advancing federal legislation and appropriations, and driving research and innovation. This effort will advance high-impact, patient-centered policy priorities across the lifespan and strengthen coordination across federal agencies, including NIH, CDC, HRSA, CMS, and FDA.”

(Source: Sick Cells [News Release](#), 3/16/26) 💧





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.

Registration is Open for the 2026 ABC Advocacy Summit

[Register now](#) for the 2026 [America's Blood Centers \(ABC\) Advocacy Summit](#)! Taking place in Washington, D.C. at The Dupont Circle (part of The Doyle Collection Hotels) June 8th-9th, [book your room now](#) to take advantage of the discounted rate and ensure availability. View the [preliminary schedule](#) and don't miss the chance to let your voice be heard as this event connects the blood community with national leaders in public policy and advocacy including meetings with members of Congress and their staff. The 2026 ABC Advocacy Summit includes advocacy training and group preparations for meetings with congressional offices on June 8th before heading to Capitol Hill on June 9th for group meetings with members of Congress and their staff, advancing ABC's advocacy priorities. We will coordinate the scheduling of meetings on behalf of all attendees and conclude the day with a reception. Please [contact us](#) with questions.

ABC Economic Outlook Survey Launches

The [ABC Economic Outlook Survey](#) is open. This resource provides a comprehensive look at blood center finances, including 19 of the most frequently used ratios for benchmarking the financial health of an organization as well as median service fees for 30 different blood products and blood center procedures. The survey closes April 24th. New this year, a completely upgraded benchmarking experience that's both more visual and accessible, while still powered by automated reporting tools. The survey has been fully redesigned with a modern user interface, delivering clearer, more actionable insights that are easier to understand, interpret, and put into practice. The aggregate data of this survey is important to both members and ABC as we advocate for fair and accurate reimbursement policies. Survey results are anonymized and aggregated and all reporting complies with antitrust requirements. The ability to download final trend reports and create customized reports based on selected filters will be available to participants via ABC's benchmarking portal. Please [contact us](#) with questions.

WELC Webinar: "Numbers Behind the Mission: How to Correctly Read, Interpret, and Act Using Financial Data" Set for April 14th

Registration is open for the ABC Women's Executive Leadership Community (WELC) Webinar "Numbers Behind the Mission: How to Correctly Read, Interpret, and Act Using Financial Data." This event will take place on Tuesday, April 14th at 1 p.m. EDT. The webinar will walk attendees through the basics of income statements, balance sheets, and cash flow, then connect those insights to real-world decisions across departments. Whether you're new to financials or looking to strengthen your confidence, you'll leave with practical tools to better understand your organization and make more informed decisions. Please [contact us](#) with questions or to request a link to register.

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INSIDE ABC (continued from page 5)

Schedule Released for 2026 ADRP Annual Conference – Register Today!

View the [schedule](#) and [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.

Hear conference Keynote Speaker [Courtney Clark](#) deliver “The Short Cut: How Strategic Adaptability Outperforms Grit” as she shares insights from her National Goal Resilience Study. Ms. Clark will explore strategies to help individuals and teams avoid burnout, adapt to change, and focus on what truly drives progress. Attendees will learn how to:

- recognize when persistence helps — and when it holds you back;
- increase flexibility during change and uncertainty;
- distinguish between goals and plans, and focus on what matters most; and
- use a simple framework to prioritize competing demands.

Additionally, 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 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 Closes This Week

Time is running out to participate in the *ADRP Trends in Donor Relations Study*. [Complete the survey](#) by April 1st and only submit one response per blood center, so please coordinate your responses accordingly. 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. [Contact us](#) with any questions. 💧

LAST CALL: Register for the Terumo BCT and ADRP Webinar: “Transforming Blood Centers: Reveos Success in the U.S.”

Please join Terumo Blood and Cell Technologies (Terumo BCT) and ADRP on April 2nd at 1 p.m. EDT for the [“Transforming Blood Centers: Reveos Success in the U.S.” webinar](#). Hear The Blood Center (New Orleans) and Carter BloodCare share their experience starting their whole blood-derived platelet program. Get initial data and insights from the very first U.S. Reveos adopters. Hear from your blood center peers as they share valuable insights from the successful implementation of the Reveos Automated Blood Processing System. Please [contact us](#) with any questions. 💧

MEMBER NEWS

Congresswoman Jill Tokuda (D-Hawaii) recently [donated](#) blood at the **Blood Bank of Hawaii** to answer an appeal for blood donors and raise awareness of the ongoing need for blood, according to *Hawaii News Now*. The publication explained that Rep. Tokuda took a tour of the facility and interacted with blood center staff. “At times like this we need blood donations even more because cancer treatments don’t stop, emergencies don’t stop, potential accidents [don’t stop],” explained Rep. Tokuda according to the news outlet. “Let’s hope there are none, but if anything happens, we want to make sure the blood bank and all of our hospitals have the lifesaving blood that they need. I came here, got in a chair. It was a quick, easy, simple donation, and you get snacks after. So, if you feel safe to come out and come donate, please be a life saver.”



Photo courtesy of Hawaii News Now

(Source: *Hawaii News Now*, “[U.S. Rep. Jill Tokuda donates blood amid critical shortage](#),” 3/13/26) ♦

GLOBAL NEWS

The Irish Blood Transfusion Service (IBTS) recently [shared](#) data from a study for an article appearing *GCN Ireland* that, “**highlighted a need for improved communication on blood donation eligibility for LGBTQ+ people in Ireland.**” Key findings from the 483 responses to the survey included:

- “90 percent of survey respondents said they would like to donate if they were eligible;
- 66 percent of survey respondents believed they were not eligible to donate for at least one reason;
- [b]arriers to donation included perceived ineligibility, medical reasons, fear of discrimination, lack of information, and logistical challenges;
- [t]here was a desire for meaningful engagement between the LGBTQ+ community and the IBTS, particularly through LGBTQ+ media and community organi[z]ations; [and]
- [a] significant amount of misinformation, outdated information, and confusion about current blood donation eligibility for LGBTQ+ people was reported.”

Ireland shifted its donor deferral policy to individual donor risk assessments in 2022.

(Source: *GCN Ireland*, “[IBTS research examines perceptions of blood donation among LGBTQ+ people in Ireland](#),” 3/13/26)

The government of Japan has [agreed](#) to provide support, “**to the Pakistan Red Crescent Society (PRCS) for a project to enhance blood donation services in Islamabad.**” The aid will be provided through Japan’s Grant Assistance for Grassroots Human Security Projects (GGP) and allow the, “PRCS to procure [a] refurbished second-hand blood donation vehicle from Japan. This vehicle will enable PRCS to conduct blood donation drives at universities, workplaces, public spaces, and mosques in Islamabad and the surrounding region. The project is expected to increase blood collection capacity by around 30 percent and contribute to saving the lives of approximately 12,000 patients suffering from thalassemia, h[e]mophilia, cancer, and victims of road traffic accidents. It will also improve the preparedness for natural disasters and other emergencies.”

(Source: *Dawn*, “[Japan to provide Rs18m for blood donation in capital](#),” 3/8/26) ♦

ADVANCED THERAPIES NEWS

CSL Behring has [distributed](#) a communication to the hemophilia B community explaining that its one-time advanced therapy, Hemgenix (etranacogene dezaparvovec-drlb) to treat hemophilia B in adult patients is currently out of stock. The March 17th notice explained that, “CSL is currently experiencing a temporary global stockout of Hemgenix® that will result in delays in treatment for some individuals in countries with established commercial access. We want to be very clear that this situation is not related to the safety or effectiveness of [the therapy]. Rather, it reflects the complexity of manufacturing gene therapies, and our commitment to adhering to the highest regulatory and quality standards for the people we serve. We are working with regulatory authorities on strategies to ensure stable ongoing supply for [the treatment] while preserving our high-quality standards. We know that this update may raise questions and that’s completely understandable. What we want you to know is that our highest priority, as always, is ensuring that eligible individuals have the information they need to determine if [the therapy] is right for them, and that when they do, Hemgenix® is available in accordance with the highest standards. We remain fully committed to delivering this innovative, one-time gene therapy to the hemophilia B community and continue to have strong confidence in Hemgenix®.” The U.S. Food and Drug Administration (FDA) [approved](#) the therapy in November 2022, “for the treatment of adults with hemophilia B who currently use factor IX prophylaxis therapy, or have current or historical life-threatening hemorrhage or have repeated, serious spontaneous bleeding episodes.”

(Source: CSL Behring [Announcement](#), 3/17/26)

The FDA has [approved](#), “Kresladi (marnetegrane autotemcel), the first gene therapy for the treatment of severe Leukocyte Adhesion Deficiency Type I (LAD-I). Kresladi is indicated for the treatment of pediatric patients with severe leukocyte adhesion deficiency I (LAD-I) due to biallelic variants in ITGB2 without an available human leukocyte antigen (HLA)-matched sibling donor for allogeneic hematopoietic stem cell transplant.” An agency announcement noted that, “[t]he safety and effectiveness of Kresladi [was] established in one open-label, single-arm, multicenter study based on increases in neutrophil CD18 and CD11a cell surface expression (disease-specific biomarkers indicative of improved immune activity), at month 12 with sustained effect through month 24 post-infusion. Increases in neutrophil CD18 and CD11a cell surface expression reflect improved function of a protein complex of the two biomarkers on the surface of neutrophils which is used as a surrogate endpoint that is reasonably likely to predict clinical benefit in LAD-I for accelerated approval. The clinical benefit of Kresladi will be confirmed in patients with severe LAD-I through post-marketing requirements. The most common side effects identified in the clinical study included anemia, low platelet and white blood cell counts, mouth sores, upper respiratory infections, viral infections, fever, febrile neutropenia, nausea, vomiting, skin infection, rash, vascular device-related infection, and increased liver enzymes.” The therapy consists of, “the patient’s own hematopoietic (blood) stem cells (HSCs), which are genetically modified to introduce functional copies of the ITGB2 gene. Following conditioning, a single dose of Kresladi is infused intravenously to address the underlying cause of severe LAD-I by restoring CD18 and CD11a cell surface expression in white blood cells, including neutrophils.”

(Source: FDA [Announcement](#), 3/26/26)

Terumo Corporation and CiRA Foundation have been [chosen](#) for funding by the Japan Agency for Medical Research and Development (AMED) to, “accelerate the automation and standardization of iPS cell manufacturing, an important step toward scaling regenerative medicine,” according to a company news release. The collaboration seeks to, “establish a robust protocol designed for consistent and

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ADVANCED THERAPIES NEWS (continued from page 8)

efficient iPS (induced pluripotent stem) cell expansion using Terumo Blood and Cell Technologies' Quantum Flex Cell Expansion System. As part of the project, the new protocol developed by the two organizations will be tested at CiRA Foundation's FiT, a dedicated facility for manufacturing and quality testing of clinical-grade iPS cells. At this stage, clinical-grade iPS cells produced with the new automated, standardized workflow will be evaluated against cells expanded through conventional manual processes, comparing their quality, performance, and suitability for clinical applications. In addition, Terumo and CiRA Foundation will co-develop a monitoring software prototype, connecting Quantum Flex to commercially available analytical instruments, enabling real-time monitoring of culture media conditions during iPS cell expansion."

(Source: Terumo Corporation [News Release](#), 3/5/26) ◆

COMPANY NEWS

Cerus Corporation has [announced](#) that Vivek Jayaraman, MBA will become president and chief executive officer (CEO) on July 1st. Mr. Jayaraman joined the company in 2016 as chief commercial officer and has served as chief operating officer at Cerus since 2020 where he is responsible for Cerus', commercial operations, supply chain, and customer service. Mr. Jayaraman received, "his MBA. from the Wharton School at the University of Pennsylvania and holds dual bachelor's degrees from the University of Michigan," noted the company news release. He will succeed William "Obi" Greenman who has been the company's president and CEO since April 2011. Mr. Greenman will, "become executive chairman of the board of directors," according to the Cerus news release. He added, "I am proud of the progress Cerus has made in advancing blood safety and availability. Having worked with Vivek for nearly a decade, I am confident that he is the right person to lead Cerus towards the goal of making Intercept the global standard of care. My goal has always been to establish Cerus as an enduring company. With four U.S. Food and Drug Administration (FDA) product approvals in the past decade, a robust innovation pipeline, and a solid financial foundation, the company is well positioned to continue to lead the field of pathogen inactivation," according to the news release.

(Source: Cerus Corporation [News Release](#), 3/16/26)

Hemanext Inc. has [named](#) Shane Ray as president and CEO. He succeeds Andy Dunham, PhD, who has held the role since September 2023. A company news release explained that, Mr. Ray will, "retain his role as the chief commercial officer to lead the global commercial strategy and sales team while Dr. Dunham will remain on the executive leadership team as Hemanext's Chief Scientific Officer. Mr. Ray has, "over 20 years in global leadership within the med-tech industry, arriving at Hemanext from curasan Inc, where he was the North American President and global chief marketing officer," noted the news release. Dr. Dunham added, "[a]s I hand the reins to Shane, I'm filled with confidence that this leadership transition marks the start of an exciting new phase for our company. With his vision and drive, I'm certain we'll see a further acceleration in our commercial momentum and a deepening of our impact in the market," according to the news release. Mr. Ray stated, "I'm excited to lead Hemanext into its next chapter of commercial growth building on the strong evidence and foundation of Hemanext ONE®. Together with our talented team and partners, we will accelerate our mission of 'Preserving What is Vital to Life' by providing meaningful benefits to patients and healthcare systems worldwide."

(Source: Hemanext Inc. [News Release](#), 2/24/26)

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COMPANY NEWS (continued from page 9)

Blood Bank Computer Systems, Inc. (BBCS) recently [announced](#), “continued momentum in its unified blood supply lifecycle strategy and the upcoming [launch of] ForLife Vantage™, the next layer in its connected platform vision, [later this year.]” According to a company news release, “ForLife Vantage [will extend] integration into electronic hospital ordering, specialized patient transfusion services, and enhanced financial visibility through integrated invoicing. [It will also] close the final loop, linking donor intent to patient care within one continuous data architecture.”

(Source: BBCS, Inc. [News Release](#), 3/25/26)

Blood Centers of America, Inc. (BCA) and **EKF Diagnostics Holdings PLC** are [partnering](#) via a three-year agreement that, “covers pricing for EKF Diagnostics’ DiaSpect Tm hand-held hem[o]globin analy[z]er and associated consumable cuvettes, as well as its EKF Link IT licen[s]e, which enables paperless workflow and streamlined quality control management. [Through the agreement,] EKF will also provide product training, evaluations, and valuation support to help integrate the DiaSpect Tm system across BCA’s network.”

(Source: Alliance News, “[EKF announces hematology purchasing deal with Blood Centers of America](#),” 3/3/26) ♦

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

April 2. **ADRP and Terumo Blood and Cell Technologies Webinar: “Transforming Blood Centers: Reveos Success in the U.S.”** [Registration](#) is open. More information is available [here](#).

April 9. **U.S. Food and Drug Administration’s (FDA) Center for Biologics Evaluation and Research (CBER), Office of Therapeutic Products (OTP) and the Alliance for Regenerative Medicine (ARM) Workshop: “Advancing Pediatric Cell and Gene Therapy Clinical Trials”** Silver Spring, Md. (Hybrid). Registration is open and required for both the [virtual](#) and [in-person](#) options. More information is available [here](#).

April 14. **America’s Blood Centers (ABC) Women’s Executive Leadership Community (WELC) Webinar: “Numbers Behind the Mission: How to Correctly Read, Interpret, and Act Using Financial Data.”** Registration is open. ABC members may [contact us](#) for more information and a link to registration.

April 15. **ADRP Webinar: 2026 ADRP Annual Conference “Know Before You Go!”** [Registration](#) is open.

April 28-30. **ARM Cell & Gene Meeting on the Mediterranean. Rome, Italy.** [Registration](#) is open. More information is available [here](#).

May 12. **FDA Center for Biologics Evaluation and Research (CBER) Public Webinar: “FDA Review of Biologics License Applications for Blood and Source Plasma.”** [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](#).

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CALENDAR (continued from page 10)

May 19-20. **FDA Regulatory Education for Industry (REDI) Annual Conference 2026: “Innovative Regulatory Strategies to Advance Medical Products”** Silver Spring, Md. (Hybrid). [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. [Registration](#) is open. More information is available [here](#).

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](#). 💧

2027

March 8-11. **2027 ABC Annual Meeting**. Atlanta, Ga. More information is coming soon.

CLASSIFIED ADVERTISING

Classified advertisements, including notices of positions available and wanted, are published free of charge for a maximum of three weeks per position per calendar year for ABC members. There are charges for non-members: \$139 per placement for ABC Newsletter subscribers and \$279 for non-subscribers. A six (6) percent processing fee will be applied to all credit card payments. Notices ordinarily are limited to 150 words. To place an ad, e-mail: newsletter@americasblood.org

POSITIONS

Transfusion Lab Supervisor Needed in Level 1 Trauma Center! Join Florida’s leading blood center, **OneBlood**, as a Blood Bank Lab Supervisor on 2nd shift in Tampa, FL. Bring your leadership, technical expertise, and management experience to support the transfusion testing procedures on patient and/or donor samples. Qualified candidates should possess three (3) or more years’ experience in a clinical laboratory, preferably blood banking environment, including one (1) or more years’ experience in supervision and management experience, as well as a valid and current Florida Clinical Laboratory Technologist license in Immunohematology and Blood Banking; Supervisor license strongly preferred. To apply and view a complete Job Description of this Lab Supervisor position, visit www.oneblood.org/careers. OneBlood, Inc. is an Equal Opportunity Employer/Vet/Disability.

Transfusion Lab Manager Needed! Join Florida’s leading blood center, **OneBlood**, as a Blood Bank Lab Manager in Tampa, FL. Bring your leadership, technical expertise, and management experience to support the transfusion testing procedures on patient and/or donor

samples. Qualified candidates should possess five (5) or more years’ experience in a related field, as well as a valid and current Florida Clinical Laboratory Supervisor license in Immunohematology required; SBB certification preferred. To apply and view a complete Job Description of this Lab Manager position, visit www.oneblood.org/careers. OneBlood, Inc. is an Equal Opportunity Employer/Vet/Disability.

Director Quality Assurance and Regulatory Affairs (Orlando, FL). OneBlood is seeking an experienced **Director of Quality Assurance & Regulatory Affairs** to lead the strategy, implementation, and oversight of quality and compliance programs across the organization. This role directs departmental operations to ensure adherence to federal and state regulations, licensing, and accreditation standards, while serving as the primary liaison during regulatory inspections. The Director oversees validation and qualification programs, internal audits,

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and continuous quality improvement initiatives that support the safety, reliability, and efficiency of blood collection and transfusion services. This position also evaluates emerging technical developments and partners with leadership to strengthen quality systems and operational performance. **Qualifications:** Bachelor's degree in a life science or healthcare field (Master's preferred) and 10+ years of progressive leadership in quality and regulatory affairs, ideally within a blood banking environment. Florida Supervisor's License in Immunohematology, SBB, and ASQ certification preferred. [Apply Here.](#)

Medical Laboratory Scientist, Specialist I/Technologist Specialist I, Certified. ARUP Laboratories is looking for a Medical Laboratory Scientist Specialist (MLS/MT) with transfusion medicine experience to join our AABB-accredited Immunohematology Reference Laboratory (IRL). The IRL supports the University of Utah Healthcare as well as clients from around the United States. MLS in the ARUP IRL performs testing that spans from routine type and screens to complex antibody identifications. Many of the employees in the IRL are SBB (Specialty in Blood Banking) certified. The employees have the opportunity to see some of the rarest antibodies currently known in the area of immunohematology. Due to the complexity of this department, we would prefer a candidate who has three (3) years of experience as an MT/MLS in a Transfusion Service. SBB and/or IRL experience are preferred, but not required. Candidate must be willing to participate in on-call rotation of approximately 1/6 weeks and act as backup call 1/6 weeks. Candidate will receive at least six (6) months of training working Monday - Friday, 8:00 AM - 4:30 PM, and then move to a morning shift. Preferred hours would be 9:30 AM - 6:00 PM. We offer exceptional benefits, competitive pay, and beautiful facilities to work in. Prospective candidates may be eligible for applicable relocation assistance. Interested candidates can apply at: <https://www.aruplab.com/careers>.

Director, Donor Marketing. The Director, Donor Marketing is a pivotal leadership role within New York Blood Center Enterprises (NYBCe), overseeing a team of seasoned marketing professionals tasked with driving donor engagement and donor acquisition across various Blood Operations divisions. Working closely with divisional Donor Recruitment and Collections teams to ensure alignment with overarching marketing strategies. The Director, Donor Marketing operationalizes Enterprise Donor Engagement strategies at the local level, guiding and empowering divisional marketing managers to execute targeted initiatives that meet product and service objectives across all divisions. Reporting directly to the Executive Director, Strategy and Planning, Donor Engagement, this role carries significant responsibility in steering local marketing efforts in line with enterprise

goals. Education: BA or master's degree in marketing, communications, or public relations. Experience: Minimum 10 years of demonstrated leadership experience in marketing and/or communications, including at least seven years of team management. Demonstrated experience managing budgets. Demonstrated experience evaluating media opportunities and buying. Strong organizational and managerial skills, adept at prioritizing assignments and problem-solving within tight constraints. Excellent written and oral presentation skills. Licenses / Certification: Valid Driver's License. Click [here](#) to apply.

Medical Technologist Careers Available! Join One-Blood's healthcare team as a Medical Technologist in the beautiful sunny state of Florida. In this dynamic role, you will perform basic through advanced testing procedures on patient and/or donor samples and interpret results in accordance with regulatory guidelines and organizational policies and procedures. A valid and current Florida Clinical Laboratory Technologist license, as well as a bachelor's degree in a biological science or related scientific field from an accredited college or university, is needed. We offer a comprehensive compensation and benefits package including healthcare, shift differentials, student loan repayment, 403b, and more! To apply and view a complete Job Description of these positions, go to www.oneblood.org and click on the **Careers** tab. One-Blood, Inc. is Employer/Vet/Disability.

Executive Director – Memphis. Vitalant is seeking an exceptional, mission-driven leader to serve as the Executive Director for our Memphis region. This influential role oversees daily operations, community engagement, mobile and fixed-site collections performance, and ensures alignment with organizational strategy and standards. The Executive Director partners closely with regional and enterprise leadership to drive collection success, strengthen customer and donor relationships, and foster a culture grounded in accountability, learning, and collaboration. **We're Looking for a Leader Who Can:** Translate strategy into effective local execution. Inspire and develop high-performing teams. Build strong partnerships across community and stakeholder groups. Drive operational excellence, adaptability, and innovation. This role offers a competitive compensation and total rewards package, including a performance-based bonus plan that recognizes the significance and impact of this position. Interested applicants can apply at [//www.vitalant.org/careers](http://www.vitalant.org/careers)

Director of Quality Assurance. Houchin Community Blood Bank is seeking a Director of Quality Assurance to lead our enterprise-wide quality program supporting the collection, processing, testing, and distribution of lifesaving blood products. The Director of QA will provide direct leadership to the Quality Assurance team and drive

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continuous improvement, regulatory compliance, and inspection readiness across all departments and locations, ensuring alignment with FDA, AABB, CLIA, cGMP, and other regulatory and accrediting standards. Primary responsibilities include leading regulatory, accreditation, and consignee inspections; overseeing internal and external audits; and managing systems for error prevention, detection, investigation, and corrective and preventive actions. The Director of QA will own SOP lifecycle management, document control, equipment qualification and validation, and quality-related training and competency programs, while partnering with executive and operational leadership to support organizational goals and maintain the highest level of product and patient safety. Qualified applicants will have a Bachelor's degree in a life sciences field, with extensive experience in a regulated environment and at least five (5) years in a management role in quality, compliance, or regulatory audit within laboratory, blood services, cell therapy, or healthcare. Strong candidates will bring advanced communication and technical writing skills, proven experience with Quality Management Systems, deviation investigation and CAPA, and personnel training and competency assessment; ASQ CQA and/or SBB certifications are highly desired. We offer many benefits including: Health/Dental/Vision Insurance, Flexible Spending Account, Employee Assistance Program for you and your family, Wellness Program, Company Paid Time Off, and 401K with Company Match. Apply online today at [HCBB Careers](#).

Vice President, Enterprise Laboratory Services (VPELS). Reporting directly to the Chief Operating Officer for Blood and Laboratory Operations, the **Vice President, Enterprise Laboratory Services (VP-ELS)** serves as the senior executive leader responsible for the strategic and operational oversight of Enterprise Laboratory Services across NYBCe. This role leads day-to-day laboratory operations while driving enterprise-wide strategy, financial performance, and operational excellence. The VP-ELS holds full P&L accountability, including revenue and operating margins, and is responsible for developing and managing budgets, implementing business plans, and fostering a high-performance, customer-centric culture. In partnership with Quality, Medical, and Executive Leadership, the VP-ELS will design and execute a forward-looking laboratory testing strategy aligned with NYBCe's mission and evolving customer needs. Qualifications include a bachelor's degree in medical technology or a related field (advanced degree preferred) and a minimum of 15 years of blood banking or comprehensive laboratory experience, including at least five years in progressive leadership roles. Demonstrated experience leading multi-site, multi-state laboratory operations in regulated CLIA and/or cGMP environments is required, along with direct experience working with the FDA, CLIA, and State Departments of Health. A proven

track record managing regulatory inspections and driving CAPA to successful closure is essential. Click [here](#) to apply.

Manager, Communications and Marketing. America's Blood Centers (ABC) is seeking a Communications and Marketing Manager to support and strengthen our mission-driven work. In this role, you'll work closely with colleagues to create clear, useful, and engaging communications that serve our member organizations—from member updates and digital content to marketing materials and press statements. This is a great opportunity for a communications professional who enjoys collaboration, is eager to build skills, and wants to help ensure members have the tools, information, and visibility they need to fulfill their lifesaving mission. Key responsibilities include **Member Communications:** develop, draft, and distribute member communications including email updates, announcements, and special alerts; ensure messaging is accurate, timely, and aligned with the association's mission and strategic priorities; collaborate with internal stakeholders to translate complex healthcare topics into clear, and member-friendly communications; **Website Management:** manage and maintain the association's website, including content updates, organization, design, and SEO optimization; partner with vendors on website enhancements and functionality improvements; ensure content is current, accessible, and consistent in tone and brand; **Media & Public Relations:** serve as the primary point of contact for press inquiries coordinating responses as needed; draft press releases, statements, and talking points; monitor media coverage relevant to the association and ensure stakeholders are aware of key topics of interest; **Design & Creative Work:** create and update visual assets such as graphics, flyers, social media images, email templates, and simple promotional materials; ensure all communications adhere to brand guidelines and maintain a professional, cohesive look; collaborate with vendors on larger design or branding projects as needed. **Required:** Bachelor's degree in Communications, Journalism, Public Relations, Marketing, or a related field; 3+ years of relevant professional communications experience; excellent writing, editing, and proofreading skills; experience managing websites and content management systems (CMS); experience managing organizational social media accounts; strong organizational skills and ability to manage multiple priorities independently. **What We Offer:** fully remote work environment; competitive salary commensurate with experience; comprehensive benefits package including health, dental, and vision insurance; flexible paid time off and paid holidays; meaningful work supporting the blood community. [Apply today!](#) 💧