



Associations of Blood Donor & Product Characteristics with Platelet Transfusion Outcomes Explored

INSIDE:

Susan Leppke Joins ABC3
BRIEFLY NOTED.....3
WORD IN WASHINGTON
.....4
ADVANCED THERAPIES
NEWS.....4
MEMBER NEWS.....5
GLOBAL NEWS5
Registration is Open for
the 2026 ABC Advocacy
Summit6
ABC Economic Outlook
Survey Closing Soon....6
Congressional Champion
Nominations Are Open .6
Time is Running Out to
Register for the ADRP
Annual Conference.....7
COMPANY NEWS7
CALENDAR.....8
POSITIONS.....9

Investigators in *Blood Advances* sought to, “understand [the impact](#) of blood donor and product characteristics on platelet transfusion outcomes.” Specifically, the paper described how the authors, “leverage[d] a vein-to-vein database of platelet transfusions to evaluate associations between blood donor and product processing characteristics [with] posttransfusion platelet increments and subsequent red blood cell (RBC) transfusion requirements.” The researchers performed a retrospective cohort study of electronic health record data which included, “blood donor demographics (e.g., age, sex, BMI, ABO/Rh), collection date, platelet processing characteristics (e.g., number of platelet splits, pathogen reduction, storage in platelet additive solution (PAS), storage duration, and irradiation) [for] each platelet unit. All [were] stored at room temperature, and all split units met the minimal approved dose of 300×10^9 platelets per unit.” The study took place from June 2020 to March 2022 and included inpatients and outpatients, “who received a single unit of platelets during ≥ 1 transfusion episodes at 21 medical centers.” The investigators considered a platelet transfusion episode to be, “any single unit platelet transfusion linked to a donor with both pretransfusion and posttransfusion platelet counts.” The primary outcome was, “platelet increment of $>20 \times 10^9/L$ based on previous studies of platelet transfusion. Secondary outcomes were the incidence and number of RBC transfusions in the 24 hours after platelet transfusion.”

The study found, “increasing donor BMI, platelet unit concentration, and high SARS-CoV-2 anti-N Ab levels were associated with higher odds of a platelet increment of $>20 \times 10^9/L$. Conversely, pathogen reduction, storage in PAS, and prolonged storage were associated with reduced odds of achieving increased platelet increments. Findings complementary to those of platelet increments were that increasing donor BMI and high SARS-CoV-2 anti-N Ab levels were associated with lower odds of subsequent RBC transfusion and that pathogen reduction was associated with increased odds of RBC transfusion.” The researchers explained that the results suggest that, “alterations of platelet function in patients with obesity or previous SARS-CoV-2 infection affect outcomes in the recipients of platelet products from donors with these characteristics.” They also discovered that, “platelet transfusions from donors with high anti-N Ab levels were associated with increased platelet increments and reductions in 24-hour RBC transfusion requirements. Increased anti-N Ab levels have been correlated with the COVID-19 severity and recognized to rise with SARS-CoV-2 reinfection,” they noted. Additionally, the investigators found that pathogen reduction and storage in PAS, “were associated with reduced odds of posttransfusion platelet increments of $>20 \times 10^9/L$. Prolonged storage of platelets was also associated with reduced platelet increments.

Associations of Blood Donor & Product Characteristics with Platelet Transfusion Outcomes (continued from page 1)

[Despite] reduced platelet increments, [they discovered] that prolonged storage and use of PAS did not affect the odds of 24-hour RBC transfusion events. [Splitting] platelet donations into three or four units did result in lower platelet increments but did not affect the odds of 24-hour RBC transfusion events.” The explained that, “[t]hese findings support that the current practice of splitting platelet units to ensure the availability and efficient use of blood products is not compromising patient outcomes. Collectively, [the] results also suggest that donor biology and processing factors, rather than platelet dose alone, may be more relevant to platelet quality and outcomes. [Although the researchers] did see differences in posttransfusion platelet increments in ABO-mismatched donors and recipients, this finding did not translate to differences in 24-hour RBC requirements.”

The paper concluded that, “[p]roinflammatory conditions such as donor obesity and previous SARS-CoV-2 infection may enhance platelet function, thereby reducing subsequent RBC transfusion requirements. In contrast, platelet processing methods such as pathogen reduction and storage in PAS may adversely affect platelet transfusion outcomes. These insights underscore the potential utility of vein-to-vein analysis to inform platelet transfusion practice. Further research is needed to explore mechanisms underlying these findings and evaluate outcomes of platelet transfusions in different clinical contexts.” Limitations of the study acknowledge by the authors included: “analysis of only single-unit platelet transfusions in which the exact timing of posttransfusion platelet counts could not be standardized; [they] were not able to reliably assess the incidence or severity of bleeding in [this] retrospective study; [t]he use of SARS-CoV-2 anti-N Ab levels as a proxy for immune response to infection is another limitation, because this measure may not fully capture the complexity of SARS-CoV-2 infection on platelet function; [and] the study’s reliance on RBC transfusion events as an indirect measure of platelet effectiveness may introduce bias, despite adjustments for various donor, product, and recipient factors.” A [commentary](#) titled “Vein-to-vein data: what predicts platelet response?” is also available in *Blood Advances* and explained that the findings of the study, “may leave readers wondering: are the results credible? An important next step will involve attempts to replicate findings in other data sets with additional statistical models and methods. This can be difficult given the many factors that influence the outcomes, but reproducing the key findings will increase reader confidence and potentially set the stage for targeted donor recruitment for better transfusion outcomes. The role of donor characteristics could ultimately be tested directly through randomization of platelet units from donors across BMI categories.”

Citation: Roubinian, N.H., Plimier, C., Thomas, K.A., *et al.* “[Associations of blood donor and product characteristics with platelet transfusion outcomes](#).” *Blood Advances*. 2026. 💧

The *ABC Newsletter* (ISSN #1092-0412) is published by America’s Blood Centers® and distributed by e-mail. Contents and views expressed are not official statements of ABC or its Board of Directors. Copyright 2026 by America’s Blood Centers. Reproduction of the *ABC Newsletter* is forbidden unless permission is granted by the publisher (ABC members need not obtain prior permission if proper credit is given).

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.



Susan Leppke Joins ABC

America's Blood Centers (ABC) is pleased to announce that Susan Leppke, MPH has been named vice president of Government Relations and Public Affairs effective April 20th. Susan brings a strong background in public policy and advocacy with more than 15 years of experience shaping federal and state legislation, reimbursement, and regulatory frameworks to expand patient access to innovative therapies. She most recently served as senior director of Public Policy and Strategic Partnerships at the Association for the Advancement of Blood & Biotherapies (AABB) and has previously held the role of director of Public and Payer Policy at NMDP (formerly Be The Match and the National Marrow Donor Program). She holds a BA in Physiology from the University of Minnesota and received her Master of Public Health degree from the University of Minnesota School of Public Health. We are excited to welcome Susan to the ABC team. She can be reached at sleppke@americasblood.org.

Susan succeeds Diane Calmus, JD who provided seven years of dedicated service to ABC, its members, and the blood community. ABC thanks Diane for making a lasting impact through her leadership and commitment to ABC's mission, transforming our advocacy presence at both the federal and state levels and achieving many notable milestones on behalf of ABC members. We are grateful for her many contributions and wish her continued success in her next chapter. 💧

BRIEFLY NOTED

The American College of Surgeons (ACS) recently [highlighted](#) a study [published](#) in the *Journal of the American College of Surgeons* that, “[used] data from hospitals and emergency medical service providers to map out areas with the greatest need for trauma care and prehospital whole blood transfusions [that] can enable hospital systems to deploy scarce blood resources quickly and minimize waste.” According to the paper, “[t]his study retrospectively analyzed trauma registry data from 427 patients who, between June 2019 and March 2025, received massive transfusion protocol (which includes multiple units of blood) at five trauma centers in Omaha and Lincoln, Nebraska. The researchers used geo-mapping, which includes plotting data points on a map to visualize geospatially where events occur to identify high-need areas for prehospital whole blood transfusion, according to lead study author Nicole K. Barmettler, MD, a general surgery resident at the University of Nebraska Medical Center (UNMC) division of trauma in Omaha.” The study found through a statistical analysis that, “strong correlations between activation for massive trauma protocol and distributions for blunt and penetrating trauma, both of which were concentrated in the downtown areas of the respective cities. [Layered mapping] of fire stations with transfusion data identified potential prehospital whole blood locations, which were used to plan the placement of whole blood resources on ambulances in high-need areas. The study authors note[d] that evidence supports the early administration of blood products to improve patient outcomes, but that several barriers exist to establishing a prehospital blood program, including the high cost of blood and equipment, limited supply, and supply chain issues. [This study] provides a model for geo-mapping that could be used anywhere. [The city] of Omaha, in collaboration with UNMC and the Omaha Fire Department, has already used this study as a foundation for its own prehospital blood program. Four ground transportation units in the highest-need areas of Omaha each have one unit of low-titer group O whole blood on board. Future research includes conducting a prospective study to analyze outcomes of that initiative and perform[ing] a cost analysis of patients who receive whole blood before arriving at the hospital.”

(Source: ACS, “[New Mapping Model Can Help Cities Efficiently Deploy Blood Resources to Patients Most in Need](#),” 4/16/26) 💧



WORD IN WASHINGTON

President Trump has [nominated](#) Erica Schwartz, MD to be the director of the Centers for Disease Control and Prevention (CDC). A report from ABC News explained that, “Dr. Schwartz earned a medical degree from Brown University and served in the U.S. Navy until 2005. She served in the U.S. Public Health Service Commissioned Corps, as the Coast Guard Chief Medical Officer and as Deputy Surgeon General from 2019 to early 2021, during the first Trump administration. [If confirmed] by the Senate, Dr. Schwartz would replace Dr. Jay Bhattacharya, director of the National Institutes of Health (NIH), who took over as acting CDC director in February 2026.”

(Source: ABC News, [“Trump nominates Dr. Erica Schwartz as new CDC director,”](#) 4/16/26) 💧

ADVANCED THERAPIES NEWS

The U.S. Food and Drug Administration (FDA) has [announced](#) the publication of a draft guidance titled [“Safety Assessment of Genome Editing in Human Gene Therapy Products Using Next-Generation Sequencing.”](#) According to the agency, the draft guidance is for, “sponsors seeking approval of human gene therapy products involving genome editing (GE) technologies. When finalized, this guidance will provide recommendations for standardized methods for comprehensively assessing the safety of genome editing therapies to bring effective treatments to patients sooner [and] supports the FDA’s framework for accelerating development of individualized therapies for ultra-rare diseases launched in February. The framework revolutionizes how the FDA engages with industry and promotes a path for transformative rare disease treatments.” Specifically, the draft guidance document expands the definition of human GE products to include, “products editing the epigenome or the transcriptome, and recommendations made for next generation sequencing- (NGS) based evaluation of off-target editing activity [applicable] to all of these products. Sponsors routinely use NGS-based methods and bioinformatics tools to assess off-target editing risk of their drug product(s). This guidance provides recommendations for nonclinical studies using NGS and bioinformatics to assess off-target editing risk and impact on chromosomal integrity for a broad range of GE modalities such as DNA editors, epigenetic editors, and editors that cleave RNA.” [Comments](#) are due by July 14th.

(Source: FDA [Announcement](#), 4/14/26)

The Blood & Cells Advocacy Roster (BCAR) recently announced that *BioProcess International* has [published](#) an article titled **“Blood Centers: A Ready Partner in Building Manufacturing Supply Chains for Cell and Gene Therapies”** in their *Manufacturing Cell and Gene Therapies April Report.* The authors of the article are Lee Buckler, senior vice president of Advanced Therapies at Blood Centers of America (BCA), Jeff Wren, vice president of Biotherapies at the Association for the Advancement of Blood & Biotherapies (AABB), and Kate Fry, chief executive officer of America’s Blood Centers (ABC). The piece highlights “that community blood centers are uniquely suited to support cell-therapy supply chains. By leveraging experience as the backbone of transfusion medicine, blood centers could provide reliable starting-material supply, end-to-end chain of identity and custody, and other services that will be essential to the future of [advanced therapy] scalability.” ABC joined BCAR last year.

(Source: *BioProcess International* April [Report](#), 4/13/26) 💧



MEMBER NEWS

We Are Blood and medics with Austin Travis-County EMS (ATCEMS) are “[expanding](#)” their partnership to get blood to patients in need faster in large scale emergencies, according to KVUE-ABC. A new “streamlined” system for mass casualty events will be developed in which, “ATCEMS will notify We Are Blood with key details about the nature of the incident, how much blood they believe will be needed, and their expected arrival time to the blood bank. A designated ATCEMS team will then respond directly to the blood bank to retrieve the units, along with a pre-packed container of additional transfusion supplies maintained by We Are Blood to support large-scale incidents. Once on scene, a dedicated ‘Blood Officer’ manages distribution, tracking and accountability of all blood products to ensure safe use. Back in 2021, ATCEMS and We Are Blood launched the program, which allows them to carry blood on ambulances and start transfusions on trauma patients as fast as possible while they’re on their way to the hospital.”

(Source: KVUE-ABC, “[Austin Travis-County EMS expands mass casualty blood transfusion program](#),” 4/8/26)

Héma-Québec is [celebrating](#) the 10th anniversary of its Gatineau Donation Cent[er] this week. A news release stated that a, “ceremony [will also be held] on April 22nd. When it opened, the Gatineau Cent[er] was the eighth in the province, which now has 13. This strategy of opening cent[ers]—with the newest ones dedicated exclusively to plasma donation—is part of Héma-Québec’s ambitious goal of increasing self-sufficiency for this blood product, which is used to manufacture medications in growing demand, such as immunoglobulins.”

(Source: Héma-Québec [News Release](#), 4/16/26) 💧

GLOBAL NEWS

Australian Red Cross Lifeblood has [implemented](#) new blood donor eligibility policies as of April 20th that, “**pav[e] the way for gay and bisexual men and transgender people in long-term monogamous relationships to donate blood and platelets.**” The policy shift to individual donor assessments means that now, “all donors will be asked the same sexual activity questions in the pre-donation questionnaire, regardless of gender [and comes in the wake of] [changes](#) to sexual activity rules for plasma donation in July 2025, which have enabled 3,000 new donors to give close to 10,000 plasma donations to date.” According to the announcement, “Lifeblood’s submission to change sexual activity eligibility rules for blood donation was [approved](#) by Australia’s regulator, the Therapeutic Goods Administration (TGA) in 2025, and included the latest research, risk mode[ling] and community feedback. It’s expected [that] up to 20,000 extra donations of blood will be made each year as part of this change.” Lifeblood Chief Executive Officer Stephen Cornelissen, AM explained in the announcement, “[p]revious donor rules prevented many people from the LGBTQIA+ community from donating blood or platelets if they’d had sex within the past three months. These latest changes mean many gay and bisexual men and transgender people in long-term, monogamous relationships will become eligible to donate blood or platelets for the first time. This is something we’ve been researching [and we’re excited] to be welcoming many more new donors into our cent[ers] to donate blood and platelets.”

(Source: Australian Red Cross Lifeblood [Announcement](#), 4/20/26)

The health ministry in Japan is “[lift\[ing\]](#) restrictions on organ donations from individuals who have stayed in Europe, a measure introduced to combat variant Creutzfeldt-Jakob disease (vCJD),” according to a [report](#) from *The Japan Times*. The news organization noted the policy change is expected to be implemented in the fall and that, “[i]n January 2026, the ministry decided to remove restrictions on blood donations in response to a decline in the number of vCJD cases and the elimination of similar measures in other countries.”

(Source: *The Japan Times*, “[Japan to lift organ donation curbs for those who have stayed in Europe](#),” 4/15/26) 💧



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 Closing Soon

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.

Congressional Champion Nominations Are Open

ABC is excited to launch [nominations](#) for Congressional Champions as part of the *Act for Blood* program! Awarded in Washington, D.C. as part of the [2026 ABC Advocacy Summit](#), a Congressional Champion is a member of Congress that has shown support for the U.S. blood supply and community blood centers through actions such as helping with an earmark request, assisting blood center outreach efforts to an administrative agency, introducing legislation, or even touring and donating at ABC member blood centers. While ABC is actively meeting with members of Congress to support the [ABC Advocacy Agenda](#), the work blood centers do as an ABC member (and a constituent of a congressional district) to build relationships with lawmakers is essential. This is a unique opportunity to [recognize](#) the work that a member of Congress has done, while continuing to build stronger relationships. Please submit your nominations by the May 7th deadline. [Contact us](#) with any questions and thank you for your ongoing support and participation in our advocacy efforts!

(continued on page 7)

INSIDE ABC (continued from page 6)

Time is Running Out to Register for the ADRP Annual Conference

View the [schedule](#) and [register](#) now for the [2026 ADRP Annual Conference](#) in Minneapolis, Minn., May 12th-14th, at the Hyatt Regency Minneapolis. [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! 💧

COMPANY NEWS

The American Society for Clinical Pathology (ASCP) has [launched](#) the 2026 Vacancy Survey. According to the announcement from the organization, the survey aims to, “determine the extent and distribution of workforce shortages within the nation’s medical laboratories. All responses will be confidential, and data will only be reported in aggregate. Individual-level data will not be reported.” ASCP asks all laboratory professionals to complete the survey and encourages individuals to forward the survey link to their peers. The survey closes on Thursday, April 30th.

(Source: ASCP [Survey](#), 4/10/26)

Unlock Health is partnering with LifeSouth Community Blood Centers to host a webinar on their efforts to target their lapsed donor base. Using the company’s Unlock Collect donor engagement system not only brought donors back to LifeSouth but kept them active and donating at a frequency close to their current base. [Registration](#) is open for the Tuesday, April 28th webinar taking place at 3 p.m. EDT titled: “Don’t Call It a Comeback” featuring:

- Dave Leitch;
- Christine Medina; and
- Joe Ferrara.

(Source: Unlock Health Announcement, 4/15/26)

Terumo Blood and Cell Technologies (Terumo BCT) recently [released](#) the latest edition of its quarterly newsletter, *Access Point BCP*. The publication is designed to be a resource for individuals who work in blood collection or processing in the U.S. and Canada to support their day-to-day work. You can also explore an [archive](#) of all editions. Subscribe [here](#) for more information.

(Source: Terumo BCT Announcement, 4/16/26) 💧

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 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. **ADRP: The Association for Blood Donor Professionals Annual Conference. Minneapolis, Minn.** [Registration](#) is open. More information is available [here](#).

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](#).

June 25-26. **National Heart, Lung, and Blood Institute (NHLBI) and the Sickle Cell Disease Association of America, Inc. (SCDAA) "Research That Heals: Partnering with Patients to Transform SCD Care." Rockville, Md. (Hybrid).** More information is coming soon.

Sept. 16-17. **ADRP: The Association for Blood Donor Professionals Master Class (Virtual).** More information is coming soon.

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

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. 💧