America's Blood Centers
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NEWSLETTER

A weekly chronicle of events and issues impacting the blood community

2026 Issue #22 **July 20, 2026**

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Improving Access to Transfusion Care for Hospice Patients House Bill Introduced

Rep. Debbie Dingell (D-Mich.) introduced legislation on July 15th, "requiring the Centers for Medicare & Medicaid Services (CMS) Center for Medicare and Medicaid Innovation (CMMI) to test a model under which blood transfusions furnished to an individual receiving hospice care are paid separately from the hospice all-inclusive per diem payment under Medicare." H.R. 9703, the "Improving Access to Transfusion Care for Hospice Patients Act of 2026," would stipulate that CMMI must, "evaluate the model by comparing patients participating in the model with those outside of the model in relation to specified metrics, such as hospital utilization and days of hospice care before the end of life."

Rep. Dingell explained in a news release, "[p]atients at the end of life should never have to choose between the comfort of hospice care and the treatments that help them live with dignity. This bill removes financial barriers so more patients can access the compassionate, high-quality care they deserve."

Kate Fry, MBA, CAE, chief executive officer of America's Blood Centers (ABC) added in the news release, "[b]lood transfusions are a critical source of comfort and quality of life for many patients receiving hospice care. This bipartisan legislation removes a financial barrier in the hospice benefit that too often forces patients to choose between hospice care and the transfusions they need. We thank Representative Dingell for championing this bill and for her continued leadership on issues that matter to blood donors and patients alike."

This legislation, as well as the Senate companion bill, S. 1936, introduced by Senator Jacky Rosen (D-Nev.), addresses a critical gap in the Medicare hospice benefit. By carving out payment for transfusions, this bill would allow hospice patients to continue receiving these life-sustaining treatments while benefiting from comprehensive hospice care. ABC applauded the bill and will continue working to ensure that hospice patients have equal access to essential treatments, enabling them to receive comprehensive end-of-life care without sacrificing vital transfusions.

Expanding access to blood transfusions within the Medicare hospice program is a policy priority of ABC's advocacy efforts. We will provide updates as they become available on both the legislation and our ongoing advocacy work. Please contact us with any questions.

(Sources: Rep. Dingell News Release, 7/15/26; H.R. 9703, 7/15/26)

FDA Announces "Strengthening the Supply Chain for Blood Manufacturing" Roundtable

The U.S. Food and Drug Administration (FDA) Center for Biologics Evaluation and Research (CBER) will host a roundtable titled "Strengthening the Supply Chain for Blood Manufacturing" on September 29th from 9 a.m. to 3 p.m. EDT. Registration is open for this virtual event that aims to, "identify supply chain challenges and potential solutions to prevent shortages of supplies and equipment used in blood manufacturing to help ensure a safe and adequate blood supply in the U.S. The meeting will include three sessions focused on:

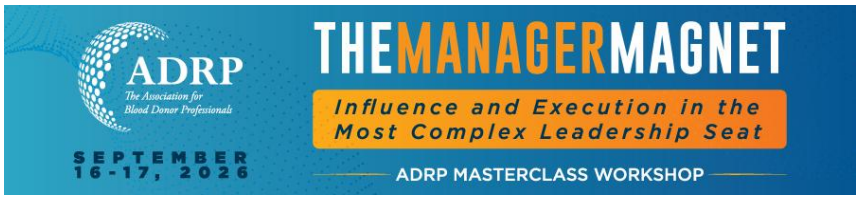
- "current challenges to supply chain disruptions involving blood manufacturing;
- manufacturers' perspectives on the root causes of supply chain disruptions and potential solutions; and
- the role of federal agencies in strengthening and building resilience in the supply chain."

The agency listed the meeting objectives as:

- "[d]escribe the supply chain for blood manufacturing and identify what supplies and equipment are essential to manufacturing blood and blood components;
- [d]iscuss current challenges and how blood collectors respond to shortages in the supply chain;
- [i]dentify the root cause of shortages in the supply chain and propose solutions to prevent such shortages; [and]
- [d]iscuss the role of various federal agencies in strengthening the supply chain for blood manufacturing."

The roundtable will feature FDA and other key stakeholders, including representatives from the blood community, supply chain manufacturers, and federal agencies in the U.S. Department of Health and Human Services as well as an open public comment session. "Individuals interested in providing brief comments during the public comment session must indicate their interest during online registration. Requests to present must be received by 11:59 p.m. EDT on Friday, September 4th. Participation in the session and the time allotted for each speaker will be limited. You will be notified of your participation in the session by September 15th."

(Source: FDA Announcement, 7/15/26)



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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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REGULATORY NEWS

The Centers for Medicare & Medicaid Services (CMS) has issued a proposed rule titled "Request for Information (RFI); Clinical Laboratory Improvement Amendments of 1988 (CLIA) Regulations." According to the July 16th RFI published in the *Federal Register*, the agency is seeking, "input from the public regarding various topics related to the CLIA regulations, including: breath testing; laboratory processes and procedures; emergency preparedness, biosafety and biosecurity, and cybersecurity; and specialty testing areas. Responses to this RFI may be used to help inform CMS and the U.S. Centers for Disease Control and Prevention (CDC) as to what types of action, if any, should be taken to update the existing CLIA regulations through future notice and comment rulemaking." Comments are due September 14th.

(Source: CMS RFI, 7/16/26)

The U.S. Food and Drug Administration (FDA) has published a notice in the *Federal Register* for proposed collection of information and comment request for an extension of the use of form FDA 356h. The form expires in a few months. Publication of a proposed collection of information is standard regulatory procedure for renewal of an FDA form when it is about to expire and allows for comment on the form. Comments are due September 4th. ABC continues to review this notice and will provide updates to member blood centers as they become available.

(Source: *Federal Register* Notice, 7/6/26)

WORD IN WASHINGTON

The Centers for Medicare & Medicaid Services (CMS) has published the "Calendar Year (CY) 2027 Medicare Physician Fee Schedule Proposed Rule." A communication from the agency noted that the proposed rule announces and solicits public comments on proposed policy changes for Medicare payments under the Physician Fee Schedule (PFS), and other Medicare Part B issues, effective on or after January 1st, 2027.[As required by statute,] beginning in CY 2026, there are two separate conversion factors: one for qualifying alternative payment model (APM) participants (QPs) and one for physicians and practitioners who are not QPs. By statute, QPs are those that meet certain thresholds for participation in an Advanced APM, which means generally that the payment model has features to ensure accountability for quality and cost of care. The update to the qualifying APM conversion factor for CY 2027 is +0.75 percent while the update to the non-qualifying APM conversion factor for CY 2027 is +0.25 percent. The changes to the PFS conversion factors for CY 2027 include these updates as required by statute and an estimated +0.53 percent adjustment necessary to account for proposed changes in work relative value units (RVUs) for some services. However, Public Law 119-21 provided a one-year PFS conversion factor increase of 2.50 percent for CY 2026, which will no longer be in effect for CY 2027. This effectively means that current law requires -2.50 percent reduction in Medicare payment under the PFS compared to CY 2026."

(Source: CMS Proposed Rule, 7/14/26)

INFECTIOUS DISEASES UPDATE

EBOLA

On July 17th, the World Health Organization (WHO) updated the status of the Ebola disease outbreak in the Democratic Republic of the Congo (DRC). As of July 15th, "a [total] of 2,124 confirmed cases, including

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INFECTIOUS DISEASES UPDATE (continued from page 3)

828 deaths, have been reported by the DRC. [Uganda has also] reported 20 confirmed cases including two deaths and no new cases since June 21st therefore, "[the country] has begun the 42-day period of enhanced surveillance required before the end of the outbreak can be declared." Last month the WHO declared the Ebola disease outbreak in the DRC and Uganda caused by Bundibugyo virus a, "public health emergency of international concern (PHEIC), but [noted that it] does not meet the criteria of pandemic emergency, as defined in the International Health Regulations (2005) (IHR)." The U.S. Centers for Disease Control and Prevention (CDC) published an update on July 20th stating that the U.S. "is responding to an outbreak of Ebola disease in remote areas of the (DRC and Uganda.) To date, no cases of Ebola disease have been confirmed in the United States because of this outbreak. The overall risk to the American public and travelers remains low." On May 18th, the CDC announced that it had, "enhanced travel screening, entry restrictions, and public health measures to prevent Ebola virus disease from entering the United States amid ongoing outbreaks in East and Central Africa." The CDC has not classified the affected region as having "widespread transmission of Ebola virus," which would trigger donor interventions in the U.S. The Food and Drug Administration (FDA) updated its guidance document on June 29th and published a communication explaining that"[b]ecause of the severity of [Ebola disease] and the potential risk of transmission by blood and blood components, Ebola disease meets the definition of transfusion-transmitted infection 21 CFR 630.3(l); however, transmission of Ebola disease by blood transfusion has not been reported. Routine measures used to screen every blood donor effectively prevent individuals with symptomatic Ebola disease from donating blood. [Considering] the current Ebola disease outbreak in the DRC and Uganda, we refer blood establishments to the recommendations in our guidance document to update their donor eligibility processes accordingly, including asking donors about residency or travel to DRC and Uganda."

(Source: WHO Update, 7/17/26; CDC Update, 7/20/26) ♦

BRIEFLY NOTED

The *American Journal of Clinical Pathology* has published a paper titled "American Society for Clinical Pathology (ASCP) and ASCP Board of Certification Medical and Public Health Laboratory Education Financing Study." Key points of the paper include:

- "[t]he cost of attending a medical laboratory education program (all inclusive) is generally at or below the national average for educational expenses;
- [a] significant portion of laboratory professionals are unaware of available state-level scholarships, grants, and loan forgiveness programs—resulting in missed opportunities for financial support;
- [s]takeholders are encouraged to actively advocate for the inclusion of the laboratory profession in all federal and state legislation related to financing overall health care education."

Citation: Garcia, E. Diaz, J., Kelly, M., *et al*. "American Society for Clinical Pathology (ASCP) and ASCP Board of Certification Medical and Public Health Laboratory Education Financing Study." *American Journal of Clinical Pathology*. 2026.

The American Heart Association has published a review article in *Circulation* titled "Perioperative Anemia and Patient Blood Management in Cardiac Surgery: A Scientific Statement From the American Heart Association." The scientific statement, "highlights the latest evidence on preoperative anemia assessment, treatment strategies, and intraoperative blood conservation, and reviews key challenges and gaps to be overcome. [It]reviews the established evidence and identifies areas where further research is needed to minimize the impact of preoperative anemia, intraoperative blood loss, and hemodilution on cardiac surgery outcomes." The authors concluded that, "comprehensive patient blood management programs

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BRIEFLY NOTED (continued from page 4)

that focus on the avoidance of perioperative anemia at all stages, reduced intraoperative bleeding, and transfusion prevention may improve postoperative outcomes. Blood management programs are best implemented through multidisciplinary care teams and with hospital support that can be acquired through joint recognition that perioperative anemia treatment and blood conservation strategies improve outcomes and reduce resource utilization at both the local and national health care system level. Despite the recent increase in the publication of literature related to anemia, iron deficiency, and patient blood management, additional research is needed, because several important knowledge gaps remain. It is well-documented that anemia and red blood cell transfusions negatively affect postoperative outcomes after cardiac surgery; however, whether anemia and transfusions are in fact causative of these adverse outcomes remains unknown."

Citation: Howard-Quijano, K., Shore-Lesserson, L., Osho, A., *et al*. "Perioperative Anemia and Patient Blood Management in Cardiac Surgery: A Scientific Statement From the American Heart Association." *Circulation*. 2026.

RECENT REVIEWS

A systematic review has been published in *Cells* titled, "Platelet Storage Quality, Plasticizer Migration, and Transfusion Exposure Risk in DEHP Versus Non-DEHP Blood Storage Systems: A Mechanistic and Quantitative Comparative Analysis." The paper aims to, "provid[e] a systematic review of the literature comparing di(2-ethylhexyl) phthalate (DEHP) and DEHP-free platelet storage systems, combining platelet biological endpoints with data on biomaterial migration and modeled estimates of platelet-transfusion exposure. [The authors] hypothesized that modern alternative plasticizers could maintain platelet metabolic and functional quality when substituting for DEHP and minimize plasticizer migration and exposure to potential recipients. Unlike previous narrative reviews that focused primarily on toxicological concerns, this systematic review integrates mechanistic platelet quality parameters, plasticizer migration profiles, and quantitative exposure estimates. It evaluates the methodological certainty of the available evidence. This review also integrates platelet biology, plasticizer migration, quantitative exploratory exposure modeling, and risk-of-bias assessment. This study combines platelet cellular physiology, biomaterial migration studies, and deterministic exposure simulations to offer a mechanistically informed framework for assessing plasticizer replacement in blood storage technologies." The paper determined that, "[o]verall, this [review] illustrates the potential of combining platelet cellular physiology, biomaterial migration analysis, and exploratory exposure modeling to provide a mechanistically driven framework for evaluating emerging blood-storage technologies. With the current trend in transfusion medicine towards safer device materials and reduced exposure to potentially harmful leachables, the analysis suggests that DEHP replacement may be feasible without clear impairment of measured *in vitro* platelet storage endpoints. However, direct clinical efficacy data remain limited, making it a promising alternative requiring continued clinical evaluation. Future work should focus on step-resolved, leachable measurements to differentiate between collection/processing and storage contributions, especially for whole-blood-derived platelet workflows, and to coordinate platelet quality panels and *in vivo* recovery clinical endpoints. Future prospective studies that include harmonized platelet quality tests, *in vivo* recovery studies, and standardized monitoring of leachables may enhance the scientific framework that informs biomaterial innovation in blood component production." Limitations of the paper acknowledged by the authors included, "although Google Scholar was used as the primary search platform because of its broad multidisciplinary coverage, reliance on a single primary database and the absence of prospective protocol registration remain methodological limitations that should be considered when interpreting the findings; [t]he predictive exposure and functional inference model is ecological in nature and uses summary estimates from *in vitro* studies rather than patient-level data. In turn, cross-study correlations between storage conditions, exposure to plasticizers, and transfusion efficacy must be viewed as hypothesis-generating rather than causal; [the model] cannot estimate clinical outcomes without patient-level covariates,

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RECENT REVIEWS (continued from page 5)

immunologic status, or measures of transfusion burden; [l]ack of prospective registration may have limited methodological transparency; the small number of pooled studies; [s]ensitivity analyses and publication bias assessment were not performed due to the limited number of studies; [t]he studies included variability from transfusion frequency, metabolism, storage conditions, and patient factors; [and] some of the models lacked external clinical validation and that randomized clinical trials comparing plasticizer systems were lacking."

Citation: Frontier Ramos, L.R., Van't Hof, W., Brebant, Q., *et al*. "Platelet Storage Quality, Plasticizer Migration, and Transfusion Exposure Risk in DEHP Versus Non-DEHP Blood Storage Systems: A Mechanistic and Quantitative Comparative Analysis." *Cells*. 2026.

MEMBER NEWS



Carter BloodCare recently hosted an uplifting, positive, and powerfully emotional recipient-donor meet-and-greet event in North Texas on July 14th. In a surprise reveal, blood donors were invited to meet a recipient who has been transfused with their donations through Carter BloodCare. The recipient, 11-year-old Daniel Wendler, has beta thalassemia major, a rare genetic blood disorder that requires him to receive transfusions every 21 days at Cook Children's Medical Center in Fort Worth. During the July 14 event, Daniel and his family were introduced to and personally thanked many of the blood donors who have made his continuing care and medical treatments possible. His mother, Allison Wendler said, "Daniel is so energetic and funny and full of life, thanks to the blood donors who voluntarily give of themselves, and everyone at Cook Children's and Carter BloodCare who work to support Daniel's treatments. He is able to be a happy, healthy boy, and we are so thankful every single day for this precious gift."

(Source: Carter BloodCare Announcement, 7/16/26)

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

Coastal Bend Blood Center is encouraging individuals to take part in its Annual Run for Blood, 1K, 5K, and 10K. Even if you cannot make it to Corpus Christi, Texas, you can still be a part of the Annual Run for Blood with the center's virtual race option, which allows friends, family, supporters, and runners from anywhere to participate while helping raise awareness for the lifesaving need for blood donors. Whether you join in-person or virtually, every step you take supports the blood center's mission and helps make a difference. The event takes place on Saturday, October 10th. Registration is open and Coastal Bend Blood Center encourages you to invite your friends and family near and far to join you.

(Source: Coastal Bend Blood Center Announcement, 7/14/26)

MEDIC Regional Blood Center has announced that it will open a new location in Sevierville, Tenn. This marks the first time the blood center has expanded since 2018. The Sevierville Donor Center is expected to open in January 2027. MEDIC Regional Blood Center Vice President of Communication and Public Relations Kristy Altman told WVLT-8, "[w]e are very excited to announce this expansion and to have a permanent location in Sevier County. This expansion will allow us to operate in the area six days per week year-round and that will provide huge boost for our blood product inventory."

(Source: WVLT-8, "MEDIC Regional Blood Center expanding to Sevierville with new donor center," 7/14/26)

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.

Economic Outlook Survey Report Available

America's Blood Centers (ABC) recently announced that the ABC Economic Outlook Survey Report has been released. The report is complimentary to participants and instructions on accessing it have been distributed to the designated contact. Non-participating ABC members may purchase the report. The ABC Economic Outlook Survey 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. Please contact us with questions.

Register for the ABC Executive Fellows Capstone Project Webinar Series

The first cohort of ABC Executive Fellows are pleased to present their final capstone projects in a special two-part webinar series on Tuesday, July 21st at 2 p.m. EDT and Tuesday, August 18th at 2 p.m. EDT. Registration is open as the capstone projects are designed to address opportunities and challenges that impact the broader blood community. Covering a wide range of timely and relevant topics, these presentations offer valuable insights for professionals across all areas of blood center operations. Attendees will have the opportunity to learn from the project teams, engage directly with the authors during Q&A, and bring new ideas back to their organizations. Please contact us for more information or assistance registering.

Registration Is Open for the ABC SMT Forum

ABC will host the next Scientific, Medical and Technical (SMT) Forum on July 27th at 1 p.m. EDT. Hear David Oh, MD, MHA, director/chief executive officer, and chief medical officer at Hoxworth Blood Center and Margaret Simon, program director at Hoxworth Blood Center share insights into the structure and organization of the TM/BB fellowship program along with common challenges and innovative opportunities in fellowship programs. The SMT Forum is designed to be both informative and interactive, with the second part of the session dedicated to open discussions and audience-driven topics. Registration is open. Please contact us with questions.

Register for the ABC WELC Webinar: Creating Momentum by Empowering Staff Through Wellness, Motivation, and Connections

Registration is open for the ABC Women's Executive Leadership Community (WELC) webinar titled "Creating Momentum by Empowering Staff Through Wellness, Motivation, and Connections." This virtual event will take place on August 11th at 1 p.m. EDT. The webinar aims to help attendees discover creative, practical strategies to boost employee engagement, strengthen workplace connections, and motivate teams through wellness, collaboration, and mentorship. With an energetic and interactive approach, the speakers will share fresh ideas to help you build a culture where employees feel supported, inspired, and empowered. ABC members can contact us for more information including a link to registration.

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INSIDE ABC (continued from page 7)

Schedule Released for the 2026 ADRP MasterClass

Join us for the 2026 ADRP MasterClass: "The Manager Magnet: Influence and Execution in the Most Complex Leadership Seat!" This virtual event will take place September 16th-17th. View the schedule and register now. In today's competitive market, businesses that prioritize both employee and customer experience gain a significant edge. Join us as we explore:

- the connection between employee engagement and customer satisfaction;
- strategies for creating a positive workplace culture;
- how technology and data improve experiences for employees and customers; and
- real-world examples of companies excelling in both areas.

Whether you're in collections, recruitment, marketing, a customer experience professional, or business executive, this event will equip you with actionable insights to enhance both employee and customer journeys.

ADRP Trends in Donor Relations Study Results Are Available

Participants can now access the results 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. 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 participated in the survey will have access to this information. Blood centers that did not participate can purchase the survey report for $599. Please contact us with any questions.

ADVANCED THERAPIES NEWS

Fondazione Telethon in partnership with IRCCS Ospedale San Raffaele (OSR) in Milan, Italy and Ospedale Pediatrico Bambino Gesù (OPBG) in Rome, Italy have begun a phase IIb clinical trial to , "evaluate the safety and efficacy profile of an optimized version of the approach developed at the San Raffaele-Telethon Institute for Gene Therapy (SR-Tiget)" to treat patients with transfusion-dependent beta thalassemia. An announcement noted that, "[the trial will determine] whether the therapy can achieve transfusion independence, defined as no need for transfusions for at least 12 consecutive months after infusion. It will also evaluate treatment safety, engraftment of genetically corrected cells, reduction of iron overload, and overall quality of life for patients and their families. Participants will be monitored for two years after treatment and then enrolled in a long-term follow-up program, as required for advanced therapies, allowing continued evaluation of safety and efficacy for up to 15 years post-infusion. [Currently, hematopoietic stem cell transplantation] from a compatible donor is a potentially curative option, but it is feasible only for a minority of patients and is associated with significant risks. A therapy based on gene-edited hematopoietic stem cells has also recently become available in Italy for specific patient groups. However, advanced therapies already approved for beta-thalassemia still present limitations related to patient age, genetic characteristics, or treatment availability."

(Source: Fondazione Telethon Announcement, 7/13/26)

The Advanced Research Projects Agency for Health (ARPA-H), an agency within the U.S. Department of Health and Human Services (HHS) has awarded up to $160 million over five years to teams as part of the, "Treating Hereditary Rare Diseases with In Vivo Precision Genetic Medicines (THRIVE) program—a critical investment toward bringing new treatments to patients faster and

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ADVANCED THERAPIES NEWS (continued from page 8)

cure rare genetic pediatric diseases." The agency explained in a news release that, "[t]he core goal for THRIVE teams will be to develop pioneering integrated platform technologies to accelerate personalized genetic medicines to cure rare pediatric diseases at the root cause. In the first year, teams must demonstrate gene editing platforms capable of generating multiple drug products with common biodistribution and toxicology profiles. By year three, teams will have begun first-in-human trials where one trial will, for the first time, accommodate several different products and several disease phenotypes. At year five, teams must demonstrate successful expansion of umbrella investigational new drug application (IND) and clinical trials with additional drug products and diseases and validate novel deployment models. Across the program, through frequent publications and demonstrations, the teams will teach their rare disease colleagues across the country how to replicate this path."

(Source: ARPA-H News Release, 7/9/26)

Be Biopharma has announced that the company has ended its, phase I/II BeCoMe-9 study of BE-101, an investigational [advanced] therapy for hemophilia B." A news release explained that, [both] a federal clinical trials database and the company [confirmed,] the trial was discontinued as a strategic business decision and was not linked to any safety concern. The study had enrolled five of an anticipated 24 patients before it was halted. BE-101 was being developed by Cambridge, Massachusetts–based Be Biopharma. The therapy used a patient's own cells, modified outside the body to produce clotting factor IX (FIX), with the potential to be re-dosed if needed."

(Source: The Coalition for Hemophilia Announcement, 6/18/26)

GLOBAL NEWS

The Plasma Protein Therapeutics Association (PPTA) has published a position paper titled, "Inequity of Non-Value-Based Pricing of Plasma-Derived Medicinal Products in Europe." The paper described how, "non-value-based and mechanically applied pricing can have perverse consequences for the industry, health systems, and ultimately patients. It may reduce list prices in the short term, but it can also erode economic viability, discourage launches or continued supply, concentrate markets, weaken supply resilience, and undermine equitable patient access." Additionally, PPTA explained in the publication that, "plasma-derived medicinal product (PDMP) pricing policy should therefore be understood as both an access policy and a resilience policy. Reimbursement does not equal patient access; list price does not equal net price; and lowest tender price does not equal value. A fit-for-purpose PDMP pricing framework must balance affordability with availability, accessibility, appropriate use, patient choice, and long-term supply sustainability."

(Source: PPTA Position Paper, 7/15//26)

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GLOBAL NEWS (continued from page 9)

Takeda and the Indonesian Government are collaborating to, "strengthe[n] Indonesia's plasma ecosystem and support[t] more equitable access to lifesaving plasma-derived medicinal products (PDMPs) [through] a fractionation license granted to Takeda by the Ministry of Health (MoH)." A news release noted that, [a]s part of the initial phase of the project, Takeda will invest up to 30 million U.S. dollars in a two-year pilot program to establish plasma donation centers in Indonesia, enabling Takeda and the MoH to evaluate feasibility and refine operational models ahead of a potential scale-up into a national network. In parallel, Takeda will assess the feasibility and regulatory requirements for building a state-of-the-art plasma-derived therapy manufacturing facility in Indonesia that could serve both Indonesia and other parts of the world—positioning the country as an important contributor to the global supply chain for advanced healthcare products and technologies."

(Source Takeda News Release, 7/13/26)

COMPANY NEWS

The **Blood Emergency Readiness Corps (BERC)** celebrated its five-year anniversary last week. During that time, the organization's network of blood centers, currently 38 nationwide, have activated 18 times delivering more than 1,600 units of blood in response to mass transfusion needs in the wake of disasters, mass casualty events, and other critical-need scenarios throughout the U.S.

(Source: BERC Announcement 7/15/26)

Retham Technologies, Inc. has announced the, "launch" of its next-generation functional Retham Cryoplatelets™." According to a company news release, this solution is for research use-only (RUO), "and support[s] a broad range of applications, including platelet function assays, drug screening (particularly antibody-based therapeutics), thrombin generation testing, and assay development." The company has designated **Prolytix**, to be its distributor. Retham Cryoplatelets™ are, "functional human cryopreserved platelets designed for RUO applications. Upon thawing, they retain responsiveness across multiple platelet activation pathways and assay formats, enabling consistent, flexible, and scalable research workflows."

(Source: Retham Technologies, Inc. News Release, 7/8/26)

The U.S. Food and Drug Administration (FDA) has approved **Octapharma USA's**, "wilate® (von Willebrand Factor/Coagulation Factor VIII Complex [Human]) for routine prophylaxis to reduce the frequency of bleeding episodes in pediatric patients with von Willebrand Disease (VWD) who are younger than 6 years of age." A company news release noted that, "[t]he expanded label is based on data from the [p]hase III WIL-33 clinical trial. The open-label WIL-33 trial enrolled and treated 12 patients, all under the age of 6 and diagnosed with severe VWD. Wilate® was administered two to three times per week at a recommended dose of 30 to 50 international units (IU)/kg over 12 months. The primary endpoint was the total annualized bleeding rate (TABR) during prophylaxis, with safety and tolerability assessed throughout the study."

(Source: Octapharma USA News Release, 7/8/26)

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

July 21. **America's Blood Centers (ABC) Executive Fellows Capstone Project Webinar Series Session I (Virtual).** More information including a link to registration is available to ABC members here.

July 23. **National Highway Traffic Safety Administration (NHTSA) Office of Emergency Medical Services (EMS) "Prehospital Blood Transfusion in Practice" Webinar (Virtual).** Registration is open. More information is available here.

July 27. **ABC Scientific, Medical, and Technical (SMT) Forum (Virtual).** More information including a link to registration is available to ABC members here.

July 29. **U.S. Food and Drug Administration (FDA) Cellular, Tissue, and Gene Therapies Advisory Committee (Virtual).** More information is available here.

August 11. **ABC Women's Executive Leadership Community (WELC) Creating Momentum by Empowering Staff Through Wellness, Motivation, and Connections (Virtual).** More information, including a link to registration, is available to ABC members by contacting us.

August 18. **ABC Executive Fellows Capstone Project Webinar Series Session II (Virtual).** More information including a link to registration is available to ABC members here.

August 18. **NHTSA Office of EMS "Establishing a Prehospital Blood Transfusion Program" Webinar (Virtual).** Registration is open. More information is available here.

September 16-17. **ADRP: The Association for Blood Donor Professionals Master Class (Virtual).** Registration is open. More information is available here.

September 22. **NHTSA Office of EMS Working with a Blood Supplier in Your Prehospital Blood Program Webinar (Virtual).** Registration is open. More information is available here.

September 23. **FDA Scientific Public Workshop: Next-Generation Sequencing for Adventitious Agent Detection in Biologics (Virtual).** Registration is open. More information is available here.

September 29. **FDA Blood supply Chain Roundtable Webinar (Virtual).** Registration is open. More information is available here.

October 4-7. **Association for Advancing Tissue and Biologics (AATB) Annual Meeting. San Francisco, Calf.** More information available here.

October 5-7. **ARM Cell & Gene Meeting on the Mesa. Phoenix, Ariz.** More information is available here.

October 14-15. **Biomedical Excellence for Safer Transfusion (BEST) Collaborative Member Meeting. Atlanta, Ga.** More information is available here.

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

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CALENDAR (continued from page 11)

October 20. **NHTSA Office of EMS Paying for Your Prehospital Blood Program Webinar (Virtual).** Registration is open. More information is available here.

November 5-6. **2026 ABC Women's Executive Leadership Community *Rise &* Lead Workshop. San Antonio, Texas.** More information is coming soon.

November 17. **NHTSA Office of EMS Prehospital Blood Transfusion Policies, Protocols Guidelines & Training Webinar (Virtual).** Registration is open. More information is available here.

November. 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.

December 15. **NHTSA Office of EMS Prehospital Blood Transfusion: Tracking Success & Improvement Webinar (Virtual).** Registration is open. More information is available here.

2027

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

May 11-13. **2027 ADRP: The Association for Blood Donor Professionals Annual Conference Columbus, Ohio.** 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

HR Director. At Stanford Blood Center (SBC), how we treat our people is just as important as the life-saving work we do. We're looking for an **HR Director** who shares that belief — and brings the experience, courage, and heart to help us live it every day. This is a strategic partnership. You'll work closely with our VP and senior leadership to advance SBC's people agenda, navigate a mission-driven organization within a large health system, and be a trusted resource for managers and staff alike. You bring the same resourcefulness to HR that SBC brings to its mission: finding a way forward. What we're looking for: A leader with presence and warmth in equal measure — someone people at every level feel comfortable approaching. A strategic thinker who brings an HR lens to organizational conversations, not just day-to-day problem solving. Someone who has navigated tough situations and comes out with relationships and trust intact. Solid experience with California employment law and labor/union relations. Background in high-volume, people-intensive environments: healthcare, retail, or similar. Ten to 15 years of progressive HR experience with a track record of follow-through. Requirements: Bachelor's degree in Human Resources, Business Administration, or relevant field. Minimum 10 years of progressive HR experience with increasing responsibility. We're a close-knit team doing work that saves lives. If you're energized by meaningful work and want an HR role where you can make a genuine difference, we'd love to hear from you. Click here to apply. Questions? Contact Miriam Garrido, Talent Acquisition Consultant Miriam1@stanford.edu.

Regional Director (Tallahassee, FL). OneBlood is seeking an experienced Regional Director to oversee donor blood collection operations and lead regional teams in support of its lifesaving mission in the Panhandle. This leadership role is responsible for driving operational excellence, ensuring compliance with regulatory and accreditation standards, and achieving donor recruitment and collection goals across the region. Candidates should possess strong leadership, analytical, communication, and team management skills, along with the ability to build collaborative relationships and improve operational performance. A bachelor's degree and significant management experience in healthcare, blood banking, or a related field are preferred. Travel

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POSITIONS (continued from page 12)

within the region may be required. This position is based in Tallahassee, Florida, and offers the opportunity to join a mission-based organization dedicated to maintaining a safe and reliable blood supply for local communities. Competitive compensation and a comprehensive benefits package offered. Apply at **OneBlood Careers**.

Executive Director (Brussels, Belgium). Reporting directly to the EBA (European Blood Alliance) President and working closely with the Executive Board and central office team, the Executive Director will oversee EBA operations, functions, and activities, and lead the EBA through its next phase of development and influence. This is a role for an individual who is comfortable operating at the intersection of healthcare, science, policy, regulation, competent authorities, and international relations. Key responsibilities include: Lead and develop EBA as a modern, effective, and influential European membership organization. Work with the President, Executive Board, and central office team to shape strategic priorities and organizational direction. Manage the day-to-day operations, governance, and financial stewardship of EBA. The individual will have: Experience building organizational capability, capacity, and effectiveness. An ability to operate independently whilst maintaining strong engagement with Boards and senior stakeholders. The successful candidate shall have and be able to demonstrate: Significant leadership experience in a complex organization or international environment. Knowledge of European Policy, Regulation, and Competent Authorities. Experience engaging with European institutions and international organizations. Experience: At least 3 years' experience in a leadership role in a complex organization or international environment. At least 3 years' experience in a role directly involving European Policy, Regulation, and Competent Authorities. Knowledge of additional European languages. Please click here to view the full job description. To apply, please contact Peter O'Leary, EBA Executive Director (departing). The deadline to apply is **August 7th**.

Director of Mobile Operations (Austin, TX). Oversee the management of all mobile and support operations, which includes but is not limited to medical history, donor eligibility, automated component collection and whole blood collection processes, as well as staff scheduling, quality control, and education and training in conjunction with the Director, Fixed Site Operations. Establish and maintain quality practices while continually seeking to improve and expand upon performance and knowledge for self and staff. A minimum of five (5) years management experience, including strategic planning, or a minimum of three (3) years blood center senior management experience is required; blood center or relevant industry-related experience may be substituted for some management experience. Blood center experience in donor collection operations management strongly preferred, particularly experience with FDA/ AABB and/ or Industry audits. College degree and/or RN license preferred. Either of these may substitute up to two (2) years management experience. Must be at least 21 years old, possess a valid driver's license, and be able to provide a copy of an acceptable driving record and proof of liability insurance. Ability to maintain a flexible schedule, including travel, evenings, weekends, and on-call responsibilities. Click here to apply.

Immunohematology Reference Laboratory Manager. LifeSouth Community Blood Centers is looking for a leader with a passion for making a difference to join our Immunohematology Reference Laboratory team in Atlanta, GA**. Legal authorization to work in the United States is required. We do not provide visa sponsorship for this position.** Shift differential applies to eligible evening and overnight hours. This position is responsible for leading staff engaged in performing laboratory testing and related activities in our AABB-accredited reference laboratory. The IRL Manager is expected to provide day-to-day onsite supervision of testing personnel and reporting of test results under the direction of the Laboratory Director. This position is also responsible for performing laboratory procedures and reporting of test results, as well as ensuring compliance with established laboratory policy and with applicable governmental regulatory requirements from agencies such as CLIA, FDA, AABB, HIPAA, and state licensing regulations. Join our team and help us continue our mission to make sure blood is available when it's needed most. Visit our careers page to learn more about this position, and apply here!

Director of Supply Chain (Piedmont, SC). The Blood Connection seeks an experienced and strategic Director of Supply Chain to lead procurement, inventory management, warehousing, logistics, and distribution operations across its growing multi-state blood center network. Reporting to the Vice President of Operational Support Services, this leader will oversee the supply chain infrastructure that supports donor centers, mobile collection operations, laboratories, manufacturing facilities, warehouses, and distribution activities. Responsibilities include directing inventory planning and replenishment, managing vendor relationships and contract negotiations, overseeing warehouse and distribution operations, implementing advanced ERP and supply chain technologies, and driving process improvements that enhance efficiency, compliance, and service levels. The Director will collaborate closely with Finance, Quality, and Operations leadership on budgeting, strategic planning, and operational excellence initiatives while developing and mentoring a high-

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performing supply chain team. The role requires a bachelor's degree in Supply Chain Management, Logistics, or a related field, along with 7–10 years of progressive leadership experience in healthcare, blood banking, pharmaceuticals, or another regulated environment. Candidates should possess strong analytical, project management, and change leadership skills, as well as a proven track record of optimizing complex supply chain operations. This is an exceptional opportunity to lead a mission-critical function that directly supports lifesaving services throughout the communities we serve. Apply today.

Medical Laboratory Scientist. LifeSouth Community Blood Centers is looking for experienced Medical Laboratory Scientists, with a passion for making a difference. Current openings: Gainesville, Florida (Multiple shifts available; rotating weekends and holidays), Jacksonville, FL (Overnight), and Atlanta, Georgia (Morning shift; rotating weekends and holidays). **Legal authorization to work in the United States is required. We do not provide visa sponsorship for these positions.** Shift differential applies to eligible evening and overnight hours; sign-on and/or relocation bonuses may also be offered to qualified candidates. Our Medical Laboratory Scientists work in a full-service, accredited immunohematology laboratory following established policies and procedures to resolve complex immunohematology and compatibility problems to provide the safest donor blood for patients in our community. Join us in our mission to make sure blood is available when it's needed most. Visit our careers page to learn more about this position and apply today!

Laboratory Supervisor (Evenings). LifeSouth Community Blood Centers is looking for an experienced Laboratory Supervisor with a passion for making a difference to lead our evening shift Immunohematology Reference Laboratory team, in **Gainesville, FL**. Shift differential applies to eligible evening and overnight hours; sign-on and relocation bonuses may also be offered to qualified candidates. In this role, you'll oversee daily operations, ensure adherence to established policies and procedures, and support staff in resolving complex testing and compatibility challenges. You'll play a critical part in identifying and addressing issues that may impact test performance or result reporting, while mentoring and guiding team members to uphold the highest standards of quality and safety. Your leadership will help ensure the delivery of the safest donor blood for patients in our community. We are committed to excellence in customer service and patient care. Join us in our mission to make sure blood is available when it's needed most. Visit our careers page to learn more about this position and apply today!

Purchasing Manager. LifeSouth Community Blood Centers is seeking a highly skilled leader with proven management experience and a passion for making a difference. The **Purchasing Manager** at our headquarters location in **Gainesville, FL** is responsible for vendor selection, negotiation, establishment and maintenance of all purchased materials, supplies, equipment, and services used by the company. The Purchasing Manager is organized and decisive and can motivate the team to reach daily and long-range goals. Join our team and help us continue our dedication to making sure the blood is there when you or your family is in need. Visit our careers page to learn more about this position, and apply here!