

Hurricane Irma Leaves Florida Without Power, But Not Without Blood

In an unprecedented event, a second massive hurricane hit the continental U.S. last week, striking Caribbean islands before devastating the Florida Keys and striking Florida's mainland. Hurricane Irma, starting as a Category Five and downgrading as it went up the Florida mainland, caused a total of [31 deaths](#) within three U.S. states (to date) as well [another 34 deaths](#) in the Caribbean. As of Wednesday, more than 40 percent of Florida still lacked electricity and estimates for when the region would regain power ranged from days to weeks. Flooding stretched from South Florida up both coastlines as this hurricane, the size of Texas, swept across the Florida peninsula. Georgia and South Carolina also experienced flooding in portions of their states.

"It was ugly, but it wasn't terrible," said OneBlood CEO Bud Scholl, who evacuated his own coastal community home and lived in a windowless warehouse for a week with his family. "From (mainland) Florida's perspective, we were spared the worst of the storm."



Florida Highway Troopers and Air Methods help to deliver blood to OneBlood

OneBlood, one of the largest blood centers in the country, serving Florida and parts of the southeast, had to suspend 100 percent of their operations for three days (Saturday, September 9, through Monday, September 11). "We were proactive before the storm arrived and made sure our hospital partners had additional blood products on-hand to be able to ride out the storm", said Mr. Scholl. "Not being able to collect for three days, we knew we would be facing a blood shortage when the storm cleared so we put the wheels in motion early on with blood centers around the country who sent additional units to help augment our supply."

Again, the blood community responded with incredible force to help ensure a ready blood supply in Florida. As soon as the storm cleared, blood started arriving "I am absolutely incredibly grateful to the national community and our employees that all put forth such an incredible effort," said Mr. Scholl. "I really can't say enough about the national blood banking community and our team members' dedication; it is these types of things (disasters) that bring out the best in people, which renews all our faith in humanity."

While OneBlood is renowned in the industry for their disaster preparedness and continuity planning—Mr. Scholl noted they had continuity planning calls every three hours last week in preparation for and after the storm—the path of Hurricane Irma took everyone by surprise as it twisted up the opposite coast from meteorologist predictions and hit Marco Island and Naples before heading inland and dissipating significantly in strength.

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OUR SPACE

ABC CMO and Interim CEO Louis Katz, MD
 ABC President Martin Grable, CEO of Community Blood Center of
 the Carolinas

If You Are Reading This...

...it means that, despite two major hurricanes in the past three weeks, ABC members assembled a quorum in Atlanta for a special members meeting and passed the bylaws changes needed to achieve the important realignment of ABC, Blood Centers of America (BCA), and HemeXcel. Despite logistical hurdles, 49 of 52 ABC members registered their votes, and an overwhelming majority of 97 percent supported the bylaws changes. Our thoughts and support go to the ABC centers and their staffs in Florida and Texas who endured the storms and now must manage their recovery. Their tasks make ours look a bit pedestrian.

Thanks are owed to the leadership from all three organizations (members and staff both) and the working group who have crafted our realignment. The outgoing board has acted in the best interest of ABC, for which we gratefully recognize them.

A new ABC Board of Directors has been constituted and consists of some of our best thinkers. Martin Grable, Delisa English, and Mike Parejko from BCA along with Jim AuBuchon, MD from HemeXcel have been retained for expertise and continuity. David Green and Bud Scholl are new members appointed from HemeXcel. John Armitage, MD, has accepted from BCA.

Now we begin the work of squaring our aspirations with reality—aligning the activities of the organizations to ensure their effectiveness and efficiency moving forward. With the new structure in place, we will move to the work at hand:

- Convene the new board, elect officers, review, and where needed, revise our strategic plan;.
- Reach agreement on a senior executive structure for ABC and execute the required searches;
- Clarify the immediate advocacy agenda and our relationships and focus with the Department of Health and Human Services, Advisory Committee on Blood and Tissue Safety and Availability and Blood, Organ, and Tissue Senior Executive Council, Centers for Medicare and Medicaid Services, the Food and Drug Administration, and the Hill. Decide how to integrate our efforts, with AABB, the American Red Cross, and our suppliers;.
- Structure existing committees and distribute projects logically to the strengths of the three organizations (ABC, BCA, and HemeXcel), i.e. integration of member efforts;.
- Determine the structure and requirements of a new Data LLC to serve our advocacy, operational, and monetization interests and access the funding to support it; and
- Identify redundant services for consolidation.

We want to thank all of the members of ABC for their support in this important initiative and look forward to the opportunity to continue to help member blood centers serve their communities.

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HURRICANE IRMA (continued from page 1)

“Most Floridians were not as prepared on the west coast as they could have been since all the tracking kept saying it was going to hit the East Coast,” said Mr. Scholl.

One of the three Creative Testing Solutions’ (CTS) testing centers is in Tampa—an area that has not seen a direct hit from a hurricane since 1921 and narrowly missed a direct hit from Irma. CTS is the largest blood products testing organization in the country and OneBlood is one of the primary and founding members.

“We did have to cease testing operations at CTS Tampa on Saturday (September 9) and didn’t restart until Wednesday morning (September 13) for samples that can be driven to the lab. Because the cargo facilities (American, Delta, and Southwest) at Tampa International Airport were closed until Tuesday, we had to wait to send samples that were flown to the CTS Tampa lab back there until Wednesday morning, at which time the lab resumed normal operations,” said Marc Pearce, vice president of business systems at CTS. “We moved all CTS Tampa clients to either CTS Dallas or CTS Phoenix while the CTS Tampa lab was down.”

LifeSouth Community Blood Centers and SunCoast Blood Bank also saw disruptions in their services due to Irma. LifeSouth closed their operations for two days in Florida, Sunday and Monday, as well as their operations in Alabama and Georgia on Monday. SunCoast Blood Bank had to stop operations entirely for five days, from noon on Friday, September 8, until Wednesday, September 13. Both blood centers are now fully operational. SunCoast CEO Scott Bush noted they received platelet units from other ABC member centers when their need became critical, but “we saw the storm coming and ramped up collections ahead of time knowing that we were likely going to cease operations. Fortunately, we had built up enough red blood cell supply to weather Irma.”

LifeSouth is experiencing some big disruptions to their platelet collections as well. “We are specifically struggling with apheresis collections. Also, the gas shortage is an issue caused by increased motorists on the road,” said J.D. Pettyjohn, vice president of Operations at LifeSouth.

With donors and staff members being evacuated, power outages, gasoline shortages, and streets flooded or impassable due to fallen trees and debris, it has been—and continues to be—tough logistically to get products where they need to be. Blood Centers of America (BCA) helped OneBlood and the other centers during the immediate aftermath of Irma to receive needed platelet units from other member centers.

“Just like in Houston, centers couldn’t get their products into Florida directly,” said Karen O’Hara, director of Blood Product Sourcing with BCA. “When there are embargos on travel, it’s very difficult getting into the city and shipping products in.” BCA helped to coordinate couriers out of Georgia and New Orleans to bring affected member centers the platelets their hospitals so badly needed.

Thankfully, most of the donor facilities remain relatively unharmed from the storm and the blood supply will be running at full throttle again shortly. The biggest obstacles now remain moving products and donor recruitment.

“You have to imagine those nearly 10 million evacuees are all trying to get back into Florida now, there is no gas, no power, the roads are jammed. It’s very difficult to send mobile units out and donors are more worried about going back to work and getting their lives back together at this time,” said Mr. Scholl.

Please note: Global Blood Fund has broadened their text-to-give campaign to include blood staff members who are affected by Hurricane Irma as well as Harvey. Text BLOOD to 91011 to donate to the Hurricane Emergency Relief Fund and 100 percent of the donation will go to blood center staff affected by these storms. 📌



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INSIDE ABC

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

Sign up for the QA Education Committee Webinar

The ABC Quality Assurance Education Committee is proud to offer the webinar “Update on Donor Hemovigilance & Blood Center and Donor Benefits” as part of the continually growing list of ABC Professional Institute’s educational and professional development offerings. The webinar will be presented by Kevin Land, MD, vice president of Clinical Services at Blood Systems, Inc., and Kip Kuttner, DO, medical director at Miller-Keystone Blood Center on September 19 from 3:00 to 4:30 p.m eastern. Attendees will leave the webinar with a new appreciation for the importance of donor hemovigilance and how blood centers can use it to improve donor safety and reduce blood center liability. Attendees will also discover how other blood centers engage in donor hemovigilance programs, review the harmonized donor standardized definitions project, and discuss the roadblocks and the future of donor hemovigilance.

To register up for the webinar, click [here](#).

Newsletter Editor Departure



Unfortunately, ABC must say goodbye to our Newsletter Editor Lisa Spinelli. Ms. Spinelli’s last day is today, Friday, September 15. She came to ABC last year from the tech startup world with a decade of journalism experience. She worked tirelessly at ABC to give readers a variety of stories, including feature-length stories that touched on non-traditional transfusion medicine topics like block chain management and climate change, to more customary issues like the sustainability of the blood supply and iron mitigation practices. Ms. Spinelli is proud to have achieved a new look for the newsletter, a complete redesign of the Blood Bulletin, and a social media strategy that has resulted in more than a 100 percent increase in followers for ABC on all platforms.

Ms. Spinelli and her husband are starting an energy resiliency consultancy group called BlackStart Innovation where she will be the executive vice president of marketing and communications. “Being a part of such a tight-knit team at ABC has been a great pleasure for me. It was an honor to be part of an industry filled with such dedicated professionals, all working to save lives and reshape the face of transfusion medicine. I wish you all the best,” she said.

For any questions on the newsletter or Blood Bulletin going forward please email ABC Communications and Marketing Manager [Mack Benton](#).

(continued on page 5)

ABC Calendar of Events

ABC offers a variety of meetings, workshops and virtual opportunities for education and networking as well as participation in ABC business. The [calendar of events](#) includes annual and summer meetings, board meetings, workshops, and webinars, and details will be updated as confirmed. We look forward to your support and participation!



INSIDE ABC (continued from page 4)

Celebrate International Donor Recruitment Professionals Day with ADRP



The team at Hoxworth Blood Center celebrates Blood Collectors Week with their team of committed, professional blood collectors, who are the vital link between donors and patients in need of blood.

ADRP is proud to sponsor International Donor Recruitment Professionals Day on Wednesday, September 20. This day recognizes the hard work and dedication of those who recruit donors to save lives around the world.

ADRP is running a friendly social media contest in celebration of the day! Post a group photo, team party, or special interaction between a team member and donor to celebrate the rewarding profession in blood banking on social media and tag them with #ADRPcelebrates. The posts with the most “likes” on Sept. 20, and from Blood Collectors Week (which ran from September 3 through 9), will win one complimentary 2018 ADRP Annual Conference Registrations each. ♦

Learn ♦ Grow ♦ Lead Shed Light on Your Future



This Month's Featured API Resources

- 1. Jerry Haarmann Leadership Program**
Six courses on leading teams

“This course gave me many ideas on how to work with the team in my department as well as working with other teams outside my department.”

- API pilot participant

- 2. Strategic Leadership Program**
Six courses on change management and communication challenges

Effective Leadership: How Do You Rate?

Check your leadership effectiveness by answering yes or no to the following questions:

- Do you know exactly what you want employees to understand, think, and do in response to your communications?
- Are trust and commitment part of your team's DNA?
- Do you know what motivates your employees?



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Social Media Posts on Blood Collectors Week

Coastal Bend Blood
@CBBloodCenter

Following

It's "Blood Collector's Week" here at the blood center! We want to thank our amazing phlebotomist for all their amazing hard work. ❤️❤️❤️



2:15 PM · 11 Sep 2017

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MVRBC @WillYouGive · 8 Sep 2016

It's #BloodCollectorWeek and we think our team is pretty amazing!



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Carter BloodCare @CarterBloodCare · Sep 10

Last week, our team celebrated National Blood Collector's Week with treats and good times! #ADRPcelebrates



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Hoxworth Blood Center Blood Collectors



Northern California Community Blood Bank Blood Collectors



Indiana Blood Center Blood Collectors



RESEARCH IN BRIEF

The presence of specific human leukocyte antigens (HLA) in sickle cell anemia (SCA) patients receiving multiple transfusions is associated with higher susceptibility to alloimmunization. Frequently transfused patients, like sickle cell disease patients, are at high risk of alloimmunization. In a study of 172 polytransfused SCA patients, researchers found that patients with allele variants HLA-C*06 and HLA-DQB1*03 had significantly higher rates of alloimmunization to Rh and Kell antigens—HLA-C*06 (allelic frequency percent= 21.59; odds ratio [OR]=3.43, 95 percent confidence interval [CI]=1.72–6.85) and HLA-DQB1*03 (allelic frequency percent=35.23; OR=1.99, 95 percent CI=1.17–3.37). Other alleles were associated with an increased rate of developing anti-Fy^a and anti-K antibodies.

Citation: Rodrigues C., Sell A.M., Guelsin G.A.S., *et al.* HLA polymorphisms and risk of red blood cell alloimmunization in polytransfused patients with sickle cell anaemia. *Transfusion Medicine*. September 7, 2017. DOI: 10.1111/tme.12459.

Laboratory correlation of thrombocytopenic bleeding in hematology/oncology patients explored. Prophylactic platelet transfusion is a mainstay of clinical care for patients with hypoproliferative thrombocytopenia after receiving chemotherapy, or allogenic or autologous stem cell transplants (SCTs). The effectiveness of transfusion is variable. In an observational analysis of the Platelet Dose (PLADO) trial data, 1,077 adults were analyzed for 16,320 patient days on or after their first platelet transfusion. The researchers found that all patients had a greatly increased risk of bleeding at platelet counts of $\leq 5 \times 10^9/L$ (odds ratio [OR], 3.1; 95 percent confidence interval [CI], 2.0-4.8) versus higher levels. Platelet counts between $6 \times 10^9/L$ and $80 \times 10^9/L$ were also associated with a somewhat elevated bleeding risk in patients receiving allogeneic SCTs or chemotherapy, but not in those undergoing autologous SCTs. Other significant contributing factors that increased bleeding rates were hematocrit ≤ 25 percent and prolonged blood coagulation assays. Allogeneic SCT patients had bleeding on 21 percent of the patient days compared to 10 percent of the autologous SCT group and 11 percent of chemotherapy patients. Patients with international normalized ratio (INR) of >1.5 had an OR of 4.08 (95 percent CI, 1.90 to 8.78) vs INR between 1.3 and ≤ 1.5 with an OR of 0.79 (95 percent CI, 0.38 to 1.64). An accompanying commentary noted, as did the authors, that this study has some limitations as it used a subset of patients and did not address fever or infection as independent risk factors.

Citations: Uhl L., Assmann S.F., Hamza T.H., *et al.* Laboratory predictors of bleeding and the effect of platelet and RBC transfusions on bleeding outcomes in the PLADO trial. *Blood*. September 7, 2017. DOI: 10.1182/blood-2017-01-757930.

Carson J.L. and Stanworth S.J. Anemia and bleeding in thrombocytopenic patients. *Blood*. September 7, 2017. DOI: 10.1182/blood-2017-07-795922. ♦

RECENT REVIEWS

Cochrane review of pathogen-reduced (PR) platelets. The Cochrane Collaboration published a comprehensive review updating the experience with Cerus and Terumo PR processes for platelets and their use for the prophylaxis of bleeding. Randomized controlled trials that included 1,662 patients treated with INTERCEPT and 319 with Mirasol platelets were eligible for inclusion. PR platelets were equivalent to standard platelets for clinically significant bleeding (WHO Grade 2 or higher). All-cause mortality and serious adverse events were similar for treated and standard platelets. Platelet refractoriness was more prevalent with treated platelets (relative risk 2.94, 95 percent CI 2.08-4.16); post-transfusion increments were lower and more platelet transfusions at shorter intervals were administered. A majority of the patients (98 percent) included in the findings already had a hematological or oncological diagnosis.

Citation: Estacourt L.J., Malouf R., Hopewell S., *et al.* Pathogen-reduced platelets for the prevention of bleeding (Review). *Cochrane Database of Systematic Reviews*. 2017. 7:1-132. ♦



BRIEFLY NOTED

Doubts about a research paper using CRISPR technology have surfaced. In a new article in the journal *bioRxiv*, Columbia University stem-cell scientist Dieter Egli offers a contrary opinion to the conclusions of a landmark research paper (Hong et al.) from the Oregon Health and Science University in Portland. The Portland paper claimed human embryos were edited with high efficiency using CRISPR-Cas 9 technology to delete a mutant version of the MYBPC3 gene that is associated with hypertrophic cardiomyopathy. Egli et al. are questioning whether the embryos were really corrected using CRISPR and speculate that the researchers inadvertently used an inappropriate assay leading them to conclude they had edited the gene when more than likely the team entirely deleted a large portion of the relevant DNA. The Hong group intends to respond to the critique in a timely fashion.

Citation: Egli D., Zuccaro M., Kosicki M., *et al.* Inter-homologue repair in fertilized human eggs? *bioRxiv*. Preprint. DOI: <https://doi.org/10.1101/181255>.

Hong Ma H., Marti-Gutierrez N., Park S.W., *et al.* Correction of a pathogenic gene mutation in human embryos. *Nature*. August 2, 2017 online. DOI: 10.1038/nature23305.

While hospital spending this year rose, it was the lowest year-over-year (YOY) growth rate in 28 years. A new report from the Altarum's Center for Sustainable Health Spending showed the hospital spending YOY growth rate for June at 0.8 percent and July at 1.1 percent—the lowest in their data records since 1989. These rates have led to health care spending growth that is 0.3 percent lower than the Gross Domestic Product growth for the last three months. (Source: [Altarum report](#), September 8, 2017)

BEST study of donor demographics published. In a study of 17 member centers in 12 countries, including some ABC members and the American Red Cross, by the Biomedical Excellence for Safer Transfusion (BEST) Collaborative, researchers calculated the median age of donors compared to the general population as well as changes in the number of first-time donors and their demographic information from 2001 to 2011. The age distribution of both donors and general population varied greatly between countries. In the U.S. the biggest differentials (percent of donors in an age cohort minus their percent in the general population) were 6.6 in the youngest age cohort (16 to 25 years) for males and 7.5 for females; and the oldest (61+) at -3 percent for males and -6.8 percent for females. This reflects overrepresentation of the youngest donors. The median donor age was 40 for the U.S., which also had one of the highest percentages of first-time donors.

Citation: Goldman M., Steele W.R., Di Angelantonio E., *et al.* Comparison of donor and general population demographics over time: a BEST Collaborative group study. *Transfusion*. September 4, 2017. DOI: 10.1111/trf.14307. ♦

INFECTIOUS DISEASES UPDATES

Inactivation of the red cell pathogen *Babesia microti* was achieved in an animal infectivity model using the INTERCEPT Blood System. *B. microti* is considered the most prevalent transfusion-transmitted parasite in the U.S. Cerus' INTERCEPT treatment of infected hamster red blood cells units resulted in a more than 5 log/mL inactivation to the limit of detection. For the platelet concentrates suspended in 100 percent plasma, the mean log reduction was more than 4.5 log/mL.

Citation: Tonnetti L., Laughhunn A., Thorp A.M., *et al.* Inactivation of *Babesia microti* in red blood cells and platelet concentrates. *Transfusion*. September 5, 2017. DOI: 10.1111/trf.14280.

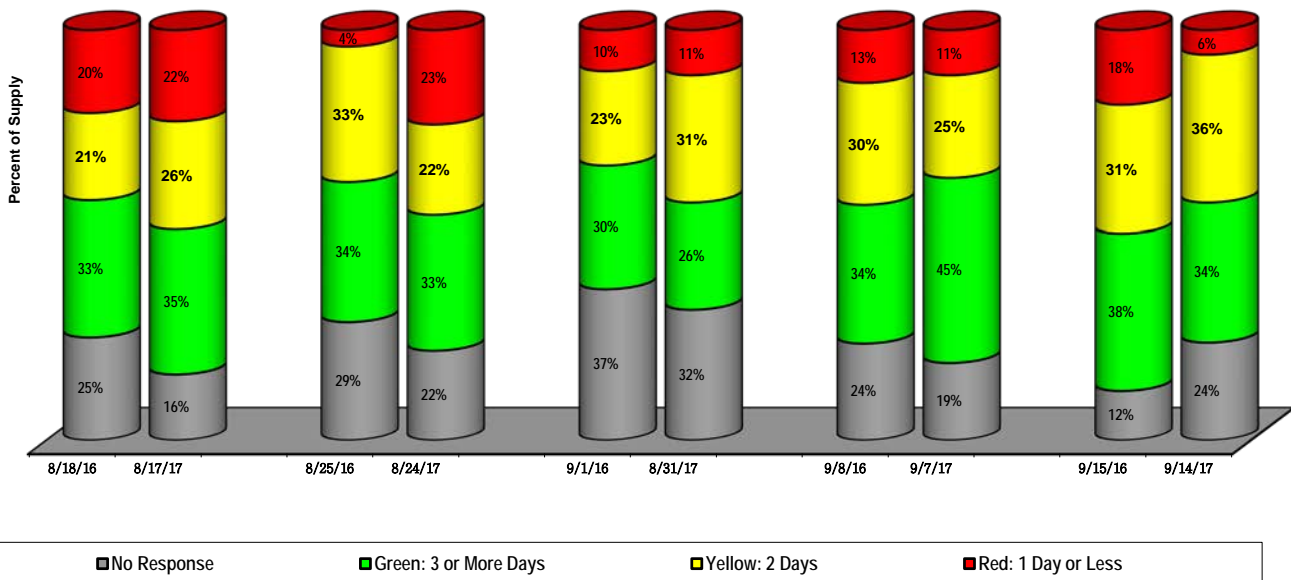
INFECTIOUS DISEASES UPDATES (continued from page 9)

Transplanting organs from hepatitis C (HCV) infected donors into uninfected recipients may be an option to reduce the shortage of organs. A study by Liu et al. in *Clinical Infectious Diseases* reported that none of the 12 HCV-negative recipients in their study had treatment-related adverse events after receiving direct acting anti-HCV treatment for HCV-positive heart transplants. The authors of a commentary explain how directly acting antivirals (DAAs) have paved the way for treatment of HCV patients and to ensure post-transplant HCV-related complications are no longer a threat to transplant recipients. Most transplant centers in the U.S. now have adopted an unofficial “wait-to-treat” stance for patients on their liver transplant list so that an HCV infected recipient can receive an HCV RNA-positive liver. The comment is favorable toward the use of HCV-infected organs being transplanted into non-HCV infected recipients as well. The authors also noted as more HCV-infected youths are dying from the opioid crisis, there is a chance that more organs can be transplanted from them to HCV-negative recipients.

Citation: Weinberg E.M. and Reddy K.R. Let’s Make a Deal: Shortening the solid organ transplant waiting time in exchange for transmitting and treating Hepatitis C infection in the era of safe and effective DAAs. *Clinical Infectious Diseases*. September 4, 2017. DOI: <https://doi.org/10.1093/cid/cix790>

Liu C.H., Chen Y.S., Wang S.S., et al. Sofosbuvir-based interferon-free direct acting antiviral regimens for heart transplant recipients with chronic hepatitis C virus infection. *Clinical Infectious Diseases*. September 4, 2017. DOI: <https://doi.org/10.1093/cid/cix787>. ♦

STOPLIGHT®: Status of the ABC Blood Supply, 2016 vs. 2017



The order of the bars is (from top to bottom), red, yellow, green, and no response



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*Book room(s) by September 1st for discounted rate

Gulf Coast Regional Blood Center is pleased to host these workshops in Houston. Attendees will benefit from the shared knowledge of fellow finance and IT professionals with lively discussions on cyber security, financial and operational metrics, and the blood banking industry. This will be an excellent opportunity to network with your peers and share your expertise on good financial and data management practices and similar topics. We look forward to seeing you!

- Brian G. Gannon, President & CEO
 Gulf Coast Regional Blood Center



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MEMBER NEWS



Louisiana Governor held statewide blood drives in the aftermath of Hurricane Harvey. LifeShare Blood Center joined The Blood Center (New Orleans) and Louisiana Gov. John Bel Edwards' office for a statewide blood drive on Friday, September 8 following the devastation of Hurricane Harvey. More than 330 blood donations took place at the designated blood drives, including a donation from Gov. Edwards himself (pictured left) and several from his staff and state government employees. LifeShare conducted mobile blood drives at various state buildings and collaborated with The Blood Center (New Orleans) to host local blood drives in the New Orleans area. Each area garnered media coverage that further expressed the need for blood donations to maintain a local supply and to help the region as the weather complications continued to result in decreased donor turnout. In a statement from the Governor's office prior to the blood drives, Gov. Edwards said, "my of-

fice is organizing this blood drive as part of our commitment to doing everything we can to help our neighbors in the wake of Hurricane Harvey's devastation. Louisianans always step up in a time of crisis and pull together to help those most in need. I am asking anyone who can give to please do so either this Friday or in the near future." (Source: LifeShare press office email, September 14, 2017)

(continued on page 12)



MEMBER NEWS (continued from page 11)

Central California Blood Center (CCBC) held their third annual Paws for Pints blood drive in collaboration with the Central California Animal Disaster Team.

Paws for Pints began as a replacement blood drive for injured fire-fighter Captain Pete Dern, who fell through a burning roof while trying to fight a house-fire. The blood drive is held every year in September to be in conjunction with National Preparedness Month. Over the years the event has evolved into a blood drive and emergency preparedness exposition. Last year there were five K-9 service animals that were injured in the line of duty so CCBC paid tribute to those K-9s at the expo. This year, CCBC remembered those animals that were being rescued during Hurricane Harvey along with those that were being rescued during the many local fires that are burning in the state of California. The goal of the drive was to raise 100 pints of blood for CCBC and those affected from the recent hurricanes in Houston and Florida. For more information, visit the Central California Animal Disaster Team website www.CCADT.org. (Source: ABC30, [Third annual Paws for Pints held at River Park](#), September 9, 2017; CCBC press office) ♦



GLOBAL NEWS

Tom Frieden, former director of the Centers for Disease Control and Prevention (CDC), started a global health initiative called Resolve to Save Lives. The five-year initiative is backed by \$225 million from Bloomberg Philanthropies, the Chan Zuckerberg Initiative, and the Bill & Melinda Gates Foundation. Partners include The World Health Organization, CDC, and the World Bank. The mission of the initiative is to “save 100 Million Lives and Prevent Epidemics” by reducing the rate of heart attacks, stroke and preventing epidemics in developing nations. (Source: *STATNews*, [Former CDC director Tom Frieden to launch new global health initiative](#), September 12, 2017) ♦

CALENDAR

2017

Sept. 18-19. **Public Workshop, Advancing the Development of Pediatric Therapeutics (ADEPT): Application of “Big Data” to Pediatric Safety Studies, Silver Spring, Md.** For more information, click [here](#).

Sept. 27-28. **Financial Management & IT Workshops, America’s Blood Centers, Houston, Texas.** Contact: ABC Meetings Dept. Phone: (202) 654-2901; e-mail: meetings@americasblood.org.

Sept. 27. **7th Annual Symposium Red Cell Genotyping 2017: Patient Safety, Bethesda, Md.** The Department of Transfusion Medicine, NIH Clinical Center, National Institutes of Health, and the BloodCenter of Wisconsin are co-hosting this symposium on the NIH campus. For information, registration fee and advance registration contact [Phyllis Kirchner](#).

Sept. 28. **36th Annual Immunohematology and Blood Transfusion Symposium, Bethesda, Md.** No registration fee. Advance registration is encouraged. Contact [Karen Byrne](#) or visit the [website](#).

Oct. 7-10. **AABB Annual Conference, San Diego, Calif.** More information and registration [here](#).

Oct. 19-20. **Austrian Red Cross Content Marketing Workshop, Vienna, Austria.** [Email](#) for more information.

(continued on page 13)

CALENDAR (continued from page 12)

Oct. 25-28. **National Sickle Cell Disease Association Convention, Atlanta, Ga.** Register [here](#).

Oct. 25-26. **MedTech Coverage, Coding, & Reimbursement Workshop, San Diego, Calif.** Find out more [here](#).

Nov. 2. **AdvaMed Cybersecurity Summit, Washington, D.C.** For more information and to register, click [here](#).

Nov. 8-10. **10th World Federation of Hemophilia Global Forum, Montreal, Canada.** For more information and to register, click [here](#).

Dec. 9-12. **American Society of Hematology Annual Meeting & Expo., Atlanta, Ga.** Register [here](#). ♦

Please note: Transfusion Safety Officer & Patient Blood Management Seminars, in Jacksonville, Fla., have been cancelled for November.

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 institutional 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, contact Lisa Spinelli at the ABC office. Phone: (202) 654-2982; fax: (202) 393-1282; e-mail: lspinelli@americasblood.org.

POSITIONS

Positions also available on our [website](#)

Assistant Director of Donor Recruitment & Marketing. The Central California Blood Center (CCBC) seeks qualified candidates for the position of assistant director of Donor Recruitment and Marketing. Reporting to the director of Donor Recruitment and Marketing. This position will be responsible to champion the CCBC strategic and marketing plans to achieve annual blood collection goals in both fixed site/automated collection locations as well as mobile/field drives. Requires an effective leader with the ability to adapt to change. Accomplished in sales/territory management, staff development, and team building, with excellent verbal and written communication and public speaking skills and computer literacy required. In addition to the oversight of all mobile/fixed site marketing and recruitment, the scope of responsibilities will require a best fit candidate to possess the ability to assist the director to oversee the implementation of a branding campaign, and work with media and other community stakeholders to advance the reputation of CCBC in the community. Advancement opportunity. Bachelor's degree or higher in communications, marketing, public relations, business administration, health care administration, political science, marketing, or related field and 10 years progressive management experience in blood banking or a health-related field is preferred. Competitive salary and benefit package offered. EOE/M/F/Vet/Disability. Apply online [here](#).

Manager Quality Control Laboratory. The San Diego Blood Bank (SDBB) is looking for a Manager of their QC laboratory who will manage and coordinate functions and activities in the laboratory as well as participate on the Lab Management Team and support SDBB safety, good manufacturing practice, and quality plan. Essential duties include: maintaining department records, reports and statistical data as required; developing laboratory goals and objectives in conjunction with the director; assisting with the development and management of the department budget; establishing and maintaining laboratory policies and procedures; participating in laboratory quality and variance programs and process improvement programs; facilitating department staff meetings and attends other meetings as assigned; enhancing professional growth and development for self and staff; and performing other duties as assigned or requested. The right applicant will have a bachelor's degree, have an advanced understanding of immunohematology and blood banking concepts with five or more years in the blood banking or a related field (with laboratory, supervisory and regulatory experience). Candidates should also have an advanced knowledge of application of AABB Standards, Food and Drug Administration, Clinical Laboratory Improvement Amendments, and other regulations that apply to

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blood banking and cell engineering. Must be a detailed-oriented, well organized, self-motivated employee capable of working independently. California Clinical Laboratory Scientist License is required. To apply, click [here](#).

VP, Medical Affairs/Medical Director. Mississippi Blood Services (MBS) has a career opportunity for a board certified/board eligible physician with 3 to 5 years of experience, preferably in transfusion medicine, hematology, cellular therapy, clinical pathology or related fields. The successful candidate will direct and control personnel and relevant procedures related donor eligibility determination; and all processes related to collection of blood and blood components, including investigations/reporting of donor-related reactions and events, post donation reports, and associated product disposition decisions. Candidate will also assist with the medical and technical review of SOP's, validations and variances as needed. In addition to technical knowledge, the successful candidate needs to be comfortable communicating with others so as to building appropriate relationships with donors, MBS associates, the Mississippi medical community and blood center Medical Directors across the country. We offer a competitive salary and benefit plan. If you are interested in discussing the opportunity further, please send your resume or CV and cover letter to klee@msblood.com, or visit <https://msblood.applicantpro.com/jobs/>. EOE

Director of Quality Assurance. LifeSouth Community Blood Centers is currently seeking an individual for the director of Quality Assurance position in Gainesville, Fla. This position is responsible for ensuring organizational compliance with applicable regulatory requirements, accreditation standards (AABB Standards, Food and Drug Administration, Clinical Laboratory Improvement Amendments, and other, state and international regulations), and industry practice. Bachelor's degree in medical technology, management or science related field required. Valid driver's license required. Must also meet and maintain LifeSouth driver's eligibility requirements. Must be willing and able to travel. The ideal candidate will possess a Medical Technologist (MT) license, ASQ certifications and experience in the quality operations of a blood bank, plasma center or biotechnology related organization. This is a full-time position. Starting salary range is \$90,000 to \$99,000 annually. Background check and drug test required. Equal Opportunity/Affirmative Action Employer/DFWP/Tobacco Free. Follow [this link](#) to apply.

Donor Services Operations Director (Ardmore, Okla.). The Oklahoma Blood Institute seeks a Donor Services Operations Director who will provide leadership and direction over all aspects of the Donor Services collection team for both mobile and fixed site operations. The position is responsible for assessing, developing, and implementing strategic plans to achieve donor services objectives and goals; creating a friendly competitive environment to motivate staff to achieve high system wide standings on all key performance metrics (loss rates, errors, double red blood cell conversion, Global Blood Fund, etc.); conducting routine meetings to communicate organizational vision, updates, and changes and recognize outstanding staff performance keeping morale high; maintaining adequate staffing levels; making frequent visits to both fixed and mobile collection sites; actively participating in internal and external assessments/inspections including corrective action plans and effectiveness checks as needed; track and monitor inventory and collection goals, which include whole blood, automation rates, and whole blood conversion data; analyze data and make adjustments to increase productivity—this includes working closely with recruitment to ensure projections are met; and prepare and manage department annual budgets. The candidate must have a bachelor's degree in management or medical field with a minimum of five years' leadership/management experience, and a valid driver's license. Competitive salary and excellent benefits package are offered. To apply, click [here](#).

Business Support Analyst. LifeServe is seeking a new business support analyst. This position is responsible for functional business support through data analytics and oversight as well as application technical support and then presents data analytics and reports to operational areas. As an internal consultant you'll resolve functional and technical problems for assigned software programs and may also support the design, configuration, testing, implementation, and general administration of assigned software systems, recommending improvements to vendor strategy, application usage and/or processes; as well as develop and design queries and reports, collaborate with stakeholders, serve as a subject matter expert for applications, create and analyze metrics to determine operational progress, develop, review, and edit requirements and processes for software programs and ensures security roles are evolving as business and regulatory requirements change; interface with vendors; deliver presentations and work with other staff to ensure projects are complete. Requirements include a bachelor's degree and three years of experience with business, process and/or data analysis; business processes; sales; business administration; strategic planning and execution; and/or

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consulting. The right person will also have the ability to analyze, interpret and manage financial resources, multi-task and set priorities, be motivated, and possess leadership skills. Personal qualities of integrity, credibility, and commitment to the organization's mission are required for this position. Demonstrating professional behavior at all times is required. LifeServe is now offering a \$1,000 sign-on bonus for new full-time hires until the end of the year. Ask the recruiter when applying for the position. EOE Interested applicants should apply at <http://www.lifeservebloodcenter.org>.

Director of Recruitment. LifeServe is seeking a new Director of Recruitment. This position will be responsible for operational oversight of the Recruitment Department, including blood donor recruitment functions via mobile blood drives and donor center environments. Direct or delegated oversight ensures financial viability, operational feasibility and desirability of business decisions. Creates and fosters a collaborative environment in the organization allowing all employees to work together to further the mission of the organization, ensuring that the organization is increasing customer value, growing in a smart/efficient manner, and driving operational efficiency. The employee will be responsible for planning, directing, staffing, and controlling the Recruitment Department to meet blood donor recruitment goals; overseeing, administering, and delegating activities within the department, including creating and/or maintaining recruitment practices and policies to ensure recruitment activities reach organizational weekly,

monthly, and yearly blood collection goals; ensuring appropriate resources are used effectively and efficiently throughout the recruitment department by creating and following productivity measures, efficiency targets and cost-effectiveness standards; creating, analyzing, and evaluating metrics to determine progress of recruitment efforts; working collaboratively and maintaining a positive working relationship with co-dependent departments. The Director of Recruitment will also be responsible for the professional development of all staff within the department; actively promoting the concept of customer service and personally adheres to those principles; providing customer service and a positive image with sponsor groups, chairpersons, donors, visitors, volunteers, and blood center staff. This position may be required to work occasional evening or weekend accessibility by phone or email. The right candidate must have a bachelor's degree in business administration, marketing, communications, or a related field; minimum of five to seven years of previous sales or marketing experience; and experience in strategic planning and execution; ability to analyze, interpret and manage financial resources; ability to multi-task and set priorities. Leadership qualities are essential. Personal qualities of integrity, credibility and commitment to the organization's mission are required for this position. Demonstrating professional behavior at all times is required. Management experience is preferred as is experience in blood banking. EOE. LifeServe is now offering a \$1,000 sign-on bonus for new full-time hires until the end of the year. Ask the recruiter when applying for the position. Interested applicants should apply at <http://www.lifeservebloodcenter.org>. 🔴