



ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

Visit ABC's Web site at: www.americasblood.org

2018 #1

January 12, 2018

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Israeli Pilot Program Allows MSM to Donate without Abstinence

The deferral of males who have sex with other males (MSM) remains a controversial subject globally. In 2015, the U.S. Food and Drug Administration (FDA) changed the deferral policy for MSM allowing them to donate blood after 12 months had passed since their most recent male to male sexual contact, if they met all other eligibility requirements. “FDA concludes that the available evidence most strongly supports a change from the indefinite deferral to a one-year blood donor deferral policy for MSM, and FDA expects that this change will maintain or improve blood safety with respect to HIV. FDA will continue to monitor the safety of the blood supply, including the effect of a change to a one year deferral,” stated the FDA [guidance](#).

Debate still exists surrounding the current FDA [guidance](#) with opponents suggesting that a 12 month deferral is medically unnecessary and discriminatory. Advocates in the LGBT community view the [guidance](#) as biased and want a deferral based on individual behaviors. Israel faced a similar situation recently when their Health Ministry announced plans to adopt a 12 month deferral for MSM. The Ministry received backlash from not only the LGBT, but Magen David Adom (MDA), the Israeli National Emergency Service.

MDA’s Professor Eilat Shinar, director of blood services, proposed “test[ing] the blood once at donation and a second time before infusion. In the interim, the blood will be frozen for four months in a special freezer,” said MDA in a statement to the *Times of Israel*. This week, the Health Ministry agreed to this system for a two-year trial, which allows MSM to donate without being celibate. “Starting very soon, all members of the population will be able to enlist to save lives regardless of their sexual orientation,” said Eli Bin, director of MDA to *The Times of Israel*. “Donation of blood is a right and duty common to all citizens of Israel.”

America’s Blood Centers, AABB, and the American Red Cross had long-supported moving to a one-year MSM deferral, because it “aligns the MSM donor deferral period with those for other activities that may pose similar risks for transfusion-transmissible infections,” according to a December 2016 [joint statement](#).

(Sources: *The Times of Israel*, [Gay, bisexual men cleared to donate blood in pilot program](#), 1/10/18; *Newsweek*, [Gay and bisexual men in Israel can now donate blood without delay, but not in the U.S.](#), 1/10/18) ♦



OUR SPACE

Jed Gorlin, MD, MBA, ABC Liaison to AABB Transfusion Transmitted Diseases Committee

Louis Katz, MD, Chief Medical Officer, ABC & AABB Transfusion Transmitted Diseases Committee

Follow the Data

At the recent Blood Products Advisory Committee (BPAC) meeting ([ABC Newsletter #42](#)), the U.S. Food and Drug Administration (FDA) heard the committee's endorsement for moving from the current universal individual donation nucleic acid testing (ID-NAT) for Zika virus (ZIKV) to a model used for West Nile Virus (WNV) donor screening—screening using minipools (MP-NAT) to reduce operational burdens, with rapid conversion to ID-NAT based on prospectively determined “triggers” that demonstrate at the probability of local (autochthonous) vector-borne transmission(s). This strategy was recommended by ABC via a statement endorsed by the Scientific, Medical, and Technical Committee, reviewed by the ABC Board of Directors, and delivered as a [joint statement](#) from ABC, the American Red Cross, and the AABB. The current expectation for WNV is that ID-NAT triggering will occur in an appropriate geographic region based on a donor's residential zip code within 24 hours or less of reaching a trigger—a fixed number of presumptively viremic donors (and/or the presence of other WNV activity in the area served by a collection facility). For WNV, accomplishing this rapid conversion to ID from MP-NAT required the evolution of an effective communication system among laboratories and center-to-center that includes blast e-mail communications to formally maintained address lists and entry of appropriate data on a [website](#) hosted by the AABB. A similar [website](#) was established to accommodate information on ZIKV testing of donors during IND testing and remains operable. Such data entry and e-mail messaging must occur as soon as possible (again, not to exceed 24 hours) since other collectors must assess their need to transition to ID-NAT.

Recent review of data from the AABB ZIKV [website](#) suggests that individual centers are not providing timely data entry (e.g., as of Jan. 5th, only 43 of 55 confirmed positive donors were listed). This has not yet had a safety or operational impact, since there is no switching to ID from MP-NAT. However, our adherence to timely conversion to ID-NAT will be critical for FDA to accept a more flexible testing model. The AABB Transfusion Transmitted Diseases (TTD) Committee (inclusive of centers, hospitals, the Centers for Disease Control and Prevention, and the military) and FDA are now considering the advice from BPAC, and what information is needed and useful for nimble triggering and detripping. It is clear that waiting for public health surveillance data will not be timely in many, if not most, jurisdictions, so our responsibility for timely donor surveillance is critical. MP-NAT has the advantage of allowing the prediction of which donors will be confirmed with subsequent testing. That is, a reactive minipool that resolves to a single donation sample, has a very high positive predictive value, and can be used to initiate immediate donor interview regarding risk for infection and subsequent triggering decisions without waiting for reference supplemental testing. As we develop processes for this transition, please be sure your SOPs will support timely (i.e., immediate) communication and data entry. Let us know how we can assist in timely submission of data to the Zika hemovigilance website. ♦

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ABC is an association of not-for-profit, independent community blood centers that helps its members provide excellence in transfusion medicine and related health services. ABC provides leadership in donor advocacy, education, national policy, quality, and safety; and in finding efficiencies for the benefit of donors, patients, and healthcare facilities by encouraging collaboration among blood organizations and by acting as a forum for sharing information and best practices.

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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.

ABC 2017 Service Fee Survey Launches

ABC is conducting its annual survey of member service fees. The results from this survey play a vital role in ABC's advocacy efforts to obtain better reimbursements for blood products on behalf of its member blood centers. The data in this report will only be reported in aggregate. No individual data from a member blood center will be displayed or shared. Please respond by January 31, 2018. Contact [Sameer Ughade](#) with any questions or to receive a link to the online survey distributed earlier this week.

SAVE THE DATE

**ABC Quality Education Process
Improvement Test Cases—Best
Bang for Your Bucks Webinar**

February 20, 2017 at 3 PM ET

Additional details coming soon!

56th ABC Annual Meeting Registration

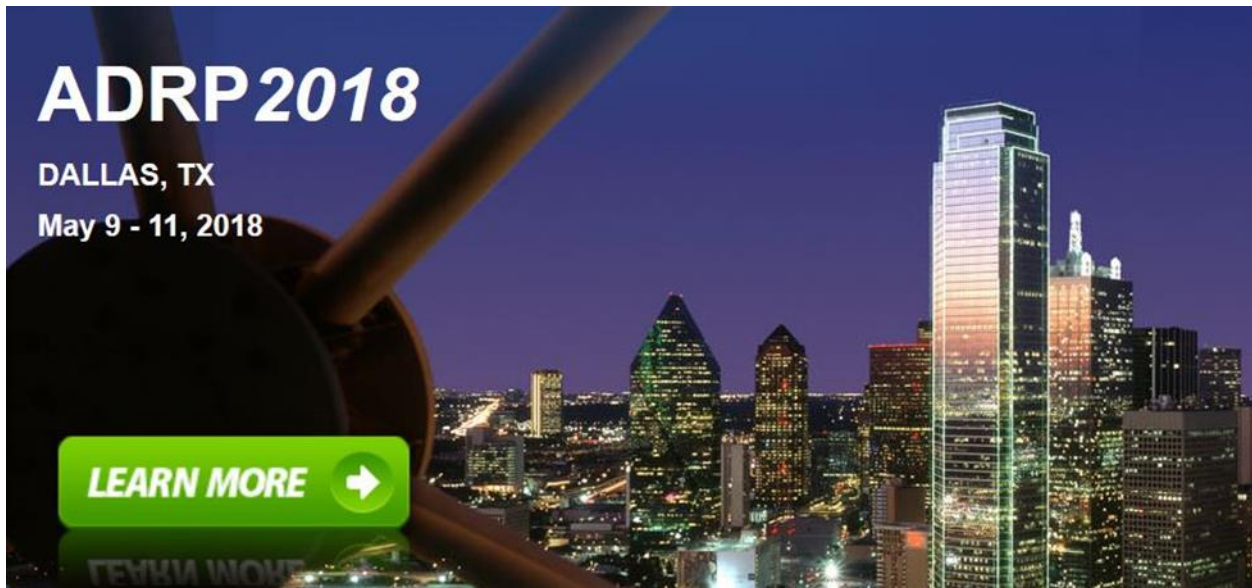
[Registration](#) is open for America's Blood Centers (ABC) 56th Annual Meeting in Scottsdale, Ariz. March 17th – 19th at the Scottsdale Plaza Resort. Don't miss an exclusive opportunity for blood community leaders to experience peer-to-peer collaboration, while discussing the latest trends impacting community blood centers. The meeting will feature the Celso Bianco, MD Lectureship, the Scientific, Medical, Technical Forum, and the 21st Annual *Awards of Excellence*. Additionally, ABC member Blood Systems Inc. will host a networking event at the [Musical Instrument Museum](#). Please make your hotel reservations by February 23rd to ensure best availability and the group rate. Click [here](#) for additional details. Contact [Leslie Maudy](#) for available sponsorship opportunities. ♦

ADRP 2018

DALLAS, TX

May 9 - 11, 2018

LEARN MORE





RESEARCH IN BRIEF

Cell salvage during cesarean section does not meaningfully reduce RBC transfusion. A pragmatic, randomized controlled study in 26 obstetrics units in the United Kingdom randomized 3,028 women, and analyzed 2,990. The allogeneic transfusion rate was 3.5 percent in those without and 2.5 percent among those with cell salvage (odds ratio (95 percent CI) 0.65 (0.42-1.01)). The rates of detection of fetomaternal hemorrhage were 10.5 percent and 25.6 percent respectively (odds ratio 5.63 (1.43-22.4)). Long term rates of maternal antibody formation were not reported.

Citation: Khan, K.S., Moore, P.A.S, Wilson, M.J. *et al.* Cell salvage and donor blood transfusion during cesarean section: A pragmatic, multicentre randomised controlled trial (SALVO). *PLoS Medicine*. 2017. 14(12): e1002471. <https://doi.org/10.1371/journal.pmed.1002471>.

Chinese investigators used a variety of in vitro assays to assess cold-stored (4°C, buffy coat platelets to 21 days in comparison to standard room temperature (22°C) storage to 5 days. Included in the assessments were platelet activation markers, pH, lactate dehydrogenase and lactic acid levels, activation markers, light and scanning electron microscopic morphology, aggregation in response to multiple agonists and viscoelastic properties. Morphologic, metabolic, and hemostatic indices were stable over greater intervals in cold platelets. They conclude that, out to 10-14 days of cold-storage, such platelets may be superior to those stored at room temperature. No *in vivo* studies were reported.

Citation: Yang, J., Yin, W., Zhang, Y. *et al.* Evaluation of the advantages of platelet concentrates stored at 4°C versus 22°C. *Transfusion*. 2017. [doi:10.1111/trf.14462](https://doi.org/10.1111/trf.14462). ♦

Willingness of men who have sex with men (MSM) to donate assessed. Dutch and Australian investigators have tried to estimate the impact of changes in MSM deferral practices on blood donation in the Netherlands. Two hundred-thirty MSM, 2,032 non-MSM males, and 137 women responded to a survey conducted in 2014, when MSM were still permanently deferred from donation. This represented an overall response rate of 60 percent. Risk factors for transfusion transmitted infections, including MSM, injection drug use, receipt of drugs or money for sex, and sexual exposure to at risk individuals were elicited. Willingness to donate blood was measured using two items and Likert scale responses combined a single score. One-third of MSM would have been eligible to give with a 12-month deferral and half were willing to do so. The latter proportion increased with shorter deferral intervals.

Citation: Romeijn, B., Merz, E.-M., Kok, G. Eligibility and willingness to donate blood in men who have (had) sex with men. *Transfusion*. 2017. [doi:10.1111/trf.14469](https://doi.org/10.1111/trf.14469).

Autologous platelet transfusion has little effect on reversal of the effects of ticagrelor or clopidogrel-treated volunteers. The value of platelet transfusion to reverse the effects of antiplatelet agents in patients requiring emergency invasive procedures or experiencing active bleeding is a recurrent and important question for transfusion medicine physicians and clinicians and informative high-quality data are sparse. Researchers from Astra-Zeneca, the manufacturer of ticagrelor, have used healthy volunteers treated with that drug or clopidogrel and characterized their responses to a single unit of autologous apheresis platelets collected before receipt of the drugs. Forty-four subjects received a single dose of the study drug (and low dose aspirin 24 hours before transfusion) in a randomized, open label, crossover trial design. Outcomes were the percent inhibition of platelet aggregation and P2Y₁₂ reaction units after transfusion or no transfusion at 24 and 48 hours after ticagrelor, and at 48 hours after clopidogrel, with each subject as his or her own control. No significant impact of transfusion was apparent in ticagrelor-treated subjects, and only minimal reversal of antiplatelet effects were seen with clopidogrel (of unknown potential clinical impact). The authors hypothesize that since ticagrelor binds reversibly to its target, it is available to redistribute in plasma

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RESEARCH IN BRIEF (continued from page 4)

and bind to transfused platelets. The active metabolite of clopidogrel binds irreversibly to its receptor, which may account for the modest effect of transfusion. Limitations included the small size of the study, the use of healthy volunteers without heart disease, the limited platelet dose (one apheresis unit) and the limited number of antiplatelet drugs evaluated.

Citation: Teng, R., Carlson, G.F., Nylander, S., *et al.* Effects of autologous platelet transfusion on platelet inhibition in ticagrelor-treated and clopidogrel-treated subjects. *J. Thrombosis and Haemostasis*. 2016. [14:2342-52](#).

Hyperfibrinolysis predicts outcomes on massive transfusion recipients. A *post hoc* analysis of data from the pragmatic, randomized, optimal platelet and plasma ratio (PROPPR) trial “has identified hyperfibrinolysis as strongly predictive of both mortality, morbidity, and blood use after trauma. Five hundred forty-seven out of 680 randomized patients, all of whom required activation of a massive transfusion protocol after severe injury (drawn from 905 PROPPR subjects receiving at least three total blood products in the 24 hours after injury) had viscoelastic assessment (thromboelastography of “TEG”) at admission to one of 12 Level I trauma centers. Clot lysis at 30 minutes (LY30) was the primary parameter used to stratify patients by their hyperfibrinolytic phenotype: hyperfibrinolytic (HF); physiologic (PHYS); or “shut down” (SD), i.e., minimal evidence of fibrinolysis. The HF phenotype was associated with a mortality odds ratio of 3.06 (95 percent CI 1.57-5.95), and had higher injury severity scores, base deficit, and more abnormal standard assays of hypercoagulability (PT, PTT and other TEG indices). Median RBC units transfused were 15, seven and nine in the first 24 hours for HF, PHYS, and SD cohorts respectively. Those values for platelets were 12, six, and six, and for plasma 11, four, and six.

Citation: Taylor III, J.R., Fox, E.E., Holcomb, J.B. *et al.* The hyperfibrinolytic phenotype is the most lethal and resource intense presentation of fibrinolysis in massive transfusion patients. *J. Trauma and Acute Care Surg*. 2017. [DOI: 10.1097/TA.0000000000001699](#).

RECENT REVIEWS

Recent Review: sickle cell disease (SCD) in the emergency room. A review of the basic pathophysiology of various acute SCD syndromes and their management in the emergency department has been published in *Hematology Oncology Clinics* of North America. It is fairly basic, but reflects what emergency room physicians are reading.

Citation: Lovett, P.B., Sule, H.B., Lopez, B.L. Sickle cell disease in the emergency department. *Hematol Oncol Clin N Am*. 2017. [31:1061-1079](#).

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!


Policies regarding blood donation by donors with seizure disorders reveal little consensus. Belgian physicians have surveyed 46 global blood services with responses returned from 26 countries with regard to acceptance or deferral from donation. Most (59.3 percent) use a temporary deferral, but its duration and

(continued on page 6)



RECENT REVIEWS (continued from page 5)

any duration during which prospective donors must be seizure free or off medication are highly variable. No data were available regarding adverse events in either donors or recipients.

Citation: Kellens, A., DeBuck, E., Edmonds, M.P. et al. Worldwide policies on epilepsy and blood donation: a survey among blood services. *Vox Sanguinis*. 2018. DOI: [10.1111/vox.12618](https://doi.org/10.1111/vox.12618). 



AMERICA'S BLOOD CENTERS'

56TH ANNUAL MEETING

March 17-19, 2018 | Scottsdale, AZ

2018 ANNUAL MEETING SCHEDULE

Saturday, March 17	ABC Board Meeting Opening Session
Sunday, March 18	ABC Members Meeting SMT Forum & Celso Bianco Lectureship Host Event by Blood Systems
Monday, March 19	General Session 21st Annual Awards of Excellence
Tuesday, March 20	NBF Leadership Forum

Hotel Information
Scottsdale Plaza Resort
Hotel room rate:
\$219 Single/Double

For registration information, visit http://bit.ly/abc_annual_meeting.

For sponsorship opportunities, please contact Leslie Maundy at lmaundy@americasblood.org.




“ I look forward to welcoming America's Blood Centers back to Scottsdale, where the organization began more than 55 years ago. Along with opportunities to discuss emerging issues in our field, the Annual Meeting is a great forum for exchanging ideas and developing collaborations. **”** The more who attend – the greater the value to all involved!

— Dave Green, MSA, President and CEO
Blood Systems, Inc.




America's Blood Centers
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BRIEFLY NOTED



Community Blood Center of the Carolinas (CBCC) has launched the international [Blood Donor Emoji campaign](#) to [petition](#) the Unicode Consortium to create an emoji for blood donation. The goal is 30,000 signatures. Blood centers across the globe are encouraged to participate in the campaign, while spreading the word to blood

donors and recipients, friends, family, colleagues, and community supporters. The campaign will culminate on July 17th, National Emoji Day. To request an emoji kit with customizable collateral materials, complete this [form](#). (Source: Community Blood Center of the Carolinas [Announcement](#), 1/8/18)

A severe winter storm resulted in blood drive cancellations along the east coast extending from the northeast through the southeast reminding us of the difficult winter months when the nation's blood

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BRIEFLY NOTED (continued from page 6)

supply can be disrupted by the holidays, winter weather, and flu season. As of Thursday, 47 percent of America's Blood Centers' member centers were reporting "green" in the ABC Stoplight data, meaning that they have at least three or more days-worth of blood in their supplies. Most ABC members are maintaining an adequate blood supply through the tough winter months thus far, while some members have sent out regional appeals for more donations during the winter dip. ABC and its members are working with the Department of Health and Human Services on messaging to encourage the scheduling of donations, and we will continue to monitor and provide updates as necessary.

2018 AABB National Blood Foundation (NBF) Leadership Forum—Grow, Protect, Prepare. Join the AABB NBF on Tuesday, March 20th in Scottsdale, Ariz. for this must-attend event for health care executives in transfusion medicine, patient blood management, and cellular therapies. Discuss the unique industry opportunities and challenges that are being faced, and work with colleagues and thought-leaders to develop practical solutions that grow, protect, and prepare your organization and the community at large for future advancement. The NBF is pleased to offer ABC's Annual Meeting attendees a \$100 discount—[sign up today](#) to be notified when registration opens! 💧



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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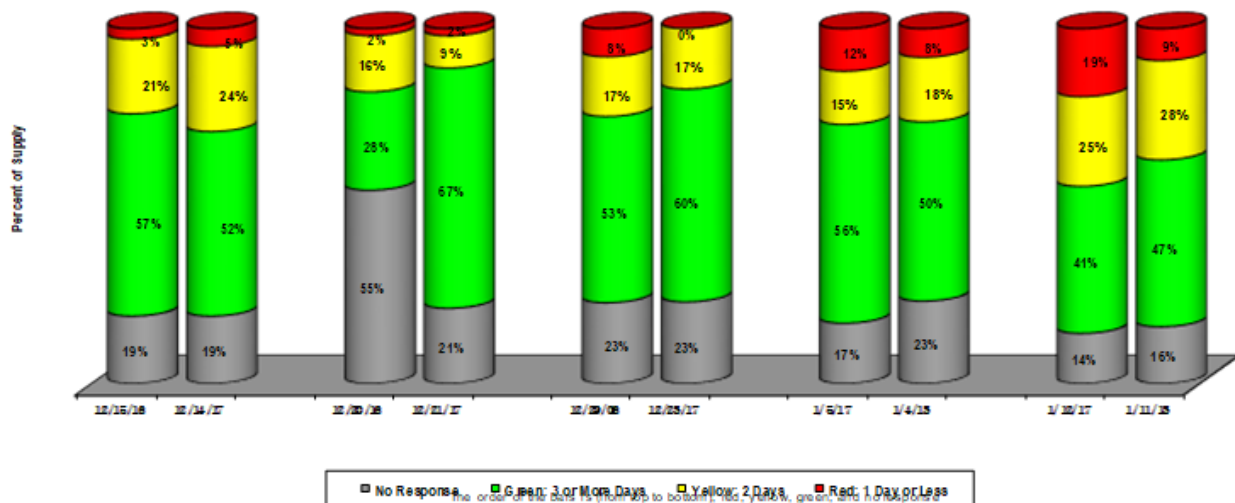
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Log on at: www.americasblood.org/education

REGULATORY NEWS

The U.S. Food and Drug Administration’s (FDA) Center for Biologics Evaluation and Research (CBER) recently published the fiscal year [2017 Report](#) from the Director, Peter Marks, MD, PhD. “During [fiscal year] 2017, CBER completed expedited reviews of seven Investigational New Drug applications (INDs) for Zika vaccines, and CBER continues to advise the U.S. Department of Health and Human Services and international regulatory partners on Zika virus vaccine development,” according to the report. “In addition, CBER oversaw the implementation of nationwide blood donor screening for Zika virus using two investigational donor screening nucleic acid tests, and subsequently licensed the [cobas Zika test](#)—the first test intended to detect Zika virus in blood donations and living organ donors.” The report also highlighted the approval and advancements in of gene therapies. Additional information is contained within the [report](#). (Source: CBER 2017 [Report](#) from the Director) 💧

STOPLIGHT®: Status of America’s Blood Centers’ Blood Supply



Daily updates are available at:
www.AmericasBlood.org

WORD IN WASHINGTON

Alex Azar, President Trump’s nominee for the next Secretary of the Department of Health and Human Services (HHS), appeared before the Senate Finance Committee this week during a confirmation hearing. According to *Politico*, he indicated his support for replacing funding for the Affordable Care Act with block grants to states, “[t]here are elements that are very positive, such as allowing states to run their own budgets,” said Mr. Azar. “Incentives can be reoriented in a very positive way for more state empowerment.” Additionally, Mr. Azar voiced his support for “more choice of insurance” and “insurance that fits needs.” A recording of the hearing is [available](#). Mr. Azar has worked both as a pharmaceutical executive and previously within the administration of former President George W. Bush. If confirmed, he would fill the role formerly held by Tom Price, MD. (Source: *Politico*, [Trump's HHS pick appears to be on track for confirmation](#), 1/9/18) 💧



IN MEMORIAM

Karen E. King, MD, a pathologist at Johns Hopkins Hospital and professor at the Johns Hopkins School of Medicine passed away on January 5th. In a career that spanned three decades, Dr. King's many accomplishments included "buil[ding] the Hemapheresis and Transfusion Support Division at Hopkins from the ground up," according to her [obituary](#). She received a [2017 President's Award](#) from AABB "in recognition of her tremendous service to AABB through education, mentorship, and numerous appointments to AABB committees, including associate editor of *Transfusion*. For her leadership in apheresis and organ transplant immunohematology and her devotion to training junior members in the field of transfusion medicine." (Source: *Baltimore Sun*, [Dr. Karen King, Johns Hopkins pathologist, dies](#), 1/8/18) 💧



PEOPLE

Blood Systems, Inc. (BSI) has named **Tanya Perry** as executive vice president, chief financial officer. "Tanya has proven her mettle in tackling myriad challenges in the finance area since she joined our organization," said BSI President and CEO David Green in a news release. "Her expertise and focused execution will serve us well as Blood Systems pursues its vision for the future." Ms. Perry is a licensed CPA with more than 20 years of financial leadership experience. Over the past year, she served as the vice president of finance at BSI before the promotion. Ms. Perry received her executive MBA from Arizona State University. (Source: Blood Systems, Inc. News Release, 1/3/18) 💧

MEMBER NEWS

OneBlood recently announced the availability of the documentary *Lifeline: The Untold Story of Saving the Pulse Survivors* on Amazon Prime Video. The documentary includes survivors of the tragic nightclub shooting in Orlando, Fla. meeting the blood donors that helped save their lives. "We are honored this important story will be seen around the globe. It will help raise awareness about the importance of a ready blood supply and show the lifesaving difference blood donors make in the world," said Susan Forbes, vice president of marketing and communications for OneBlood and the director of *Lifeline* in a [news release](#). A preview can be viewed [here](#), as the documentary will also appear on national television throughout the month of January. (Source: OneBlood [News Release](#), 12/28/17)

Rock River Valley Blood Center (RRVBC) in Rockford, Ill. is celebrating 65 years of existence this month during National Blood Donor Month. Several events are planned as a part of the celebration including birthday cake at all donor centers on January 9th. "It is only due to the dedication of lifesaving blood donors that we have been able to serve this community for 65 years," said Jennifer Bowman, public relations and marketing manager at RRVBC in a [news release](#). "We are honored to be a part of the [R]ock [R]iver [V]alley and continue to provide lifesaving blood products and services to people in need." (Source: Rock River Valley Blood Center [News Release](#), 12/28/17) 💧

COMPANY NEWS

The U.S. Food and Drug Administration (FDA) has approved 510k clearance to Arlington Scientific, Inc. (ASI) for the ASI Automated Rapid Plasma Reagin (RPR) test for Syphilis on the ASI Evolution. The ASI

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COMPANY NEWS (continued from page 9)

RPR test is a nontreponemal test that uses antigen-antibody interaction to detect the presence of syphilis and is designed to be used in screening blood donors. It is the first and only fully automated nontreponemal syphilis test cleared by the FDA Center for Biologics Evaluation and Research for blood and plasma screening. Additional information is [available](#) in the FDA Cleared 510(k) submissions with supporting documents. (Source: Arlington Scientific, Inc. [News Release](#), 1/2/18) ♣

CALENDAR

Note to subscribers: Submissions for a free listing in this calendar (published in the last issue of each month) are welcome. Send information to Leslie Maundy by e-mail (lmaundy@americasblood.org) or by fax to (202) 393-1282. (For a more detailed announcement in the weekly "Meetings" section of the newsletter, please include program information.)

2018

Feb. 5-7. **14th Annual FDA and the Changing Paradigm for HCT/P Regulation., Alexandria, Va.** Register [here](#).

Feb. 21. **SCABB Regional Symposium: General Topics for Blood Bankers in Clinical Laboratory Medicine, Orlando, Fla.** For more information, contact [Nancy Benitez](#).

Mar. 17-19. **ABC Annual Meeting, America's Blood Centers, Scottsdale, Ariz.** More details available [here](#).

Mar. 20. **National Blood Foundation Leadership Forum, Scottsdale, Ariz.** More details available [here](#).

Mar. 21-22. **IPFA 3rd Asia Workshop on Plasma Quality and Supply, Kuala Lumpur, Malaysia.** More details available [here](#).

May 8-10. **ABC Human Resources and Training/Development Workshop, Dallas, Texas.** More details available [here](#).

May 9-11. **ADRP Conference & Expo, Dallas, Texas.** More details available [here](#).

May 16-17. **IPFA/PEI 25th Workshop on "Surveillance and Screening of Blood-borne Pathogens," Athens, Greece.** More details available [here](#). ♣

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 Leslie Maundy at the ABC office. Phone: (202) 654-2917; fax: (202) 393-1282; e-mail: lmaundy@americasblood.org.

POSITIONS

Assistant Vice President, Quality & Regulatory Affairs. Kentucky Blood Center, located in Lexington, Kentucky, is seeking a proactive professional to assist the Vice President, Quality & Regulatory Affairs (VPQRA) in coordination of institutional adherence to standards and guidelines issued by regulatory agencies and accrediting organizations by designing, implementing, and monitoring the quality assurance program plan. This position is responsible for assisting the VPQRA in regulatory oversight of quality and operational activities

to ensure KBC compliance with all regulations and standards issued by regulatory agencies and accrediting organizations, including AABB, FDA, CLIA, State, OSHA, NRC, EU, and Short-Supply Agreement requirements. Qualified applicants must have a Bachelors of Arts or Science, Medical Technologist MT(ASCP) or equivalent, and CQA(ASQ) or equivalent preferred. A minimum of seven years blood banking experience or

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POSITIONS (continued from page 10)

demonstrate understanding of all federal, state and regulatory agency requirements/guidelines and five years' experience in management. Must have good communication skills, computer skills, and have the ability to perform and interpret statistical analyses and reports. Competitive salary, comprehensive benefits including health, dental, vision, life, STD, LTD, paid time off/holidays, EAP, and 401(k) retirement savings plan. Relocation provided. For more information or to apply online, please visit www.kybloodcenter.org. Drug-free and EOE/AAP.

Manufacturing and Hospital Services Manager. Kentucky Blood Center (KBC), located in Lexington, KY is seeking a resourceful, self-motivated individual to oversee Technical Services second shift blood component processing from receipt of units through distribution, including inventory management. The successful candidate will ensure excellent customer service is provided to all KBC blood component customers; ensure Quality System Essentials are implemented, audited, and in compliance within Technical Services; develop and monitor department budgets; and will ensure acceptable validation and implementation of new or revised processes, equipment, computer programs and SOPs. This is a second shift position, 2:00 pm – 10:30 pm. Bachelors of Arts or Science, Medical Technologist MT(ASCP) or Clinical Laboratory Sciences, or experience deemed equivalent. Three years of management experience in an organization regulated by good manufacturing practices, FDA, AABB or equivalent. Two or more years' experience in a blood center managing blood components distribution, inventory, and customer relations preferred. Must have excellent leadership, problem solving, and communication skills. Competitive salary, comprehensive benefits including health, dental, vision, life, STD, LTD, paid time off/holidays, EAP, and 401(k) retirement savings plan. Relocation provided. For more information or to apply online, please visit www.kybloodcenter.org. Drug-free and EOE/AAP.

Vice President, Clinical Services Administration. Blood Systems, headquartered in Scottsdale Arizona, is one of the nation's largest comprehensive transfusion medicine organizations. Our blood centers provide blood, blood components and special services to patients in over 1,000 hospitals across the country. We are seeking a Vice President, Clinical Services Administration for the Corporate Division. This position is responsible for fostering enterprise-wide collaboration among Blood Systems' immunohematology reference and centralized transfusion clinical services, promoting cost-saving standardization and enacting approved changes to provide impeccable laboratory and transfusion services for the patients served by our hospital partners. The ideal candidate will have extensive supervisory experience in immunohematology.

Experience: Eight years of related experience required, to include five years' supervisory experience. Knowledge/Education: Bachelor's degree required. Master's degree preferred. Knowledge of large system operations management including fiscal policies, human resource management, and strategic planning required. Knowledge of federal, state, and local regulations that affect business operations required. Licenses/Certifications: SBB or equivalent preferred. To view the job description and apply for this position, please click [here](#).

Human Resources (HR) Training Specialist (Greenville, SC). The Blood Connection (TBC) seeks qualified applicants for its Human Resources (HR) Training Specialist position. The role of the HR Training Specialist is to oversee all professional development and regulatory training within TBC. HR Training Specialist responsibilities include understanding regulatory training requirements and communicating with executives and managers to identify training needs and mapping out development plans for teams and individuals. The HR Training Specialist is responsible for managing, designing, developing, coordinating and facilitating all training programs. Bachelor's degree in education, human resources, or related field with four years training experience or a bachelor's degree in any field with eight years training experience preferred. This position reports to Vice President of Business and Administration/VPBOA. The Blood Connection is an Equal Opportunity Employer. EEO/Minority/Female/Disability/Vets. To apply please go to <http://thebloodconnection.org/verify/>.

Manager of Operations. The Blood Connection (TBC) seeks qualified applicants for its Manager of Operations position in Western North Carolina. This position is responsible for operational oversight of The Blood Connection's collections, and donor recruiting in the Western NC Region. Supervises staff in Western NC Region with guidance from the TBC Executive team. Monitors performance in the areas of productivity, proficiency, efficiency, and customer service. Advanced communications skills preferred with working knowledge of blood center practices, regulations, and equipment requirements. Must be an effective leader and have the ability to adapt to change. Excellent salary and benefits including relocation packages. Bachelor's degree required. Demonstrated experience in territory management skills, superb leadership and team building skills, excellent verbal and written communication and public speaking skills, computer literate. Five years related experience required with at least three years' supervisory experience. Successful candidate must demonstrate ability to work closely with Executive team to facilitate efficient and effective blood drives. This position reports to Executive Vice President Operations/

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POSITIONS (continued from page 11)

COO. The Blood Connection (TBC) is an Equal Opportunity Employer. EEO/Minority/Female/Disability/Vets. To apply please go to <http://thebloodconnection.org/everify/>.

Chief Financial Officer (CFO). LifeShare Blood Center is looking for a Chief Financial Officer (CFO) with responsibilities for directing, organizing, leading and managing the following departments: Fiscal Services, Central Supply, and Properties. Additionally, the CFO provides overall reporting to the President & CEO and the Board of Trustees on all financial aspects of the Corporation. The CFO serves as Secretary/Treasurer of the Corporation, prepares annual budget, prepares and analyzes financial statements in accordance with GAAP and monitors the financial position of the Corporation at all times. The CFO manages Corporate investments, monitors cash flow information to ensure adequate availability to monies needed for daily operations, reviews and approves expense reports, coordinates annual audit, reviews and files all 990's, and files all annual reports with appropriate bodies. The CFO reviews and approves all expenditures and monitors all property and liability insurance contracts. A bachelor's degree in business, finance, accounting or other application degree is required. Master's degree preferred. Certified Public Accountant (CPA) certification must be current and maintained or have the ability to obtain within two years of hire. Ten plus years' work experience in public or private accounting, or business finances. Experience working in a not-for-profit organization helpful. Interested applicants may apply through company website at www.lifeshare.org/careers. ♦