

Developing a Relationship with the Local Health Department

Issue #32
September 9, 2016

Blood centers had anything but a boring summer—not that all of it was enjoyable. With the rise in hemoglobin cutoff for men, the Haemonetics filter recall, and escalating guidance requirements for preventing Zika transmission by transfusion, blood centers have had their hands full. One good thing to come out of all the obstacles this summer is the palpable necessity for an open relationship with one's state health department.

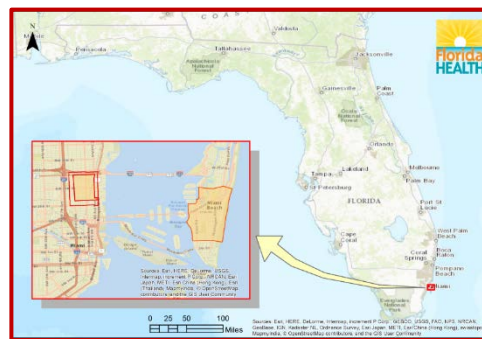
For OneBlood in Florida, the cultivation of this relationship has taken a number of years, but the benefits are enormous. “When you develop a good understanding of each other's roles in public health, you realize how a close collaboration between two organizations enhances the safety of the population and the blood supply,” said Rita Reik, MD, chief medical officer for OneBlood. “A close working relationship is essential.”

After prior infectious disease outbreaks of dengue and chikungunya in Florida, Dr. Reik and Danielle Stanek, DVM, medical epidemiologist at the Florida Department of Health, became close collaborators. Whenever there was an issue one of them needed to address with the other, they would text or call each other, even in the late hours of the night. With Zika, this kind of personal 24/7 access has been invaluable, said Dr. Reik.

“Communication and implementation is greatly facilitated when you can work closely with the health department,” she said. “We alert the health department immediately if we have a Zika-positive donor. The health department immediately contacts the donor and lets the blood

center know when that has taken place. That then allows the blood center to reach out to the donor for follow-up notification.”

The ability to share the results helps expedite the determination as to which results are false positives and which ones are confirmed. Building trust and being able to quickly share information can help



in data collection, further research opportunities, and help thwart a statewide disaster.

But for many centers in areas not as affected by infectious disease outbreaks, the idea of developing a relationship with their state health department might feel less critical and more time-consuming than it's worth.

“I think it's easy to perceive this task isn't critical. There are certainly states that are more likely to be at risk for issues such as Zika, and if you feel immune it may appear to not be worth the resources,” said

INSIDE:

Surveys, Surveys, and More Surveys!.....	3
RESEARCH IN BRIEF....	4
RECENT REVIEWS	5
BRIEFLY NOTED	5
STOPLIGHT®: Status of the ABC Blood Supply .	6
INFECTIOUS DISEASE UPDATES.....	7
WORD IN WASHINGTON	7
MEMBER NEWS	7
GLOBAL NEWS.....	8
COMPANY NEWS.....	8
MEETINGS	9
POSITIONS	11

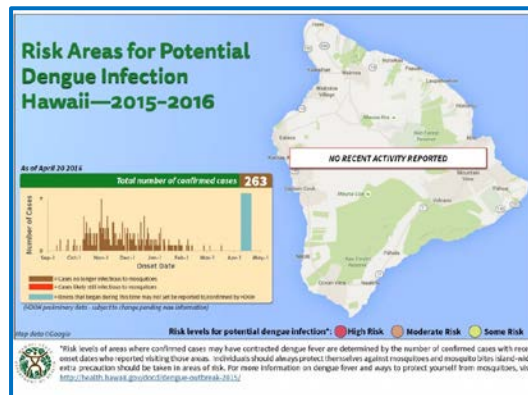


DEVELOPING A RELATIONSHIP (continued from page 1)

Galen Kline, director of quality and regulatory affairs at Heartland Blood Centers.

But Mr. Kline said the time he and his team have spent getting acquainted with the state and county health officials has been worth the effort(s). Now the state and county-level health departments are in frequent contact with Heartland Blood Centers and disseminate information back and forth on news that might affect each other. What is invaluable to Heartland is that the health departments now have a better understanding of what their blood centers do and that can help impact guidelines and regulations. “If nothing comes from it, at least we have a better understanding of each other and that can’t do anything but help,” said Mr. Kline.

For the Blood Bank of Hawaii, learning to work with their state health department, much like OneBlood’s experience, came after an outbreak of dengue. In a six-month long outbreak from 2015 until 2016, Hawaii saw over 260 confirmed cases of the virus across the eight islands of Hawaii. They did not speak to the local state department hardly at all, noted Randal Covin, MD, medical director of the Blood Bank of Hawaii. As for the local state department, Sarah Park, MD, chief state epidemiologist for the Hawaii Department of Health, said, “We never even considered about how dengue was affecting blood transfusions. We realized afterward, we should have engaged them (BBH). I guarantee our colleagues don’t think about it either. In the thick of things we weren’t thinking about that.”



Now Parks and Covin have a more open relationship and have begun to engage in proactive versus reactive communication to help with future outbreaks. As Dr. Park said, blood centers are among the first to identify suspected local vector-borne cases—a necessity for many states when dealing with Zika or other infectious diseases. The relationship is critical on both sides to help combat and prevent an outbreak.

Yet, there is much more work to be done in communicating with local health departments, said Louis Katz, MD, ABC’s chief medical officer. “We are told that one of the great concerns at the Food and Drug Administration was the difficulty getting timely surveillance data. I suspect from long experience that, to the degree this is an issue, it relates a lot to the lack of resources in state and local health jurisdictions for optimal surveillance.”

Starting the conversation with your local health department can be tricky, said Mr. Kline. He ran into resistance at first, but persistence and making sure the health officials understood why this relationship would benefit both sides was key in obtaining those first meetings. Now Heartland Blood Centers sits with at least one county group meeting to play a role in their planning. And Dr. Reik sits on the arbovirus interdisciplinary task force in Florida to help exchange information with numerous organizations from around the state to plan, prevent, and combat the threat of outbreaks.

“Be persistent in your attempts,” said Dr. Reik as advice to those looking to establish a connection with the local health department. “Find out who is responsible for managing the arbovirus outbreaks and contact them directly. Volunteer to sit on their arbovirus committees and disaster planning committee. Offer to give a presentation on the role of the community blood center in protecting public health at one of their meetings. When you find the right person, they will welcome you with open arms!” ♦



America's Blood Centers®
It's About *Life.*

INSIDE ABC

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

Surveys, Surveys, and More Surveys!

We would like to thank all the blood centers who participated in the recent ABC survey regarding the implementation of the one-year blood donor deferral recommendation from the Food and Drug Administration (FDA) on men who have sex with men. The 90 percent of blood center members who have responded to the survey helped ABC understand the intentions and concerns over the new, shorter, deferral period. The survey results are also a key tool in our continued advocacy on behalf of ABC members related to flexibility in implementation of the shorter deferral. ABC executives recently met with key staff members from the U.S. Senate Health, Education, Labor & Pensions Committee to discuss the guidance changes and how it will affect the blood supply and our member centers.

We would also like to thank all those who responded to the ABC Newsletter Survey. The short survey contained questions regarding how newsletter readers preferred to receive the newsletter, how often, the length of the newsletter, and the most sought-after content. We had a very good response rate as well and gained new insights into how we can move the newsletter's format and delivery system into the new age. We will keep all our readers updated on any new changes coming within the next year.

ABC would like to encourage all CEOs to take the Zika Implementation Survey and thank all those CEOs who already have found time to take the survey. Your views are critical in helping ABC shape our advocacy messaging to legislators and regulators as it relates to the Zika revised guidance requiring universal ID-NAT screening of all U.S. blood donations. ABC executives will be meeting with key staff members of the U.S. House of Representatives and Senate to discuss the resources needed to support the Food and Drug Administration's guidance. In addition, ABC is working in conjunction with ARC and AABB to ensure congressional appropriations language include recognition of the need for cost recovery for such testing. ♦

The *ABC Newsletter* (ISSN #1092-0412) is published 46 times a year by America's Blood Centers® and distributed by e-mail. Contents and views expressed are not official statements of ABC or its Board of Directors. Copyright 2016 by America's Blood Centers. Reproduction of the *ABC Newsletter* is forbidden unless permission is granted by the publisher. (ABC members need not obtain prior permission if proper credit is given.)

ABC 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.

America's Blood Centers

President: Susan Rossmann

CEO: Christine S. Zambricki

Editor: Lisa Spinelli

Subscriptions Manager: Leslie Maundy

Annual Subscription Rate: \$390

Send subscription queries to

lmaundy@americasblood.org

America's Blood Centers

725 15th St. NW, Suite 700, Washington, DC 20005

Phone: (202) 393-5725

Send news tips to newsletter@americasblood.org.



RESEARCH IN BRIEF


In a nine-year retrospective study of children who received trauma care, there were no clear improvements in outcomes for those who received resuscitation with a massive transfusion protocol (MTP) versus those who received non-massive. Of the 11,995 treated children, 235 who received RBCs during care at the American College of Surgeons' Level I pediatric trauma center from May 2005 to February 2014 met the criteria for the study with 120 in the pre-MTP group and 115 in the post-MTP group, and 26 and 17 received massive transfusion, respectively. Children who received massive



transfusion post-MTP implementation received more platelets and plasma earlier in their management, and fewer RBCs, so the mean amount of blood product used did not increase during admission (158.2 ± 112.7 mL/kg pre-MTP implementation and 158.6 ± 73.7 mL/kg post-MTP implementation). There was no difference in in-hospital mortality between pre- and post-MTP groups (24 vs. 19 percent) or massive transfusion subgroups (54 vs. 47 percent). There were also no differences in secondary outcomes.

Citation: Hwu R.S, Spinella P.C., Keller M.S., *et al.* The effect of massive transfusion protocol implementation on pediatric trauma care. *Transfusion*. August 29, 2016. DOI: 10.1111/trf.13781.

All 25 sites participating in a study from the BEST Collaborative were able to resolve daratumumab (DARA) interference in compatibility testing with a dithiothreitol (DTT)-based method. DARA, a human monoclonal antibody used to treat multiple myeloma, binds to the CD38 transmembrane protein on both myeloma cells and RBCs. DARA consistently interferes with routine blood bank serologic testing. In an international multi-center study, researchers sent each of the sites across 11 countries two plasma samples each, one spiked with DARA only and the other with DARA and anti-s, anti-Fy, or anti-D. All sites were able to identify the hidden antibodies after using DTT-treated reagents, overcoming DARA's interference in gel or tube testing. Solid phase testing, for which there is no way to treat reagent RBCs with DTT, required a retest using one of the other two methods. DTT also denatures the Kell (K) antigen so K-units would be required unless the recipient is known to be K+. The authors found DTT to be a relatively low-cost and easy method to implement.

Citation: Chapuy C.I., Aguad M.D., Nicholson R.T., *et al.* International validation of a dithiothreitol (DTT)-based method to resolve the daratumumab interference with blood compatibility testing. *Transfusion*. September 2, 2016. DOI:10.1111/trf.13789. 

We Welcome Your Articles

We at the *ABC Newsletter* welcome freelance articles on any subject relevant to the blood banking community. Writers are encouraged to submit short proposals or unsolicited manuscripts of no more than 1,100 words. While ABC cannot pay for freelance pieces, the writer's name and title will be included at the end of the story, brief news item, or commentary. If proposing a story, please write a few paragraphs describing the idea and sources of information you will use, your present job and background, and your qualifications for writing on the topic. ABC staff cannot guarantee all stories will be published, and all outside writing will be subject to editing for style, clarity, brevity, and good taste. Please submit ideas and manuscripts to ABC Publications Editor Lisa Spinelli at newsletter@americasblood.org. You will be sent a writer's guide that provides information on style conventions, story structure, deadlines, etc.



RECENT REVIEWS

A large percentage of oncology guideline authors have a financial conflict of interest (FCOI) with organizations in the industry, reads a new study in *JAMA Oncology*. Guideline authors are highly influential in their fields as they set the standards by which many clinicians will practice medicine. The National Comprehensive Cancer Network guideline authors have included such recommendations as noting the risks and benefits of using [red blood cell transfusions versus erythropoiesis-stimulating agents](#) for chemotherapy patients experiencing anemia and [transfusion parameters for non-Hodgkin's lymphoma](#) patients. Of 125 guideline authors, 86 percent had at least one reported FCOI, which the authors of this study write could influence the authors' decisions. The authors who did report an FCOI received an average \$236,066 in industry research payments, some of which helped fund clinical trials. Funding for clinical research and trials is scarce and industry funding is often needed to help researchers perform studies. One invited commentary suggested that policies setting parameters for how much FCOI is permissible (if it involves stock ownership vs. payment for meals) could help provide more "meaningful disclosure."

Citations: Mitchell A.P., Basch E.M., Dusetzina S.B., *et al.* Financial Relationships with Industry Among National Comprehensive Cancer Network Guideline Authors. *JAMA Oncology*. August 25, 2016. DOI: 10.1001/jamaoncol.2016.2710.

Nipp R.D., Moy B. No Conflict, No Interest. *JAMA Oncology*. August 25, 2016. DOI: 10.1001/jamaoncol.2016.2726. 📌

BRIEFLY NOTED

Researchers analyzed large sets of data on ABO blood group structural variants from the National Heart, Lung, and Blood Institute Exome Sequencing Project and the Minority Health Genomics and Translational Research Bio-Repository Database. In 6432 sequenced exomes, 32 people of African descent with a partial deletion predicting a novel O allele were found. The identification of these variants even in the well-studied ABO gene, may allow better matches for those with rare blood group antigens and demonstrates the power of large-scale sequencing.

Citation: Fox K., Johnsen J.M., Coe B.P., *et al.* Analysis of exome sequencing data sets reveals structural variation in the coding region of ABO in individuals of African ancestry. August 31, 2016. *Transfusion*. DOI: 10.1111/trf.13797.

Fort Hood's Robertson Blood Center set up a mobile blood drive program to give deploying service members a chance to donate blood. Because many service members are deployed to areas from which they are then deferred, this kind of mobile blood unit can be a last donation-chance for some. The donated blood is then processed and shipped for use by service members deployed to Kuwait, Afghanistan, and other regions. To date, there have been two mobile blood drives at Fort Hood with more scheduled shortly. (Source: Armed Services Blood Program, [Robertson Blood Center Brings Blood Drives To North Fort Hood](#). August 8, 2016.) 📌

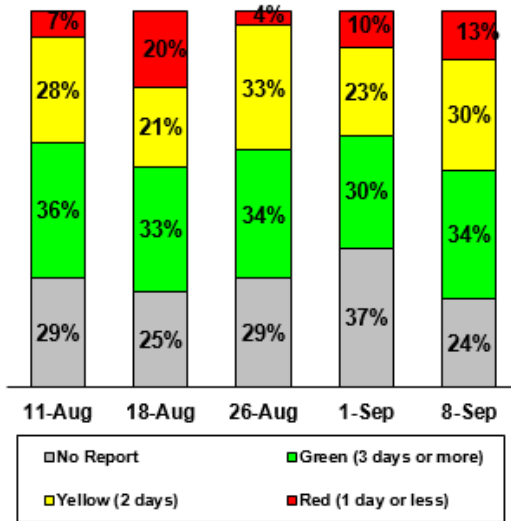
ABC Calendar of Events

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!

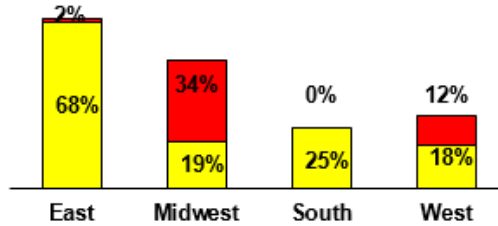


STOPLIGHT®: Status of the ABC Blood Supply

Total ABC Red Cell Inventory



Percent of Regional Inventory at 2 Days Supply or Less, September 8, 2016



Daily updates are available at:
www.AmericasBlood.org

Percent of Total ABC Blood Supply Contributed by Each Region
 East: 20%; Midwest: 25%; South: 24%; West: 31%

AMERICA'S BLOOD CENTERS' Information Technology Workshop

Minneapolis, MN – September 13-14, 2016

Hosted by



Innovative Blood Resources and our Minnesota Division, Memorial Blood Centers, are pleased to host the 2016 ABC Information Technology Workshop near our headquarters in St. Paul, Minnesota. Attendees will benefit from the shared knowledge of fellow IT professionals while exploring topics impacting our changing and interconnected healthcare environment. We look forward to seeing you in September!

– Donald C. Berglund, CEO, Innovative Blood Resources



Negotiated hotel room rate: \$199 + tax
http://bit.ly/renaissance_minneapolis

2016 Workshop Fees (early bird/regular)
 2-day registration: \$410/\$465

Registration opens **July 13**. Non-members (non-vendor), contact Lori Beaston at lbeaston@americasblood.org for invitation, registration fees and information.

Scholarship opportunities available to ABC members to cover the cost of registration fees and help with travel expenses. Application form and details will be made available when registration opens.

Sponsorship opportunities available. Contact Jodi Zand at jzand@americasblood.org for details.

Minneapolis-Saint Paul International Airport (MSP) is served by most major US airlines. Visit www.mspairport.com.



America's Blood Centers®
 It's About Life.



INFECTIOUS DISEASE UPDATES

The Center for Disease Control and Prevention (CDC) is continuously updating their Zika site with changes to their interim response plan, recommendations, and notices. They have free educational resources as well as an emergency vector control request form for download. Keep current with the latest from the CDC by clicking [here](#).



This year to date, 63 blood donation units reported to the AABB were positive for Chagas, with a concentration of cases in mid and southern California. AABB keeps their [Chagas Disease Biovigilance Network](#)

records updated as a free resource for blood collection sites. Chagas disease is parasitic disease that is usually spread by an infected blood-feeding insect carrying the parasite *Trypanosoma cruzi*, which causes the disease, but is also transmissible by transfusion. While benign in many people infected, it can create cardiac disease in up to 30 percent of those who are chronically infected and 10 percent experience digestive issues, neurological outcomes, or mixed syndromes. There are two blood donor screening tests approved by the Food and Drug Administration to screen blood, tissue, and organ donors for the blood-borne parasite. These laboratories that report to AABB for the Chagas site account for more than 65 percent of the total blood collected in the U.S. (Source: World Health Organization fact sheet, [Chagas Disease](#).)

The World Health Organization (WHO) certified Sri Lanka is malaria-free. By using mobile malaria clinics, surveillance, community engagement and educational resources, the WHO, and other humanitarian organizations, were able to help lower the number of malaria cases from thousands in the 1990s to zero for the last 42 months. (Source: [WHO press release](#), September 5, 2016.) ♦

WORD IN WASHINGTON

Facing a short timeframe to fund the federal government before they go out on recess again, Congress reconvened on September 6 with no Zika funding package passing their first few days back. On September 7, Rep. David Jolly (R-Fla.) brought a jar of about 100 non-infected mosquitoes to the House floor in an effort to pressure Congress; however, the stunt didn't seem to work. Democrats are still blocking the necessary 60 votes the bill needs to pass due to provisions obstructing money for Planned Parenthood. Sen. John Cornyn (R-Texas) told *The Hill* he expects Zika funding will combined with the government funding bill; however prospects for that bill remain unclear as various factions of both chambers remain at odds over timing and language.

(Sources: *The Hill*, [Top GOP senator: Zika money could end up in short-term spending bill](#). September 6, 2016; *The Hill*, [Florida lawmaker brings jar of mosquitoes to House floor](#). September 7, 2016.) ♦

MEMBER NEWS



A collaborating investigator of the Carter BloodCare Population Health Initiative Program was recently awarded a National Institutes of Health K23 grant for \$661,000. Odette Gore, MD, assistant professor in the internal medicine department of the University of Texas' Southwestern Medical Center is being awarded the grant over a five-year-period to help support her career development in patient-oriented research. Carter BloodCare announced their population health program's role is central to this grant as they aim to improve

health risk factor awareness and develop tactics to drive healthy behavior, specifically high school students and educate donors on the risks of cardiovascular diseases and diabetes. The blood center has previously published on health initiatives with Dr. Gore (*Diabetes and Vascular Disease Research*. 2015; 12:272; *Diabetes Care*. 2014;37:e3-e4). (Source: Carter BloodCare press release, September 6, 2016.)

(continued on page 8)



MEMBER NEWS (CONTINUED FROM PAGE 7)



LifeSouth drew employees from Florida, Georgia, and Alabama to staff the big blood drive at Dragon Con, Labor Day weekend in Atlanta.

LifeSouth Community Blood Centers held their largest blood drive of the year in Atlanta, Ga.—LifeSouth Dragon Con. The blood drive drew in 2,764 donors, an increase of 1.6 percent from last year. LifeSouth beefed up its efforts to connect with platelet and plasma donors for the drive—their largest blood drive of the year—and the percentage of donors opting for automated procedures jumped 128 percent over 2015, including a nearly 60 percent increase in AB plasma donations. The donors were dressed as kings and space aliens and helped fill the gap for LifeSouth during the holiday weekend, when donors are traditionally hard to find. ♦

GLOBAL NEWS

The South African government announced last week it will give free HIV treatment to all those infected. Previously, the country's health department was giving away free medicine to those whose white blood cell count was lower than a certain threshold. The United Nations estimated about 7 million South Africans are infected with HIV. (Source: *Associated Press*, [South Africa to give free HIV treatment to all infected](#). September 1, 2016.) ♦

COMPANY NEWS



Takeda Pharmaceutical, a Japanese drug company, announced it is developing a Zika vaccine with funding from the U.S. Biomedical Advanced Research and Development Authority (BARDA). The funding would start with an initial \$20 million over the next 18 months for pre-clinical research/manufacturing and could extend up to \$312 million if the vaccine makes it to phase III trials. BARDA has committed \$75 million toward the development of a Zika vaccine so far. (Source: *Reuters*, [Takeda joins effort to develop Zika vaccine with U.S. funding](#). September 1, 2016.)

The U.S. Department of Health and Human Services' Office of the Assistant Secretary for Preparedness and Response (ASPR) announced an \$8.2 million contract to Moderna Therapeutics toward the development of a Zika vaccine. The Massachusetts-based company will be developing an mRNA-based Zika vaccine, the development of which will be overseen by the Biomedical Advanced Research and Development Authority ([BARDA](#)). The contract can be extended for up to five years with funding up to \$125.5 million for Phase 2 and 3 clinical trials. (Source: [HHS press release](#), September 7, 2016.) ♦





MEETINGS

Sept. 12-13

FDA Public Hearing on HCT/Ps, Bethesda, Md.

This public hearing was created to collect comments on the draft guidances relating to the regulation of human cells, tissues or cellular or tissue-based products. The hearing will take place at the Masur Auditorium, Building 10, 9000 Rockville Pike, in Bethesda. More information can be found [here](#).

Sept. 13-14

ABC IT Workshop, Minneapolis, Minn.

Experts in the field will gather in Minneapolis to discuss the implications of blood center corporate mergers on IT, service metrics, and cost saving initiatives. Come for the discussions on pressing IT topics and stay to network with your peers at this ABC workshop. To register or learn more, contact the ABC Meetings Department at (202) 654-2901 or e-mail: meetings@americasblood.org.

Sept. 21

Red Cell Genotyping 2016: Clinical Steps, Bethesda, Md.

The BloodCenter of Wisconsin (BCW) and the Department of Transfusion Medicine at the National Institutes of Health (NIH) Clinical Center, are co-hosting the 6th Annual Red Cell Genotyping Symposium at Lister Center Auditorium, National Library of Medicine, NIH Building 38A, 8600 Rockville Pike, Bethesda, Md., from 8:25 a.m. to 4:15 p.m. This symposium will review the laboratory aspects and clinical benefits of red cell genotyping in patients and blood donors. For information, program fee and advance registration visit BCW's [website](#) or contact [Phyllis Kirchner](#).

Sept. 29

The 38th Annual Alexander S. Wiener Lecture, New York, NY

Kanti R. Rai, MD, investigator for the Peter Karches Center for Chronic Lymphocytic Leukemia at the Feinstein Institute for Medical Research and director of the Center for Oncology and Cell Biology at Long Island Jewish Medical Center, will present the 38th Annual Alexander S. Wiener Lecture titled, "Dr. Wiener and Chronic Lymphocytic Leukemia Research," at the Murray Sargent Auditorium in the New York Blood Center, 310 East 67th Street, NY, NY, from 3:00 p.m. to 4:00 p.m. The lecture is free as well as the reception after. To read the program and register [online, click here](#).

Oct. 6-7

Pre-Clinical Evaluation of Red Blood Cells for Transfusion, Bethesda, Md.

The Food and Drug Administration is holding a free public workshop to discuss new methodologies for pre-clinical evaluation for the safety and efficacy of red blood cell transfusion products. The workshop is being held in partnership with the National Heart, Lung and Blood Institute; National Institutes of Health (NIH); the Department of Defense; and the Office of the Assistant Secretary for Health, Department of Health and Human Services and is located on the NIH campus with the Ruth Kirschstein Auditorium, Natcher Conference Center, Bldg. 45, 9000 Rockville Pike, Bethesda, MD. To register for the workshop, click [here](#).

Oct. 22-25

2016 AABB Annual Meeting, Orlando, Fla.

The AABB Annual Meeting is a health care professional event for those in the fields of transfusion medicine, cellular therapies, and patient blood management. AABB's

MEETINGS (continued from page 9)

2016 Annual Meeting offers opportunities to learn the latest in the field, advance your career, explore state-of-the-art products and services, and network with your colleagues. The meeting will be held at the Orange County Convention Center in Orlando, Fla. More information is available at www.aabb.org/annual-meeting.

Oct. 31 – Nov. 1

FDA 510(k) Submissions Workshop, Washington, D.C.

AdvaMed hosts FDA and industry experts to teach the basics of 510(k) submissions. Learn about the FDA's updates to the 510(k) process, considerations for determining a product's regulatory route to market, factors to consider when planning and assembling a 510(k) submission. The workshop will take place at the Washington Marriott at Metro Center, 775 12th Street, N.W., in Washington, D.C. Find out more information [here](#).

Nov. 2

FDA IDE Submissions Workshop, Washington, D.C.

Learn the regulatory and practical guidelines governing when an investigational device exemption is required during this interactive AdvaMed workshop. The workshop will take place at the Washington Marriott at Metro Center, 775 12th Street, N.W., in Washington, D.C. Find out more information and register [here](#).

2017

March 2 -3

IPFA Plasma Quality and Supply Workshop, Yogyakarta, Indonesia

Registration for this workshop is open. The Internatinoal Plasma Fractionation Association is holding this workshop to further the exchange of key issues, strategies and opportunities of plasma for fractionation and plasma-derived product professionals in Asia. Some of the topics it will cover are donor recruitment and selection, screening and diagnostic programs for bloodborne pathogens, quality management and regulatory issues. To register for the workshop, click [here](#).

May 16 -17

IPFA/PEI Surveillance and Screening of Blood-borne Pathogens Workshop, Zagreb, Croatia

Registration for this workshop is now open. The 24th IPFA/PEI International Workshop on bloodborne pathogens will address the detection, epidemiology, costs, and regulation of new and old agents that threaten the safety of blood components and plasma derivatives. To register, click [here](#).

Sept. 11 – 12

IPFA/BCA 3rd Global Symposium on The Future for Blood and Plasma Donations, Atlanta, Ga.

The International Plasma Fractionation Association and Blood Centers of America are holding this meeting that will be hosted by Blood Assurance, a non-profit, full-service regional blood center. The meeting will cover a range of topics, including: clinical developments in plasma product use, plasma supply - optimizing plasma collection and economics, donor recruitment, industry developments in support of blood establishments, donor and product safety, regulatory issues, and quality management. [Registration will open in mid-September.](#) ♦



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

Senior Manager Donor Care. Blood Centers of the Pacific located in San Francisco seeks Senior Manager for our Donor Care division. Responsible for the oversight of all aspects of technical and administrative functions of blood centers' donor care operations ensuring quality, accuracy, excellent customer service and efficiency of department. Major responsibilities include staff management, staff training, project management, formulation and implementation of department goals, and department budgeting. Requires BA/BS in related field; five years relevant experience in healthcare administration management (three years of which were in a managerial/supervisory capacity); experience in blood center collections department, valid CA CLS or CA RN license a plus. Equivalencies considered. To apply, visit our [employment page](#): Requisition #16000909. Blood Centers of the Pacific is an equal opportunity employer: EEO/Minorities/Females/Disabled/Veterans/Other Protected Groups. Our organization participates in E-Verify.

Quality and Regulatory Services Manager. Small regional blood center in search for full time Tennessee licensed Medical Technologist with at least five years' experience. Strong communication and interpersonal skills required. Must have strong computer skills and be proficient in Microsoft Office including Word, Excel and PowerPoint. Candidate must be self-motivated and able to work independently. Position requires a strong work ethic and attention to detail. Responsibilities: Training, auditing, donor management, project management, writing of Standard Operating Procedures, validation, equipment control and QC oversight. Ability to comprehend and apply regulations/standards from multiple agencies. Please submit resumes to: nikki.watlington@lifelinelbloodserv.org.

Donor Testing Technician I. (Department: Donor Testing; Location: St. Paul, MN; Hours: Full Time, 1.0 FTE (40hrs/wk), Non-Exempt; Shifts: 3rd Shift: Tuesday-Friday, 10:00 p.m. - 6:30 a.m. and Saturday, 8:00 p.m. - 4:30 a.m.; *Multiple positions available). Primary Purpose: Under general supervision, this position precisely and accurately performs sample handling/tracking/testing for one or more of the following: serologic testing for markers of hepatitis B, hepatitis C, human immunodeficiency virus (HIV), human T-lymphotropic virus (HTLV), syphilis, cytomegalovirus (CMV), red cell antibody screen, NAT(PCR), Chagas (T CRUZI) and additional viral screening assays on both blood donor and patient samples. Completes all required ancillary duties including reporting of test results, quality control/quality assurance

activities and record maintenance. Operates a variety of computer systems and lab equipment, performs periodic equipment maintenance as necessary, performs primary review of test records, monitors and maintains adequate laboratory supplies, provides excellent customer service to both external and internal customers. To apply please go directly to our [website with an updated resume](#).

Clinical Laboratory Scientist (Full Time). Houchin Community Blood Bank, located in Bakersfield, California, is currently recruiting for a full time Clinical Lab Scientist. Houchin is centrally located in California, serving all of Kern County. Successful candidates must have a current state of California CLS License and have excellent communication skills, good laboratory practices and experience in quality control. Must have a bachelor's degree in a biological, physical, chemical or clinical laboratory science. Blood Donor Center or Transfusion Service experience is preferred. Duties include operation and maintenance of hematology instruments, performance of various testing, culturing of platelet products, and labeling of blood products. Knowledge of theory and test application in Immunohematology, microbiology and Hematology is required. Experience working with a computerized laboratory information system is necessary, as well as the ability to work independently. Applicants must be able to work daytime, weekend shifts, holidays and rotating on-call hours. We offer a competitive salary, great work environment, excellent benefits, including two retirement plans, and more. For more information about our company, visit www.hcbb.com. Resumes can be emailed to careers@hcbb.com.

Chief of Donor Operations. SunCoast Blood Bank, serving four counties on Florida's Gulf Coast is seeking a blood bank professional to direct and oversee our recruitment, collections, therapeutic services, supply chain and facilities operations. The successful candidate will have the ability to think strategically and have the organizational skills necessary to plan and execute varying directives which will further the organization's mission. Requirements for this position include a bachelor's degree in healthcare management or other equivalent field; MBA preferred. Eight years blood bank operational experience, five of which includes senior management experience. Competitive salary and benefits package. To apply please submit cover letter, salary requirement and resumes to jobs@scbb.org. Applicant drug testing required. EOE.

(continued on page 12)

POSITIONS (continued from page 11)

Medical Technologist MT/MLT. Our techs perform immunohematology reference work and consultations for our customer hospitals in a pleasant and low stress environment. In addition to reference work, our techs process samples for outsourced testing; evaluate laboratory data and test results; investigate and resolve process issues; assist with evaluation, validation and implementation of new technology and instrumentation. **Duties:** Assist in the preparation of all components, including special components. Performs basic laboratory computer functions. Organize, identify and label blood and blood components with complete accuracy. **Qualifications:** Qualified candidates will have a stable work history and a bachelor's degree with a certification in Medical Technology. Candidate can also be a Medical Lab Technician but must have at least two years of experience. One to two years laboratory experience preferred. SBB, BB or previous experience in a blood bank a plus. We have an excellent training program to ensure you're completely comfortable with the procedures you will be asked to perform. Hours: 4:00 p.m. -12:30 a.m. Monday-Friday with rotating weekends and an "on-call" schedule! **MUST BE ABLE TO TRAIN ON DAY SHIFT!** To view the full description and apply online visit <http://msblood.iapplicants.com>. It's a great time to join us in our life saving mission - you'll be glad you did! 📌