

2018 #42

December 14, 2018

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Your Feedback Wanted!

ABC is in the process of redesigning its public [website](#). Please help us determine how you interact with the site and how we can improve it by taking a short [survey](#). Your opinion is very important to us. Thanks in advance for your feedback!

CBER Director, Peter Marks, MD, PhD, Provides Update on Progress Regarding Donor Deferral Policies for Men Having Sex with Men (MSM)

The “Blood Equality Group” is an ad hoc assembly of stakeholders with an interest in MSM-related issues that includes New York Blood Center’s Vice President of Medical Programs and Services Debra Kessler, RN, MS and America’s Blood Centers’ Chief Medical Officer Louis Katz, MD in addition to HIV activists, care providers, and public health personnel. In a letter to its members, Peter Marks, MD, PhD, director of the Center for Biologics Evaluation and Research (CBER) at the U.S. Food and Drug Administration (FDA), lists international changes in deferral policies that include shortened time-based deferrals (e.g. three months in the United Kingdom), stratified deferral (e.g. the possible acceptance of monogamous MSM in Denmark), and clearance of MSM for donation of plasma for further manufacture.

The results of the United States Transfusion-Transmissible Infections Monitoring System (TTIMS) were briefly reviewed and demonstrate no change in donor HIV prevalence comparing rates before and after the reduction of the U.S. MSM deferral to one year. The next step is execution of a study to include about 2,000 active MSM who are willing to donate blood at 8–10 clinics around the U.S. to assess the predictive value of a panel of potential donor questions for recent infection with HIV. The study is scheduled to start before the end of 2019 after protocols, funding, and logistics are finalized. Dr. Marks concludes by reinforcing that “FDA remains committed to gathering the scientific data that could potentially support donor deferral policies minimizing restrictions on blood donation while maintaining a high level of blood safety.” ♦

Authors from the United Kingdom Formally Prioritize Research Topics for Transfusion Medicine


A steering committee of donors, patients, caregivers, and clinicians supported by information scientists used multiple methods including serial surveys and literature reviews to develop a list of research questions of interest to the transfusion medicine

(continued on page 2)



Transfusion Medicine Research Topics (continued from page 1)

community. More than 400 individuals responded to the initial survey. They contributed 817 questions, which was reduced to 54 that had not already been answered in previously published work. A prioritization survey ranking the questions produced a list of the 30 most popular topics. These themes were presented and discussed at a face-to-face workshop that included donors, patients, and caregivers to generate the top 10. The authors note the relative difficulty of engaging patient groups, patients, and family members as a limitation. They conclude that, their priority setting partnership “provides an aid to directing public research funding to areas that matter to all stakeholders in transfusion medicine. It also gives members of the public a greater ownership of the research agenda. Finally, there is immense value to health care professionals in being reminded of the breadth of thought and reflection from patients, relatives, and donors; research is enriched by those it is directed at helping.”


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

**A NATIONAL EFFORT WITH A
 LOCAL APPROACH**

SAVE THE DATE!
March 26, 2019

**AMERICA'S BLOOD CENTERS'
 CAPITOL HILL DAY
 WASHINGTON, D.C.**

More details coming soon!

(continued on page 3)

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ABC advocates for and advances policies that promote the role of independent blood centers in providing life-saving blood products and recognize the continuous need for a safe and robust blood supply. ABC exists to advocate for laws and regulations recognizing the essential role that independent blood centers play in the healthcare system; promote partnerships, policies and programs that increase awareness about the need for blood donation; and serve as a thought-leader in the advancement of evidence-based medical and scientific solutions related to health and safety.

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Transfusion Medicine Research Topics (continued from page 2)

Workshop results		Rank after prioritization survey				
Final rank	Question	Clinician	Patient	Donor	Relative	Overall
1	What would encourage more people (especially black and ethnic minority groups or people with a rare blood type) to donate blood?	4	1	1	1	1
2	How can health professionals be discouraged from using blood inappropriately?	3	20	12	22	7
3	How can the wastage of donor blood be minimized?	1	4	2	2	3
4	What is the optimal type and combination of blood products (RBCs, platelets, frozen plasma) for adult patients* with a major hemorrhage that requires a transfusion of 4 or more units of blood? (*Aged over 16 years old)	5	40	31	33	30
5	How can patients, relatives and caregivers be empowered to have greater say about their choices in relation to blood transfusion and its alternatives?	34	18	61	5	18
6	How can patients with anemia be identified and treated in a timely manner so that the need for transfusion is avoided?	2	6	13	7	3
7	What are the best drug alternatives to blood transfusion to reduce and prevent bleeding?	12	23	14	33	17
8	How can the blood transfusion process be delivered more safely and in a timely manner in hospitals?	11	20	18	17	11
9	What medical conditions make it unsafe for a person to be a blood donor?	29	7	6	17	9
10	What are the most effective ways to educate the general public about the process and purpose of blood donation?	29	5	3	3	5

Citation: Hibbs, S.P., Brunskill, S.J., Donald, G.C. *et al.* Setting priorities for research in blood donation and transfusion: outcome of the James Lind Alliance priority-setting partnership. *Transfusion*. 2018. doi:[10.1111/trf.15077](https://doi.org/10.1111/trf.15077). ♦



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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.

ADRP Conference 2019 Call for Speaker Abstracts Extended

ADRP has extended the call for abstracts for its [2019 Annual Conference](#) in Indianapolis, Ind. Marketing, communications, recruitment, and collections professionals and experts are invited to [submit](#) abstracts to share their expertise. The deadline to submit is December 31st. Speakers that are chosen will receive a 30 percent discount off conference registration. This year will feature speaker panels, breakout sessions, and roundtable discussions. Interested individuals can submit their abstracts [here](#).

ADRP Award Nominations Extended

Recognize a peer or outstanding donor group by nominating them for an [ADRP Award](#). Submissions are being accepted until December 31st via the online [nomination form](#). This year's categories include:

- Donor Recruiter of the Year
- Donor Collections Team Member of the Year
- Leader of the Year (Recruitment & Collections)
- Franzmeier Lifetime Achievement Award
- Gilcher MD/CEO Award
- Media Partner Award
- Blood Drive Award (Creative & Most Productive)
- School Blood Drive Award
- Humanitarian Service Award 💧

Webinar Recordings for ABC Members

- **Quality Integration Part I Recording** – [MCN 18-041](#)
- **Quality Integration Part II Recording** – [MCN 18-051](#)





RESEARCH IN BRIEF

Weak association of red blood cell age and mortality in transfused trauma victims. A secondary analysis of the Pragmatic, Randomized Optimal Platelet and Plasma Ratios (PROPPR) trial found 24-hour mortality in 678 patients receiving 8,830 units of red blood cells (RBCs) to be higher in those receiving older cells. The number of packed RBCs ≥ 22 days of age was associated with an adjusted odds ratio for death of 1.05 (95 percent confidence interval 1.01-1.08) per unit of aged cells. A statistically significant effect was restricted to those patients receiving ≥ 10 units (i.e. “massive transfusion”).

Citation: Jones, A.R., Patel, R.P., Marques, M.B. *et al.* [Older blood is associated with increased mortality and adverse events in massively transfused trauma patients: secondary analysis of the PROPPR trial.](#) *Ann. Emerg. Med.* 2018.

More information on the possible infectivity of amyloid-beta (A β) proteins. In 2015, the possible transmission of A β , a protein implicated in the pathogenesis of Alzheimer’s disease, from the cadaveric human pituitary growth hormone that also transmitted iatrogenic Creutzfeldt-Jakob disease (CJD), was hypothesized when A β accumulation was seen in histopathologic sections of autopsied brains from iatrogenic CJD patients. A report in *Nature* describes the detection of A β in archived, implicated batches of growth hormone. Further experiments transmitted cerebral amyloid angiopathy (CAA) to humanized, transgenic mice by intracerebral inoculation of the archived material suggesting that A β in the hormone “seeded” the formation of A β plaques in the brains of the exposed animals. Controls including unaffected brain and recombinant growth hormone were negative. The authors raise concerns about the iatrogenic transmission of neuro-degeneration from surgical instruments or other medical exposures, and point out that a clear understanding of pathogenesis may facilitate the development of diagnostics and treatments for diseases with A β deposition. They state that while “there is no suggestion that Alzheimer’s disease is contagious, and no supportive evidence from epidemiological studies that it is transmissible (notably by blood transfusion), we consider it important to evaluate the risks of iatrogenic transmission of CAA, and potentially of Alzheimer’s disease.” A paper from the SCANDAT group, previously covered in the *ABC Newsletter*, found no association of neurodegenerative syndromes with a history of blood transfusion among almost two million recipients.

Citations: Purro, S.A., Farrow, M.A., Linehan, J. *et al.* [Transmission of amyloid- \$\beta\$ protein pathology from cadaveric pituitary growth hormone.](#) *Nature.* 2018.

Edgren, G., Hjalgrim, H., Rostgaard, K. *et al.* Transmission of neurodegenerative disorders through blood transfusion: a cohort study. *Ann. Int. Med.* 2016.doi: [10.7326/M15-2421](#). ◆

REGULATORY NEWS

The U.S. Department of Health and Human Services (HHS) Office of the Assistant Secretary for Health [announced](#) that it is seeking nominations of qualified members of the public to serve on the Advisory Committee on Blood and Tissue Safety and Availability (ACBTSA). This federal advisory committee within HHS provides advice to the Secretary and Assistant Secretary for Health regarding public health, ethical, safety, and legal issues relating to blood, blood products, and transfusion. The committee consists of 23 voting members; 14 public members; and nine individuals designated to serve as official representative members. Persons nominated for appointment to the committee should be among authorities knowledgeable in blood banking, tissue banking, transfusion medicine, organ or tissue transplantation safety, bioethics, socioeconomic, health policy or law, and/or related disciplines. All nominations must be emailed by 4 p.m. eastern on Friday, December 28th to ACBTSA@hhs.gov or mailed and delivered to James Berger, senior advisor for Blood and Tissue Safety Policy at the Office of the Assistant Secretary for Health, HHS; 330 C St., SW, Room L001 Switzer Building, Washington, DC 20201.

(Source: *Federal Register* [Notice](#), 12/11/18) ◆

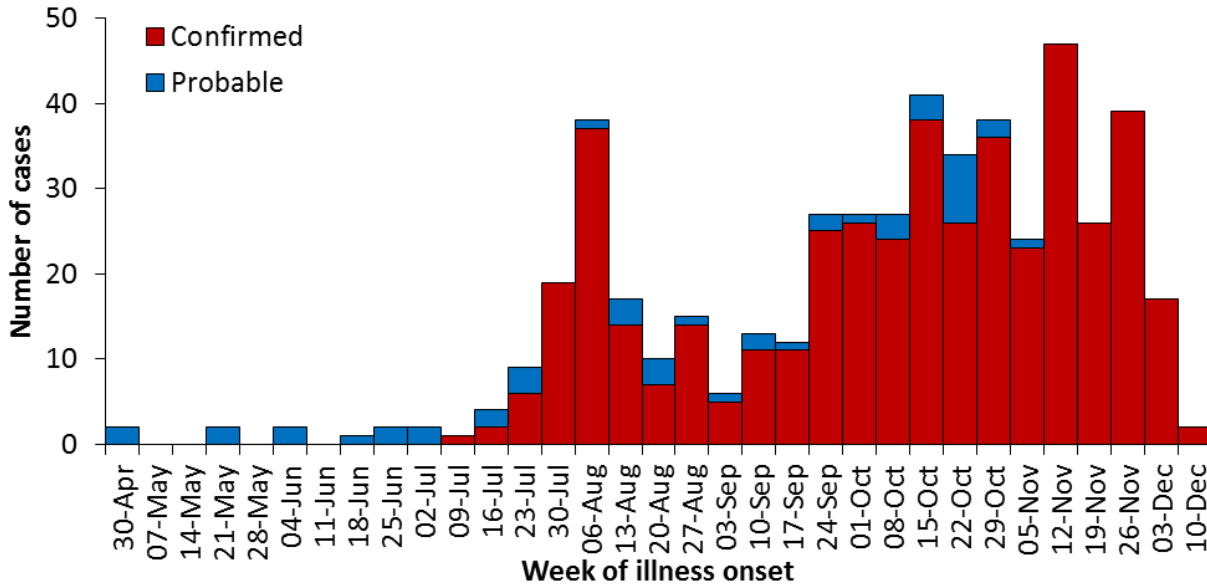
INFECTIOUS DISEASE UPDATES

EBOLA

The Ebola outbreak in the Democratic Republic of Congo (DRC) is ongoing. The World Health Organization (WHO) and Centers for Disease Control and Prevention (CDC) have not classified the affected areas as having “widespread transmission of Ebola virus,” which would trigger donor interventions in the U.S. The U.S. Food and Drug Administration (FDA) [guidance](#) requires that “in the event that one or more countries is classified by CDC as having widespread transmission of Ebola virus, your donor history questionnaire (DHQ), including your full-length and abbreviated DHQ, and accompanying materials, must incorporate elements to assess prospective donors for symptoms of recent or current illness with Ebola virus infection or disease, and travel to, or residence in, an area endemic for Ebola virus in accordance with 21 CFR 630.10(e)(2).”

As of December 11th, there were 505 reports (457 confirmed and 48 probable) in the DRC provinces of North Kivu and Ituri and 296 deaths.

Confirmed and probable Ebola virus disease cases by week of illness onset, data as of December 11th



**Data in recent weeks are subject to delays in case confirmation and reporting, as well as ongoing data cleaning. Trends during this period should be interpreted cautiously.*

(Source: [Ebola virus disease – Democratic Republic of the Congo](#), 12/13/18) ◆

We Welcome Your Letters

The ABC Newsletter welcomes letters from its readers on any blood-related topic that might be of interest to ABC members. Letters should be kept relatively short and to the point, preferably about a topic that has recently been covered in the ABC Newsletter. Letters are subject to editing for brevity and good taste and published after editorial review. Please send letters to the Editor at newsletter@americasblood.org or fax them to (202) 899-2621. Please include your correct title and organization as well as your phone number. The deadline for letters is Wednesday to make it into the next newsletter.



WORD IN WASHINGTON

The House passed the Sickle Cell Disease and Other Heritable Blood Disorders Research, Surveillance, Prevention and Treatment Act of 2018 ([S.2465](#)) this week, as it now awaits President Trump's signature. The bill introduced in the Senate earlier this year by Sens. Tim Scott (R-S.C.) and Cory Booker (D-N.J.) received unanimous Senate approval in October. It includes:

- support for sickle cell disease research;
- authorizes public health initiatives for sickle cell disease;
- authorizes a sickle cell disease surveillance program; and
- reauthorizes the existing sickle cell disease treatment demonstration program at Health Resources and Services Administration (HRSA) within the U.S. Department of Health and Human Services.

ABC joined 66 other organizations in signing a letter thanking Sens. Scott and Booker for their efforts in introducing the bill in the Senate and promoting the importance of sickle disease awareness nationally. ABC members can view the letter on the ABC member [website](#). Sen. Scott issued the following statement in a news [release](#) after the bill's passage in the House, "[o]ne of the pillars I base my public service on is giving a voice to the voiceless, and that is exactly what this bill does. I am thrilled that both the House and Senate passed my bill to ensure that we work to improve our understanding of this disease through enhanced data collection and how patients are treated through public health initiatives. For far too long, this terrible disease has been overshadowed in the public sphere and I am encouraged that, by the passage of this bill, our world-renowned researchers and providers will one day find a way to better treat and cure the estimated 100,000 people across our nation who are affected. I want to thank Senator Cory Booker and Congressmen Danny Davis and Michael Burgess for their continued efforts on this issue. I look forward to the President signing this legislation into law."

(Source: Sen. Tim Scott News [Release](#), 12/11/18) 💧

Rep. Kevin Brady (R-Texas), chair of the House Ways and Means Committee, introduced legislation that would place a 5-year moratorium on the medical device tax. "This package delivers bipartisan relief from some of Obamacare's most egregious taxes including ones that stifle innovation, reduce jobs, and increase the cost of families' health insurance," said Rep. Brady according to a [report](#) appearing on his website attributed to *The Daily Blaze*. The Advanced Medical Technology Association (AdvaMed) also [issued](#) a statement lauding the efforts of the House Ways and Means Committee "[a] 5-year moratorium will give companies greater confidence in planning long-term R&D—a component that is critical to maintaining the longevity of the industry and sustaining the innovation ecosystem. Future breakthroughs in patient care are undermined by the threat of the medical device tax." ABC signed on to a coalition letter this month that supported repeal of the medical device tax before the end of 2018. The letter sent to Sen. Mitch McConnell (R-Ky.), Senate Minority Leader Sen. Charles Schumer (D-N.Y.), House Speaker Rep. Paul Ryan (R-Wisc.), and House Minority Leader Rep. Nancy Pelosi (D-Calif.) described how the medical device tax stifles innovation, which could adversely impact treatments for patients, "We are concerned that the impending reinstatement of the medical device tax would result in the curtailing of investment in development of such life-changing innovations, and creation of fewer next-generation treatments and cures for individuals in need. Americans living with medical conditions deserve better. Since the tax is levied on revenues, not profits, it is particularly challenging for smaller companies, which make up more than 80 percent of the industry and are the source of so much innovation, and many of which generate revenue but no profit. This has a downstream effect on the entire innovation ecosystem for medtech. It is also worth noting that the U.S. medical technology industry saw its jobs ranks fall by nearly 29,000 while the medical device excise tax was in effect, according to data from the U.S. Department of Commerce. We are grateful for the steps Congress has taken to suspend the tax on two previous occasions, which provided important short-term

(continued on page 8)



WORD IN WASHINGTON (continued from page 7)

benefits. In July of this year, the U.S. House of Representatives overwhelmingly passed H.R.184, the Protect Medical Innovation Act of 2017, which permanently repeals the device tax, with a large margin of bipartisan support. Full repeal of the device tax would mean that the medical technology industry can continue innovating new approaches to managing chronic health issues, improving the overall quality of life, and developing technologies that could revolutionize the way we treat disease and illness in this country.” The full letter is available [here](#).

(Source: *The Daily Blaze*, [Chairman Brady Offers Important Disaster Relief, Retirement, Tax, and Healthcare Reform](#), 12/10/18; AdvaMed [Statement](#), 12/10/18; Medical Device Tax Repeal Coalition [Letter](#), 12/5/18) ◆

MEMBER NEWS

OneBlood disseminated the following message regarding their search for rare donors for [Zainab](#) covered in [Issue #41](#) of the ABC Newsletter:

Thank you for your continued help with OneBlood's worldwide search to find rare blood donors for Zainab.

The following is important information on how to send samples to OneBlood for compatibility testing.

1. Please inform your Collections team to label all Zainab designated donations with a special tag that indicates the donation needs to be tested by OneBlood for compatibility. This will help ensure Manufacturing teams at each blood center do not release the unit to their regular inventory before the compatibility testing is performed.
2. Please provide two segments from each red blood cell donation, label each segment with the donor ID number and fill-out [this form](#). Please include all items in the package as this is important for tracking purposes. Please also email a copy of the form with the FedEx tracking number to Frieda.Bright@oneblood.org, if possible.
3. Mail the segments and coordinating paperwork to: OneBlood at 3000 West Cypress Creek Road, Ft. Lauderdale, Florida 33309 (FedEx delivery is preferred. OneBlood's phone number to include is 954.777.2677).
4. Donors must be O or A blood type as indicated in the [form](#). (If the blood type is not known, OneBlood will still test the sample).
5. Please email the tracking/shipping number to Frieda.Bright@oneblood.org and Nancy.Benitez@oneblood.org. (Please group samples in one shipment, when possible).
6. It is important that blood centers hold the units collected for Zainab until OneBlood has performed the compatibility testing. OneBlood will call or email with compatibility results. In most instances, the results will be known the same day segments arrive to OneBlood for testing.
7. If you have any questions, please do not hesitate to contact Nancy Benitez, Laboratory Director at 954.777.2677 or Frieda Bright, Reference Laboratory Manager at 954.777.2677.

OneBlood greatly appreciates the industry-wide support in the search for rare blood donors for Zainab.

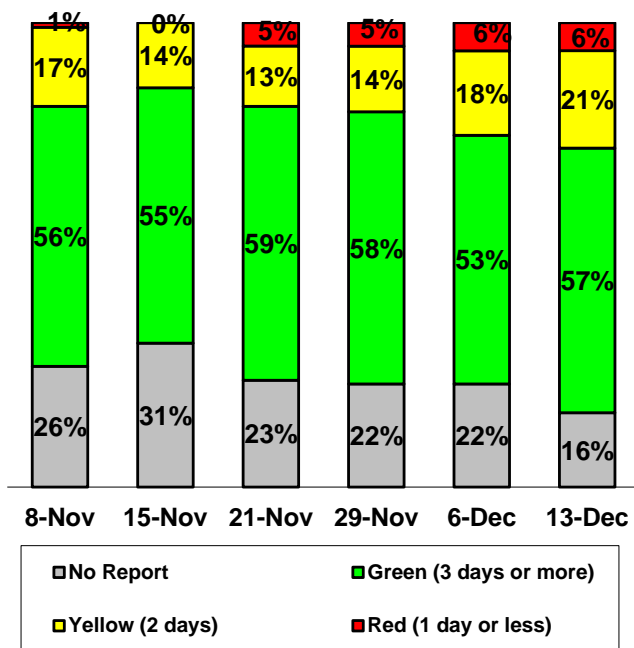
Sincerely,

*Jeanne Dariotis
Senior Vice President, Laboratories and Reference Services*

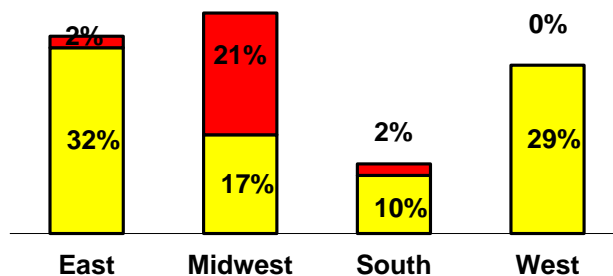
(Source: OneBlood Announcement, 12/12/18) ◆

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

Total ABC Red Cell Inventory



Percent of Regional Inventory at 2 Days Supply or Less, December 13, 2018



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

Daily updates are available at:

www.AmericasBlood.org

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) 899-2621. (For a more detailed announcement in the weekly “Meetings” section of the newsletter, please include program information.)

2019

Jan. 22. **American Course on Drug Development and Regulatory Sciences – NIH Cell-Based Immunotherapy: From Bench to Bedside and Beyond, Bethesda, MD.** More details available [here](#).

Feb. 4-5. **15th Annual FDA and the Changing Paradigm for HCT/P Regulation, Washington, D.C.** More details available [here](#).

March 6-7. **IPFA 4th Asia Workshop on Plasma Quality and Supply, Hanoi, Vietnam.** More details available [here](#).

March 23. **2019 International Blood Safety Forum, Washington, D.C.** More details coming soon.

March 24-26. **2019 ABC Annual Meeting, Washington, D.C.** More details coming soon.

May 14-16. **ADRP Annual Conference, Indianapolis, Ind.** More details available [here](#).

May 22-23. **IPFA/PEI 26th International Workshop on “Surveillance and Screening of Blood-Borne Pathogens”, Krakow, Poland.** 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) 899-2621; e-mail: lmaundy@americasblood.org.

POSITIONS

Product Quality Control (PQC) Supervisor – (Orlando, Fla.). OneBlood is hiring a PQC Supervisor to provide leadership and technical expertise, coordinate workflows, manage staff scheduling and payroll functions, and perform training and quality activities for the Product Quality Control (PQC) lab. The supervisor will ensure testing is completed in a timely and accurate manner in accordance with regulatory guidelines and organizational policies and procedures. Schedule: Tuesday - Saturday 2:00 pm to 10:30 pm; however, will need to be flexible to work other shifts as needed for departmental coverage. Qualified candidates will possess a bachelor's degree in Medical Technology, Biological Science or related field from an accredited college or university. Three (3) or more years' experience in a Product Quality Control laboratory or other related blood center laboratory, including one (1) or more years' experience in a Supervisor, Tech Lead or management capacity or an equivalent combination of education, certification, training, and/or experience. Valid and current Florida Clinical Laboratory Supervisor license in Immunohematology, and Microbiology required. Supervisor license in Blood Banking preferred. Apply online at www.oneblood.org/careers.

Manager, Clinical Services. LifeStream (San Bernardino, CA) located 60 miles east of Los Angeles and 50 miles west of Palm Springs seeks qualified applicants for its Manager, Clinical Services. Under the direction of the Vice President of Technical and Clinical Affairs, oversees the Therapeutic Hemapheresis Program by managing resources and directing/supervising subordinate staff performing therapeutic procedures in a clinical setting. Coordinates activities between other departments and Clinical Services; lends expertise and strategic direction, in coordination with Chief Medical Officer (CMO) decisions, to oversee clinical practice and, as needed, perform therapeutic hemapheresis. Collaborates with healthcare organizations to establish and maintain clinical services programs. Develops and maintains operating procedures that promote a safe and positive environment for staff, donors and patients. Associate (AS) or bachelor's degree (BRN) in Professional Nursing. Minimum one year of hemapheresis experience in blood banking required. Two to three years of hemapheresis experience is preferred. One year of supervisory experience required. Current California license as a Registered Nurse (RN) required. Current California Driver's License required. Current CPR certification required. This position reports to the Vice President/Technical and Clinical Affairs.

LifeStream is an Equal Opportunity Employer, M/F/D/V. Apply online at <https://www.lstream.org/open-positions/>.

Vice President of Biologics & Supply Chain. OneBlood, a not-for-profit community asset responsible for providing safe, available and affordable blood to more than 200 hospital partners and their patients, is currently searching for a strong leader to join the organization as Vice President of Biologics & Supply Chain in the St. Petersburg, Florida area. This position will provide operational and technical leadership for Biologics Operations by working with the management team to develop opportunities and implement short and long-range goals and strategies, plans and policies. Qualified candidates will possess a bachelor's degree from an accredited university with a master's degree preferred. A minimum of fifteen (15) years of progressively responsible experience in various operational, management and leadership roles including a minimum of five (5) years supply chain experience and a minimum of eight (8) to ten (10) years of progressively responsible management experience or an equivalent combination of education, certification, training and/or experience. A State of Florida Supervisor license in Immunohematology or Blood Banking and Black Belt Certification are preferred. Consider bringing your leadership, vision and expertise to OneBlood and join our mission to save lives. Interested candidates should apply online at www.oneblood.org/careers.

Director of Quality Assurance. Kentucky Blood Center (Lexington, Kentucky), is seeking a Director of Quality Assurance to support the oversight of our compliance program. This critical management position reports to the VP, Quality and Regulatory Affairs, and provides supervision of the QA department. Responsibilities include: Adherence to regulatory and accrediting organization standards; Compliance with applicable AABB, FDA, CLIA, State, OSHA, EU, Short-Supply Agreement requirements; Working to maintain a safe blood supply, and ensuring the safety of KBC stakeholders; Standard Operating Procedures (SOP's); Auditing – development and execution of methods and systems; Occurrence management; Regulatory investigations; Training documentation; Team leadership and process management; Strong communication and guidance at all organizational levels. Requirements: MT (ASCP), with five years' experience in related quality assurance management background. Microsoft Office skills; knowledge

(continued on page 11)

POSITIONS (continued from page 10)

of general compliance and regulatory practices, with occasional travel. Supervisory experience in coaching and leading teams is preferred. Blood banking knowledge highly desired. Competitive salary, benefits including health/dental/vision/life/disability; PTO/holidays, EAP, 401(k) plan. Relocation provided. For more information or to apply online, visit www.kybloodcenter.org. Drug-free and EOE/AAP.

Technical Director. Located in the heart of the magnificent coastal redwoods of Northern California, The Northern California Community Blood Bank is a non-profit blood bank serving Humboldt and Del Norte Counties. The Northern California Community Blood Bank has an immediate opening for a Technical Director. Under the direction of the Administrator and Medical Director, the Technical Director has overall 24-hour responsibility for the Laboratory and all activities related to processing, testing, storage, transportation, and other handling of blood and blood products. The Technical Director oversees component production, inventory, product distribution, reference immunohematological testing, and compliance with regulatory and standard-setting agencies. Experience, Education and Licensure: Four-year degree from an accredited college or university in science, medical technology or a related field. Valid current CA license as a Clinical Laboratory Scientist. Experience as a technologist performing high complexity testing in a clinical laboratory and familiarity with standard laboratory methods and techniques. Demonstrated ability to perform standardized routine testing, specialized testing in blood donor processing, and immunohematology is preferred. Must meet the CLIA defined General supervisor qualifications (42 CFR 493.1461). To Apply: Contact [Kate Witthaus](#), Northern California Community Blood Bank, 2524 Harrison Avenue, Eureka, CA 95501, (707) 443-8004.

Director, Donor Recruitment. LifeStream (San Bernardino, CA) located 60 miles east of Los Angeles and 50 miles west of Palm Springs seeks qualified applicants for its Director, Donor Recruitment position. This position is responsible for developing and directing the blood center's donor recruitment department/plans to achieve collection goals. Scope of responsibilities includes oversight of all mobile and fixed site recruitment. Requires the ability to oversee the daily operations, as well as strategically work toward the long-term goals. Must be able to facilitate all operational activities related to recruitment of donors and management of recruitment staff within the expected budget guidelines. Must be an effective leader and have the ability to adapt to change. Excellent salary (with bonus program) and benefits including relocation package. Bachelor's degree required. Demonstrated experience in sales/territory management skills, strong leadership and team building skills, excellent verbal and written communication and public speaking skills and computer literacy. Prior blood center experience preferred. Minimum three years management experience. Successful candidate must demonstrate ability to work closely with Marketing and Collections Managers/Directors to facilitate efficient and effective blood drives. This position reports to the Vice President/Operations. LifeStream is an Equal Opportunity Employer, M/F/D/V. Apply online at: <https://www.lstream.org/careers/>. 💧