

# ABCNEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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### 2019 #1

### January 11, 2019

**Please Note:** The *ABC Newsletter* will not be published on January 18th. We will resume regular publication on January 25<sup>th</sup>. Thank you for your continued interest.

# **National Blood Testing Cooperative Formed by ABC Members**

Nine ABC members have partnered to establish the National Blood Testing Cooperative (NBTC). This organization was developed "to allow community-based blood centers to take control of their blood testing needs," according to a news release from NBTC, and to provide "high-quality testing services, at cost, to its owner-members by eliminating unnecessary profit-mark-ups that large testing entities charge."

The founding members blood centers include:

- Community Blood Center of the Ozarks (Springfield. Mo.);
- Kentucky Blood Center (Lexington, Ky.);
- Mississippi Valley Regional Blood Center (Davenport, Iowa);
- LifeServe Blood Center (Des Moines, Iowa);
- LifeShare Blood Center (Shreveport, La.);
- LifeSouth Community Blood Centers (Gainesville, Fla.);
- Stanford Blood Center (Palo Alto, Calif.);
- SunCoast Blood Bank (Sarasota, Fla.); and
- The Blood Center (New Orleans, La.).

"This new cooperative business model approach provides a strategic opportunity to blood center owners and/or members by providing a level of control for a major, core function of our blood center operations," said Nancy Eckert, president and CEO of LifeSouth Community Blood Centers, member and chair of NBTC. Wendy Trivisonno, CEO and President of NBTC added, "[w]e are pleased to have worked with Blood Centers of America (BCA) Cooperative during the contracting process. NBTC was able to leverage the consolidation volume and maximize the contractual benefits under the BCA Donor Screening agreements. We understand the complex nature of testing agreements and relationships and are working individually with each new or potential new member to onboard them at the right times. I am looking forward to watching this cooperative grow with more NBTC members and seeing our community blood centers thrive with this new option."

The organization will commence testing services by the end of 2019 for its facility based in Atlanta, Ga. as its west coast facility is currently performing testing services.

(continued on page 2)







## National Blood Testing Cooperative (continued from page 1)

"Approaches to change the competitive landscape can be difficult to get off the ground because it requires working for the good of the group," said Billy Weales, president and CEO of The Blood Center, member and treasurer of NBTC. "It is truly rare to create something that is an industry disrupter. The cooperative approach, which has worked well in our industry, now gives independent blood centers like mine a voice in the direction of blood testing and the control over the services that are needed for a safe blood supply."

NBTC becomes the first cooperative created specifically for blood testing needs. Some members will continue to do their own testing, while others will outsource testing until the Atlanta lab becomes operational. "When I became an owner of NBTC, the hard work of creating a model that is truly unique and game changing had already been completed; but also, what resonated with me was the fact that several different CEO's had put aside their personal agendas to create this organization that will benefit our industry," said Chad Douglas, president and CEO of LifeShare Blood Center, member, and secretary of NBTC. "It was hard to not be impressed by what had been created and how it had been done."

(Source: National Blood Testing Cooperative News Release, 1/7/19)

## **HHS Unveils Voluntary Cybersecurity Practices for Healthcare Industry**

The U.S. Department of Health and Human Services (HHS) published a voluntary guide for organizations within the healthcare sector to improve their security against increasing cyberthreats. "Cybersecurity is everyone's responsibility," said HHS Acting Chief Information Security Officer Janet Vogel in an agency news <u>release</u>. "It is the responsibility of every organization working in healthcare and public health. In all of our efforts, we must recognize and leverage the value of partnerships among government and industry stakeholders to tackle the shared problems collaboratively."

The publication is entitled "Health Industry Cybersecurity Practices (HICP): Managing Threats and Protecting Patients." Its goal is to identify the biggest cyberthreats, while recommending best practices to mitigate them. "The healthcare industry is truly a varied digital ecosystem," said Erik Decker, industry colead and Chief Information Security and Privacy Officer for the University of Chicago Medicine in the news release. "We heard loud and clear through this process that providers need actionable and practical advice, tailored to their needs, to manage modern cyber threats. That is exactly what this resource delivers; recommendations stratified by the size of the organization, written for both the clinician as well as the IT subject matter expert." More information and tools are available on the HHS website.

(Source: HHS News Release & Publication, 12/28/18)

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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.

#### **America's Blood Centers**

Chief Executive Officer: Kate Fry Chief Medical Officer: Louis Katz Editor: Mack Benton Subscriptions Manager: Leslie Maundy Annual Subscription Rate: \$390

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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.

# **Results from 2018 Employee Turnover and Retention Survey**

ABC's Human Resources Committee recently announced the availability of the results from the annual Industry Employee Turnover and Retention Survey for calendar year 2017. It is an analysis from 2013–17 reported in aggregate and made available on ABC's member website. The calendar year 2017 report is available <a href="https://example.com/here">here</a>. This industry benchmark report can be used by members to easily identify strengths and opportunities in their own organizations when compared to the industry.

(Source: MCN 18-056)

### Latest Blood Bulletin Now Available to ABC Members

ABC's Scientific, Medical, and Technical (SMT) Publications Committee has published the December 2018 Issue of the <u>Blood Bulletin</u>, "Patient Blood Management (PBM) in the Setting of Adult Cardiovascular Surgery (CVS)."

The article was written by Chris Gresens, MD, Senior Chief Medical Officer, North & West Divisions at Vitalant, Scottsdale, Arizona. <u>Blood Bulletin</u> is reviewed and edited by ABC's SMT Publications Committee. The latest editions are available here to ABC members in <u>PDF</u> or <u>MS Word</u> versions.

ABC publishes the <u>Blood Bulletin</u> for its member blood centers to use in your educational programs as a value-added service for hospital customers.

(Source: MCN 18-055)

# ADRP Webinar: Beyond Customer Service, How Collections Staff Can Build Donor Relationships

Register for the Wednesday, January 23<sup>rd</sup> ADRP Webinar entitled "Beyond Customer Service, How Collections Staff Can Build Donor Relationships." This webinar will take place at 1 p.m. eastern and feature Carter BloodCare's James Giacoletti, assistant manager Donor Notification – Medical Services and Welda Alaman, manager, Donor Advocate and Special Donations. Attendees will receive an overview of the customer service program developed at Carter BloodCare for new collections staff to provide front line staff the tools to be more effective and consistent when communicating with donors, increasing donor engagement and loyalty. ADRP subscribers may register for free and non-subscribers can participate for \$25.

(continued on page 4)

### **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 <u>calendar of events</u> 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!

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### **INSIDE ABC** (continued on page 5)





#### 2019 ANNUAL MEETING SCHEDULE

Saturday, March 23: International Blood Safety Forum

**ABC Board Meeting** 

Sunday, March 24: General Session

SMT Forum & Celso Bianco Lectureship Celso Bianco Celebration of Life Reception

Monday, March 25: ABC Members Meeting

General Session

22nd Annual Awards of Excellence

Tuesday, March 26: Advocacy Forum Capitol Hill Visits





-Kate Fry, Chief Executive Officer America's Blood Centers



#### **Hotel Information**

Ritz-Carlton (Pentagon City) Hotel room rate: \$259



For registration information, visit http://bit.ly/abc\_am19.

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

# 57th ABC Annual Meeting Registration Open

Registration is open for America's Blood Centers (ABC) 57<sup>th</sup> Annual Meeting in Washington, D.C. March 23<sup>rd</sup> − 26<sup>th</sup> at the Ritz-Carlton (Pentagon City). 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 & Reception, the Scientific, Medical, and Technical Forum, Capitol Hill Visits, General Session, and the 22<sup>nd</sup> Annual *Awards of Excellence*. Please make your hotel reservations by March 1<sup>st</sup> to ensure best availability and the group rate. Click here for additional details. Contact Leslie Maundy for available sponsorship opportunities. ◆

### 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 <a href="mailto:newsletter@americasblood.org">newsletter@americasblood.org</a> 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.







### RESEARCH IN BRIEF

Zika virus: what's new? An analysis and editorial explore the cost effectiveness of U.S. donor testing for Zika infection. Authors from Vitalant, the American Red Cross, and Stanford University provide estimates of the cost effectiveness of donor screening in Puerto Rico and the 50 U.S states. For the latter, neither the individual donation testing strategy imposed by the U.S. Food and Drug Administration (FDA) guidance (the authors' point estimate is \$340,000,000 per quality adjusted life year) nor more targeted strategies met generally accepted cost thresholds compared to other transfusion transmissible infections. Screening was cost effective in Puerto Rico only during the "high mosquito" season. Donor infection rates in the models reflected those during the main epidemic in 2016-17, so estimates would be worse after its subsidence of the epidemic. They do not provide any analysis of the cost effectiveness of ongoing minipool testing or the individual donation triggering strategies required in the revised FDA guidance.

Editorialists conclude that "the sociopolitical context of screening the blood supply for infectious pathogens has been indelibly influenced by the transmission of HIV to thousands of blood and blood product recipients before implementation of HIV antibody screening in 1985" and that the resulting precaution "can promote the expectation of zero risk." They close by referring to the potential value of pathogen reduction as a proactive approach to avoiding the pitfalls of this precautionary paradigm.

Another study traces the cascade of changes in the Zika virus during its journey from Africa to Asia to Oceania and the Americas while discussing their potential impacts on the pathogenesis of infection, especially the emergence of central nervous system damage in fetuses. The authors cite recent studies of viral sequences and reverse genetics in animal models to assert that specific genomic sequence changes, associated with specific amino acid substitutions, were acquired at the same time the congenital Zika syndrome was recognized and may be pathogenic.

Citations: Russell, W.A., Stramer, S.L., Busch, M.P. and Custer, B. Screening the blood supply for zika virus in the 50 U.S. states and Puerto Rico: a cost-effectiveness analysis. Ann. Int. Med. 2019. doi:10.7326/M18-2238.

Ellingson, K.D. and Kuehnert, M.J. Blood safety and emerging infections: balancing risks and costs. Ann. Int. Med. 2019. doi:10.7326/M18-3527.

Liu, Z-Y., Shi, W-F. and Qin, C-F. The evolution of Zika virus from Asia to the Americas. Nature Rev. Microbiology. 2019.

Iron deficiency and neuronal development: in vitro veritas? A recent publication from the laboratory of Michael Georgieff, who has spoken at recent ABC and AABB meetings, from the University of Minnesota adds to the understanding of how depleting iron stores affects embryonic neuronal development of mice in utero. This lab has previously demonstrated iron depletion may have effects on brain development in a murine model. Specifically, mice subjected to in utero iron deficiency have impaired neurological development that is not remediated by repletion of iron stores during the postnatal period.

The new study used deferoxamine to chelate iron in cell cultures of hippocampal neurons, demonstrating adverse effects on mitochondrial development and migration, and inhibiting neuronal synaptic development. Specifically, they found that "at the beginning of peak dendritic growth/branching, iron deficiency reduces mitochondrial speed through increased pause frequency, decreased mitochondrial size and alters fusion/fission gene expression".

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### RESEARCH IN BRIEF (continued from page 5)

It is important not to uncritically extrapolate from murine cell culture to human blood donor policies, but the work does contribute to an understanding of how and why clinically significant iron depletion might adversely affect fetal neuronal development. This concern gives support to those who advocate a "precautionary" approach to blood donor recruitment in females of childbearing age.

**Citation:** Bastian, T.W., von Hohenberg, W.C., Georgieff, M.K. and Lanier, L.M. Chronic energy depletion due to iron deficiency impairs dendritic mitochondrial motility during hippocampal neuron development. *J. Neuroscience*. 2018. Doi: 10.1523/JNEUROSCI.1504-18.2018.

A case report alleges an association of transfusion with "posterior reversible encephalopathy syndrome" (PRES). PRES presents subcortical vasogenic brain edema in patients with acute neurological symptoms, such as conscious disturbance, headache, seizure, and various visual disturbances. Japanese authors describe a 75-year old woman who developed PRES following receipt of 560 mL of red blood cells for a hemoglobin of 4.8 g/dL from gastrointestinal bleeding. The syndrome was characterized by the onset on the day after transfusion of decreased responsiveness. Imaging at that time was consistent with diffuse, probably vasogenic, edema. Clinical, laboratory and other imaging evaluation did not suggest an etiology other than PRES. She recovered responsiveness but had persistent visual injury. They reviewed 21 previously reported cases, of which 15 of 18 with adequate data were temporally associated with transfusion from a mean hemoglobin of 3.4 g/dL with an average time of onset of 1 week after receiving blood. No evidence is cited that allows the causal inference which the authors imply.

**Citation:** Nakamura, Y., Sugino, M., Tsukahara, A. *et al.* <u>Posterior reversible encephalopathy syndrome with extensive cytotoxic edema after blood transfusion: a case report and literature review. *BMC Neurology*. 2018.</u>

More red blood cell "omics." A first wave of publications on the application of "omics" to transfusion medicine from the Red Blood Cell (RBC)-Omics study of the National Heart, Lung, and Blood Institute (NHLBI) Recipient Epidemiology and Donor Evaluation study (REDS-III) are published in the January issue of *Transfusion*. Broadly speaking "omics" for transfusion medicine is the study of essentially all the genes (genomics) and products of metabolism (e.g. metabolomics and proteomics) using advanced, high throughput analysis methods and "big data" computational techniques to explore the effects of everything from heredity and other donor characteristics, collection, processing, and storage methods and recipient characteristics on outcomes.

There are six studies and a descriptive editorial. Papers describe the study methods including validation and quality control aspects, extensive studies on hemolysis during storage, the potential impacts of processing and additive solutions in comparison to storage duration, and a genome-wide genotyping microarray that will be useful for future studies across the discipline of transfusion medicine and beyond.

The manuscripts derive from four U.S. blood centers, encompassing more than 13,000 racially and ethnically diverse donors age 18-90 including both routine and high frequency donors. The cohort provides "demographic, behavioral, biochemical, and genetic data for a broad range of blood donor studies related to iron metabolism, adverse consequences of iron deficiency, and differential hemolysis...during RBC storage." Linkage to recipients and creation of a sample repository enhances the current and future utility of the project.

**Citations:** Spitalnik, S.L. and Devine, D.V. <u>Translating red cell "omics" into new perspectives in transfusion medicine: mining the gems in the data mountains</u>. *Transfusion*. 2019.

Endres-Dighe, S.M., Guo, Y., Kanias, T. *et al.* <u>Blood, sweat, and tears: Red Blood Cell-Omics study objectives, design, and recruitment activities. *Transfusion*. 2019. ◆</u>

ABC Newsletter -7







### **REGULATORY NEWS**

ABC cosigned a joint letter from AABB and the American Red Cross that requested that the Centers for Medicare and Medicaid Services (CMS) create "miscellaneous/not otherwise classified" HCPCS II code for blood products as part the HCPCS 2020 annual update. The letter states that the three organizations "believe that creation of a miscellaneous/otherwise not classified code for blood products is instrumental to facilitating the timely adoption of new products that may have the potential to result in improved clinical outcomes." The lack of this classification results in hospitals not being able to use such a code to bill 3<sup>rd</sup> party payers for investigational blood products or future blood products not adequately described by existing P-code in the event of FDA approval. The full letter may be viewed here.

(Source: AABB, ABC, American Red Cross Joint Letter to CMS, 1/4/19)

Former commissioners of the U.S. Food and Drug Administration (FDA) have questioned whether the agency should exist independently of the U.S. Department of Health and Human Services (HHS). They suggest that the political nature of HHS can "interfere" with the ability of FDA scientists to protect the public health," according to <u>STAT News</u>. The seven former commissioners, "who served under Democratic and Republican administrations alike" acknowledged that any structural changes are not likely even if the group feels they would be beneficial to the agency moving forward. "I don't think that there's much appetite in this current environment to take this on, with everything else that's swirling around," said former Commissioner Margaret Hamburg, MD, who served from 2009 to 2015 and co-authored the papers referenced in the STAT News article. "You get bogged down, also, in a way that's frustrating, by individuals at different levels in the hierarchy of review not having the background and expertise."

(Source: STAT News, All seven of the FDA's recent commissioners agree it should be independent — but not on how to accomplish it, 1/7/19) ♦



### **RECENT REVIEWS**

**Recent reviews:** *Transfusion and Apheresis Science* **publishes a themed issue on "novel" platelet products.** The application of cold platelets and other platelet products with functional and storage characteristics that obviate the safety and operational shortcomings inherent in room temperature platelet storage is a subject of increasing interest in the U.S. and globally. The five manuscripts in this volume include a review by Col. G. Michael Fitzpatrick, former chief operating officer of ABC, that

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## RECENT REVIEWS (continued from page 7)

encompasses the history of transfusion for trauma, and discusses the development of lyophilized platelets, synthetic platelets, and stem cell-derived platelet products. There is a summary editorial and descriptions of cold and frozen platelets and their physiology. The articles are open access and can be found in the links included below.

**Citation:** Wagner, S.J. Guest Editorial: <u>The Resurgence of Cold Stored Platelets</u>. *Transfusion and Apheresis Science*. 2018.

Fitzpatrick, G.M. <u>Novel Platelet Products under Development for the Treatment of Thrombocytopenia or Acute Hemorrhage</u>. *Transfusion and Apheresis Science*. 2018.

Getz, T. Physiology of Cold-stored Platelets. Transfusion and Apheresis Science. 2018.

Reddoch-Cardenas K.M., Bynum, J.A., Meledeo, M.A., Nair, P.M., Wu, X., Darlington, D.N., Ramasubramanian, A.K., Cap, A.P., <u>Cold-Stored Platelets: A Product with Function Optimized for Hemorrhage Control</u>. *Transfusion and Apheresis Science* . 2018.

Kelly, K., Dumont, L.J. Frozen Platelets. Transfusion and Apheresis Science. 2018.

What are the data about the use of massive transfusion protocols (MTPs) in non-traumatic bleeding? MTPs have shown great promise in trauma literature, but data and experience in other settings are much less robust. Swiss investigators have performed a systematic review and meta-analysis of MTP vs. non-protocol transfusion assessing mortality in non-trauma patients at  $\geq 18$  years of age, which included examining 252 papers to find twelve studies comprising 2,475 patients from 2007-17. The most frequent clinical contexts included perioperative hemorrhage, obstetric and gastrointestinal bleeding. The meta-analysis included only four studies and revealed no statistically significant effect of MTP on the 24-hour mortality (OR 0.42, 95 percent CI 0.01-16.62, p=0.65) with a trend towards lower one-month mortality (OR 0.56, 95 percent CI 0.30-1.07, p=0.08). There were few studies, the populations included were heterogeneous, the MTPs variable, and high-quality randomized trials were absent.

**Citation:** Sommer, N. Schnüriger, B., Candinas, D. Haltmeier, T. Massive Transfusion Protocols in Non-Trauma Patients: A Systematic Review and Meta-Analysis. *J Trauma Acute Care Surg.* Doi: 10.1097/TA.0000000000002101. ◆

### **PEOPLE**

**Larry Smith** announced his upcoming retirement through the letter below:

Dear Friends and Colleagues,

I am pleased to announce that after 41 years, I will officially retire at the end of January 2019.

I have been most fortunate to have spent my entire career – 30 years at the Rhode Island Blood Center and 11 at Central Jersey Blood Center – working with talented casts of dedicated and resourceful individuals on a daily basis at both centers. During those years, I've also enjoyed serving on Boards and Committees of Blood Centers of America (BCA), America's Blood Centers (ABC) and the American Association of Blood Banks (AABB).



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### PEOPLE (continued from page 8)

It has been my constant privilege and pleasure to witness firsthand the selfless generosity and kindness of thousands of volunteer blood donors. Although much has changed in blood banking and transfusion medicine since the 1970's, the need for volunteer blood donors and the primary role of blood centers in taking responsibility for the safety and availability of the blood supply remains the same. At home and at work I have been blessed with love and support from family and friends, and now retirement is the beginning of the rest of the story. I plan to stay busy and already have three part-time "jobs" lined up — Grandpa, farmhand and golf buddy. Grandpa is easy and fun, as my role is to be wingman for the more capable and talented Grandma. Being an occasional farmhand on my son's organic vegetable farm will be personally and nutritionally rewarding, as I'm paid in veggies! Being a golf buddy will be socially rewarding when I get to reconnect and play with other retired blood center friends.

In closing, I want to say thank you to the wonderful staff (present and past) at BCA, ABC and AABB who have helped me and Rhode Island Blood Center for so many years. And finally, I want to say a most appreciative and heartfelt thank you to the entire RIBC family of staff, trustees, and volunteers, including new colleagues at NYBC, for making my work especially meaningful and rewarding.

Best Regards,

Larry Smith

(Source: Letter from Larry Smith, 1/7/19)

### **WORD IN WASHINGTON**

House Resolution 269, the Pandemic and All Hazards Preparedness and Advancing Innovation Act of 2019 (PAHPAI), passed in the House this week. The bill was reintroduced following its failure to be passed at the end of 2018. It includes important provisions that are intended to strengthen the U.S. blood system. Section 209 references the role of the nation's blood supply in emergency preparedness and response systems and the specific challenges facing community blood centers. The House bill also makes references to blood centers and the blood system requiring the Assistant Secretary for Preparedness and Response (ASPR) to develop and update guidelines for regional health care emergency and response systems, and to consult with blood banks and other key stakeholders when developing and updating guidelines. House Energy and Commerce Chairman Frank Pallone, Jr. (D-N.J.) and Ranking Member Greg Walden (R-Ore.) issued the following joint statement: "The bipartisan Pandemic and All-Hazards Preparedness and Advancing Innovation Act of 2019 will strengthen our nation's emergency preparedness and response efforts and modernize the nation's regulatory framework for over-the-counter (OTC) drugs," said Chairman Pallone and Ranking Member Walden in a news release. "Thanks to this legislation our communities will be safer and better prepared for emergencies, and FDA's regulatory standards for OTC drugs will be modernized to better ensure consumer safety. This package is the product of bipartisan compromise and we urge our Senate colleagues to quickly take up this package and send it to the President's desk for signature, "We would like to thank Reps. Anna Eshoo, Susan Brooks, Diana De-Gette, Bob Latta, Debbie Dingell, and Brett Guthrie for their dedicated work on this issue." ABC also cosigned a coalition letter to Senate Majority Leader Sen. Mitch McConnell (R-Ky.) and Sen. Minority Leader Sen. Chuck Schumer (D-N.Y.) asking that the Senate quickly pass PAHPAI.

(Source: Rep. Pallone and Walden Joint Statement News Release, 1/8/19)

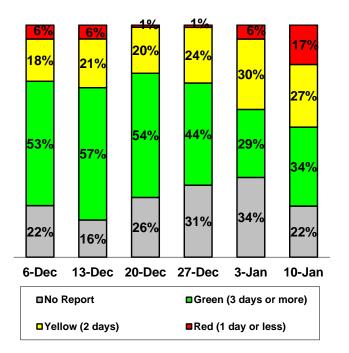
January 11, 2019

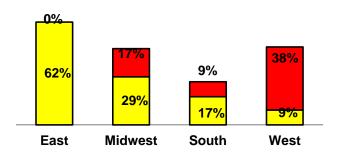
ABC Newsletter -10-

# STOPLIGHT®: Status of America's Blood Centers' Blood Supply

### **Total ABC Red Cell Inventory**

Percent of Regional Inventory at 2 Days Supply or Less, January 10, 2019





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

### **CALENDAR**

Note to subscribers: Submissions for a free listing in this calendar are welcome. Send information to Leslie Maundy by e-mail (<a href="mailto:lmaundy@americasblood.org">lmaundy@americasblood.org</a>) 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 <a href="https://example.com/here/beta-based-linearing-new-more details">here</a>.

Feb. 4-5. 15<sup>th</sup> Annual FDA and the Changing Paradigm for HCT/P Regulation, Washington, D.C. More details available <a href="here">here</a>.

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 available here.

March 24-26. **2019 ABC Annual Meeting, Washington, D.C.** More details available <u>here</u>.

April 30-May 2. 2019 ABC Technical & Quality Workshop, Minneapolis, Minn. More details coming soon.

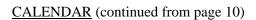
May 14-16. ADRP Annual Conference, Indianapolis, Ind. More details available here.

May 22-23. IPFA/PEI 26th International Workshop on "Surveillance and Screening of Blood-Borne Pathogens", Krakow, Poland. More details available <a href="here">here</a>.









July 30-Aug. 1. **2019 ABC Medical Directors Workshop & Summer Meeting, Denver, Colo.** More details coming soon.

| ABC 2019 Meetings & Workshops   |                                  |                           |  |   |  |
|---------------------------------|----------------------------------|---------------------------|--|---|--|
| Meeting/Workshop                | Dates                            | Location                  | Hotel/Hotel Rate                             | Registration Dates<br>& Fees  |  |
| Annual Meeting                  | March 23-26                      | Washington, DC            | Ritz-Carlton (Pentagon City),<br>\$259/night | Register here by Mar. 1<br>\$760  |  |
| Technical & Quality<br>Workshop | April 30-May 2                   | Minneapolis,<br>Minnesota | Embassy Suites,<br>\$139/night               | Mid-Feb. (Early Bird TD or QA or TD + QA) \$360/\$435; Feb. 23-Apr. 5 (TD or QA or TD + QA) \$420/\$495 |  |
| ADRP Annual Conference          | May 14-16                        | Indianapolis, Indiana     | Hyatt Regency,<br>\$179/night                | Register here now Subscribers \$575/\$695 nonsubscribers  |  |
| Medical Directors<br>Workshop   | July 30<br>(precedes Summer Mtg) | Denver, Colorado          | Grand Hyatt, \$239<br>CAD/night              | Late April - July 5<br>MD Workshop \$435<br>MD+Summer \$760   |  |
| Summer Meeting                  | July 31-August 1                 | Denver, Colorado          | Grand Hyatt, \$239<br>CAD/night              | Late April - July 5<br>Summer \$655<br>Summer+MD \$760  |  |

### **Notes:**

For the most up-to-date information on all events, members of ABC may check the <u>calendar</u> on ABC's Member Site. Non-members may attend all events; information will be updated on ABC's <u>Public Site</u>.

### **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: <a href="mailto:lmaundy@americasblood.org">lmaundy@americasblood.org</a>.

### **POSITIONS**

Clinical Laboratory Scientist (Sign-on Bonus from \$1000 to \$5000). Donor Testing Laboratory at Hoxworth seeks a Clinical Laboratory Scientist for second shift position. This position performs routine and complex quality control testing of blood and blood components, as well as high-level evaluation, review and interpretation of test results. Candidates shall be able to perform with minimal supervision, be proficient in computerized data entry and retrieval functions, and communicate effectively with individuals within and outside the department. On-call rotation for weekends and holidays is required. The job requires a bachelor's degree and MT (ASCP), BB (ASCP) or CHT (ABHI); - OR- bachelor's degree and

registry eligible; -OR- bachelor's degree and HEW certified medical technologist with two (2) years related experience; -OR- MLT with three (3) years related experience. Degree must be in biological science or related field. Visit the Hoxworth Blood Center website at <a href="https://www.hoxworth.org">www.hoxworth.org</a>.

**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

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### **POSITIONS** (continued from page 11)

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.

Vice President of Blood Services. Responsibilities as the Vice President of Blood Services: Serve as an active member of the leadership team, providing strategic and operational expertise to achieve Blood Services goals. Manage the operational activities of a large technical and support staff engaged in the collection of donated blood and its preparation, testing, labeling and distribution. Assure compliance with policies, programs, and directives set forth by regulatory agencies and the organization. Establish and execute meaningful continuous improvement, coordinate laboratory functions with Transfusion Services to achieve efficient and effective blood resource management within the region. Responsible for preparing, recommending and subsequently executing a departmental profit and loss budget, inclusive of all relevant financial and operational performance measures. Serve as the strategic analyst and integrator of evolving healthcare information and delivery trends. Lead the effort to provide blood donors with an optimal experience. Develop and maintain a highly engaged workforce. Hire and retain successful team. Serve on boards, committees and task forces that promote Bloodworks within the community. Other duties as assigned. Education & Experience: Medical, technical or nursing degree or equivalent combination of education and experience. Ten or more years of progressive leadership experience in blood collection and manufacturing (strongly preferred), or equivalent. Apply online here.