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

ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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

2019 #5 **February 15, 2019**

INSIDE:

Maternal Iron Deficiency in Donors and Academic Attainment of Their Offspring Studied

It is an understatement to say there is no consensus in the U.S. on the most appropriate approach, if any, to risks from iron depletion in blood donors. Some advocate for a precautionary response, others cite a lack of literature to suggest donation-related iron depletion is clinically important. The greatest concern centers on children and adolescents undergoing ongoing neurodevelopment. A study from Denmark links information on maternal blood donation frequency prior to a pregnancy (a surrogate for their iron stores) with subsequent student performance on standardized written tests. Analyses were controlled for student grade; year of graduation; maternal, paternal and student ages; student gender; and parental education and income. In the multivariate analysis of nondonor women (n=177,078), low frequency (1-5 donations in the three years before the pregnancy, n=4,995) and high frequency donors (women with six or more donations in that interval, n=414), test scores were statistically significantly higher in the children of donors compared to nondonors and no difference was measured between children of high vs. low frequency donors. The authors attribute the difference between the children of donors and nondonors as reflecting "residual confounding due to incomplete adjustment for socioeconomic and lifestyle factors known to differ between donors and nondonors." Weaknesses of the study include the absence of any direct measure of iron stores and the narrow definition of academic attainment, assuring that controversy will continue.

Citation: Rigas, A.S., Pedersen, O.B., Rostgaard, K. *et al*. Frequent blood donation and offspring scholastic attainment: an assessment of long-term consequences of prenatal iron deficiency. *Transfusion*. 2019. doi: 10.1111/trf.15193. 🩸

Upcoming ABC Webinars – Don't Miss Out!

- **ABC Bylaws Webinar** – March 8th. Additional details forthcoming!
- **ADRP Webinar - Diversification of the Donor Pool: Identifying Challenges and Highlighting Strategies for Successful Donor Recruitment and Retention** – March 14th – Register today!
- **SMT Journal Club –** April 3rd. Additional details forthcoming!
- **QA Education Webinar – PRT & Double Red Cell Licensure** – April 9th. Additional details forthcoming!
- **QA Education Webinar – Change Management** – July 16th. Additional details forthcoming!

Facebook Blood Donation Tools Coming to the U.S.

Facebook has previously demonstrated a commitment to the cause of blood donation by creating tools to connect blood donors and blood collection agencies in several countries abroad including India, Bangladesh, Brazil, and Pakistan. An estimated 35 million individuals have signed up using this donation tool since its inception over the past two years. Facebook is preparing to "roll out" a U.S. version of the tool.

America's Blood Centers (ABC) first approached Facebook in May 2018 about the possibility of bringing a blood donation tool to the U.S. given seasonal shortages and the ongoing need for a diverse donor base. ABC connected Facebook with various member blood centers to help them gain insights into the issues that U.S. blood centers encounter daily. In recognizing those challenges, Facebook is developing the U.S. blood donation tool that will be made available to all U.S. blood centers.

The tool will allow Facebook users to indicate their interest in becoming a blood donor and gain additional information about blood centers in their area. Facebook is also working through possibilities for various alerts, notifications, and reminders to individuals registered for the blood donation tool throughout the year to continually promote the importance of regular donation. ABC members can find out additional details in MCN 19-015 or contact ABC CEO Kate Fry, MBA, CAE with questions.

(Source: MCN 19-015) ♦

Be a Part of the Solution: Join us at the International Blood Safety Forum on March 23rd

In 2017, the World Health Organization reported the good news that tangible progress had been made in improving the safety of the world's blood supply. Between 2008 and 2013, the number of donations collected from voluntary nonremunerated donors (VNRBD) had increased by more than 10 million, and 74 countries collected more than 90 percent of their blood from VNRBD. This improvement in safety has not, unfortunately, been accompanied by an improvement in access. In 2017, blood collections per 1,000 people in low-income countries were one seventh of those in high income countries. Issues of quality and cost still challenge the ability of low-resource countries to produce plasma that is suitable for fractionation to produce plasma derived medicinal products (PDMP). In 2013, 96 of 180 countries surveyed reported that all of their PDMP were made from plasma collected elsewhere, and 17 countries reported having no access to PDMP at all. This is incredibly bad news for hemophiliacs and people with immunodeficiencies in all 113 of these countries. U.S. government support for international blood safety and access has cratered, from a peak investment of $55 million in 2010 to an expected expense of $2.7 million in 2019, and from supporting active programs in 27 countries in 2012 to four countries in 2019.

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The *ABC Newsletter* (ISSN #1092-0412) is published by America's Blood Centers® and distributed by e-mail.

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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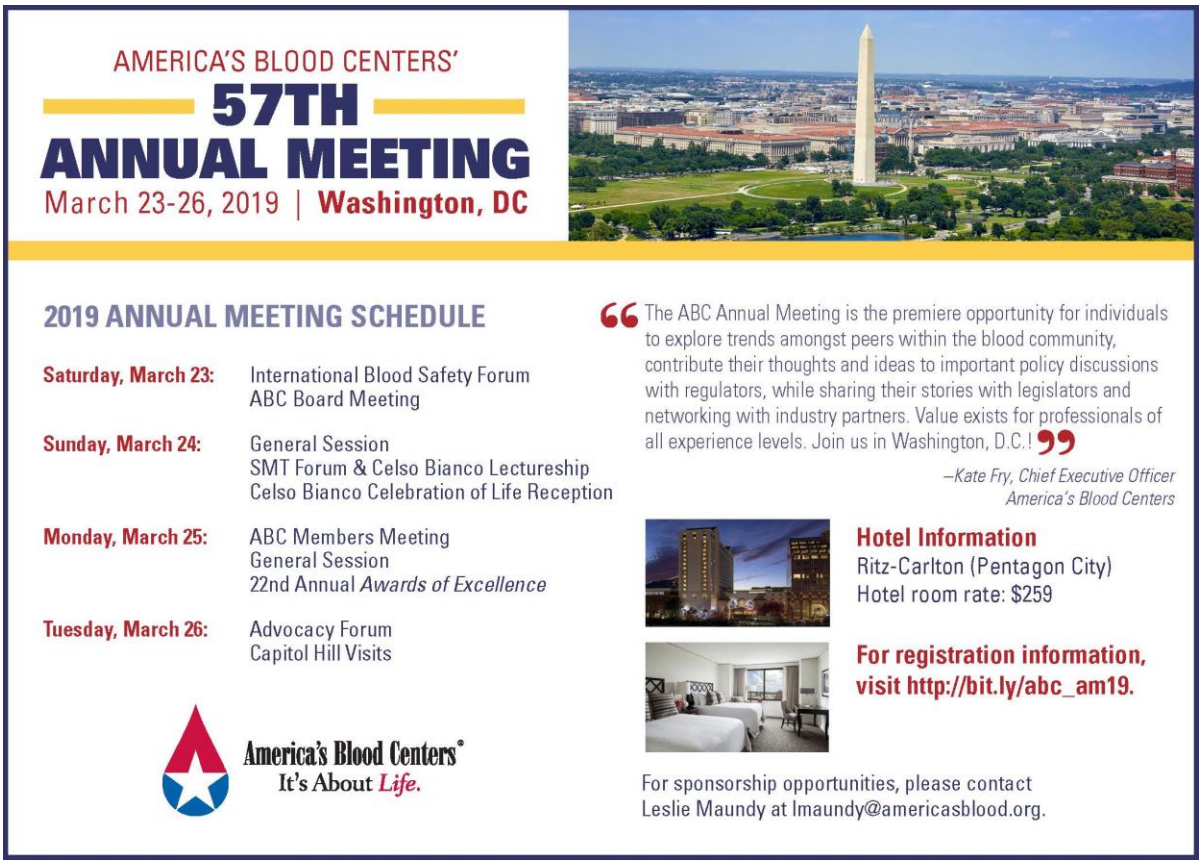
Be a Part of the Solution (continued from page 2)

Despite the grim picture, dedicated physicians and laboratory scientists around the world have not given up. Professional societies, individual blood centers, and industry leaders have continued to work where they can build quality systems that will help create accessible, safe blood and enable access to plasma that can translate into available PDMP. At the International Blood Safety Forum in Arlington, Va. on Saturday, March 23rd, you can learn what these dedicated, resourceful, and caring people and organizations are continuing to do in the face of shrinking resources. Hear leaders from America's Blood Centers (ABC), the International Society for Blood Transfusion (ISBT), AABB, the Plasma Protein Therapeutics Association (PPTA), the International Plasma and Fractionation Association (IPFA), and the Grupo Cooperativo Iberamericano de Medicina Transfusional (GCIAMT) along with representatives of North American blood centers and leading blood products corporations talk about how they are continuing to press forward. Join the conversation to learn what you can do to help these distinguished colleagues to engage, advocate, facilitate, and assist efforts to build sustainable access to safe blood and blood products for the 80 percent of the world's population that right now gets less than half of the world's blood resources. Please visit us today for more information or to register be a part of the solution!

Contributed by John Donnelly, PhD, Global Healing ♦



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.

America's Blood Centers®
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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.

57th ABC Annual Meeting Registration Open

Registration is open for America's Blood Centers' (ABC) 57th Annual Meeting in Washington, D.C. March 23rd – 26th, 2019 at the Ritz-Carlton (Pentagon City). Don't miss an exclusive opportunity for blood center 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 & Celebration of Life Reception, the Scientific, Medical, and Technical Forum, Capitol Hill Visits, General Session, and the 22nd Annual *Awards of Excellence*. Please make your hotel reservations by March 1st to ensure best availability and the group rate. Click here for additional details. Contact Leslie Maundy for available sponsorship opportunities.

Registration Open for ABC Quality and Technical Workshop

Register today to take advantage of early bird discounts rates available through February 25th for the ABC Quality and Technical Workshop in Bloomington, Minn. at the Embassy Suites Bloomington. Reserve your room by April 5th to secure the group rate of $139. This year, ABC and Blood Centers of America, Inc. (BCA) are partnering to provide a multiday professional development and educational opportunity for quality and technical blood bank professionals. The BCA IRL Networking Conference/IRL Disease Symposium will take place on April 29-30th with the ABC Quality (QA) & Technical Directors (TD) Workshops following it on April 30th- May 2nd. Additional schedule and registration information are below:

- April 29: BCA IRL Networking Conference (*BCA members-only; BCA will provide registration information*)
- April 30: BCA IRL Disease Symposium (*All ABC members welcome; no registration fee; ABC will provide symposium registration*)
- April 30 – May 1: TD Workshop and Joint TD/QA Session
- May 2: QA Workshop

Registration & Fees:

- Breakfast, lunch, and two receptions included.
- ABC QA/TD Workshop Registration Fees: (Early Bird: mid-Feb-Feb 23/Regular: Feb 24-April 5)
    - TD or QA Workshop: $360 early bird/$420 regular
    - TD & QA Workshop: $435 early bird/$495 regular

RESEARCH IN BRIEF

Do ABO antigens on platelets matter? A multicenter analysis in kids. A pediatric study looks at the impact of ABO mismatching on outcomes from platelet transfusions from the Point Prevalence Study of Platelet Transfusions in Critically Ill Children (A.K.A. P3T). This was a pre-planned secondary analysis of a prospective observational study in children aged 3 days to 16 years, conducted at 82 sites in 16 countries during 2016-17. A single platelet transfusion per subject was classified according to the degree of ABO compatibility (matched, major or minor mismatch) and the association of the compatibility group with the post-transfusion increment was measured. Among 503 patients enrolled with full data, and after adjusting for the platelet dose, the median increments were statistically equivalent at 28,000/μL for 342 ABO identical transfusions, 26,000/μL for 133 with major incompatibility and 54,000/μL for 28 with minor incompatibility. There were no differences between patients with or without bleeding. Transfusion reaction rates were not affected by compatibility. The timing of platelet counts was not controlled, and paired transfusion results were not available, among other weaknesses, so the experimental design demands confirmation with a larger, more definitive study.

Citation: Nellis, M.E., Goel, R., Karam, O, *et al*. Effects of ABO Matching of Platelet Transfusions in Critically Ill Children. Ped. *Crit. Care Med*. 2019. doi: 10.1097/PCC.0000000000001779.

Cell salvage with autologous reinfusion for caesarean section—is it cost effective? A wide variety of patient blood management strategies have been developed in the aftermath of the recognition of HIV, Hepatitis C virus, and other infectious and noninfectious hazards as threats to transfusion safety. Intraoperative cell salvage is one of those strategies. Results from a randomized controlled trial in 26 obstetric units were used to construct a cost-effectiveness model to estimate the cost of intraoperative red blood cell (RBC) salvage per allogeneic transfusion avoided among women undergoing c-section. Eligible patients were women with "an identifiable increased risk of h[e]morrhage, defined as all emergency caesarean sections, where maternal or fetal compromise is suspected, and elective caesarean section for all indications other than maternal request or breech presentation." The underlying trial randomized these subjects to either cell salvage or standard care with the primary outcome measure being the proportion of women receiving donor blood due to bleeding. The analyses modeled that cost according to intention to treat, per protocol and restricted to emergency procedures, with the incremental cost effectiveness ratio for avoidance of allogeneic transfusion estimated at £8,110, £8,252 and £13,713 respectively. Long term health outcome and quality of life data were not available. In the conclusion the authors say that "under the conditions reported here, for a high-income country such as the UK, where donor blood is typically available, cell salvage is unlikely to be considered a cost-effective alternative to the provision of donor blood by the health service. However, in lower/middle-income countries where the provision of a safe and secure blood supply may be more challenging, the relative cost-effectiveness may be very different."

Citation: McLoughlin, C., Roberts, T.E., Jackson, L.J. *et al*. Cost-effectiveness of cell salvage and donor blood transfusion during caesarean section: results from a randomised controlled trial. *Brit. Med. J. Open*. 2019. doi: 10.1136/bmjopen-2018-022352.

Some closure on Hepatitis C virus (HCV)? The recognition of HCV as a serious threat to transfusion safety was a transformative event in transfusion medicine, the impact of which, in terms of clinical morbidity and mortality, exceeds that of HIV. Despite a raft of randomized, controlled trials demonstrating sustained cure of HCV infection by direct acting antivirals (DAAs), a recent Cochrane review considered the evidence that DAAs impacted long-term outcomes (e.g. decompensated cirrhosis and hepatocellular carcinoma) uncompelling. This challenges many clinician's impressions and was felt by many to represent an artefact of the duration of follow-up from the studies included in the review. A multicenter, prospective, risk-adjusted cohort study in almost 10,000 patients with a median follow up of 33.4 months is now published. It compares treated to untreated patients. The study demonstrates that exposure to DAAs is

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RESEARCH IN BRIEF (continued from page 5)

associated with a halving of the risk of mortality (adjusted hazard ratio 0.48, 95 percent CI 0.33-0.70), and a one third drop in hepatocellular carcinoma (0.66, 0.46-0.93). The risk of uncompensated cirrhosis was unchanged (1.14, 0.57-2.27). The authors note that the definitive trial, a randomized, placebo-controlled trial of treatment vs. none, is not ethical and encourage others to replicate their work and conclude that their results "support urgent treatment" of HCV-infected patients at risk for morbid outcomes. An editorial, lauding the conduct and results of the study, goes further, stating "they also provide the best evidence to date to support guidance documents that recommend direct-acting antiviral treatment for all patients with chronic HCV infection."

Citations: Jakobsen, J.C., Nielsen, E.E., Feinberg, J., *et al*. Direct-acting antivirals for chronic hepatitis C. *Cochrane Database Syst Rev*. 2017.

Carrat, F., Fontaine, H., Dorival, C. *et al*. Clinical outcomes inn patients with chronic hepatitis C after direct-acting antiviral treatment: a prospective cohort study. *The Lancet*. 2019.

Holmes, J.A., Rutledge, S.M., Chung, R.T. Direct-acting antiviral treatment of hepatitis C. *The Lancet*. 2019. ♦

RECENT REVIEWS

Organoids. "An organoid is a three-dimensional construct composed of multiple cell types that originates from stem cells by means of self-organization and is capable of simulating the architecture and functionality of native organs." This definition makes self-evident the potential of organoids in research designed to replicate the structure and function of tissues, organs, and whole organisms. Their ability to supplement or replace animal models is a particular advantage. A manuscript in the *New England Journal of Medicine* reviews their generation, summarizes selected available models, their current and potential applications including modeling normal physiology and disease states, screening candidate therapeutic drugs, testing cellular and gene therapy, and predicting drug toxicity. Limitations to be considered include the absence of standardized methods to produce and maintain organoids, but the authors are impressed that the rapid pace of recent progress can address such issues.

Citation: Li, M. and Izpisua-Belmonte, J.C. Organoids—preclinical models of human disease. *N. Engl. J. Med*. 2019. doi: 10.1056/NEJMra1806175. ♦

REGULATORY NEWS

The U.S. Food and Drug Administration's (FDA) Blood Products Advisory Committee (BPAC) will be holding their next meeting public meeting on March 20th and 21st. The meeting will take place at the FDA Campus in Silver Spring, Md. It will include discussions and strategy recommendations for reducing the risk of Zika virus transmission and weigh the need for universal testing of blood and blood components for Zika. The committee will also examine developments in men who have sex with other men (MSM) policies from around the world, HIV data from the Transfusion-Transmitted Infection Monitoring System, a proposed questionnaire study on HIV risk, and the potential for the use of pathogen reduction technology as an alternative to a time-based MSM deferral. The official meeting notice and additional information are available here.

(Source: Blood Products Advisory Committee Meeting Notice, 2/15/19)

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REGULATORY NEWS (continued from page 6)

The U.S. FDA's Center for Biologics and Evaluation and Research (CBER) and the Japanese Ministry of Education, Culture, Sports, Science and Technology are jointly hosting the 22nd U.S.-Japan Cellular and Gene Therapy Conference: "Adeno-associated Virus (AAV)-Mediated Gene Therapy. The Conference will take place on Thursday, March 7th at the FDA's White Oak Campus in Silver Spring, Md. and explore the advances, key achievements, and emerging issues surrounding AAV-mediated gene therapies. Attendance is free and open to the public without prior registration. A webcast is available for those unable to attend in-person. Additional information including the program are available on the FDA's website.

(Source: CBER Announcement 2/11/19)

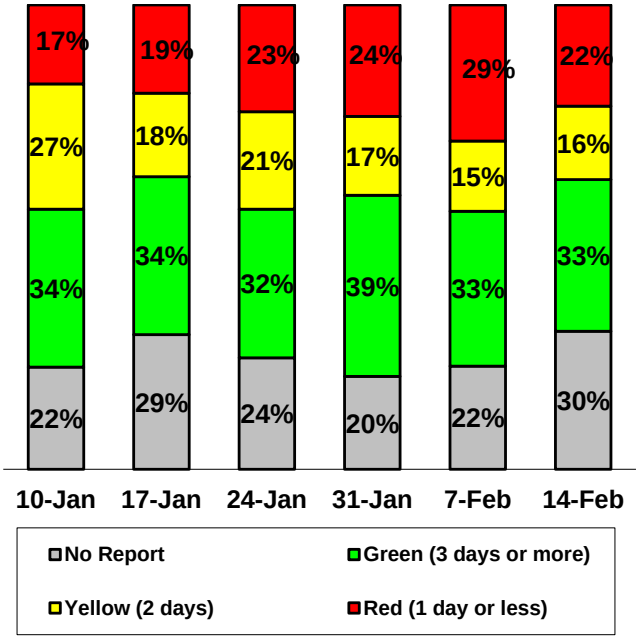
Recordings are now available from the FDA's November 2018 "Pathogen Reduction Technologies for Blood Safety" Workshop. The workshop included regulatory, blood center, hospital, manufacturers, and academic stakeholders and afforded them the opportunity to discuss the past, present, and future states of pathogen reduction technology. The recording is divided into a six-parts with parts 1-4 spanning day one and parts 5-6 day two:

- Part 1
- Part 2
- Part 3
- Part 4
- Part 5
- Part 6

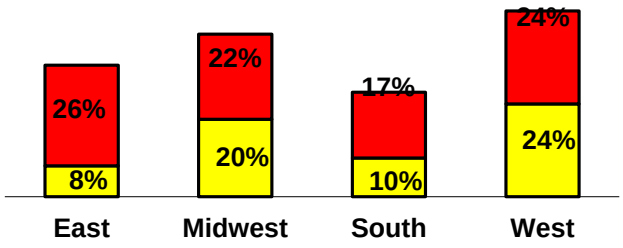
(Source: FDA Announcement, 2/8/19)

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

Total ABC Red Cell Inventory



Percent of Regional Inventory at 2 Days Supply or Less, February 14, 2019



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

WORD IN WASHINGTON

The House and Senate reached agreement and passed a spending bill to fund several federal agencies averting another government shutdown. President Trump signed the bill today (February 15th). It includes funding for the U.S. Food and Drug Administration, which would see more than a $260 million increase in funding levels from the previous fiscal year. The temporary stopgap spending bill agreed to last month that reopened all government agencies is set to expire February 15th.

(Source: *USA TODAY*, Congress passes spending bill to avoid shutdown, sends it to Trump for his signature, 2/14/19)

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!

MEMBER NEWS

Community Blood Center (Appleton, Wis.) recently received a visit from Rep. Glenn Grothman (R-6th) at its Oshkosh location. The Campbellsport native took the time to stop by for a tour of the facility and learned about the lifesaving work of Community Blood Center. He is pictured (left-center) with Jessica Radke (left), Sherry Meisenhelder (right-center), and John Hagins (right) of Community Blood Center.

(Source: Community Blood Center Announcement, 2/12/19)

SunCoast Blood Bank (Sarasota, Fla.) marked its 70th anniversary on February 14th. An official recognition ceremony will take place on February 21st as the blood bank will commemorate the occasion by celebrating and acknowledging the role that high-gallon donors, volunteers, and community supporters play in the organization's success. Both the Sarasota City Council and Sarasota County Commission will be in attendance and honor SunCoast through proclamations.

(Source: *Herald-Tribune*, SunCoast Blood Bank Celebrates 70 Years on Valentine's Day, 2/13/19)

New York Blood Center and the New York City Fire Department (FDNY) held the Honor Roll of Life Induction Ceremony on January 30th honoring 13 FDNY bone marrow donors as new inductees. This year is the 30th anniversary of the program that matches FDNY donors with transplant patients. Both Fire Commissioner Daniel Nigro and New York Blood Center President and CEO Christopher Hillyer, MD were on hand to recognize the inductees for their commitment to saving lives. "More than 200 FDNY members have answered the call for life-saving bone marrow donations – including several members who have donated to help others on multiple occasions – and thousands more stand ready to donate when a match is found," said Commissioner Nigro in a news release. "The FDNY's partnership with the New York Blood Center and the Be The Match Registry continues to provide our Department the opportunity to save lives well beyond the borders of the five boroughs. I encourage everyone to follow the Department's lead and sign up to potentially help save a life." According to the release, Dr. Hillyer added, "[t]he FDNY is an invaluable partner to New York Blood Center and we are privileged to have the opportunity to honor the dedication of those who have given of themselves in such an extraordinary manner. "The powerful donor-recipient reunions we're celebrating today are a reminder that all New Yorkers can step up and join the FDNY in helping to save lives."

(Source: FDNY News Release 1/31/19)

ABC 2019 Meetings & Workshops				
Meeting/Workshop	**Dates**	**Location**	**Hotel/Hotel Rate**	**Registration Dates & Fees**
Annual Meeting	March 23-26	Washington, DC	Ritz-Carlton (Pentagon City), $259/night	Register here by Mar. 1 $760
Technical & Quality Workshop	April 30-May 2	Bloomington, Minnesota	Embassy Suites, $139/night	Mid-Feb. (Early Bird TD or QA or TD + QA) $360/$435; Feb. 25-Apr. 5 (TD or QA or TD + QA) $420/$495
ADRP Annual Conference	May 14-16	Indianapolis, Indiana	Hyatt Regency, $179/night	Register here now Subscribers $575/$695 non-subscribers
Medical Directors Workshop	July 30 (precedes Summer Mtg)	Denver, Colorado	Grand Hyatt, $239/night	Late April - July 5 MD Workshop $435 MD+Summer $760
Summer Meeting	July 31-August 1	Denver, Colorado	Grand Hyatt, $239/night	Late April - July 5 Summer $655 Summer+MD $760

Notes:

For the most up-to-date information on all events, members of ABC may check the calendar on ABC's Member Site.

Non-members may attend all events; information will be updated on ABC's Public Site.

GLOBAL NEWS

Media reports from China claim that a batch of immunoglobulin produced by the Chinese Pharmaceutical maker Shanghai Xinxing Medicine Co. tested positive for HIV antibodies in the province of Jiangxi, according to *Bloomberg*. The test result prompted Chinese regulators to order an emergency recall and for production to cease, as more than 12,000 units of the potentially contaminated product may have been sold with some patients having already been treated with the potentially contaminated units. Officials have not yet stated how many patients were exposed to the potentially contaminated treatments. Tests performed by regulators in Shanghai were negative. A report in the *New York Times* attributed to China's official news agency Xinhua stated, "[i]n the spirit of being highly responsible to the people, the local authorities are responsible for conducting follow-up observations of relevant patients and cooperating with the State Drug Administration," said a report published Wednesday by Xinhua, China's official news agency.

(Sources: *Bloomberg*, China's Potential HIV Contamination Revives Drug Safety Fears, 2/11/19 *New York Times*, China Investigates Reports of H.I.V.-Tainted Blood Plasma Treatment, 2/6/19)

The European Blood Alliance (EBA) recently held its inaugural European Parliament round table. The meeting included 90 attendees and sought to call attention to the challenges of blood sustainability in Europe. Featured sessions examined whether blood is "good," recruiting and retaining a "robust" base of donors and non-remunerated blood donation. A complete report with presentations is available on the EBA website.

(Source: EBA Parliament Round table Report, 1/28/19)

CALENDAR

Note to subscribers: *Submissions for a free listing in this calendar 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

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

March 7. **22nd U.S.-Japan Cellular and Gene Therapy Conference, Silver Spring, MD.** 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 here.

April 23-24. **15th Annual FDA and the Changing Paradigm for HCT/P Regulation, Washington, D.C.** More details available here.

April 30-May 2. **2019 ABC Technical & Quality Workshop, Minneapolis, Minn.** More details available here.

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.

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

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

Chief Medical Officer (America's Blood Centers). Reporting to the Chief Executive Officer (CEO), the Chief Medical Officer (CMO) is responsible for implementing strategies and tactics, consistent with the best scientific and medical evidence and regulatory requirements, that support America's Blood Centers' (ABC) mission, maintain our values, and realize our vision. The CMO works as part of the ABC Senior Executive Team (SET) to communicate ABC's issues to members, regulators, legislators, and external groups and mobilizes ABC members and professional staff to achieve the strategic goals of the organization. The CMO serves as a public advocate for ABC, maximizing the organization's public presence as a national leader in shaping the future of blood banking, transfusion medicine, and cell therapies. Responsibilities: Represent independent non-profit community blood centers on scientific, medical, and technical matters as well as donor and patient safety concerns before federal agencies, industry and other business partners, allied domestic and international organizations, scientific societies, the media, and the public. Advise the CEO, ABC Board of Directors, and ABC member centers on medical, scientific, technical, safety, and policy issues germane to blood banking. Stay appraised of pertinent regulatory developments and develop effective strategies to achieve success on regulatory issues affecting ABC members. Education & Experience: Medical Degree required. U.S. medical license required with board certification in a medical specialty. Board certification in pathology, transfusion medicine, hematology, or infectious disease preferred. Ten or more years' experience related to blood banking or transfusion medicine. Three or more years' experience with healthcare and/or blood banking issues at a national level via committee work, offices held, or other appropriate experience. Administrative experience in a leadership role preferred. Please click here to view the full job description. To apply, please submit a resume and cover letter to Kate Fry. Applications must be received by March 1st.

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POSITIONS (continued from page 11)

Immunohematology Reference Laboratory Assistant Director (Hoxworth Blood Center). The ideal candidate will have five years' experience and SBB (ASCP) at the supervisor level or above in the areas of immunohematology reference testing and/or transfusion service. The Assistant Director is responsible for providing leadership, expertise and oversight with emphasis on customer interactions with our 24 hour associated labs and regional transfusion services, coordinating development, training, and managing resources. The Assistant Director assures that departmental processes, procedures, and quality control activities are compliant with accreditation and regulatory standards. Successful candidate will be responsible for all testing, technical operation, and standard supervisory functions. Other duties include developing/managing contracts and bids, budget development and management, management of a licensed regional antibody registry, relevant projects, training and education of selected transfusion service technologists, bachelors/masters' students and post-doctoral physicians/scientists. Apply – Req ID #35809 https://www.uc.edu/hr/careers.html

ORISE Fellow (Blood, Tissue, and Tick-Borne Disease Fellowship, Office of HIV/AIDS and Infectious Disease, Office of the Assistant Secretary for Health, U.S. Department of Health and Human Services, Washington D.C. -- DHHS-OASH-2012-0010). A research and health policy opportunity is available in the Office of HIV/AIDS and Infectious Disease within the Office of the Assistant Secretary for Health (OASH) of the U.S. Department of Health and Human Services (DHHS). The selected participant will assist with program management for research projects currently underway within the division relating to U.S. blood, tissue safety and availability, and tick-borne diseases. Opportunities may include: Project management for studies looking at topics relating to blood and tissue collection and utilization, transfusion-transmissible infections in blood donors, and infectious disease markers in potential organ and tissue donors. The Research Participation Program for DHHS is administered by the Oak Ridge Institute for Science and Education (ORISE). The initial appointment is for one year but may be renewed upon recommendation of OASH contingent on the availability of funds and project needs. The participant will receive a monthly stipend based on educational level and experience. Qualifications: A master's degree in public health, knowledge of the regulatory requirements for blood and tissue transplantation and knowledge of tick-borne diseases. Click here to view the full job description. To be considered, send a current CV/resume to the attention of Tasha Powell. Please reference DHHS-OASH-2012-0010 in all communications.