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ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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2019 #17 **May 24, 2019**

INSIDE:

FDA Report: TACO #1 Cause of Reported Transfusion-Related Death

The U.S. Food and Drug Administration's (FDA) Center for Biologics Evaluation and Research (CBER) released its report for fiscal year (FY) 2017 on fatalities reported to FDA following blood collection and transfusion. The report showed that transfusion associated circulatory overload (TACO) is the most commonly reported cause of transfusion-related death. TACO accounted for 30 percent of the reported transfusion-related deaths in FY 2017 followed by transfusion-related acute lung injury (TRALI), which was suspected in 24 percent of reported deaths. A team of CBER medical officers reviews each case to assess the relationship, if any, between the blood donation or transfusion and the reported fatality.

During FY 2017, CBER received 81 fatality reports. Of these, 67 were "potentially associated" transfusion recipient deaths and 14 were "potentially associated" with donation. Of the 67 "potentially associated" transfusion recipient fatalities, 37 (55 percent) received the classification of definite/certain, 7 (11 percent) were classified as doubtful/unlikely/improbable or not determined/assessable/evaluable, and 23 (34 percent) were designated as ruled out/excluded.

FDA emphasizes that the "blood supply is safer today than at any time in history" due to advances in donor screening, improved transfusion medicine practices, and automation in data systems. The number of deaths following a transfusion remains low in comparison to the number of transfusions.

TACO accounted for 32 percent of reported transfusion-related fatalities reported in combined fiscal years 2013-2017. Other reported causes of transfusion-related fatalities during that time period included:

- TRALI (30 percent)
- Microbial Contamination (12 percent)
- Hemolytic transfusion reactions (18 percent overall; 11 percent due to non-ABO incompatibilities; 7 percent due to ABO incompatibilities);
- Anaphylaxis (6 percent); and
- Hypotensive Reaction (2 percent).

In FY 2017, there were 12 fatalities reported following source plasma donation, and two following whole blood donations. In six of the 12 reported source plasma donor

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TACO #1 Cause of Transfusion-related Death (continued from page 1)

deaths and one of the whole blood donor deaths, donation could not be ruled out as contributing to the donors' deaths. The full report is available on the FDA's website.

Table 3: Transfusion-Associated Fatalities by Complication, FY2013 – FY2017

Complication	FY13 No.	FY13 %	FY14 No.	FY14 %	FY15 No.	FY15 %	FY16 No.	FY16 %	FY17 No.	FY17 %	Total No.	Total %
Anaphylaxis	-	0%	2	7%	2	5%	5	12%	3	8%	**12**	**6%**
Contamination	5	13%	1	3%	5	14%	5	12%	7	19%	**23**	**12%**
HTR (ABO)	1	3%	4	13%	2	5%	4	9%	1	3%	**12**	**7%**
HTR (non-ABO)	5	13%	4	13%	4	11%	1	2%	6	16%	**20**	**11%**
Hypotensive Reaction	-	0%	1	3%	1	3%	1	2%	0	0%	**3**	**2%**
TACO	13	34%	5	17%	11	30%	19	44%	11	30%	**59**	**32%**
TRALI*	14	37%	13	43%	12	32%	8	19%	9	24%	**56**	**30%**

Note: FY2015-FY2017 only includes cases with an imputability of *Definite/Certain, Probable/Likely*, or *Possible*, and FY2013-FY2014 only include cases classified as transfusion-related.
*FY2013-FY2017 numbers combine both *TRALI* and *Possible TRALI* cases [22,23]

Courtesy of Fatalities Reported to FDA Following Blood Collection and Transfusion Annual Summary for Fiscal Year 2017

(Source: Fatalities Reported to FDA Following Blood Collection and Transfusion Annual Summary for Fiscal Year 2017, 5/8/18) ♦

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.

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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WORD IN WASHINGTON

The House of Representatives' appropriations subcommittee with FDA jurisdiction passed its fiscal year 2020 Agriculture, Rural Development, Food and Drug Administration, and Related Agencies funding bill. It includes $24.3 billion in total discretionary funding. The FDA would receive $3.26 billion in funds, a portion of which would be used for "new initiatives to revolutionize the safety of the nation's blood supply," according to a committee news release. America's Blood Centers previously joined AABB and the American Red Cross in sending joint letters of support to the House and Senate Appropriations Committees in support of funding for pathogen reduction technologies (PRT) included in the White House's fiscal year 2020 budget proposal. The letters describe the potential for PRT to improve patient safety and increase the pool of eligible donors. "This bill reflects our commitment to strengthening rural communities, expanding access to quality, affordable food, and protecting the health of individuals and communities," said House Appropriations Committee Chairwoman Rep. Nita Lowey (D-N.Y.) "It provides increased funding for medical product and food safety activities, because public health is paramount."

(House Appropriations Committee News Release, 5/22/19)

INFECTIOUS DISEASE UPDATES

MALARIA

The Centers for Disease Control and Prevention's (CDC) Morbidity and Mortality Weekly Report (MMWR) published on May 17th the "Malaria Surveillance-2016" summary. U.S. malaria surveillance is conducted to identify episodes of local transmission and to guide recommendations for travelers. CDC recorded 2,078 cases of malaria with onset of symptoms in 2016, including 2,056 cases classified as imported. There was one case caused by transfusion-transmission, the first since 2011. "Unfortunately, 5 days passed from when the recipient first developed fever until receipt of a malaria diagnosis, and the already ill patient experienced severe malaria and endured an extended recovery process…In the 2016 case, the identified donor lived in sub-Saharan Africa for approximately 17 years and reported having malaria regularly during that time. However, the donor had subsequently lived in the United States for approximately 16 years, and despite frequent travel for work and to visit friends and relatives in Africa, most recently in early 2015, her donation was accepted in accordance with the policy because it had been >1 year since she had last traveled to an country with endemic malaria, she was asymptomatic, and her last malaria illness was >15 years earlier." The total number of malaria cases represents an increase from the 1,524 cases reported in 2015.

(Source: CDC MMWR 2016 Malaria Surveillance-2016 Summary, 5/17/19)

MEASLES

CDC announced 41 new cases of measles in the past week bringing the total number of confirmed cases to 880 in 24 states in the U.S. according to a report from the Center for Infectious Disease Research and Policy (CIDRAP) at the University of Minnesota. Measles had been "declared eliminated" by CDC in 2000. However, an outbreak this year in the U.S. has occurred due to a combination of unvaccinated individuals and travel abroad with 32 of the new cases occurring in New York City. "These outbreaks are linked to travelers who brought measles back from other countries such as Israel, Ukraine, and the Philippines, where large measles outbreaks are occurring" said a CDC official to CIDRAP, referencing 10 outbreaks (which are classified as three or more cases) across the U.S. The agency describes measles as "a highly contagious, acute viral illness characterized by fever and a maculopapular rash; complications include pneumonia, encephalitis, and death."

(Sources: CIDRAP, CDC: 41 new measles cases in US, 880 total, 5/20/19; CDC MMWR, 5/3/19)

RESEARCH IN BRIEF

First Nationally Representative Study Finds Iron Deficiency in Female Adolescents and Adults- Calls for Policy Change. A study appearing in *Transfusion* examined the association of blood donation and iron deficiency in a national sample among adolescent and adult females in the U.S.

Teen donors aged 16 to 18 accounted for an estimated 1.5 million blood donations in the U.S. in 2015 according to figures from the National Blood Collection and Utilization Survey. While donating blood remains safe, the authors noted that the potential for increased risk of iron deficiency in young females may stem from "typically hav[ing] lower total blood volumes[;] a greater proportion of hemoglobin (Hb) and Hb-bound iron is lost following whole blood donation. Premenopausal females may also be at a greater risk of postdonation iron deficiency due to lower baseline iron stores and ongoing blood loss associated with menstruation."

Investigators used data from the 1999–2010 National Health and Nutrition Examination Survey (NHANES) in a cross-sectional analysis. It included females aged 16-49 who reported their blood donation history in the preceding year and had serum ferritin (SF) measurements with adolescents (16–19 years; n = 2,419) and adults (20–49 years; n = 7,228). "Mean SF levels (ng/mL) were lower in blood donors compared to nondonors among adolescents (21.2 vs. 31.4; $p < 0.001$) and among adults (26.2 vs. 43.7; $p < 0.001$). The prevalence of absent iron stores (SF < 12 ng/mL) was higher in blood donors compared to nondonors among adolescents (22.6 percent vs. 12.2 percent; aPR = 2.03 [95 percent confidence interval (CI) = 1.45–2.85]) and among adults (18.3 percent vs. 9.8 percent; aPR = 2.06 [95 percent CI = 1.48–2.88]). Additionally, the prevalence of iron deficiency anemia (SF < 26 ng/mL and hemoglobin < 12.0 g/dL) was also higher in blood donors compared to nondonors among adolescents (9.5 percent vs. 6.1 percent; aPR = 2.10 [95 percent CI = 1.13–3.90]) and among adults (7.9 percent vs. 6.1 percent; aPR = 1.74 [95 percent CI = 1.06–2.85])."

The authors concluded that to the best of their "knowledge, this is the first nationally representative study to demonstrate" an increased prevalence of iron deficiency within female blood donors when compared to nondonors. It was noted that almost half of the female adolescent donors exhibited signs of iron-deficient erythropoiesis (SF < 20 ng/mL) and approximately "one in five had evidence of absent iron stores (SF < 12 ng/mL)." Young female donors had a higher prevalence of iron deficiency and lower SF levels than adult females in both donors and nondonors. The authors emphasized that "collectively, these data highlight the vulnerability of female adolescents to blood donation–associated iron deficiency" and called for "a public health response to be considered in the development of national regulations or accreditation standards."

Citation: Patel, E.U., White, J.L., Bloch, E.M., *et al*. Association of blood donation with iron deficiency among adolescent and adult females in the United States: a nationally representative study. *Transfusion*, 2019.; Doi:10.1111/trf.15179.

Contributed by Richard Gammon, MD, Medical Director at OneBlood

BRIEFLY NOTED

The *New York Times* recently published an article on the importance of having a diverse base of blood donors supplying blood products for patients in need. "[T]here is a shortfall between ethnic minority patients who need blood, and ethnic minority donors." It highlights the significance and uniqueness of blood types from various ethnicities in maintaining the nation's blood supply. "[I]t's now scientifically established

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BRIEFLY NOTED (continued from page 4)

that blood can be racially or ethnically specific. Most people know about the eight major blood groups: A, B, AB, and O, each of which can be positive or negative (the Rh factor). These are determined by genes, and what group you are depends on what combination of proteins and sugars — antigens — are on the outside of your red blood cells. The International Society of Blood Transfusion lists 360 known antigens, but the combinations are infinitely more...A successful blood transfusion relies on sameness." Additionally, the article mentions the story of Zainab Mughal, a 3-year-old with an extremely rare blood type that lead ABC member OneBlood to conduct an international search for donors to provide the lifesaving blood products needed in her battle with neuroblastoma. It attempts to dispel some "myths" about blood donation while noting the sensitivities to specifically recruiting or targeting donors of similar ethnic backgrounds, "given sensitivity about whether race is skin-deep and whether differences should be highlighted at all, if equality is ever to be reached. But the startling truth about blood is that acknowledging, seeking, and celebrating its differences can tip the balance between life and death for people who need it."

(Source: *New York Times*, The intersection of race and blood, 5/14/19)

The National Academies of Sciences Engineering and Medicine (NASEM) Committee on Addressing Sickle Cell Disease: A Strategic Plan and Blueprint for Action will meet in an open session in Washington, D.C. on June 3rd at 1:00 p.m. The meeting will feature experts from the sickle cell disease community who will discuss delivering healthcare to sickle cell patients, the latest innovative therapeutic treatments, and the perspective of patients undergoing such treatments. A webcast of the event is available. Additional resources from previous meetings can be found on the NASEM website. The full agenda for the June 3rd meeting is forthcoming.

(Source: NASEM Announcement, 5/1/19)

REGULATORY NEWS

The U.S. Food and Drug Administration (FDA) published four final guidances on regenerative medicine products this week. The guidances form a comprehensive framework "to support and expedite the development of regenerative medicine products, including human cells, tissues, and cellular and tissue-based products (HCT/Ps)" according to FDA. A listing of the guidances are below:

- Regulatory Considerations for Human Cell, Tissues, and Cellular and Tissue-Based Products: Minimal Manipulation and Homologous Use;
- Same Surgical Procedure Exception: Questions and Answers Regarding the Scope of the Exception;
- Expedited Programs for Regenerative Medicine Therapies for Serious Conditions; and
- Evaluation of Devices Used with Regenerative Medicine Advanced Therapies.

(Source: FDA Announcement, 5/21/19)

Upcoming ABC Webinars – Don't Miss Out!

- **Update on Biological Product Deviation Reports Webinar** – June 18th. Additional details forthcoming!
- **QA Education Webinar – Change Management** – July 16th. Additional details forthcoming!
- **SMT Journal Club Webinar** – August 19. Additional details forthcoming!

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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.

Request for ABC Member Fixed Blood Collection Sites

All ABC member blood centers are asked to submit an updated listing of each of their fixed blood collection sites. ABC is in the final stages of redesigning its public website and would like to ensure that the listing of each members' facilities are accurate. To assist us in doing so, we are asking ABC member blood centers to review ABC's current listings and provide any changes or updates to your fixed collection sites, including the name, complete address, phone number, and website URL. Please update your listings by Wednesday, May 29th. Additional information can be found in MCN 19-038. Please contact please contact Leslie Maundy with any questions.

(Source: MCN 19-038, 5/16/19)

New ADRP Board Announced

Lisa Entrikin

Lisa Entrikin of Rock River Valley Blood Center (Rockford, Ill.) has assumed the role of ADRP Advisory Board President. She succeeds Marie Forrestal of New York Blood Center whose term as ADRP President ended following the 2019 ADRP Annual Conference. ABC and its board of directors thanks Ms. Forrestal for her leadership and service to ADRP and its subscribers. The ADRP Advisory Board for 2019-2020 is:

- President Lisa Entrikin - Rock River Valley Blood Center
- Past President Marie Forrestal - New York Blood Center
- Vice President Jennifer Charbonneaux - Vitalant
- Vice President Theresa Pina - Gulf Coast Regional Blood Center
- Secretary Kelly High - American Red Cross
- Treasurer Amanda Farrell- Unyts
- Patti Nagle – American Red Cross
- Asuka Burge – New Zealand Blood Service
- Pat Michaels - OneBlood
- Shelly Muckerheide – Community Blood Center (Kansas City, Mo.)
- Brandye Norman – Carter BloodCare
- Stephanie Nunez-Leos – Vitalant
- Hunter Shaffer – Blood Centers of America, Inc.
- Elizabeth Waltman – South Texas Blood and Tissue Center
- Tammy Whiteley – Oklahoma Blood Institute
- Evangelina Zavala - Versiti

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INSIDE ABC (continue from page 6)

ABC Technical and Quality Workshop in Bloomington, MN.

The 2019 America's Blood Centers (ABC) Technical and Quality Workshop drew attendees from ABC member blood centers across the country for this biennial event known for providing a great collaboration and networking opportunities for blood center professionals. ABC partnered with Blood Centers of America, Inc. (BCA) to offer a multi-day educational event which began with the BCA IRL Networking Conference/IRL Disease Symposium. Attendees heard presentations from experts on current issues and best practices that included the American Rare Donor Program (ARDP), out of hospital transfusions, and redefining quality's role in the blood center. The workshop also featured roundtable discussions and networking opportunities, where attendees shared experiences and common challenges in areas such as the use of low titer O whole blood and maintaining quality in an unpredictable environment.

The ABC portion of the meeting kicked off in the afternoon of April 30th with the Technical Director's Workshop. It opened with a series of sessions on hot topics for the blood industry. Leslie Johns, director of Technical Services at Rock River Valley Blood Center and chair of the Technical Director's Workshop Planning Committee, welcomed the attendees and introduced Associate Medical Director of Innovative (IBR) Nancy Van Buren, MD who discussed identifying "Strategies to Promote Hospital Adoption of Antigen-matched RBCs for Long Term Transfusion Therapy."

Dr. Van Buren's presentation was followed by a session on "Catching Up with the American Rare Donor Program". Connie Westhoff, PhD, executive scientific director of Immunohematology and Genomics at New York Blood Center, updated the audience on the Enhanced National Blood Exchange. Sue Johnson, director of clinical education at Versiti and Sandra Nance, senior director of the American Rare Donor Program (ARDP) then discussed in detail the role and importance of ARDP as well as the process to obtain rare blood. OneBlood's Reference Laboratory Director Nancy Benitez capped the session with a case study presentation and demonstrated how the process was recently put to the test with "The Antibodies Do Not Read Books-A Very Special Case."

From left to right: Sandra Nance, Nancy Benitez, Sue Johnson, Connie Westhoff

The afternoon ended with lively roundtable discussions on several key issues for the technical directors that included:

- use of low titer O whole blood in massive traumas,
- implementing FDA guidelines on a tight timeline,
- innovative ways to fill challenging employee positions, meeting customer needs for blood products, and
- transfusion service challenges.

The Technical Director Workshop continued the next morning with a business-focused presentation by Rawlinson Isaac, executive director of Clinical Services at New York Blood Center. Mr. Isaac discussed the uses for HPC/MNC and its potential for revenue generation in blood centers. The workshop's focus then switched with a talk on "PrEP and Antiretroviral (ARV) Therapy in the Donor Room-Do We Care?" presented by Louis Katz, MD former chief medical officer of ABC. Dr. Katz reviewed the current understanding of the impact of ARVs on donor screening tests as well as the interventions under consideration if PrEP is identified as impacting blood safety. Next, with platelet safety being a very hot topic among ABC members for the past few years, Lori Daane, PhD, director of Scientific Affairs at bioMérieux, discussed

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INSIDE ABC (continued from page 7)

the "Operational Flexibility for Testing 5 and 7- Day Platelets using the BacT/Alert System Culture Bottles." The morning ended with Camille van Buskirk, MD, medical director of the Transfusion Laboratory at the Mayo Clinic updating the attendees on new and upcoming blood products, considerations for their clinical use, and adoption by blood centers and hospitals.

The Joint Session with the technical and quality directors began the afternoon with a presentation on the "Status of the Blood Industry" by ABC CEO Kate Fry, MBA, CAE. Ms. Fry also shared with the audience ABC's advocacy work and its benefits for ABC member blood centers. Her presentation was followed by Blood Bank of Delmarva's Margaret Russ, quality associate II and Kristin Frederick, director of Laboratories, who opened the ensuing session, "Next Generation Business Partner Models…Growing Collaboration Between Operations and Quality," with an introductory presentation on the partnership they have established at their blood center. The attendees then broke into roundtables to discuss strategies they have used to partner and thereby improve collaboration and productivity in their blood centers.

From left to right: Courtney Hopkins, DO; Margaret Hannan, Nanci Fredrich, RN, and Kristin Frederick

The Joint Session then turned its attention to another hot topic: out of hospital transfusions. Four speakers from ABC member blood centers shared their experiences including challenges with providing blood outside of the hospital setting to meet patient needs. Courtney Hopkins, DO, senior chief medical officer from Vitalant, Nanci Fredrich, RN, transfusion safety & blood management officer from Versiti, and Blood Bank of Delmarva's Margaret Hannan, director of Quality Systems Management and Kristin Frederick, director of Laboratories delivered eye-opening and informative presentations on the various organizations performing the transfusions and also covered the regulatory requirements, legal aspects, challenges, and blood centers' roles in supporting these initiatives.

Contributed by Toni Mattoch, Director of Quality Services at ABC

Please Note: The workshop will be reported on in two parts. The remaining portion of the meeting will be covered next week. ♦

ABC 2019 Meetings & Workshops

Meeting/Workshop	Dates	Location	Hotel/Hotel Rate	Registration Dates & Fees
Medical Directors Workshop	July 30 (precedes Summer Mtg)	Denver, Colorado	Grand Hyatt, $239/night	Late May- July 5 MD Workshop $435 MD+Summer $760
Summer Summit	July 31-August 1	Denver, Colorado	Grand Hyatt, $239/night	Late May - July 5 Summer $655 Summer+MD $760

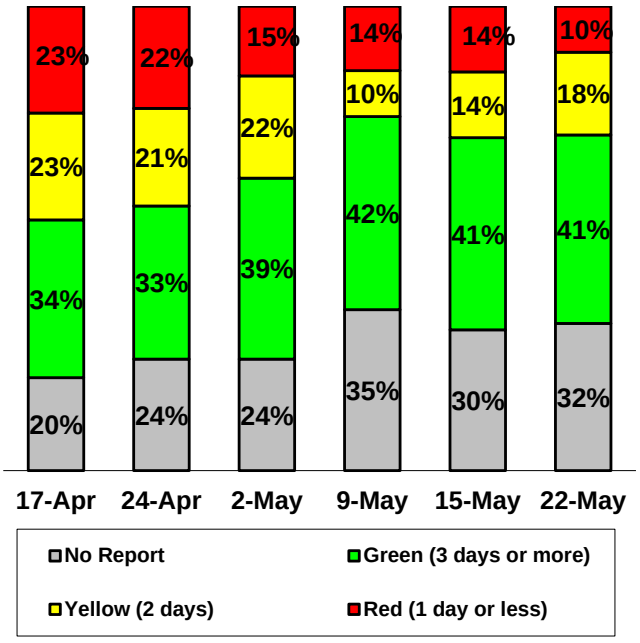
Notes:

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

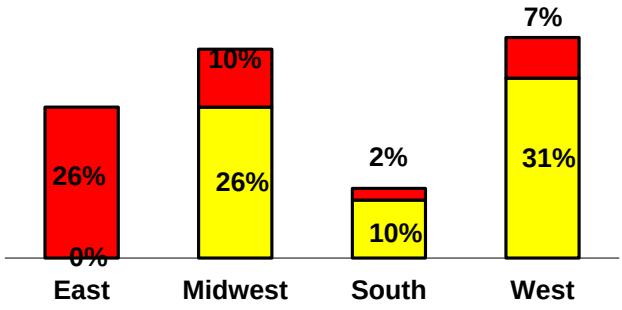
Non-members may attend all events; information will be updated on ABC's Public Site.

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

Total ABC Red Cell Inventory



Percent of Regional Inventory at 2 Days Supply or Less, May 22, 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

COMPANY NEWS

OrSense recently received 510(k) clearance from the U.S. Food and Drug Administration (FDA) for the NBM200 hemoglobin measurement device. It is the first non-invasive hemoglobin measurement device that has been approved by the FDA for use in U.S. blood centers and can measure the hemoglobin of donors without pricking their fingers. "This new regulatory clearance will be welcome news for both blood donors and blood collection centers," said OrSense President Chip Neff in a news release. "The 'finger stick' is often mentioned by donors as the most painful part of the blood donation process. The OrSense NBM200 hemoglobin measurement is painless and represents a win/win for blood donors and blood bank organizations; it makes the blood donor experience more comfortable and provides for more efficient, lower cost operations for blood collection centers. The OrSense NBM200 will change the way pre-donation hemoglobin is measured by the U.S. blood bank industry." The device has been in use by ABC member OneBlood for more than two years under an investigational new drug application (IND) from the FDA but has been incorporated into the predonation process at blood and plasma centers internationally since 2014.

(Source: OrSense News Release, 5/14/19)

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

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

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!

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

Medical Director. If you have a passion to join a team that is providing cutting-edge medical expertise in the areas of blood banking, transfusion medicine, immunohematology reference laboratories, therapeutic apheresis, cellular therapy and research, consider joining OneBlood as a **Medical Director.** Qualified candidates should possess a minimum of three years' experience and a M.D. or D.O. degree with board certification in Clinical Pathology, Internal Medicine or Hematology and subspecialty board certified in Blood Banking/Transfusion Medicine by a Board Registry recognized by the American Board of Medical Specialties. Appropriate state licenses will be required as needed. Must meet the eligibility requirements to obtain appointments at hospitals served by OneBlood. This position includes the option of free medical coverage with a competitive benefit package, 403(b) retirement plan with company contribution PLUS a company match, company vehicle lease/allowance, paid holidays, and much more. This position will be based out of the Jacksonville, Florida area, with some of the most gorgeous beaches in the nation! If you want to join our life saving mission and team of dedicated employees, visit our *Careers* page at www.oneblood.org to learn more. OneBlood, Inc., a proven leader in blood banking, is an Equal Opportunity Employer/Vet/Disability.

Laboratory Services Manager. LifeSouth Community Blood Centers is currently seeking a skilled individual for a Laboratory Services Manager position in our Immunohematology Reference Laboratory in **Gainesville, FL**. This position is responsible for overseeing all laboratory testing activities performed in the LifeSouth facility. This includes meeting the needs of customers for accurate, timely and high-quality immunohematology reference laboratory testing and services. This position is also responsible for compliance with established laboratory policy and with applicable governmental regulatory requirements from CLIA, FDA, AABB, HIPAA and state licensing regulations. Bachelor's degree in clinical laboratory, chemical or biological science required. SBB Certification required. Five years of clinical laboratory experience at a licensed, certified or accredited facility required. Previous management experience required. Master's degree may compensate for less experience. Relocation expenses negotiable. Background check and drug test required. Equal Opportunity/Affirmative Action Employer/DFWP/Tobacco Free. VEVRAA Federal Contractor. Follow this link to apply: https://lifesouth.careerplug.com/jobs/901033/apps/new.

Clinical Lab Supervisor (San Francisco, CA). Since 1941, Vitalant has proudly served as a leader in the blood banking industry. We are a globally-recognized leader in blood transfusion medicine. Requirements: Bachelor's degree. Must satisfy CLIA requirements for High Complexity Testing. Certification as a Medical Technologist

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POSITIONS (continued from page 10)

or Specialist in Blood Banking (SBB) by a recognized certifying organization. Seven years clinical laboratory testing experience. Two years supervisor experience required. Two years IRL experience preferred. Apply here. EOE

Senior Clinical Lab Specialist (San Francisco, CA; Req: 190688). Vitalant exists to help people realize their life-transforming potential by offering convenient blood donation opportunities and sharing our expertise in transfusion medicine. Under minimal supervision, this position is responsible for performing routine testing of biological specimens and reviewing test results and quality assessment data and responsible for providing skilled technical support in the laboratory. Requirements: Bachelor's degree required. Must satisfy CLIA requirements for High Complexity Testing required. Certification as a CA Medical Technologist required. Specialist in Blood Banking (SBB) by a recognized certifying agency preferred. Five years clinical laboratory testing experience required. One-year IRL experience preferred. For more information or to apply, please visit here. EOE

Executive Director. ADRP, an International Division of America's Blood Centers (ABC), is seeking a part-time Executive Director. The position is a senior management role and will provide oversight and leadership to all aspects of ADRP, including membership, communications and marketing, events, and education. The position will report directly to the ABC Chief Executive Officer, providing strategic guidance on emerging trends in the blood banking industry to help shape strategies that promote growth and drive value. Primary Responsibilities: Provide organizational oversight, including support for the ADRP Advisory Board and ADRP committees, management of ADRP in accordance with an annual budget, and alignment of ADRP with other ABC programs and services. Promote ADRP through a variety of communication platforms, including a monthly Newsletter, various email communications, and the ADRP website. Educational Requirements: Bachelor's required. Experience, Knowledge, Skills and Abilities: Five plus years of related experience in program development and management, event planning, communications and/or marketing. Experience in the blood banking industry preferred, but not required. Strong written and oral communication and interpersonal skills. Strong planning and organizational skills, detailed oriented. This is a remote position. Click here to view the full job description. Interested applicants should send a cover letter and resume to careers@americasblood.org.

Assistant Director of Clinical Business Development. Stanford Blood Center (SBC), a subsidiary of Stanford Health Care, is focused on connecting our communities to provide hope for healing. We lead the fields of transfusion and transplantation medicine by advancing science and technology. For more information, visit http://blood-center.stanford.edu/. We are seeking an Assistant Director of Clinical Business Development to improve SBC's market position and achieve financial growth and service excellence for SBC's core business units. Core Duties: In coordination with operational departments, serve as a primary service relationship contact for customers, current and prospective. Develop a growth strategy focused both on financial gain and customer satisfaction. Set and manage customer expectations, communicate strategic plans and status. Screen and identify potential business deals by analyzing market strategies, deal requirements, potential, and financials. Close new business deals by coordinating requirements; developing and negotiating contracts; integrating contract requirements with business operations. Manage customer relationships through regular meetings and maintaining a customer database. Capture customer feedback to identify areas for improvement and opportunities for revenue growth and ensure customer satisfaction and retention. Qualifications: Four-year college degree required; MBA or other advanced degree desired. For a complete job description and to apply , please visit https://www.stanfordhealthcarecareers.com/, and reference job #50676.

Medical Director. Provide transfusion medicine (TM) clinical care at Heartland Blood Center (HBC) and its associated hospitals in the scope noted below, as well as effort in leadership of the Immunohematology Reference Laboratory (IRL) as Medical Director at HBC/Versiti.

Key components of this position would comprise TM consultation and oversight of blood management at HBC and Versiti partner hospitals, as well as participation in educational initiatives and clinical/applied research within both Versiti blood centers and their affiliated health systems. Primary Responsibilities: Oversees blood donor center collections in the Chicagoland and various areas of Indiana. Provides medical direction, including compliance with local, state, and federal regulations and accreditation agencies, for blood center and transfusion services at Versiti affiliated hospitals in Illinois and Indiana. IRL Medical Director for HBC, providing oversight of IRL laboratory staff technical duties and working with Versiti and HBC laboratory management to provide education and skill advancement. Education and Licenses: M.D. or D.O. Degree. Board certified in pathology (AP/CP or CP only), internal medicine, or pediatrics (with subspecialty boards in hematology). Board certified/board eligible in Blood Banking/Transfusion Medicine (American Board of Pathology—ABP). Current or eligible for medical licenses in Illinois, Wisconsin, Indiana, Michigan and Ohio. Experience/Certifications: Demonstrated experience in both 1) pathology/laboratory medicine or hematology and 2) transfusion medicine.

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POSITIONS (continued from page 11)

Ability to write lectures and articles using original or innovative techniques or styles; excellent presentation skills with capacity to present to varied audiences. Click here to view the full job description and to apply..