

2019 #25

July 26, 2019

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Please Note: The *ABC Newsletter* will not be published on August 2nd. We will resume regular publication on August 9th. Thank you for your continued interest.

UK Analysis Reviews Adverse Outcomes in Manual Versus Automated ABO/D Grouping

Researchers in the United Kingdom (UK) reported their findings of a retrospective analysis that explored the role of manual interventions in ABO/D blood grouping errors in comparison with automation. They examined ABO/D blood grouping data from the Serious Hazards of Transfusion (SHOT), which tracks serious adverse events and reactions from blood and blood component transfusions. The data from January 2004 through December 2016 that was the focus of this analysis included reports to SHOT, “where ABO/D grouping errors led to the transfusion of an incorrect blood component.”

The authors of the analysis reviewed 17,901 reports that included adverse events and outcomes, of which 158 are attributed to ABO/D blood grouping errors. They discovered that no errors were reported with “fully automated processes,” while manual intervention did occur in 93 percent of the grouping errors (148 reports), as 10 cases did not specify a cause. “Interpretation errors occurred in 86 (58 percent) of 148 cases, and [t]ranscription errors were made in 42 (28 percent).” ABO-incompatible transfusions occurred in 21 of the 148 errors (14 percent) including one death. Of the 50 group D errors, 35 (70 percent) involved D-positive red blood cells being transfused to D-negative women.

The authors describe manual blood grouping as “inherently unsafe” due to the increased potential for interpretation and documentation errors unless the lab is “appropriately resourced including full automation and safe laboratory practice for 24 [hours] a day, 7 days a week (24/7).” In conclusion, they suggest that manual testing should be avoided where possible with any results from manual interventions being confirmed through automated techniques with backup processes available at all times. “SHOT data confirm that manual interventions are prone to human error, especially in transcription and interpretation, and demonstrate a continuing need for appropriate serological knowledge and understanding by transfusion laboratory staff to underpin safety provided by automation and information technology.”

Citation: Mistry, H., Poles, D., Watt, A., Bolton-Maggs, P. Human errors in manual techniques for ABO/D grouping are associated with potentially lethal outcomes. *Transfusion Medicine*. 2019. Doi: [10.1111/tme.12616](https://doi.org/10.1111/tme.12616). 💧



ABC Names Senior Director of Strategic Marketing and Communications

Jeanette Brown, MBA has joined the America's Blood Centers (ABC) staff as the senior director of Strategic Marketing and Communications. Ms. Brown brings more than 18 years of non-profit medical marketing experience to the role, in which she will lead and develop ABC's marketing and communications efforts to internal and external stakeholders, while identifying, building, and fostering strategic partnerships on behalf of the association and its member blood centers towards the goals of prioritizing blood donation as a national imperative. "I am very excited to join the ABC team," said Ms. Brown. "Using my experience both in the blood bank industry as well as strategic marketing and communications, I look forward to working closely with our members and external partners to drive success."



Throughout her career, she has been responsible for enhancing and growing organization brands, as well as providing analysis and solutions to more than 100 non-profit companies. Ms. Brown initially began working as a blood donor recruiter at Massachusetts General Hospital in Boston, Mass. Ms. Brown has earned a B.A. in Psychology from Arcadia University and her MBA from the University of Phoenix.

Previously, she worked as both the director of Marketing and Industry Relations for the American Urogynecologic Society and the director of Market Development for the Society for Vascular Ultrasound (SVU), a role in which she helped increase SVU's membership 20 percent. Ms. Brown has also served on the Board of Directors for both the Anne Arundel Special Olympics and Annapolis Jaycees. She can be reached at jbrown@americasblood.org or (202) 654-2980. ♦

Carla Peterson Named ADRP Executive Director

Carla Peterson has been named ADRP Executive Director. She has held the position on an interim basis since January 2019. Ms. Peterson brings more than 32 years of blood banking experience to ADRP after working in various leadership roles in donor recruitment, collections, and production planning at Vitalant.

She has also previously served on the ADRP Board of Directors from 2010-17 including a term as ADRP Board President. Ms. Peterson holds a B.S. in Communications from St. Cloud State University in Minnesota and master's degree in Public Administration from the University of Wyoming. Ms. Peterson can be reached at cpeterson@adrp.org. ♦



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

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A Review of Patient Blood Management: Transfusing Appropriately

Please note: The views/comments expressed in submitted articles from external parties are those of the author(s) and are not to be interpreted as the viewpoint of America's Blood Centers.

AABB defines patient blood management (PBM) as an evidence-based multidisciplinary approach to optimize the care of patients who might need a transfusion. Three recently published articles promote this definition.

The first study evaluated transfusion indices after 1-unit and 2-unit apheresis platelet transfusions to determine if there was a benefit to 2-unit transfusions. A retrospective chart review was conducted of all adult oncology patients who received an outpatient platelet transfusion from July 2016 through November 2017. Pre- and post-transfusion platelet count were compared. A total of 8,467 platelet transfusions were administered to 602 patients. On average, 2-unit platelet transfusions resulted in a higher immediate post-transfusion platelet count (43,000 vs. 37,000/uL, $P < 0.001$) and a lower corrected count increment (9,707 vs. 14,060, $P < 0.001$). Transfusion with 2-unit platelets did not increase the number of days between transfusions (median; 4 vs. 4, $P = 0.959$) or the platelet count at the time of the next transfusion (11,000 vs. 11,000/uL, $P = 0.147$). The authors concluded that among adult, oncology outpatients, transfusion with 2-units of platelets did not offer a durable improvement in platelet count or impact the subsequent transfusion schedule.

The second article reviewed red blood cell (RBC) utilization and transfusion thresholds in patients diagnosed with chronic lymphocytic leukemia (CLL). This retrospective study included 213 Icelandic registry CLL patients diagnosed between 2003 and 2016. Hemoglobin (Hb) transfusion thresholds were compared before (2003-2012) and after (2013-2017) the publication of revised PBM guidelines. 77 (36.2 percent) received RBC transfusion(s). Higher age, Rai stage (CLL classification) ($P < 0.05$) and chemotherapy ($P < 0.001$) were associated with increased odds of transfusions. Shorter time to first transfusion correlated with higher age ($P < 0.001$) and Rai stage ($P = 0.02$). The mean Hb threshold was 9.4 g/dL and 8.1 g/dL in the earlier and latter period respectively ($P = 0.01$). The median time from diagnosis to transfusion was longer in the latter period (2.9 years vs. 1.6 years, $P = 0.01$). After RBC transfusions, the survival decreased significantly ($P < 0.001$).

The authors concluded that while the hemoglobin transfusion threshold decreased over time, RBC transfusions predicted poor survival. The final article reviewed 25 studies on restrictive transfusion practice and seven on computerized physician order entry (CPOE)/clinical decision support (CDS). The authors found that a restrictive transfusion strategy (hemoglobin 7- 8 g/dL) was applicable to a variety of surgical and nonsurgical environments and effective in reducing RBC transfusions for intensive and tertiary care patients in both community and large academic medical centers. It was effective for orthopedic and cardiac surgical and nonsurgical cases (e.g., critically ill and anemic patients). CPOE/CDS studies, which supported the reduction of RBC transfusion using hemoglobin alerts, were conducted in the past 10 years and were initially implemented on a small scale in focused areas within the medical environment. The authors stated it was reasonable to expect the use of CPOE/CDS with hemoglobin alerts would reduce overuse of RBC transfusion in smaller hospitals or other patient settings. The article concluded that adherence to an institutional restrictive transfusion strategy and use of CPOE/CDS tools for hemoglobin alerts were effective in reducing RBC transfusion overuse.

Citations: Puca, K.E. Patient Blood Management In: AABB Technical Manual. 19th ed. AABB Press 2017.

Thorvaldsson, H.H., Vidarsson, B., Sveinsdottir, S.V. Red blood cell utilization and transfusion triggers in patients diagnosed with chronic lymphocytic leukaemia in Iceland 2003-2016. *Vox Sanguinis*. 2019. Doi: [10.1111/vox.12775](https://doi.org/10.1111/vox.12775).

Gehrie, E.A., Frank, S.M., Visagie, M. One-unit compared to two-unit platelet transfusions for adult oncology outpatients. *Vox Sanguinis*. 2019. Doi: [10.1111/vox.12785](https://doi.org/10.1111/vox.12785)

Derzon, J.H., Clarke, N., Alford, A. Restrictive transfusion strategy and clinical decision support practices for reducing RBC transfusion overuse. *Am J Clin Pathol*. 2019. Doi: [10.1093/AJCP/AQZ070](https://doi.org/10.1093/AJCP/AQZ070).

Contributed by Richard Gammon, MD, Medical Director at OneBlood ♦



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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.

August SMT Journal Club Webinar Articles Announced

The ABC Scientific, Medical, and Technical (SMT) Journal Club Webinar on August 19th at noon EDT will feature the articles below:

- [Financial impact of alternative approaches to reduce bacterial contamination of platelet transfusions](#) (*Transfusion*);
- [Response to random apheresis platelets versus HLA-selected platelets versus pooled platelets in HLA-sensitized patients](#) (*Transfusion*); and
- [Platelets stored in whole blood at 4 C: in vivo posttransfusion platelet recoveries and survivals and in vitro hemostatic function](#) (*Transfusion*).

Additional details are available to ABC members in MCN [19-054](#).

(Source: MCN [19-054](#), 7/25/19)

July Blood Bulletin Available

ABC's Scientific, Medical, and Technical (SMT) Publications Committee has published the July 2019 Issue ([PDF](#) or [MS Word](#) versions) of the [Blood Bulletin](#), titled "Using Group A Plasma to Support Emergently Bleeding Patients."

The article was written by Jonathan Hughes, MD, Medical Director at Vitalant and Chris Gresens, MD, Senior Chief Medical Officer, North & West Divisions at Vitalant. [Blood Bulletin](#) is reviewed and edited by ABC's SMT Publications Committee.

ABC publishes the [Blood Bulletin](#) for you to use in your educational programs as a value-added service for hospital customers.

(Source: MCN [19-055](#))

2019 Financial Ratio Survey

ABC members are encouraged to participate in the 2019 Financial Ratio Survey. The results provide members with a powerful tool for managing blood programs, benchmarking valuable operational data, and identifying best practices. The survey is now conducted as part of a newly developed schedule to ensure that benchmarking surveys are spread throughout the year and can be planned accordingly. Most of the financial information requested is public information that blood centers already report on IRS Form 990 or is included in annual audited financials. Only participating blood centers receive the final report. Please contact [Ruth Sylvester](#) with any questions or comments. More details are available to ABC members [here](#). Please complete the survey by August 9th.

(Source: MCN: [19-050](#)) 💧



ABC 2019 Meetings & Workshops				
Meeting/Workshop	Dates	Location	Hotel/Hotel Rate	Registration Dates & Fees
Medical Directors Workshop	July 30 (precedes Summer Mtg)	Denver, CO	Grand Hyatt, \$239/night	Register today!
Summer Summit	July 31-August 1	Denver, CO	Grand Hyatt, \$239/night	Register today!

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](#).

AMERICA'S BLOOD CENTERS'

2019 ABC SUMMER SUMMIT

Empower. Influence. Advance.

July 30 - August 1, 2019 | Denver, CO

This year’s newly-designed ABC Summer Meeting, now known as the “Summer Summit,” will convene thought leaders from across the industry to focus on the future of blood centers and the transfusion medicine community. This year’s theme “Defining and Promoting Innovation in the Blood Sector” will feature leaders from outside the industry, case studies from your peers, and interactive peer roundtable discussions. Please join us for this one-of-a-kind experience to be inspired!

2019 SUMMER SUMMIT INCLUDES:

- ABC Board Meeting
- Medical Directors Workshop
- Members Meeting

Networking Events:

- General Reception
- Women-Inspiring-Leading-Learning High Tea Luncheon



America’s Blood Centers’
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For registration and hotel information, visit
http://bit.ly/2019_summer_summit

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





BRIEFLY NOTED

The University of Pittsburgh (Pitt) and University of Pittsburgh Medical Center (UPMC) have received a \$19.2 million grant from the National Institutes of Health for a clinical trial to test the impact of red blood cell exchange in fighting sickle cell disease. “Because of a lack of sufficient data, physicians today have to make a judgement call on whether to administer red cell exchange to their patients,” said co-principal investigator Darrell Triulzi, MD, professor of pathology and director of the division of transfusion medicine at Pitt School of Medicine in a news [release](#). “Physician opinions on whether red cell exchange is effective at preventing or reversing organ damage are equally divided, suggesting the real need for a definitive clinical trial such as this one to determine whether red cell exchange should be added to the standard of care for these high-risk patients.” The Sickle Cell Disease and Cardiovascular Risk – Red Cell Exchange (SCD-CARRE) trial will include patients receiving the standard of care (randomly assigned) or “in combination” with red blood cell exchange each month over a 12-month period. “Currently there is no standard of care for patients with sickle cell at high risk of organ damage,” added principal investigator Mark Gladwin, MD, Jack D. Myers professor and chair of medicine at Pitt's School of Medicine and director of the Pittsburgh Heart, Lung, Blood, and Vascular Medicine Institute in the news release. “We are proud to lead this collaborative effort among major centers of excellence to tackle an important open question in how we treat and manage the disease.” The study will aim to determine if red blood cell exchange can reduce deaths, hospitalizations, and lower or reverse the occurrence of major organ damage.

(Source: University of Pittsburgh and University of Pittsburgh Medical Center News [Release](#), 7/9/19)

The Centers for Disease Control and Prevention’s National Center on Birth Defects and Developmental Disabilities Division of Blood Disorders will be holding a public health webinar entitled “2019 Scientific Update: Transfusion Guidelines for Thalassemia.” The webinar will talk place on August 13th at 2 pm eastern and feature Ashutosh Lal, MD and Elliott Vichinsky, MD of the University of California, San Francisco School of Medicine. The stated objectives for the webinar are:

- identify two complications of blood transfusions in thalassemia;
- describe the guidelines for initiating and monitoring blood transfusions in patients with beta thalassemia major; and
- describe the approach to transfusions in patients with alpha thalassemia major and non-transfusion-dependent thalassemia.

The webinar is free and [registration](#) is open.

(Source: CDC [Announcement](#), 7/24/19) ♦

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.



REGULATORY NEWS

The National Institutes of Health’s National Heart, Lung, and Blood Institute (NHLBI) recently announced that the fourth phase of the Recipient Epidemiology and Donor Evaluation Study, or REDS study, will expand its scope to include infants and children. “For years, we’ve adopted transfusion strategies that were evaluated in adults to babies and children without much attention to the fact that they are physiologically different than adults and may have different transfusion needs,” said Simone Glynn MD, MSc, MPH, chief of the Blood Epidemiology and Clinical Therapeutics branch of the NHLBI and project officer for REDS-IV-Pediatrics (REDS-IV-P) in the agency’s news [release](#) announcing the study. “The time is right to address critical needs in transfusion safety among infants and children, who as a group are understudied in transfusion research—but highly vulnerable to adverse outcomes. A better understanding of how transfusions affect the neonatal and pediatric populations can lead to improved outcomes and save lives.” REDS-IV-P will include ABC members New York Blood Center, Versiti Blood Research Institute, and Vitalant Research Institute. More information about REDS-IV-P is available on the NHLBI’s REDS-IV-P [website](#).

(Source: NHLBI News [Release](#), 7/11/19) 💧

MEMBER NEWS

San Diego Blood Bank recently announced the results of the 43rd annual Robert A. Heinlein Blood Drive that occurs each year during Comic-Con. More than 3,300 units of blood products were collected at this year’s drive from July 17th-21st.



“Adding preview day to our drive helped us register 400 more donors than last year and collect 20 percent more blood, shattering our goal of 3,000,” said David Wellis, PhD, CEO of the San Diego Blood Bank in a news release. “We are truly thankful for our partnership with Comic-Con and to every donor who helped us get our supply to where it needs to be to meet the needs over the summer.”

(Source: San Diego Blood Bank News [Release](#), 7/22/19) 💧

GLOBAL NEWS

The Health Minister for France has announced that the country will be adjusting its deferral policy for men who sex with other men (MSM) from 12-months to 4-months. It will take effect February 1, 2020. The decision comes in the wake of a risk analysis conducted by Santé Publique France (the French public health institute) whose results will appear in *Vox Sanguinis* and were presented at an ISBT meeting by Josiane Pillonel. It determined that the policy change would not modify the residual risk of HIV.

(France24, [France to ease restrictions on blood donations from gay men](#), 7/17/19) 💧

Upcoming ABC Webinars – Don’t Miss Out!

- SMT Journal Club Webinar – August 19. Additional details available to ABC members in MCN [19-054](#)!



CALENDAR

Note to subscribers: Submissions for a free listing in this calendar (published in the last issue of each month) are welcome. Send information to Leslie Maundy by e-mail (lmaundy@americasblood.org) or by fax to (202) 393-1282. (For a more detailed announcement in the weekly "Meetings" section of the newsletter, please include program information.)

2019

July 30-Aug. 1. **2019 ABC Summer Summit & Medical Directors Workshop, Denver, Colo.** More details available [here](#).

Aug. 13. **CDC National Center on Birth Defects and Developmental Disabilities Division of Blood Disorders "2019 Scientific Update: Transfusion Guidelines for Thalassemia Webinar.** Registration [open](#).

Sept. 20. **Red Cell Genotyping 2019: Patients First, Bethesda, Md.** This 9th annual symposium will review the laboratory aspects and clinical benefits of red cell genotyping in patients and blood donors. More details available [here](#).

Sept. 23-25. **The MedTech Conference, powered by AdvaMed, Boston, Mass.** More details available [here](#).

2020

Mar. 9-11. **2020 ABC Annual Meeting, Washington, DC.** More details coming soon.

May 13-14. **IPFA/PEI 27th International Workshop on "Surveillance and Screening of Blood-Borne Pathogens", Porto, Portugal.** More details available [here](#).

May 19-21. **2020 ADRP Conference, Phoenix, Ariz.** 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

Quality & Regulatory Affairs Specialist. The Stanford Blood Center is seeking a Quality & Regulatory Affairs Specialist. Under the general supervision of the Director of Quality and Regulatory Affairs, this position will perform the quality and regulatory affairs duties and responsibilities by reviewing department procedures, forms, training documents, product and equipment quality control (QC), change control processes, validations, and assist with development, as necessary. Develop, perform and report departmental, system audits, and safety inspections. Perform Good Manufacturing Practice (GMP) and safety training, trend analysis of events and

quality indicators, root cause analysis, process improvement, corrective and preventive actions; maintain compliance by enforcing applicable regulations and standards set by regulatory agencies and submit appropriate reports, when required. Core Duties include: Review validation plans, procedures, training documents, PDIF records, product and equipment QC for regulatory compliance and assist with development and training as necessary. Develop, perform and generate departmental reports and system audits. Develop, revise, institutional

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POSITIONS (continued from page 8)

QRA SOPs and training. Perform GMP, QRA and safety training. Perform trend analysis of events, complaints, and quality indicators with subsequent performance of root cause analysis, and process improvement. For complete job description and to apply, visit www.stanfordhealthcarecareers.com and reference job # 51343.

Director of Donor Recruitment (Tulsa, OK). Do you have a passion for community service, leadership and sales? Are you a goal-oriented people person? Oklahoma Blood Institute is seeking qualified candidates for Director of Donor Recruitment in the Tulsa area. This is a vital and rewarding position that will play a key role in expanding our footprint and sharing our lifesaving mission in Oklahoma. The Director of Donor Recruitment will lead a donor recruitment team to success; providing clear direction, as well as employing effective management and strategic planning to ensure collection goals, performance expectations and departmental objectives are met. Qualifications: Three to five years of work experience directly related to blood banking. Associate's degree is required, bachelor's degree preferred. Public speaking/presentation experience required. Excellent verbal and written communication skills. Benefits: Oklahoma Blood Institute offers a competitive salary, excellent benefits package including health, dental, vision, and life insurance, 401(k), paid time off, tuition reimbursement, etc. Apply online only at <http://obi.org/careers/>. EEO M/F/D/V/Drug Free Work Environment

Director of Donor Recruitment (Little Rock, AR). Do you have a passion for community service, leadership and sales? Are you a goal-oriented people person? Arkansas Blood Institute is seeking qualified candidates for Director of Donor Recruitment in the Little Rock area. This is a vital and rewarding position that will play a key role in expanding our footprint and sharing our lifesaving mission in Central Arkansas. Arkansas Blood Institute is part of one of the fastest-growing independent blood centers in the U.S., providing blood to more than 30 hospitals in Arkansas, including four major hospitals in Little Rock. Arkansas is home to 52 state parks set on gorgeous mountains, lakes, streams and forests. Little Rock is beautifully located along the Arkansas River and has more than fifteen miles of scenic riverfront, cultural and historic attractions, entertainment and world-class dining. Qualifications: Three to five years of work experience directly related to blood banking. Associate's degree is required, bachelor's degree preferred. Benefits: Arkansas Blood Institute offers a competitive salary, excellent benefits package including health, dental, vision, and life insurance, 401(k), paid time off, and a relocation package for candidates who do not reside in the Little Rock area. Apply online only at <http://arkbi.org/careers/>. EEO M/F/D/V/Drug Free Work Environment

Chief Medical Officer. The Chief Medical Officer is responsible for the following: Build and leverage cross functional collaborative relationships to achieve shared company goals. Support donor recruitment through presentation to key decision makers in clients and prospects. Participate in senior management business and clinical strategy development and implementation. Participate as a staff representative to the Board of Directors. Is encouraged to conduct research in areas related to hematology and blood banking. Obtain support, funding and grants. Review research efforts with the CEO. Review and approve all controlled documents. Develop and recommend departmental policies, procedures and programs to ensure departmental adherence to Quality Program. Provide leadership and direction for management and employees. Establishes performance goals, allocates resources and assesses policies for department directors. Recommend and develop new services and programs. Review processes with the intent of improving efficiency and reducing costs. Involved with medical aspects of new product development and preparation of articles and abstracts for presentation and publication. With VP, Quality and Regulatory Affairs review blood collection quality control issues and policies. Develop and implement strategic goals related to the quality improvement, management programs and accreditation standards. Assist with the accreditation process and maintaining the San Diego Blood Bank standards for both blood collection and processing. Click [here](#) to view the full job description and to apply.

Registered Nurse (*\$3,000 SIGN-ON BONUS*). Essential Functions: Ensures compliance with relevant CBC, FDA, AABB and OSHA regulations. Performs therapeutic Apheresis procedures on patients at CBC and area hospitals. Performs quality control on apheresis instruments and related equipment. Assists with training and competency assessment, as needed. Communicates with staff, CBC Medical Director and outside facilities/physicians to ensure optimal patient care and efficient use of resources. Communicates confidently and interprets intermediate information in English to all members of the public and CBC staff. Ensures billing for department services are current. Meets all credentialing requirements of any hospital CBC serves. Administers injectable vaccines, ex: Hepatitis B and Filgrastim. Reports all traffic tickets or license suspension to the Manager. Education: Minimum of ADN or BSN – must provide copy of transcript. Current RN license in Missouri & Kansas – must provide copy of license. Experience: Minimum of two (2) years' experience in critical care, therapeutic apheresis or dialysis. Must maintain a valid KS or MO driver's license and clean driving record. To apply: Please visit www.savealifenow.org.

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POSITIONS (continued from page 9)

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. We have two openings; one based out of the Jacksonville, Florida area and the other based out of the Ft. Lauderdale area, both locations have 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. ♦