



ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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2019 #37

November 1, 2019

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Results from the 2019 ABC Gender Identification and Blood Collection Survey Shared at 2019 AABB Annual Meeting

In a U.S. Food and Drug Administration [guidance](#) entitled “Revised Recommendations for Reducing the Risk of Human Immunodeficiency Virus Transmission by Blood and Blood Products,” the agency included a recommendation that “male and female gender be taken to be self-identified and self-reported” in the context of the donor history questionnaire (DHQ). A discussion of gender identification in blood donation, its challenges, and the experiences of stakeholders within the blood community took place during a session at the 2019 AABB Annual Meeting in San Antonio, Texas. It included a synopsis of aggregate data from the 2019 ABC Gender Identification and Blood Collection Survey that sought to acquire information on how a blood donor’s gender or sexual identification impacts blood collection.

The session featured Michelle Miller, Pharm.D. (University of Iowa Health Care-Iowa River Landing), Suchitra Pandey, MD (Stanford Blood Center), and Geoffrey Belanger, MPH (Stanford Blood Center). Ms. Miller provided insight and background into the sensitivity needed by all staff at blood centers to foster respectful and inclusive experience all donors, particularly those that identify as non-binary. She explained the importance of being educated and aware of terms used to identify individuals within the Lesbian Gay Bisexual Transgender “Queer or are Questionable (LGBTQ+)” community. “For many of us, we identify very closely as being either a man or a woman and that includes some transgender people,” stated Ms. Miller during her presentation. “However, when someone does not identify within these binary terms, we might use the term nonbinary and that tends to be the most common term that is utilized, but there are also several other terms that people may use to express this gender identity...The biggest lesson that I’ve learned is just asking individuals [how they prefer to be identified] and creating a welcoming environment, understanding that I may make a mistake, but saying ‘I’m sorry’ and not focusing on that too much when I’m working these individuals.” She referenced data from the 2015 National Center for Transgender Equality that indicated that 44 percent of individuals that self-identify as nonbinary let others assume that they are a man or woman. Reasons for this varied from feeling that people will not understand, thus being more comfortable saying nothing than identifying as nonbinary, or that others will not understand what the term nonbinary means or dismiss it as a phase or fearing violence from individuals within society. This information further highlighted the need for organizations to be proactive in training staff and ensuring that they are cognizant of the importance of creating a welcoming environment.

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Gender Identification Survey Results (continued from page 1)

Next, Mr. Belanger discussed the specific problems that blood centers could encounter when it comes to gender identification and posed several hypothetical questions to audience using live polling within the meeting app for real-time feedback as to how they would handle certain situations at their center when dealing with the complexities of gender identification. He also examined challenges inherent with gender identification in blood donation from the difference in hemoglobin thresholds for male and female donors, to information technology issues from blood establishment computer systems (BECS) and donor management software and their inflexibility in allowing the addition of other gender categories, to gender specific requirements for apheresis machines that conduct blood volume calculations. “The main limitation of BECS is the inability to add a third gender option,” explained Mr. Belanger during his presentation. “And much less of an issue the inability to change gender and that’s either by the policy at your blood center or the computer system itself.” He also highlighted that more states are allowing individuals to choose from a third gender on state-issued I.D. cards, which could lead to an increase in the number of nonbinary donors presenting to donate at blood centers and could necessitate a policy change at blood centers. Mr. Belanger also noted that gender-based regulations also pose challenges from men who have sex with other men (MSM), transfusion-related acute lung injury (TRALI), and different physical examination requirements.

Dr. Pandey shared aggregate data from the 2019 ABC Gender Identification Blood Collection Survey and the experience from Stanford Blood Center and their policy with regards to nonbinary blood donors. Close to 40 centers responded to the survey (an 83 percent response rate) which included 15 questions. More than 60 percent of blood centers indicated that their organization has a policy in place for transgender donors. Only eight blood centers responded that they have included nonbinary donors into their written procedures and policies, but 12 explained that while they do not currently, their center will in the future. One-third of centers that replied to the survey replied that they have seen a nonbinary donor come into their center. Dr. Pandey also shared a news article that reported that nonbinary California resident had been turned away from donating blood. The individual had nonbinary on their state I.D. and was told by the center that if they did not self-identify as male or female then all gender-specific questions on the DHQ must be answered. The center’s BECS at the time only allowed for male or female to be selected in the gender category underscoring an earlier challenge identified by Mr. Belanger. The donor chose not to present to donate after this conversation, but it became national news when the individual stated that the blood center turned them away. “This article I think did start increased discussions in blood centers about being prepared when a nonbinary donor comes into your blood center,” explained Dr. Pandey. “That even engaging with your BECS vendor [is important] to see if you can work them in adding additional genders.” Only six blood centers at the time of the survey had the ability to add additional genders.” She explained that Stanford Blood Center currently obtains the presenting donor’s gender from the I.D. card of the individual. “If the identification [card] does not have a gender, then the donor is able to self-report,” said Dr. Pandey. “Then

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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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Gender Identification Survey Results (continued from page 2)

each [subsequent] donation we ask the donor if the [gender] information correct. If it changes, we are able to change it in our system if [their gender has changed].”

ABC will make the aggregate results of the survey available with no blood center-identifying information shared. Additionally, a session on gender identification will take place at the ABC Annual Meeting in March. 💧

Hahn Nominated as Next FDA Commissioner

President Trump has announced Stephen Hahn, MD, a chief medical executive at MD Anderson Cancer Center, as his nominee to be the next commissioner of the U.S. Food and Drug Administration (FDA). If confirmed, he would take over the role full-time for Ned Sharpless, MD, who has served as Acting Commissioner following the resignation of Scott Gottlieb, MD earlier this year.

(Source: CBS News, [Trump taps cancer researcher to be FDA commissioner](#), 11/1/19) 💧

REGULATORY NEWS

The Joint Commission has published its 2020 National Patient Safety Goals for laboratory services. The Joint Commission is an independent non-profit organization that accredits and certifies more than 22,000 health care organizations and programs in the US. Goals for laboratory services include improving the accuracy of patient identification once again, as in previous years, along with improving the effectiveness of communication among caregivers and reducing the risk of healthcare-associated infections. Both a [simplified version](#) and [full chapter version](#) are available. Additional information on the 2020 National Patient Safety Goals for other programs such as hospital or ambulatory services can be found on The Joint Commission [website](#).

(Source: The Joint Commission [Announcement](#), 10/4/19)

The U.S. Department of Homeland Security has released a white paper that discusses the status of the development and voluntary adoption of non-radioactive technologies in medical, industrial, and research fields. It contains a chapter focused on the blood community and irradiation with a detailed review of all the applications of sealed-source radioactive materials and the effort to reduce the risk posed by their use following the events of September 11th. The white paper entitled “Non-Radioisotopic Alternative Technologies White Paper” can be downloaded on the ABC member [site](#).

(Source: Non-Radioisotopic Alternative Technologies White [Paper](#), 10/21/19) 💧



Platelet Crossmatch Is Effective with Refractory Hematology-Oncology Patients

Contributed by Richard Gammon, MD, Medical Director at OneBlood

Please note: America’s Blood Centers welcomes regular contributions or briefs from guest authors for scientific/medical peer-reviewed published papers. 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. If you are interested in contributing an article for potential publication please contact us [here](#).

Hematological malignancies require supportive therapy with allogenic platelet transfusions. Thrombocytopenia may be either a result of chemotherapy or the underlying disease itself. Patients who receive long-term platelet transfusion support may develop refractoriness. Approximately 20 percent of cases are due to immune mediated causes that can be attributed to alloantibodies to either class I human leucocyte antigens (HLA) and/or human platelet antigens (HPA). Managing such patients can be challenging. In a study published in *Transfusion and Apheresis Science*, the researchers aimed to assess the efficacy of crossmatch compatible platelets in alloimmunized multi-transfused hematology-oncology (Heme-Onc) patients who were refractory to platelet transfusion.

This was a single institution study conducted over a 17-month period. The majority (56.6 percent) of multi-transfused Heme-Onc patients were refractory with 83.33 percent alloimmunized to HLA and HPA antibodies. The study population included 38 patients, 17 (44.7 percent) males and 21 (55.3 percent) females, who received 149 ABO compatible single donor apheresis platelet transfusions. Post-transfusion platelet increment (PPI), corrected count increment (CCI) and percent platelet recovery (PPR) were monitored for each transfusion. Acceptable response criteria at one-hour post-transfusion was PPI $\geq 10,000/\mu\text{l}$, CCI $\geq 5,000$ and PPR ≥ 30 percent. Refractoriness was defined as a CCI $< 5,000$ (one- hour post-transfusion) on two separate occasions. The solid-phase red cell adherence assay was used for platelet crossmatching.

The diagnoses of the 38 patients in the study were: 16 aplastic anemia, nine acute myeloid leukemia, four acute lymphoblastic leukemia, four multiple myeloma, two non-Hodgkin’s lymphoma, two myelodysplastic syndrome and one had chronic lymphoproliferative disorder. There were three study groups: (Ia) received crossmatch compatible platelets, (Ib) received crossmatch incompatible and (II) received uncrossmatched platelets. On intergroup (Ia and II) and intragroup (Ia and Ib) comparison, these values were found to be statistically significant, thereby implying that crossmatch compatible units showed a better recovery profile than uncrossmatched or crossmatched incompatible platelet transfusions. The platelet transfusion recovery profiles for crossmatched incompatible (Ib) and uncrossmatched platelet were similar making them less suitable options in refractory patients. At this institution the probability of finding a crossmatch compatible unit for a single patient out of three or four randomly crossmatched units was 48 percent. Study results are shown in the table above.

Outcome		Ia Matched & compatible (n=45)	Ib Matched & incompatible (n=28)	II Unmatched (n=76)	Total (n=149)	Pearson's Chi square p
PPI	≥ 10000	44 (97.8%)	11 (39.3%)	38 (50%)	93 (62.4%)	<0.001
	< 10000	1 (2.2%)	17 (60.7%)	38 (50%)	56 (37.6%)	
CCI	≥ 5000	44 (97.8%)	12 (42.9%)	41 (53.9%)	97 (65.1%)	<0.001
	< 5000	1 (2.2%)	16 (57.1%)	35 (46.1%)	52 (34.9%)	
PPR	$\geq 30\%$	37 (82.2%)	2 (7.1%)	18 (23.7%)	57 (38.3%)	<0.001
	$< 30\%$	8 (17.8%)	26 (92.9%)	58 (76.3%)	92 (61.7%)	

Table courtesy of Transfusion and Apheresis Science: the comparative analysis of post-transfusion platelet recovery indicators for crossmatch compatible (Ia n=45), crossmatch incompatible (Ib n=28) and uncrossmatched platelet transfusion (II, n=76) episodes.

Platelet Crossmatch (continued from page 4)

The provision of crossmatch compatible platelets is one of the strategies in the management of multi-transfused alloimmunized patients who are refractory to platelet transfusion therapy. This technique provides information about the antibodies against antigens on platelet surface that can lead to their rapid clearance shortly after transfusion. This study revealed that platelet crossmatching was an effective intervention in the management of multi-transfused alloimmunized Heme-Onc patients who were refractory to platelet transfusion.

Citation: Chavan, A., Sharma, R.R., Saikia, B. *et al.* Efficacy of Cross-match Compatible Platelets in Multi Transfused Haemato-Oncology Patients Refractory to Platelet Transfusion. *Transfusion and Apheresis Science* 2019. Doi: [10.1016/j.transci.2019.09.010](https://doi.org/10.1016/j.transci.2019.09.010). ♦

BRIEFLY NOTED

The National Institutes of Health (NIH) and the Bill and Melinda Gates Foundation [announced](#) that each organization will provide \$100 million in funds over the next four years in hopes of developing affordable gene-based therapies to cure sickle disease and HIV. “This unprecedented collaboration focuses from the get-go on access, scalability and affordability of advanced gene-based strategies for sickle cell disease and HIV to make sure everybody, everywhere has the opportunity to be cured, not just those in high-income countries,” said NIH Director Francis S. Collins, MD, PhD in an agency news release. “We aim to go big or go home.” The investments will be in addition to each organization’s ongoing research efforts to find a cure for each ailment. The stated focus of the collaboration is two-fold:

- identify potential cures for sickle cell disease and HIV for pre-clinical and clinical evaluation; and
- define long-term opportunities to collaborate with partners in Africa towards advancing promising potential cures to late-phase clinical trials.

“In recent years, gene-based treatments have been groundbreaking for rare genetic disorders and infectious diseases,” said Trevor Mundel, MD, PhD, president of the Global Health Program for the Bill & Melinda Gates Foundation in the news release. “While these treatments are exciting, people in low- and middle-income countries do not have access to these breakthroughs. By working with the NIH and scientists across Africa, we aim to ensure these approaches will improve the lives of those most in need and bring the incredible promise of gene-based treatments to the world of public health.”

(NIH News [Release](#), 10/23/19)

The Georgia Health Policy Center with funding from the Centers for Disease Control and Prevention (CDC) have launched MySleevesUp.com to educate and inspire of the need for a diverse pool of blood donors from all racial and ethnic groups to help patients in need. This resource is a part of the Registry and Education for Hemovigilance in Hemoglobinopathy Transfusion Therapy (RedHHoTT) project, which aims to reduce the complications of blood transfusions for sickle cell disease or thalassemia patients. The site features education tools, video, and printable resources that are available for use by all including information for organizing blood drives and finding a nearby blood center.

(Source: RedHHoTT [Announcement](#), 10/24/19)

Fresenius Kabi announced the 2019 inductees into to the blood donation hall of fame this week, which recognizes individuals who demonstrate a commitment and passion to either encouraging or donating blood. “The U.S. blood supply is dependent on the commitment of a compassionate community of recruiters, sponsors, donors, collectors, technicians, scientists and drivers. Fresenius Kabi works shoulder-

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BRIEFLY NOTED (continued from page 5)

to-shoulder with blood centers in the U.S. to assure that blood is available to patients in need,” said Dean Gregory, president, Global Commercial Operations, Transfusion Medicine and Cell Therapies Division at Fresenius Kabi in a news [release](#). “This year’s class of Fresenius Kabi Donation Hall of Fame inductees is a wonderful example of heroes working in support of our communities. Fresenius Kabi is honored to recognize them.” This year’s inductees include several donors from ABC member blood centers:

- Dexter Emoto (LifeStream Blood Bank)
- Theodore Hale (Community Blood Center, Dayton, Ohio)
- Sarah Hansgate (ConnectLife)
- Jillian Truesdale (ConnectLife)
- Dawn Wolf (ConnectLife)
- Dawn Marisch (Versiti Blood Center of Wisconsin)
- Steve Pringle (LifeServe Blood Center)
- Jamie Stembridge (OneBlood)

More information and a complete listing of all winners is available on the Fresenius Kabi [website](#). Nominations for 2020 Hall of Fame inductees are due by June 14th, 2020.

(Source: Fresenius Kabi News [Release](#), 10/30/19) ♦

PEOPLE

Beth Shaz, MD has begun her term as President of AABB. She is the executive vice president and chief medical and scientific officer at New York Blood Center where she leads the medical and scientific activities for the organization. “I am truly thankful to the membership for giving me an opportunity to serve as AABB board president and help ensure the future success of the Association,” said Dr. Shaz in an AABB news [release](#). “AABB provides a platform to bring all these wonderful individuals from different subspecialties, in different stages of their careers, with different expertise, and from all over the world together to improve the fields of transfusion medicine and cellular therapies.” Dr. Shaz holds a medical degree from the University of Michigan and a B.S. from Cornell University in chemical engineering.



(Source: AABB News [Release](#), 10/23/19) ♦

COMPANY NEWS

The Plasma Protein Therapeutics Association (PPTA) published a response to the open letter issued previously from the American Red Cross. In the PPTA letter, president and CEO Amy Efantis addresses the need for increased collections of source plasma while thanking the blood community for providing recovered plasma that is used in plasma protein therapies. She also recognizes the respective roles and the importance of continuing to grow the donor pool for both unpaid blood and paid plasma donors suggesting that the presence of plasma donation centers in areas with blood donation centers can have a “crowding in” effect rather than “crowding out,” based on data from Georgetown University researchers William English, PhD and Peter Jaworski, PhD that was presented at the ABC Annual Meeting in March 2019, “[d]onors of both blood for transfusion and plasma for manufacturing use are special people. We are grateful to donors

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COMPANY NEWS (continued from page 6)

and want to encourage both blood and plasma donations. In the recent past, we heard concerns from the blood community about “crowding out.” We have cooperated with America’s Blood Centers and Georgetown University researchers to study the effect on donations in areas that include both blood centers and plasma centers. Initial results indicate that crowding out does not occur in most areas studied with a surprising finding that there may be a slight crowding in effect. We are most willing to continue supporting factual monitoring of this interface.” The full response is available on the PPTA [website](#).

(Source: PPTA Response [Letter](#), 10/18/19) 💧

MEMBER NEWS

LifeStream Blood Bank [recognized](#) longtime donor Rob Lennox this week as he reached the 100-gallon milestone. The *Press-Enterprise* reported that Mr. Lennox, who worked for 40 years at the University of California Riverside in air pollution research, botany, and plant science became a blood donor in 1980 as a way to initially escape hot days in the California sun harvesting but has since become a regular platelet donor that can be counted on for patients in need. According to the blood bank, he is their 25th blood donor to reach 100 gallons as LifeStream Blood Bank President and CEO Rick Axelrod, MD, MBA was on hand to congratulate Mr. Lennox on his achievement.



Photo courtesy of the Press-Enterprise: LifeStream Blood Bank President & CEO Rick Axelrod, MD, MBA (left) congratulates Rob Lennox (right).

(Source: *The Press-Enterprise*, [Riverside man donates 100th gallon of blood through LifeStream](#), 10/30/19)



Photo courtesy of MVRBC

Mississippi Valley Regional Blood Center held a ribbon cutting ceremony on October 23rd to [celebrate](#) the opening of its Peoria Inventory Management and Distribution Center. The facility will serve as MVRBC’s distribution center for hospitals in the Peoria, Ill. region with the blood center’s partnership to expand its service from seven UnityPoint Health hospitals to ten as of January 2020. “We appreciate this opportunity to expand on our existing service to UnityPoint Health,” said MVRBC CEO and current ABC Board President Mike Parejko in a news [release](#). “We look forward to working with our new UnityPoint Health partners in central Illinois to support the community blood supply.” Additionally, MVRBC will open a new donor center in Peoria in December.

(Sources: MVRBC Ribbon [Cutting](#) and UnityPoint Health [Partnership](#) News Releases, 10/23/19) 💧

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.



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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.

ABC Awards of Excellence Call for Nominations Now Open

ABC members are encouraged to nominate blood donation sponsors, corporations, and advocates for the 23rd Annual Awards of Excellence. This year's ceremony on Tuesday, March 10th will be in Washington, D.C. during ABC's 58th Annual Meeting at the Ritz-Carlton (Pentagon City). Nominations are currently open until Wednesday, December 4th. Additional details are available in [MCN 19-072](#) for ABC member blood centers. The online submission form is available [here](#). ABC members are permitted to submit up to three nominations per category. The following awards will be presented during the awards ceremony and are currently open for nominations:

- ABC Outstanding Blood Drive of the Year
- Outstanding Public Relations Campaign
- Corporation of the Year Award
- Larry Frederick Award (jointly presented by ABC and ADRP)
- William Coenen President's Award
- Blood Community Advocate of the Year Award
- Thomas F. Zuck Lifetime Achievement Award

A complete description of each award is available [here](#). Please direct any questions about nominations or the awards ceremony to memberservices@americasblood.org.

(Source: MCN [19-072](#), 10/30/19)

2020 ADRP Award Nominations Launch

Each year, ADRP honors individuals and organizations that have demonstrated outstanding service, accomplishments or leadership in blood banking. Blood centers are encouraged to [nominate](#) individuals and organizations. In addition to a complimentary conference registration, winners receive a commemorative award and recognition in the ADRP newsletter and website. The nomination deadline is December 31, 2019. This year's award categories are:

Individual Awards

- Donor Recruiter of the Year
- Collections Team Member (Recruitment and Collections)
- Rolf Kovenetsky Leader of the Year
- Ron Franzmeier Lifetime Achievement
- Ronald O. Gilcher, MD

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Organization Awards

- Media Partner
- Humanitarian Service
- Blood Drive (Most Creative and Most Productive)
- School Blood Drive (HS or College)

Additional information on the ADRP awards is available on the ADRP [website](#).

(Source: ADRP Awards [Announcement](#), 10/29/19)

2020 ADRP Annual Conference Now Accepting Abstracts

ADRP, an international division of America's Blood Centers, is encouraging donor collections, donor recruitment, and marketing or communications professionals to consider sharing their knowledge at the 2020 ADRP Annual Conference by being a presenter. The call for speaker abstracts is [open](#) until December 31st. Topics that have been the most requested by attendees include:

- **Leadership and team development:**
 - Critical thinking
 - Time management
 - Staff adequacy and talent level
 - Managing change
- **Blood Type Management:**
 - Collecting correct units based on blood type
 - Maintaining inventory during time of need
 - Rebooking donors and drives with emphasis on time of need
- **Donor and sponsor communication strategies:**
 - Diversification of the donor base
 - Addressing donor apathy
 - Communications strategies

Additional information about the conference is available on ADRP's [website](#).

(Source: ADRP [Announcement](#), 10/10/19)

Upcoming ABC Webinars – Don't Miss Out!

- **Staffing Success & Challengers at Blood Centers Webinar** – November 19th from 3 - 4:30 p.m. (ET). Additional details coming soon!
- **SMT Journal Club Webinar** – December 5th from 12 – 1 p.m.(ET). Additional details coming soon!
- **Irradiator Replacement at Blood Centers Webinar** – January 21st from 3 – 4:30 p.m. (ET). Additional details coming soon!

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

Nov. 12-14. **U.S. Food and Drug Administration Center for Drug Evaluation and Research Small Business and Industry Assistance Clinical Investigator Training Course, College Park, Md.** More details available [here](#).

Nov. 22. **U.S. Food and Drug Administration Blood Product Advisory Committee Meeting, Silver Spring, Md.** More details available [here](#).

2020

Jan. 14-15. **IPFA/EBA Workshop on Plasma Collection, Amsterdam, the Netherlands.** More details available [here](#).

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

Mar. 25-26. **IPFA 5th Asia Workshop on Plasma Quality and Supply, Chonburi, Thailand.** More details available [here](#).

April 14-15. **16th Annual U.S. Food and Drug Administration and the Changing Paradigm for HCT/P Regulation Conference, Washington D.C.** More details available [here](#).

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. 💧

EQUIPMENT AVAILABLE

ABC 2020 Meetings & Workshops				
Meeting/Workshop	Dates	Location	Hotel	Registration Dates & Fees
2020 ABC Annual Meeting	March 9 th -11 th	Washington, D.C.	Ritz-Carlton (Pentagon City)	More details coming soon!
ADRP 2020 Conference	May 19 th -21 st	Phoenix, Ariz.	Hyatt Regency	More details coming soon!
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 .				

For Sale. 50 Genesis Mixers Model CM375A and 22 Ohaus portable digital scales. All in working order. For additional details or to make an offer contact Jahn Legh-Page at (559) 389-5440 or jlegh-page@donateblood.org.

Best Offer. PK7300 microplate blood donor typing system, Two (2) Pluggo decappers, Two (2) Immucor microplate washers for manual Capture assays, Two (2) Immucor microplate incubators for manual Capture assays. For additional details or to make an offer contact Joseph Hulina at jhulina@cbcts.org.

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

Executive Director. (Little Rock, Ark.) The Arkansas Blood Institute is seeking a "community spirited" professional to lead its Little Rock team in fulfilling the mission to recruit blood donors, drive sponsors, and volunteers and to store and deliver blood units for local hospitals. This public-facing, "visible" position not only requires an outgoing, bright, and energetic personality to foster relationships, but also demands detailed attention to planning, communication, regulations, finances and personnel. Significant successes in project management and organizational expansion and entrepreneurship are desirable. Connectivity with regional leaders and access to key social networks would also be positives. The successful candidate will present and maintain a credible, positive image of the Arkansas Blood Institute in the local community. He or she will act as a liaison between the Institute and the community, organizations and residents. Applicants should be goal-driven self-starters who have strong interpersonal, organizational and analytic skills. They should be able to motivate and inspire diverse constituencies including donors, sponsors, staff, and volunteers. Salary Range: Competitive salary, commission plan, and excellent benefits package including health, dental, vision, and life insurance, 401(k), paid time off, and holiday pay. Apply: <http://arkbi.org/careers/>.

Vice President, Reference & Transfusion Services. Vitalant is currently hiring a VP of Reference & Transfusions Services to be responsible for the leadership, management, and direction of the organization's Red Cell Reference Laboratories (RCRLs) and Transfusion Services (TS) expanding and advancing the business unit's effectiveness. This role will also support the Blood Services Division product portfolio by developing and delivering value-added RCRL/TS services to client hospitals, health care providers, and patients. This vital role will oversee these functions to ensure that procedures, controls and systems are in place for accurate test results and timely provision of appropriate blood products while maintaining compliance with all federal and state regulatory requirements and industry accreditation standards. This role will also oversee the development of organizational strategies to achieve core corporate goals aligning with the strategic initiatives of the Corporation while ensuring that all service offerings meet or exceed customer expectations. The ideal candidate will formulate the development and direct the implementation of relevant strategic plan elements to assure the ongoing success and

growth of the organization, provide Executive Management with activity summaries, and fosters enterprise-wide collaboration of clinical services while promoting cost saving, standardization and economies of scale. Interested candidate can apply to the position directly at <https://bloodsystems.taleo.net/careersection/jobdetail.ftl?job=191590&lang=en>

Reference Lab Manager. OneBlood is currently recruiting for a Lab Manager in our AABB-Accredited Immunohematology Reference Laboratory. This position provides leadership and technical expertise, manages staff, and performs training and quality activities for the staff responsible for performing basic through advanced testing procedures on patient and/or donor samples. Applicants must have a bachelor's degree in medical technology, biological science or related scientific field from an accredited college or university. Five or more years in a clinical laboratory, preferably blood banking environment, or an equivalent combination of education, certification, training and/or experience. Applicants must have SBB certification, as well as a valid and current Florida Clinical Laboratory Supervisor license, or eligible, in Immunohematology or Blood Banking. To apply and view a complete Job Description of this position, go to www.oneblood.org and click on the "Careers" tab. OneBlood, Inc. is an Equal Opportunity Employer/Vet/Disability.

Manager, Plasma Operations. Blood Centers of America (BCA) is a national cooperative comprising over 50 blood center members. BCA is seeking an individual with industry experience to serve as Manager, Plasma Operations. This position is responsible for specific aspects of the Plasma for Fractionation Program including managing day-to-day inquiries and operational tasks for this business unit. The person in this role must be successful in understanding the technical requirements of multiple agreements and assisting members with plasma optimization and contract compliance. The ideal candidate will possess outstanding communication abilities, relationship development talent and strong customer service skills. Five to 10 years of progressive experience in blood banking or similar field is required. Proven track record in managerial role is a plus. BCA is based near Providence, Rhode Island. Will consider remote location for the right candidate. Position requires up to 20 percent overnight travel. Please submit resume to careers@bca.coop.

POSITIONS (continued from page 11)

Immunohematology Reference Laboratory Manager (FT). Miller-Keystone Blood Center (MKBC) focuses on our mission to save lives by partnering with our community to provide a continuous supply of blood products and services. The core values Integrity, Passion, Trust, and Customer Centricity have made MKBC one of the nation's best-regarded, highly experienced blood centers, and our history of compliance with FDA and AABB requirements demonstrates our commitment to quality and service excellence. We are looking for a detail-oriented and passionate professional with a BS in biologic or clinical laboratory science, ASCP certification and SBB (or eligible) to join our management team in the Immunohematology Reference Laboratory. Responsibilities include supervising and training reference lab staff. Position oversees reference lab testing including reagent quality control, release of products and equipment maintenance. Approves patient and donor antibody work-ups and provides written and verbal consultations regarding transfusion recommendations. Writes, revised and reviews SOPs and equipment/testing validations. Duties include preparation of washed, frozen and deglycerolized components, testing, and maintenance of red blood cell phenotype database and data entry. Manages customer service and is available for on-call duties. Applicants must have a minimum five years of clinical laboratory experience in Blood Banking and three years supervisory/management experience. To apply go to our website at: www.hcsc.org. Miller-Keystone Blood Center is an EEO/AA Employer Minority/Female/Disabled/Veteran/Sexual Orientation/Gender Identity

Clinical Lab Specialist (Med Tech) (San Francisco, CA). Vitalant exists to help people realize their life-transforming potential by offering convenient blood donation opportunities and sharing our expertise in transfusion medicine. Requirements: Bachelor's degree required. Must satisfy CLIA requirements for High Complexity Testing required. Certification as a Medical Technologist or Specialist in Blood Banking (SBB) by a recognized certifying agency required. Valid CA CLS license required. Five years clinical laboratory testing experience required. One-year IRL experience preferred. Please apply [here](#). EOE

Clinical Lab Supervisor (San Francisco, CA; Req: 190704). Vitalant exists to help people realize their life-transforming potential by offering convenient blood donation opportunities and sharing our expertise in transfusion medicine. Requirements: Bachelor's degree required. Must satisfy CLIA requirements for High Complexity Testing required. Certification as a Medical Technologist or Specialist in Blood Banking (SBB) by a recognized certifying agency required. Seven years clinical laboratory testing experience required. To include: Two years supervisor experience required. Two years IRL experience preferred. Apply [here](#). EOE

Medical Technologist II (San Francisco, CA; Req:191052). Vitalant exists to help people realize their life-transforming potential by offering convenient blood donation opportunities and sharing our expertise in transfusion medicine. Bachelor's degree in a chemical, physical, biological, medical technology or clinical laboratory science required. Certification as a Medical Technologist by a recognized certifying agency required or CLIA equivalent for high complexity testing required. CA Certification as a Medical Technologist by a recognized certifying agency required or CLIA equivalent for high complexity testing required. SBB preferred. State licensure (as required by regulations). Three years' experience in a clinical laboratory setting required or SBB. Experience in developing and conducting formal training preferred. Apply [here](#). EOE

Assistant Lab Supervisor (San Francisco, CA; Req: 191123). Since 1941, Vitalant (formerly known as Blood Centers of the Pacific) has proudly served as a leader in the blood banking industry. Requirements: High School graduate or GED required. CLIA equivalent for moderate complexity testing required. Medical Laboratory Technician (MLT) or Clinical Laboratory Scientist (CLS) certification/licensed required. One-year laboratory experience required. Please apply [here](#). EOE

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 benefits 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 Ft. Lauderdale, 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. 💧