



ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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

2020 #2

January 17, 2020

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Federal Blood Advisory Committee Preserved

The U.S. Department of Health and Human Services (HHS) Advisory Committee on Blood and Tissue Safety and Availability (ACBTSA) will remain intact as a part of the Federal Advisory Committee Act. In June 2019, President Trump issued the [“Executive Order on Evaluating and Improving the Utility of Federal Advisory Committees,”](#) which instructed federal agencies to examine the need for each of its current advisory committees and to terminate one-third of committees whose:

- “stated objectives of the committee have been accomplished;
- subject matter or work of the committee has become obsolete;
- primary functions have been assumed by another entity; or
- agency determines that the cost of operation is excessive in relation to the benefits to the Federal Government.”

In a note sent to America’s Blood Centers (ABC) and other stakeholders within the blood community this week, from the Office of the Assistant Secretary for Health’s (OASH) Office of Infectious Disease and HIV/AIDS Policy (OIDP) Senior Advisor for Blood and Tissue Policy James Berger, MS, MT(ASCP) SBB that thanked the leadership of ABC, AABB, and the American Red Cross for their support and expressed that the committee “will move forward to ensure the safety and availability of the U.S. blood supply.” In July 2019, ABC, AABB, and the American Red Cross issued a letter of support to HHS Secretary Alex Azar regarding the existing structure of the ACBTSA and the U.S. Food and Drug Administration Blood Products Advisory Committee (BPAC).

The letter stated, “[t]ogether, ACBTSA and BPAC encompass a comprehensive approach to the collection and manufacture of blood and blood components that is inclusive of donors, patients, and industry. These two advisory committees have distinct roles within the statutory authority and limitations of each agency. We believe that HHS should ensure that each of these committees are preserved and the public forums continue to exist to fully inform and advise federal authorities about blood safety and availability.” The executive order from the administration stated that exemptions could be granted by the Director of the Office of Management and Budget (OMB) if the committee is needed for “the delivery of essential services.”

The joint letter from the blood community also expressed the need to maintain each committee and provided examples of their significance to the industry, “[t]he important and distinct roles of both committees is illustrated through their recent work. For instance, BPAC recently advised the FDA Commissioner on regulatory options for emerging risks to the blood supply posed by Zika virus infection and babesiosis.

(continued on page 2)



Blood Advisory Committee Preserved (continued from page 1)

BPAC also responded to specific questions from [the Center for Biologics Evaluation and Research] in support of ‘risk control strategies’ for platelets to enhance detection of bacterial contamination, resulting in decreased patient risk for adverse events and fatalities. As another example, the ACBTSA is currently working to advise the HHS Assistant Secretary for Health on the resilience of the blood supply amid a shifting donor base, increasing complexity of safety and technology measures, and economic challenges as well as considering acceptable risk tolerability for infectious diseases. The functions of these unique advisory committees are essential to ensuring highly complex regulatory and policy decisions will support a safe and robust supply of blood sufficient to meet ongoing and emergency needs of Americans across the country. We encourage you to maintain these committees of experienced experts so they can continue to provide strong advice on the state of the nation’s blood supply and advocate for the needs of donors and transfusion recipients.” The complete letter is available [here](#).

(Sources: OASH/OIDP Note, 1/15/20, Joint [Letter](#) in Support of Advisory Committees to HHS Secretary, 7/17/19) ♦



AMERICA'S BLOOD CENTERS'

58TH ANNUAL MEETING

March 9-11 | Washington, DC

“Join us in Washington, D.C. for the only industry meeting dedicated solely to advocacy as decisionmakers, thought leaders, experts, and industry partners discuss trends and issues that impact community blood centers. Value exists for professionals of all experience levels with the opportunity to let your voice be heard in policy discussions with your peers, regulators, and legislators as we work collaboratively with all stakeholders to develop solutions that advance the industry.”

Kate Fry, Chief Executive Officer
America's Blood Centers



2020 ANNUAL MEETING SCHEDULE

- March 9** General Sessions, SMT Forum, Celso Bianco, MD Lectureship
- March 10** ABC Members Meeting, Public Awareness Forum, Advocacy Forum, 23rd Annual Awards of Excellence
- March 11** Capitol Hill Congressional Visits



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



For registration information, visit http://bit.ly/abc_am20

For sponsorship opportunities, please contact Mack Benton at mbenton@americasblood.org.

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!

ABC Issues vCJD Position Paper

America's Blood Centers (ABC) has published a new position paper on the U.S. Food and Drug Administration's (FDA) variant Creutzfeldt-Jakob Disease (vCJD) deferral. This paper asks the FDA to rescind the current vCJD deferral and allow re-entry of U.S. military personnel, Department of Defense (DoD) civilians, and their families who spent time at U.S. military installations in Europe outside of the United Kingdom (U.K.) during the period of 1980-1996. It will also serve as background and the basis for discussions on the recommended change during the ABC's Advocacy Day on Capitol Hill on March 11th, 2020 during the 58th Annual Meeting and in ongoing discussion with the FDA. Members are encouraged to [participate](#) in this event.

ABC worked with our Scientific, Medical, and Technical (SMT) Committee and the Board of Directors to finalize the new paper and recommendation. Members of ABC can view the position [paper](#) on the vCJD deferral providing background and rationale for the organization's position on the ABC public website in the advocacy "[resources](#)" section.

In December 2017, FDA issued a draft Amendment to the 2016 CJD/vCJD Guidance which proposed modifications to the vCJD deferrals. The proposed changes would eliminate the deferral for donors who spent cumulatively ≥ 5 years in European countries other than France and Ireland since 1980 and cap the inclusive dates to between 1980 to 2001. Ireland would also be included in the deferral for a history of blood transfusion in the U.K. and France from 1980 to present. The deferrals for 3 months' time in U.K. and 6 months for donors exposed to U.K. beef on certain military bases in Europe would remain unchanged. ABC will continue to engage on this issue and inform members as soon as a new draft guidance is issued.

As background, vCJD the human form of Bovine Spongiform Encephalopathy (BSE), is a fatal, progressive neurological condition that was first identified in the U.K. in 1996. While generally transmitted by eating beef of animals affected, a few cases have been found to result from blood transfusion from donors that appeared healthy at the time of donation but later developed vCJD. As a result, the FDA has recognized vCJD as a relevant transfusion-transmitted infection. Because there is no licensed screening test for vCJD, in 1999 the FDA implemented geographical deferrals for blood donors depending on time in areas considered at risk for vCJD transmission. In light of the long period of time which has passed since control of the BSE epidemic in the U.K. (1980-1996), the rarity of transfusion transmission of vCJD, and the fact that no cases have been reported in U.S. military personnel, DoD civilians, nor their families, ABC feels that the time has come to revisit this policy and revise deferral criteria.

(Source: MCN [20-004](#), 1/17/20) 

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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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Celebrate National Blood Donor Month

National Blood Donor Month is entering its third full week. Blood centers across the U.S. continue to celebrate blood donation while raising awareness of the constant need for blood by recognizing volunteer blood donors and encouraging blood donation during the winter season when attracting donors can be particularly difficult due to inclement weather, the holidays, and seasonal illness. Recently, Nebraska Governor Pete Ricketts showed his support for blood donation and Nebraska Community Blood Bank by issuing a proclamation recognizing January as National Blood Donor Month.



Additionally, ADRP, an International Division of ABC, created several [resources](#) to form a complete toolkit for blood centers to use throughout the month of January. These resources include:

- Social media graphics, sized for Twitter, Instagram, and Facebook
- Sample social media posts
- Blood donor facts infographic
- Press release template
- Op-Ed article to be used with your local media and partners

ADRP and ABC encourage individuals to spread the word by using the hashtags #NationalBloodDonorMonth, #NBDM, #ADRP throughout January and challenging friends and family members to schedule an appointment to [donate](#) at least twice this year.

(Sources: Nebraska Community Blood Bank [Announcement](#), 1/7/20) 💧

How will you address the FDA bacterial risk control strategies guidance?*

One-step or two-step strategy? Pathogen reduction or bacterial detection testing? Deciding which risk control strategy to implement is no easy task.

We can help you evaluate the options — taking into consideration processes and productivity. Then we'll apply our expertise and analytics to your data and business needs to help you determine your best path forward.

[Learn more](#) or contact your Terumo BCT representative.

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Risk Factors of Hepatitis C in MSM on Preexposure Prophylaxis

A high incidence of acute hepatitis C virus (AHCV) infection (1.8 to 4.4 percent) has been reported among at-risk human immunodeficiency virus (HIV)-negative men who have sex with other men (MSM) while receiving preexposure prophylaxis (PrEP) for HIV. International guidelines recommend that HIV negative MSM starting PrEP should be tested for HCV infection at baseline using an HCV antibody test. A study published in *AIDS* sought to assess the incidence of the AHCV among high-risk MSM in the ANRS (France Recherche Nord & Sud Sida-HIV Hépatites) IPERGAY (On-Demand Antiretroviral Pre-exposure Prophylaxis for HIV Infection in MSM) PrEP trial, in addition to identifying risk factors for HCV infection, and determining the sensitivity of both indirect (enzyme immunoassay (EIA) and antibody rapid tests) and direct (EIA antigen and HCV ribonucleic acid (RNA)) assay tests available.

HIV-negative MSM who were 18 years old or above who were at high risk for HIV acquisition participated in the study. They were enrolled at seven sites (six in France and one in Canada) between February 2012 and June 2016. Follow-up visits were scheduled at four and eight weeks and then every two months until the conclusion of the study. Participants completed a questionnaire to collect sociodemographic characteristics, alcohol and/or drug consumption, sexual behavior, and factors associated with a high-risk of HCV acquisition during each visit. HCV was diagnosed using a third-generation antibody immunoassay (EIA ARCHITECT HCV Ab) that was performed: at screening every 12 months or if the alanine transaminase (ALT) was elevated more than 2.5 times the upper limit of normal. In individuals with a positive EIA, stored sera were used to perform tests at the time of diagnosis and from previous visits using rapid tests for detection of HCV antibodies, HCV viral load tests, and an HCV antigen (Ag) immunoassay.

Among 429 participants, 14 men with a median age of 30 were diagnosed with AHCV infection for a total of 932 person-years. AHCV incidence was 13/932 or 1.40 per 100 person-years. Patients with AHCV reported taking part in a significantly higher number of sexual acts over the previous four weeks (a median of 18 versus 10 sexual acts, $P=0.02$) and/or partners (a median of 17 versus eight sexual partners, $P=0.03$), and more frequent recreational drug use at baseline (57 versus 11 percent, $P=0.0001$). Compared with the EIA HCV Ab, rapid tests for detection of HCV antibodies had a lower sensitivity. At diagnosis, the EIA HCV Ag and viral load tests had a sensitivity of 100 percent and all patients had significantly elevated ALT (median 451 IU/l). Analysis of stored sera showed that median time between AHCV diagnosis and the prior visit with a negative HCV RNA was 3.5 months. Only 25 percent of the cases had an elevated ALT (median 291 IU/l) at the visit preceding AHCV diagnosis.

The study demonstrated a high incidence of AHCV infection in HIV-negative MSM on PrEP. Only anti-HCV serology is currently recommended for screening in France, however, the study found that the HCV Ag immunoassay and plasma HCV RNA tests were reactive in most cases within a median of two months prior to the detection of antibodies. The authors concluded that the HCV Ag immunoassay had excellent diagnostic performances for the early diagnosis of HCV in addition to being less expensive than HCV RNA. They suggested it may be a good alternative for screening.

Citation: Gras, J., Mahjoub, N., Charreau, I., *et al.*, Early diagnosis and risk factors of acute hepatitis C in high-risk MSM on preexposure prophylaxis. *AIDS*. 2020. Doi: [10.1097/QAD.0000000000002364](https://doi.org/10.1097/QAD.0000000000002364).

Contributed by Richard Gammon, MD, Medical Director at OneBlood 

RESEARCH BRIEFS

America's Blood Centers welcomes 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 a brief for potential publication please contact us [here](#).



RECENT REVIEWS

A series of reviews on obstetric hemorrhage has been published in the *Seminars of Perinatology*. It explores several aspects of postpartum hemorrhage including blood product management and massive transfusion including appropriate response novel treatments. The complete series is available [here](#) which also provides an:

- overview;
- anesthesia, medical, and surgical management;
- early identification challenges; and
- reporting and systems learning.

Citation: Kogutt, B. and Vaught, A. [Postpartum hemorrhage: Blood product management and massive transfusion.](#) ♦

BRIEFLY NOTED

The Centers for Disease Control and Prevention (CDC) is hosting its next webinar in the Public Health Webinar Series on Blood Disorders entitled “Science Update: State of the Science on Inhibitors.” The webinar will focus on “developing scientific priorities and implementation strategies for the following types of research studies:

- clinical trials to prevent and eradicate inhibitors;
- specimen collection and observational cohort studies;
- immunology studies of the host immune response and tolerance; and
- longitudinal cohort studies of FVIII immunogenicity and predictors of inhibitor risk.

[Registration](#) is currently open and webinar is scheduled to take place on February 13th at 2 p.m. Eastern Standard Time. It will feature Steven Pipe, MD of the University of Michigan and Margaret Ragni, MD, MPH of the University of Pittsburgh.

(Source CDC [Announcement](#), 1/14/19) ♦

WORD IN WASHINGTON

President Trump recently signed a bipartisan bill into law designed to reduce unwanted robocalls. The Telephone Robocall Abuse Criminal Enforcement and Deterrence (TRACED) Act increases penalties for violations and provides greater protection from invalid use of phone numbers, also known as spoofing. “the TRACED Act convenes a working group with representatives from the Department of Justice, the Federal Communications Commission (FCC), the Consumer Financial Protection Bureau, state attorneys general, and others to identify ways to criminally prosecute illegal robocalling,” said Sen. John Thune (R-S.D.) in a news [release](#). “And in the meantime, it expands the window in which the Federal Communications Commission can pursue scammers and levy fines from one year to four years.” Telecommunications companies are required to implement, without a separate charge, technology to authenticate and block problematic calls. Through educational efforts, ABC and other stakeholders that appropriately use robocalling and text messaging technologies were able to ensure the final legislation did not include provisions that would have likely blocked appropriate calls. The legislation provides the FCC with additional authority to create rules to reduce the rate of unwanted texts and robocalls. “The annoying and harassing robocalls we receive every day are neither a Democrat nor Republican menace,” said bill co-sponsor Sen. Ed Markey (D-Mass.) in a news [release](#). “They are a universal menace.

(continued on page 7)



WORD IN WASHINGTON (continued from page 6)

The TRACED Act cracks down on scammers by requiring phone carriers to authenticate whether calls are legitimate, and then blocking unverified robocalls at no charge to consumers. I thank Sen. Thune for his unwavering partnership on this important consumer protection issue.” Through ABC’s efforts, we have the opportunity to continue to work with the FCC to ensure calls to donors are not impacted by these new rules. The law did not include any deadlines for this rulemaking process. ABC will continue to engage with the FCC to ensure blood centers’ concerns and uses of these phone calls and text messages are considered as rulemaking moves forward.

(Sources: Sen. John Thune News Releases, [1/9/20](#), [12/19/19](#))

The U.S. Department of Health and Human Services (HHS) distributed a bulletin warning healthcare organizations to patch vulnerabilities in Microsoft Windows operating systems using recently released updates. The Office of the Assistant Secretary for Preparedness and Response (ASPR) issued the warning following an Emergency Directive and Activity Alert from the Cybersecurity and Infrastructure Security Agency (CISA). The HHS bulletin warned that, “[t]his recommendation is based on the likelihood of the vulnerabilities being weaponized, combined with the widespread use of the affected software across the sector and high potential for a compromise of integrity and confidentiality of information,” according to *Health Data Management*. The CISA alert stated, “[o]n January 14, 2020, Microsoft released software fixes to address 49 vulnerabilities as part of their monthly ‘Patch Tuesday’ announcement. Among the vulnerabilities patched were critical weaknesses in Windows CryptoAPI, Windows Remote Desktop Gateway (RD Gateway), and Windows Remote Desktop Client. An attacker could remotely exploit these vulnerabilities to decrypt, modify, or inject data on user connections...CISA strongly recommends organizations install these critical patches as soon as possible—prioritize patching by starting with mission critical systems, internet-facing systems, and networked servers. Organizations should then prioritize patching other affected information technology/operational technology (IT/OT) assets.” Additional details including the full [alert](#) are available on the CISA [website](#).

(Source: CISA Emergency Directive and Activity [Alert](#), 1/14/20, *Health Data Management*, HHS calls on healthcare organizations to patch Windows vulnerabilities, 1/15/20) ◆

COMPANY NEWS

Bluebird bio, Inc.’s gene therapy treatment (ZYNTGLO™) for patients that are 12 years of age and older with transfusion-dependent beta thalassemia (TDT) is available in Germany. This marks the first time that ZYNTGLO™ is commercially available. “For patients with TDT, lifelong chronic blood transfusions are required in order to survive”, said bluebird bio’s Chief Operating Officer Alison Finger, in a company news [release](#). “We are thrilled to announce that ZYNTGLO will now be available for patients in the EU living with this severe disease. In addition to confirming manufacturing readiness of our partner, apceth Biopharma GmbH, bluebird has also submitted a dossier to the Joint Federal Committee (G-BA) in Germany for drug benefit assessment. We would like to thank our collaborators for their commitment in helping us transform the healthcare system by accepting innovative payment models, and we look forward to treating our first commercial patient soon.” Earlier this year, the European Medicines Agency approved the refined drug product manufacturing specifications for ZYNTGLO™. The one-time gene therapy treatment for TDT patients is specifically for those who would otherwise rely on hematopoietic stem cell (HSC) transplantation but are unable to find a human leukocyte antigen (HLA)-matched related HSC donor. Individuals receiving the treatment make an initial down payment and will only be responsible for the remaining four additional annual payments if “no transfusions for TDT are required for the patient.”

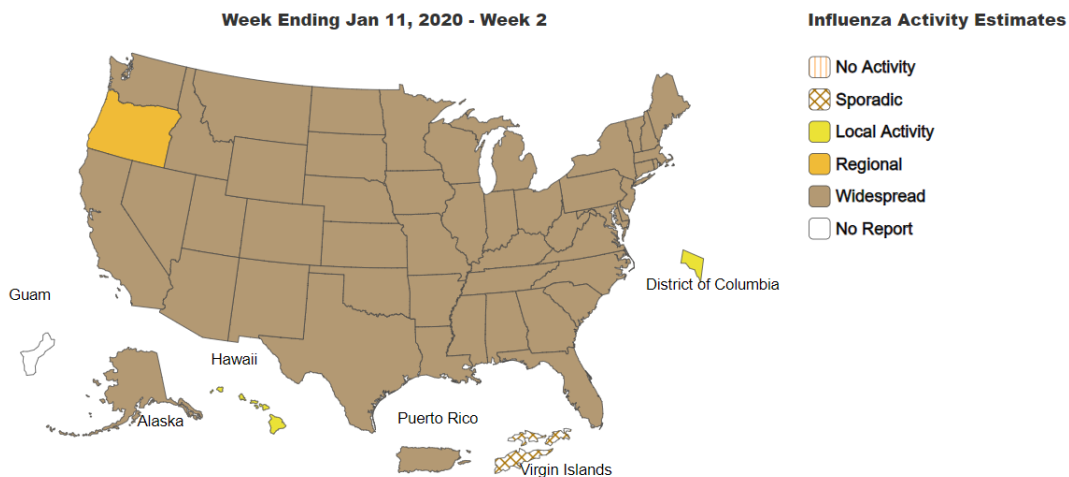
(Source: bluebird bio, News [Release](#), 1/13/19) ◆



INFECTIOUS DISEASE UPDATES

INFLUENZA

The Centers for Disease Control and Prevention (CDC) reported that the flu activity is widespread in 48 states and Puerto Rico. Only Oregon is exhibiting regional activity, while Hawaii and the District of Columbia are reporting local activity respectively as of January 11th. More than 5,700 hospitalizations have been linked to flu as of CDC's latest figures from October 1st, 2019 – January 11th, 2020. The hospitalization rate per 100,000 people increased to 19.9. Thirty-nine children have died this season from flu. CDC officials note that the best defense against the flu remains the flu vaccine and that it's not too late to get vaccinated.



(Sources Centers for Disease Control and Prevention Summary of Weekly FluView [Report](#), 1/11/20) 💧

NOVEL CORONAVIRUS

The World Health Organization (WHO) issued a [statement](#) following confirmation of a case of the novel coronavirus of an individual in Thailand and an imported case in Japan that are linked to the original novel coronavirus in China's Wuhan City Hubei Province. "The possibility of cases being identified in other countries was not unexpected and reinforces why WHO calls for on-going active monitoring and preparedness in other countries. WHO has issued [guidance](#) on how to detect and treat persons ill with the new virus." The coronavirus outbreak in China is thought to be associated with exposures to a seafood market in Wuhan and "no clear evidence of human to human transmission" reports the WHO as patients are being treated for pneumonia-like symptoms. One death has been reported in the 41 confirmed cases in China as of January 12th.

(Sources: WHO [Statement](#), 1/13/20, Outbreak [Update](#) 1/12/20) 💧

We Welcome Your Letters

The *ABC Newsletter* welcomes letters from its readers on any blood-related topic that might be of interest to ABC members. Letters should be kept relatively short and to the point, preferably about a topic that has recently been covered in the *ABC Newsletter*. Letters are subject to editing for brevity and good taste and published after editorial review. Please send letters to the Editor at newsletter@americasblood.org or fax them to (202) 899-2621. Please include your correct title and organization as well as your phone number. The deadline for letters is Wednesday to make it into the next newsletter.



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

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.

Register for the 2020 ABC Annual Meeting

[Registration](#) is open for America's Blood Centers' (ABC) 58th Annual Meeting in Washington, D.C. March 9th – 11th, 2020 at the Ritz-Carlton (Pentagon City). Join us for the premiere blood community meeting that brings blood center, regulatory, legislative, and medical leadership together to focus on key issues which will ultimately impact blood center bottom-lines. From implementation challenges for the new bacterial guidance to the operational complexities entailed in gender identification, the ABC Annual Meeting will provide you with the latest updates on these topics and more, along with the opportunity to help shape the association's advocacy and policy efforts.

Additionally, attendees will have the chance to work collaboratively with their peers and ABC leadership in developing solutions that address internal and external needs ranging from health policy to donor motivations. This is the only meeting in the industry that focuses solely on advocacy and includes a day on Capitol Hill to let our voices be heard. Please make your hotel [reservations](#) by February 1st to ensure best availability and the group rate. Contact [Jeanette Brown](#) for available sponsorship opportunities.

Registrant substitutions are accepted any time at no charge. Registrations cancelled after February 16 will be refunded, less \$200. No refunds after March 8. CME and P.A.C.E.® credits will be offered. Schedule at a glance:

- ABC Board Meeting (**open to ABC Members only*) (March 8th)
- General Sessions & SMT Forum & Celso Bianco Lectureship (March 9th)
- ABC Members' Meeting (**open to ABC Members only*) & Public Awareness Forum & Advocacy Forum (March 10th)
- 23rd Annual Awards of Excellence (March 10th)
- Advocacy Day – Capitol Hill Visits (March 11th)

(Source: MCN [19-086](#), 12/18/19) ♦





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)	Registration now open!
ADRP 2020 Conference	May 19 th -21 st	Phoenix, Ariz.	Hyatt Regency	Registration now open!
2020 ABC Medical Directors Workshop and Summer Summit	July 21 st -23 rd	Cleveland, Ohio	Westin Downtown	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](#).

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 newsletter@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.)

2020

Jan. 28-29. U.S. Department of Health and Human Services Tick-Borne Disease Working Group Public Meeting, Washington, D.C. More details available [here](#).

Mar. 9-11. 2020 ABC Annual Meeting, Washington, D.C. Registration is [open](#).

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 available [here](#).

July 21-23. 2020 ABC Medical Directors Workshop and Summer Summit, Cleveland, Ohio. More details coming soon.

Oct. 3-6. 2020 AABB Annual Meeting, Baltimore, Md. More information available [here](#). 💧

Upcoming ABC Webinars – Don’t Miss Out!

- **ABC QA Education Webinar: Irradiator Replacement at Blood Centers** – January 21st from 3 – 4:30 p.m. (ET). Additional details and login information available [here](#).

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, e-mail: newsletter@americasblood.org



POSITIONS

Hematologist/Medical Director. Our growing clinical practice in the area of outpatient therapeutic apheresis and therapeutic phlebotomy is seeking a board-certified hematologist to broaden our clinical services to include pre-op anemia management, cell therapy and treatment of blood disorders. If you have a passion to join a team that is providing cutting-edge medical expertise in the areas of outpatient clinical transfusion medicine, blood banking, immunohematology reference laboratories, therapeutic apheresis, cellular therapy and research, consider joining OneBlood as a Medical Director. Qualified candidates should possess a minimum of 3 years' experience and a M.D. or D.O. degree with board certification in Internal Medicine/Hematology and sub-specialty board certification 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 Ft. Lauderdale, Florida area, with some of the most gorgeous beaches in the nation! If you want to join our lifesaving 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.

Technical Director. This position's responsibilities include coordination/management of the departments of Distribution, Component Production, Testing and Labeling (North Texas) and Hematology (North Texas and East Texas). He/she will manage departmental operations with strong planning and developmental skills. This individual will also be responsible for advising and informing all senior management regarding departmental activities, requirements, and the requirements of the region's hospitals and transfusion services. Also, the position will maintain effective and regular communication with hospital representatives, both in the laboratory and at the administrative level. Other requirements include: Bachelor's degree required, MBA preferred, MT degree or equivalent, 10 years' experience in blood bank

administration/ management; and five years' experience in blood banking with experience in inventory management and a working knowledge of component production issues; and five years' experience in blood bank laboratory operations including product quality control and quality assurance activities. Knowledge of hematology instrumentation, bacterial detection testing and environmental monitoring a plus. Equivalent combination of education and experience, working knowledge of all applicable AABB standards and FDA regulations associated with production, distribution, storage, and transportation of blood products. Understanding of employment law, OSHA requirements, departmental planning, cost accounting, and budgeting. Carter Blood-Care is an EEO/Affirmative Action employer. For full posting, visit www.carterbloodcare.org.

Reference Lab Manager. OneBlood is currently recruiting for a Lab Manager in our AABB-Accredited Immunoematology 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 Immunoematology 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. ♦