



ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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Second Case of Novel Coronavirus Confirmed in U.S. as the Blood Community Continues to Monitor

This week the World Health Organization (WHO) called an emergency meeting to discuss the ongoing outbreak of a novel coronavirus (2019-nCoV) as mounting evidence suggests that the infection can be spread person-to-person. The infection was first identified in the Wuhan, Hubei Province of China, where more than 800 potential cases have been reported with 26 deaths according to *CNBC*, but has now been confirmed in the U.S. by the Centers for Disease Control and Prevention (CDC) as a second U.S. case was announced today by the agency as it continues to investigate 61 potential cases from 22 states.

The AABB Transfusion Transmitted Diseases (TTD) Committee issued a [summary](#) that provided additional background on 2019-nCoV and noted that “[n]o data on the presence of viral nucleic acid or infectious virus in blood have been reported to date for this coronavirus strain. AABB’s Transfusion Transmitted Diseases Committee is monitoring developments continuously and members have been in contact with both [the U.S. Food and Drug Administration] and CDC to assess any need for interventions to protect the safety of the blood supply as our information expands, given the potential similarities of this virus to SARS and MERS-CoV (the Mideast Respiratory Syndrome Coronavirus)”.

The WHO has elected not to declare a global health emergency at this time, but “[expects] that further international exportation of cases may appear in any country. Thus, all countries should be prepared for containment, including active surveillance, early detection, isolation and case management, contact tracing and prevention of onward spread of 2019-nCoV infection, and to share full data with WHO.” CDC defines coronaviruses as “a large family of viruses, some causing respiratory illness in people and others circulating among animals.”

(Sources: AABB TTD [Summary](#), 1/23/20; *CNBC*, [New CDC coronavirus: 2nd case confirmed in the U.S.](#), 1/24/20; WHO [Statement](#), 1/23/20) ♦

Upcoming ABC Webinars – Don’t Miss Out!

- **SMT Journal Club Webinar** – March 30th from 2 – 3 p.m. (E.T.) More information coming soon.

ABC Cosigns Joint Comments to TBDWG

America's Blood Centers joined AABB, the American Red Cross, the American Society for Transplantation and Cellular Therapy, and the Cord Blood Association in submitting joint [comments](#) to the Tick-Borne Disease Working Group (TBDWG) in advance of their next public [meeting](#) January 28th-29th in Washington D.C. The comments thank federal officials for acknowledging the importance of combating tick-borne diseases in the Kay Hagan Tick Act and states that the legislation will assist with improving the rapid detection of new agents and the public's health. It also encourages the TBDWG to include four recommendations in its report to Congress:

- “ensure that surveillance and research findings are shared with the Food and Drug Administration’s (FDA) Center for Biologics Research and Evaluation (CBER) in a timely manner to inform evidence-based policies;
- recognize gaps in research related to the impact of tick-borne diseases on the blood supply as well as on cellular therapies and biotherapies;
- consult with individuals with expertise in the impact of tick-borne diseases on the safety and availability of blood and HCT/Ps; and
- encourage the safety and availability of blood and HCT/Ps to be integrated into the national strategy for tick-borne diseases.”

The Kay Hagan Tick Act is named in honor of former Sen. Kay Hagan (D-N.C.) who passed away in October from complications associated with the tick-borne disease Powassan virus. The legislation:

- requires the U.S. Department of Health and Human Services to create a national strategy to promote research, better testing, and encourage interagency coordination from the federal government;
- reauthorizes \$50 million in funding over five years for Regional Centers of Excellence in Vector-Borne Disease; and
- allows the Centers for Disease Control and Prevention to issue \$20 million dollars annually in grants to state health departments to improve the collection of data, surveillance efforts, treatment, and awareness of vector-borne diseases.

(Sources: Joint [Comments](#), 1/22/20) ♦

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!

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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.

America's Blood Centers

Chief Executive Officer: Kate Fry

Chief Medical Officer: Rita Reik

Editor: Mack Benton

Subscriptions Manager: Leslie Maundy

Annual Subscription Rate: \$390

Send subscription queries to

memberservices@americasblood.org

America's Blood Centers

1717 K St. NW, Suite 900, Washington, DC 20006

Phone: (202) 393-5725

Send news tips to newsletter@americasblood.org.



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



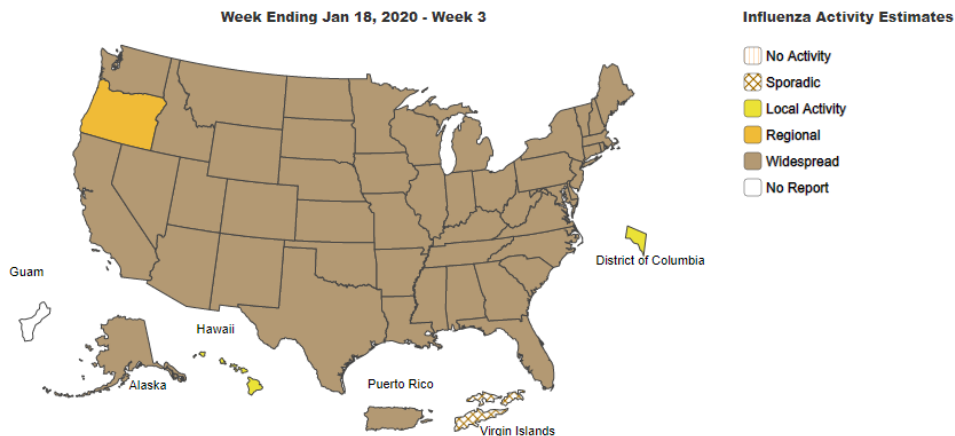
For registration information, visit http://bit.ly/abc_am20

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

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 18th. More than 7,000 hospitalizations have been linked to flu as of CDC's latest figures from October 1st, 2019 – January 18th, 2020. The hospitalization rate per 100,000 people increased to 24.1. Fifty-four 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](#), 1/24/20) ◆



How Big Is the U.S. Donor Pool?

In 2007, 38 percent or 111 million individuals within the U.S. population were thought to be eligible to donate blood according to estimations. A study published in *Transfusion* reexamined the exclusion factors to obtain a current estimate of the eligible U.S. donor population.

In determining the potential donor pool, the authors distinguished between donor deferral and donor exclusion. Donor deferral was defined as individuals who presented as potential blood donors but for various reasons did not meet eligibility criteria. Donor exclusion referred to the total number who would not be suitable blood donors because of established risk factors. They used the following research methods:

- identify and categorize donor exclusion factors;
- select an appropriate database for each donor exclusion factor, determine the population prevalence for each donor exclusion factor;
- adjust the prevalence for each donor exclusion factor by age;
- and adjust the prevalence for each donor exclusion factor by duration [permanent (366 days- permanent), long-term (60-365 days), and short-term (1-59 days) exclusion], and estimate and adjust the prevalence for comorbidities.

These calculations were used to provide an estimate of the excluded donor population, from which the population of eligible blood donors could be approximated.

In 2018, the U.S. had a population of 327 million individuals of which 253 million were aged 18 years or older. The study found that that 97.5 million had permanent exclusions while 20.7 million had long-term exclusions with another 100 million people having short-term exclusions. Once adjusted for comorbidities, the total population eligible for blood donation was 204.9 million or 62.6 percent.

It was noted that a portion of the increase in eligibility in 2018 in comparison to 2007 was due to the inclusion of the 65 years and older age segment. The exclusion of this group in the previous study was due to practice patterns as there were no deferrals per AABB BB/TS Standard nor U.S. Food and Drug Administration (FDA) guidance. This provided an additional 51 million. The population has increased by 33.5 million. The table summarizes the changes in blood donor exclusion factors in the 11 years between the two studies.

Changes	2007	2018
US population	293,665,000	327,167,434
New exclusion factors		<ul style="list-style-type: none"> • Babesiosis • Ebola • Diagnosis of malaria • People who inject drugs • West Nile virus • Immunizations (typhoid, yellow fever) • Immunizations (chickenpox, shingles) • Organ transplants • Blood transfusions • Tattoo • Lyme disease • Allergies
Removed exclusion factors		<ul style="list-style-type: none"> • Long-term exclusion
Male-to-male sexual contact	Permanent exclusion	Long-term exclusion
Travel to malarial region	Permanent exclusion	Long-term exclusion
Individuals aged 65 years and older	Excluded	Included

Courtesy of Transfusion

The comparison of the two periods showed substantial changes in the prevalence of several exclusion factors including increases in cancer (9.1 million), heart disease (4.7 million), expatriation (5.2 million), renal disease (3.3 million), diabetes (18.5 million), illness/cold/flu (694 million), and stroke (2.7 million). Another significant event in the past decade was the change in age demographics. Between 2010 to 2017, “there was an increase in the baby boomer population and a small increase in the millennial and generation Y populations,” while a decrease in the generation X and Z populations occurred. Baby boomers were not the largest group though they made up the largest portion (31 percent) of successful blood donors. Generation Z made up the largest age cohort but only accounted for 22 percent of blood donors. The authors stated that this demographic change was concerning because the individuals who donated at the highest rate were not

(continued on page 5)



Size of U.S. Donor Pool (continued from page 4)

the largest age group and were at higher risk of being diagnosed with conditions that may exclude them from donating blood. In spite of the increase in eligible blood donors, the authors suggested supply limitations appeared to be due to differences in social commitments by changing demographics and possibly due to the elimination of high-cost blood collection operations by blood suppliers.

Citations: Riley, W., Schwei, M., McCullough, J. [The United States' potential blood donor pool: estimating the prevalence of donor exclusion factors on the pool of potential donors](#). *Transfusion*. 2007.

To, L., Dunnington, T., Thomas, C., *et al.* [The United States' potential blood donor pool: updating the prevalence of donor-exclusion factors on the pool of potential donors](#). *Transfusion*. 2020. doi:10.1111/trf.15573.

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](#).

WORD IN WASHINGTON

The U.S. Department of Health and Human Services (HHS) published a [draft](#) of the “2020-2025 Federal Health Information Technology (IT) Strategic Plan. More than 25 federal organizations collaborated on the plan led by HHS' Office for the National Coordinator for Health IT. The draft plan provides goals and objectives for the agency's health IT strategy and “will serve as a roadmap for federal agencies and drive private sector alignment. Agency officials will use it to prioritize resources, align and coordinate efforts across agencies, signal priorities to the private sector, and benchmark and assess change over time.” The draft plan prioritizes:

- promoting health and wellness;
- enhancing the delivery and experience of care;
- building a secure, data-driven culture to accelerate research and innovation; and
- connect healthcare and health data through an interoperable health IT infrastructure.

The agency is soliciting [comments](#) from the public regarding the plan through March 18th.

(Source: HHS News [Release](#), 1/15/20; HHS Draft 2020-2025 Federal Health Information Technology (IT) Strategic [Plan](#), 1/15/20) 💧

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.



MEMBER NEWS

Shepard Community Blood Center has partnered with the American Heart Association's (AHA) Central Savannah River Area (CRSA) chapter in hopes of assisting patients in need, while increasing both blood donations within the community and financial support to the local chapter of the AHA. For every presenting donor that mentions the AHA and successfully donates, Shepard Community Blood Bank will contribute \$5 to the AHA CRSA. "Last year, we were about 2,000 blood products short of meeting our needs for the hospital," [said](#) Shepard Community Blood Center President and Chief Executive Officer Kevin Belanger, DHA, MS, MT(ASCP)SBB to *The Augusta Chronicle*. "It's going to help us bring [in] donors ... [and] allow a donor, not only to give blood, but [we] are going to donate \$5 for every donation [throughout the] year back to the AHA CRSA." Kayla Kranenberg, executive director of the AHA CRSA added, "[h]opefully it's a really successful campaign. If Kevin wants to keep partnering with us, we can keep increasing the [number of] donors, specifically young donors." Her organization's goal is to raise \$25,000 through the partnership and increase awareness of the ongoing need for blood in the community.



Photo courtesy of The Augusta Chronicle: AHA's Kayla Kranenberg (left) and Shepard's Kevin Belanger DHA, MS, MT(ASCP)SBB (right).

(Source: *The Augusta Chronicle*, [American Heart Association and Shepard Blood Center announce partnership](#), 1/21/20) 💧

GLOBAL NEWS

Denmark is set to begin implementing a revision to its blood donor deferral policy for men who have sex with other men (MSM). The deferral policy is changing to four months for MSM rather than the lifetime deferral that has been in place since 1988. "The introduction of blood donation for MSM is a positive move," wrote current Danish Minister of Health Magnus Heunicke in parliamentary notice according to an [article](#) published by *The Local Denmark*. "With the four-month probation period, Denmark will be among the most progressive countries in the world with regard to blood donation for MSM." The new deferral policy is expected to take effect in March to allow blood centers time to prepare for implementation. Former Danish Health Minister Ellen Trane Nørby first announced the policy change in August 2018.

(Source: *The Local Denmark*, [Denmark changes 1988 health legislation to allow gay men to give blood](#), 1/20/20) 💧





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 meeting also 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!
<p>Notes:</p> <p>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.</p>				



COMPANY NEWS

Cerus Corp. announced this week that the French National Agency for the Safety of Medicines and Health Products' annual hemovigilance report revealed no cases of bacterial infection from platelet transfusion in 2018, which coincides with the first full year of use of the Intercept blood system for pathogen reduced platelets. Fifteen cases of bacterial infection occurred in France from 2013-17. "The new hemovigilance data published by ANSM underscores the clinical utility and the safety benefits conferred by the use of the Intercept blood systems for platelets," said Cerus President and Chief Executive Officer William 'Obi' Greenman, in a company news release. "We are proud that every single patient receiving a platelet transfusion in France today is benefitting from our pathogen-reduction technology." France transfused 320,235 Intercept-treated platelet units according to the report, representing 99.9 percent of the country's platelet needs. "The French Hemovigilance system is the most robust surveillance system for transfusion safety in the world and it is encouraging to observe that the Intercept system provided the expected safeguard to the French platelet supply during its first full year in routine use at 100 percent," added Richard Benjamin, MD, PhD, Cerus' chief medical officer in the release. "We believe this large new data set documenting the French experience will provide further confidence to U.S. blood centers and hospitals as they anticipate increasing use of INTERCEPT in order to comply with the FDA's Guidance Document on platelet bacterial safety."

(Source: Cerus Corp. News [Release](#), 1/21/20) ♦

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](#). ♦

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

Director, Regulatory Affairs. America's Blood Centers (ABC), North America's largest network of community-based, independent blood programs, is seeking a Director, Regulatory Affairs. The position will be actively involved and accountable for the development, implementation, execution and advancement of the ABC regulatory agenda before federal agencies and other stakeholders. In addition, the position will assist in the facilitation of member education, evaluation and coalescing of member input in the development of industry positions, data collection from internal and external sources, and primary and secondary research. The position will report directly to the Senior Director, Federal Government Affairs, providing strategic guidance on regulatory affairs and public policy issues pertaining to the nation's blood supply. A bachelor's degree is required for the position, which is based in Washington, D.C. This individual should: have a thorough understanding of the federal regulatory processes and landscape, particularly with the FDA; have knowledge of and experience in health policy; blood industry knowledge preferably (but not required); be able to collect, analyze, and synthesize information from varied sources; have strong critical thinking, analytical, and problem-solving skills; be self-motivated and goal oriented; have the ability to multitask and determine priorities; be able to network and collaborate effectively with colleagues and volunteers; have strong communication skills - verbal, written, and presentation; and be able to travel, sometimes at short notice. ABC offers a salary commensurate with experience as well as an excellent benefit package including medical, dental, LTD, and 401k contribution. We are a hybrid virtual office that promotes a flexible work environment. This is a full-time staff position including benefits and a stipend for internet and telephone services. ABC prohibits discrimination and provides equal employment opportunities to all employees and applicants for employment without regard to race, color, religion, age, sex, national origin, disability status, genetics, protected veteran status, sexual orientation, gender identity or expression, or any other characteristic protected by federal, state or local laws. The full job description is available [here](#). Interested applicants should send a cover letter and resume to careers@americasblood.org.

Clinical Laboratory Scientist. Hoxworth Blood Center seeks a full-time, second shift, Clinical Laboratory Scientist in the Immunohematology Reference Laboratory. Position requires a minimum of two (2) years transfusion service/blood bank or immunohematology reference laboratory experience. Position will perform routine, complex immunohematology serological testing with minimal supervision; evaluate, interpret test results, prepare reagents, select components for transfusions, maintain rare blood inventories; perform quality control procedures, computerized data entry, retrieval functions; communicate effectively with individuals in and outside the department. Requires participation in on-call duty. Applicants must qualify as High Complexity Laboratory

Testing Personnel and as a General Supervisor as defined by CLIA regulations (CFR 493.1487 and CFR 493.1461). Registry eligible individuals must take and pass the MLS(ASCP) or BB(ASCP) exam within 12 months of employment. Applicants must have a strong commitment to quality patient care and a customer service focus. Apply online at www.jobsatuc.com for Position Number: 213HX6932. Visit Hoxworth Blood Center at www.hoxworth.org. The University of Cincinnati Academic Medical Center offers an excellent compensation package that includes full tuition remission for employees and their dependents and great medical benefits. The University of Cincinnati is an Equal Opportunity/Affirmative Action/Equal Access Employer.

Technician I – Phlebotomist. We Are Blood (Austin, Texas) has been drawing Central Texans together since 1951. As the exclusive community blood supplier, we serve over 40 hospitals and medical facilities in a 10-county area. Our mission is to provide and protect the community blood supply, to inspire Central Texans to save lives locally, and to always treat everyone we serve as family. When you work here, you're a vital part of helping to ensure that all Central Texans have access to life-saving blood when they need it! This individual will determine donor eligibility, perform phlebotomy techniques, and manage adverse donor reactions at fixed site. Responsibilities: report to work according to department schedule and comply with organizational timekeeping policy; maintain the donation site and equipment according to SOP: Assembly, daily quality control procedures, routine/preventative maintenance, housekeeping procedures and disassembly; process and accurately document allogeneic whole blood donations according to SOP: registration, medical history interviews and vital signs (pulse, blood pressure, hematocrit, and temperature), phlebotomy; respond to donor reactions according to SOP: Identify/treat symptoms, monitor/perform vital signs (pulse and blood pressure) and accurately document the reaction; review electronic/hard copy documentation, as appropriate, according to SOP; execute special projects and other duties as assigned by Supervisor or Operations Manager. Requirements: high school graduate or equivalent; effective communication skills; compassionate interpersonal skills; excellent customer service skills; basic computer skills; punctual and dependable; experience in phlebotomy and/or taking vital signs is preferred; certification as a phlebotomist, medical assistant, EMT, paramedic or LVN is a plus; ability to interpret and respond appropriately to sensitive/confidential information and situations; ability to maintain focus and make sound judgments in a busy/distracting environment; ability to perform the same task repeatedly while maintaining a high level of accuracy; ability to read/follow SOPs and to maintain complete/accurate records; ability to work well in a team environment; ability to

(continued on page 10)

POSITIONS (continued from page 9)

work a flexible schedule including Saturday and/or Sunday; good manual dexterity; ability to lift up to 25 pounds unassisted; and the ability to stand for long periods. Local applicants only; EEO Employer: Minorities/Women/Veterans/Disabled; interested in our organization, but not this job? Apply [here](#); Check us out on our [website](#) to find out how you else you can be a part of our family.

Technician I – Mobile Phlebotomist. We Are Blood (Austin, Texas) serves over 40 hospitals and medical facilities in a 10-county area. Our mission is to provide and protect the community blood supply, to inspire Central Texans to save lives locally, and to always treat everyone we serve as family. When you work here, you're a vital part of helping to ensure that all Central Texans have access to life-saving blood when they need it! This individual will determine donor eligibility, perform phlebotomy techniques, and manage adverse donor reactions at blood drives across the Central Texas area. Responsibilities: loading/unloading the mobile bus, setting up/taking down the blood drive event, and maintaining excellent donor relations; report to work according to department schedule and comply with organizational timekeeping policy; maintain the donation site and equipment according to SOP: Assembly, daily quality control procedures, routine/preventative maintenance, house-keeping procedures and disassembly; process and

accurately document allogeneic whole blood donations according to SOP: registration, medical history interviews and vital signs (pulse, blood pressure, hematocrit, and temperature), phlebotomy; respond to donor reactions according to SOP: Identify/treat symptoms, monitor/perform vital signs (pulse and blood pressure) and accurately document the reaction; review electronic/hard copy documentation, as appropriate, according to SOP; execute special projects and other duties as assigned by Supervisor or Operations Manager. Requirements: high school diploma or equivalent required; experience in a blood center is preferred, Certification as a Phlebotomist, Medical Assistant, EMT, Paramedic or LVN is a plus; open availability needed; MUST be able to work a full-time schedule with flexible hours to include evenings, weekends, and holidays; effective communication, compassionate interpersonal and excellent customer service skills; basic computer skills; punctual and dependable ability to work well in a team environment able to lift 25 pounds unassisted and ability to stand for long periods; ability to work well in a team environment and good manual dexterity; and the ability to perform the same task repeatedly while maintaining a high level of accuracy. Local applicants only; apply [here](#). Interested in our organization, but not this job? Check us out our [website](#) to view other opportunities within our organizations to make you a part of our Family. EEO Employer: Minorities/Women/Veterans/Disabled; an open house and hiring fair with on-site interviews will take place on January 29th from 5 – 6 p.m. central. RSVP by calling (512) 206-1112. Send resumes to resumes@tcms.com. ♦