

A B C N E W S L E T T E R

URRENT EVENTS AND TRENDS IN BLOOD SERVICES

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2020 #28

August 14, 2020

Mayo Publishes Convalescent Plasma Study Efficacy Data

In June, researchers at the Mayo Clinic published safety findings from a study of COVID-19 convalescent plasma (CCP) from recovered COVID-19 patients that "found investigational CCP to be safe following transfusion in a diverse group of 20,000 patients." This week, the investigators released efficacy data that associates CCP with reduced mortality in COVID-19 patients.

The preprint published <u>findings</u> of the U.S. Food and Drug Administration's (FDA) Expanded Access Program (EAP) for COVID-19 span three months and include more 35,000 patients. "We found that patients who were treated early and within three days of diagnosis treated with convalescent plasma that contains high levels of antibodies have evidence of improved survival or in other words decreased mortality," said Mayo Clinic Principal Investigator of the EAP and lead author of the study Michael Joyner, MD in <u>video</u> interview from Mayo. "And that's really the main finding of this paper. If people get convalescent plasma with high levels of antibodies and they get it early after diagnosis their mortality rate appears to be lower."

The study cohort included 52.3 percent critically ill patients in the intensive care unit with 27.5 percent on ventilators at the time of transfusion. The investigators also "report that in a subset of the cohort (3,082 patients), they found lower mortality associated with plasma transfusions that contained higher levels of antibodies against the virus that causes COVID-19." A reduced seven-day mortality rate was seen in patients that were transfused within three days of diagnosis "with similar trends seen for the the 30-day mortality rate." Also, they associated reduced mortality, both seven-and 30-day, with the use of CCP.

"Two signals of efficacy are time of diagnosis from administration of convalescent plasma and the antibody levels in the plasma. The time from diagnosis to treatment had a random element to it as did the antibody levels in the convalescent plasma that was administered. So that gave us some levels of variability and randomization that permitted us to construct what you might describe as dose response curves looking at time from diagnosis to treatment and also antibody levels versus outcomes. And then combine the two to demonstrate or at least provide evidence that early treatment with convalescent plasma with high levels of antibodies was probably associated with the very best outcomes."

The study took place from April 4th to July 4th and featured a "diverse representation of participants" that were enrolled adults in the EAP. Dr. Joyner concluded that additional reasearch should continue to take place. "We need to continue to look at

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Mayo CCP Study (continued from page 1)

our database and continue to understand what properties in convalescent plasma are associated with improved outcomes, the volume of convalescent plasma required, or does it make a difference...and then we also need to integrate our findings with ongoing clinical trials. And those clinical trials include trials in hospitalized patients and also trials in people that are in the emergency department or not quite sick enough to be in the hospital and then prophylaxis trials to see if people who have been exposed to COVID-19 to see if the disease can be prevented in those people if they are given convalescent plasma."

(Source: Mayo Clinic News Release, 8/14/20)

Jill Evans Joins ABC Team

America's Blood Centers (ABC) recently announced that Jill Evans, MT(ASCP), CQA(ASQ) has been named the director of Regulatory Services. "We are excited to have Jill as part of the ABC staff," said Kate Fry, MBA, CAE. "Jill brings diverse experience to ABC that will help the association continue to provide value to community blood centers with her expertise and strong background as a medical technologist in both hospital-based transfusion services and community blood banking. She is also a proven leader in quality and regulatory affairs, laboratory management, and software development and implementation who will add a unique perspective with her years of blood center experience." She succeeds Ruth Sylvester who retired as of July 31st. Ms. Evans most recently served as the vice president of Strategic Implementation at LifeSouth Community Blood Centers where she provided leadership and helped facilitate coordination between the blood center's executive leadership team and the corporate support and blood center operations functions at



LifeSouth. She received a medical technology degree from the University of Florida and has more than 30 years of experience in blood banking, including transfusion service medicine, laboratory management, and community blood banking. Ms. Evans is also an AABB Assessor and Certified Quality Auditor. Her first day at ABC was August 3rd and she can be reached at jevans@americasblood.org or (202) 654-2983.

(Source: ABC Announcement, 7/31/20) •

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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.

America's Blood Centers

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REGULATORY NEWS

ABC Newsletter

The U.S. Food and Drug Administration (FDA) published a notice on August 10th through Med-Watch, the FDA Safety Information and Adverse Event Reporting Program, regarding a recall initiated by Becton, Dickinson and Company (BD) of its ChloraPrepTM 3 mL applicator. BD issued a voluntary recall on June 23rd "for specific catalog numbers" of the applicator "due to possible fungal contamination, which only affects climate zone IV regions in specific U.S. territories (the recall does not apply to any U.S. states) and other countries. Internal product quality testing from BD "identified that storage of the ChloraPrepTM 3 mL Applicators where [the] product may be consistently exposed to temperatures of 30 degrees Celsius (86 degrees Fahrenheit) and 75 percent relative humidity for more than six months can result in the growth of *Aspergillus penicillioides*, a type of fungus, resulting in a breach in the outer package integrity. The *Aspergillus penicillioides* within the packaging can contaminate the surface of the applicator and/or gloved hands of the health care professional and then consequently the sterile field. Contamination of skin preparation products with *Aspergillus penicillioides* may lead to serious systemic infection, sepsis, illness, and death. Customers and distributors affected by the recall have been notified by BD and provided guidance. Additional information is available on the FDA website.

(Source: FDA MedWatch, 8/10/20)

The U.S. Department of Health and Human Services <u>published</u> a meeting notice in the *Federal Register* announcing that the next Advisory Committee on Blood and Tissue Safety and Availability (ACBTSA) will hold an online public meeting August $26^{th}-27^{th}$. The committee plans to "discuss recommendations to improve the blood community's response to future public health emergencies. In order to facilitate this discussion, key stakeholders from across the nation will present on their lessons learned during the latest pandemic. The committee will analyze strengths and weaknesses from the COVID-19 response on the blood community and blood supply." The Wednesday session is scheduled to take place from 12:30 - 5:15 p.m. EDT with Thursday tentively being a full day session from 8:00 a.m. - 5:00 p.m. EDT. Additional information including an agenda will be published on the HHS website when available.

(Source: *Federal Register* Meeting Notice, 8/11/20)

RECENT REVIEWS

Clinical Trials for COVID-19 and FAST Evidence. A review published in Transfusion Medicine Reviews sought to "[identify] registered studies [of COVID-19 convalescent plasma (CCP)] that are actively recruiting" in an effort to "[allow one] to assess [the] feasibility and timing of performing a rapid meta-analysis to accelerate assessment of efficacy and safety of [CCP] therapy." The researchers used "a Framework for Accelerated Synthesis of Trial (FAST) Evidence, [to find] studies that share sufficient homogeneity for inclusion in a planned meta-analysis that can be continuously updated to provide required knowledge synthesis for timely approval and delivery to patients if CCP is effective in treatment of COVID-19." They searched both "the registry at clinicaltrials.gov and the World Health Organization's International Clinical Trials Registry Platform using the COVID-19 registry." They discovered and included "a total of 48 studies" and "29 trials" that described normal plasma as the control...[with] the remaining [using] conventional therapy as the control." Regarding "potential risk of bias," the authors noted that "randomization was described in [only] 50 percent of studies...With regards to plasma manufacturing and product characterization, seven studies reported specific targets for antibody titers in the product." Regarding "the dose and schedule of administration, the controlled studies describe... 100 - 600 mL given either once or up to five infusions." In the controlled trials of CCP, disease severity was classified as "severe or critical in 21 studies...The most commonly assessed outcomes were "clinical improvement," "viral load or reverse transcriptase polymerase chain reaction results," "duration of hospital stay," "need for mechanical ventilation," and "duration of



<u>RECENT REVIEWS</u> (continued from page 3)

intensive care unit (ICU) and 28-day mortality." The authors stated that "[f]or clinically meaningful absolute reductions of 2 to 10 percent in mortality and other dichotomous outcomes, such as rates of ICU admission and [the] need for mechanical ventilation, a cumulative sample size of 74 to 9,493 subjects would be required for intervention and control arms." They also added that, "[b]ased on projected date of completion of registered controlled trials we can expect sufficient numbers of patients to be enrolled by as early as September 2020 for an assessment of efficacy." The researchers suggest "contact[ing] investigators for additional data to align with reported outcomes of other studies [that] could mitigate against [underpowered studies] and allow insightful meta-analysis... [It was concluded that their] approach, termed FAST Evidence, can provide answers as quickly as possible regarding efficacy...[allowing], "regulatory bodies in affected countries [to potentially] move more quickly to approve CCP therapy."

Citation: Zheng, K., Liao, G., Lalu, M.M., *et al.* A Scoping Review of Registered Clinical Trials of Convalescent Plasma for COVID-19 and a Framework for Accelerated Synthesis of Trial Evidence – FAST Evidence. *Transfusion Medicine Reviews*. 2020. Doi: <u>10.1016/j.tmrv.2020.06.005</u>.

Contributed by Richard Gammon, MD, Medical Director at OneBlood

MEMBER NEWS

Oklahoma Governor Kevin Stitt recently donated convalescent plasma at Okla-Blood Institute homa (OBI), headquartered in Oklahoma City, O.K. He urged other individuals who have recovered from COVID-19 to do the same. "One donation can provide lifesaving plasma for up to four people," said Gov. Stitt in a news release. "Donating convalescent plasma is the easiest way Oklahomans who have recovered from COVID-19 can help their friends and neighbors and I urge everyone to make an appointment and join the fight." **OBI** President and Chief Executive Officer John Armitage, MD added, "We're ex-



Photo courtesy of Gov. Stitt's Office

tremely grateful to Governor Stitt for his donation and continued advocacy for convalescent plasma, a critical product in the state's response to the COVID-19 pandemic. As the community blood supplier servicing more than 90 percent of the state, we need all Oklahomans who have recovered from COVID-19 to answer the Governor's call and donate convalescent plasma with OBI, ensuring we have this lifesaving product on the shelves for our neighbors in local communities."

(Source: Gov. Kevin Stitt News Release, 8/11/20)

Carter BloodCare (Bedford, Texas) announced that it has received U.S. Food and Drug Administration (FDA) approval for its iWeBB electronic Laboratory Information System (eLIS). This software application is designed for use in Immunohematology Reference Laboratories (IRL). "eLIS streamlines processes, eliminates potential clerical errors, and works consistently," said Carter BloodCare Lab Manager Pam Boyd. "The system will automate processes such as patient reports, blood inventory records, and the customer communication log." Development of the web-based software application began five years ago as

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<u>MEMBER NEWS</u> (continued from page 4)

the "software is intended to manage patient information, blood transfusion requirements, blood specimen test orders, lab test results, blood product orders, and patient transfusion histories." The application is expected to officially launch next month with plans for additional features to be added in phase two before the close of the calendar year.

(Source: Carter BloodCare News Release, 8/10/20)

LifeShare Blood Center (Shreveport, La.) received FDA Licensure application approval for apheresis platelets stored in InterSol Platelet Additive Solution (PAS), which replaces a portion of the plasma that is typically used to store platelets, as reducing plasma volume may reduce the risk of some transfusion reactions. The approval will allow LifeShare to expand its distribution of apheresis platelets containing PAS outside of the state. According to the news release, "[s]tudies have shown that an adverse event rate of 0.55 percent for InterSol platelets as compared to 1.37 percent in plasma platelets."

(Source: LifeShare Blood Centers, News Release 8/10/20)

Héma-Québec and the National Institute of Public Health published findings from a seroprevalence study of blood donors. The data showed that 2.23 percent of the 7,691 individuals whose blood samples were tested between May 25th and July 9th, whose ages ranged from 18 to 69 "would have been infected by COVID-19." According to the <u>news release</u>, "[b]ased on the results, the study can extrapolate that around 124,880 people in the age group in question have contracted the virus since the start of the pandemic. The Quebec Ministry of Health and Social Services, which commissioned the research, reported around 37,000 cases in the 20 to 69 age group for the same period.

(Source: Héma-Québec News Release, 8/5/20)

Stanford Blood Center (Palo Alto, Calif.) (SBC) led by chief medical officer Tho Pham, MD had a case report of SBC's nucleic acid testing study findings recently published in the *Annals of Internal Medicine* entitled, "<u>SARS-CoV-2 RNAemia in a Healthy Blood Donor 40 Days After Respiratory Illness Resolution</u>." SBC is currently the only U.S. blood center proactively testing all blood donations for detectable levels of SARS-CoV-2 RNA as part of an ongoing research initiative and as an added safety measure. The case report details a blood donation positive for SARS-CoV-2 by NAT. The donor had recovered from a respiratory infection over a month prior to their donation date, had no symptoms of illness on the day of donation, and tested negative for SARS-CoV-2 by polymerase chain reaction on nasopharyngeal swab specimen five days after their donation. While there is still no evidence of transfusion-transmitted COVID-19, this case report may be informative for regulatory entities crafting COVID-19-related blood donation policy, particularly as infections increase with the relaxation of shelter-in-place orders worldwide.

Citation: Pham, T., Huang, C., Wirz, O., Röltgen, K., *et al.* <u>SARS-CoV-2 RNAemia in a Healthy Blood</u> <u>Donor 40 Days After Respiratory Illness Resolution</u>. *Annals of Internal Medicine*. 2020.

Contributed by Ross Coyle, Public Relations Officer, Stanford Blood Center •

Upcoming ABC Webinars – Don't Miss Out!

- **ABC QA Education Webinar** August 18th from 3 4:30 p.m. (EDT). More details available <u>here</u>.
- **ADRP Webinar** August 26^{th} from 1 2 p.m. (EDT). More details available <u>here</u>.



The programs and services described in the Inside ABC section are available to ABC member blood centers and their staff only, unless otherwise specified.

ADRP Webinar: Shifting from Uncertainty to Innovation in Donor Services

Register today for the Wednesday, August 26th ADRP webinar titled "Shifting from Uncertainty to Innovation in Donor Services." This webinar will take place at 1 p.m. EDT and will describe how innovation can be used in donor services to "provide insight into tactical adjustments that were developed, as well as how teamwork continues to be critical" during these challenging times brought on by the pandemic.

ADRP subscribers may register for free and non-subscribers can participate for \$25.

(ADRP Announcement, 8/11/20) •

Sign-up Today for the ADRP Digital Marketing Solutions Virtual Master Class

Registration is now open for the upcoming Digital Marketing Solutions Virtual Master Class. This series of three single-day events will occur over the course of three weeks and has been designed to move beyond the basics and build upon the skills needed to excel at your job while providing participants with the latest tools and trends to incorporate into their current business plans.

ADRP has scheduled more than 15 speakers from blood centers of all sizes as well as digital marketing subject-matter experts from Facebook and Google. This will be a hands-on experience, rather than solely lectures, featuring activities designed to engage attendees equipping them with the necessary resources to strategize a plan that can be implemented immediately.

Individuals and teams within the communications, marketing, and public relations departments at your blood centers are encouraged to register today for the Digital Marketing Solutions Master Class to drive tangible results for both your existing and future digital marketing efforts.



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BRIEFLY NOTED

ABC Newsletter

An op-ed published in the Washington Post on August 3rd written by former U.S. Food and Drug Administration Commissioners Mark McClellan, MD, PhD, Margaret Hamburg, MD, Robert Califf, MD, MACC, and Scott Gottlieb, MD calls attention to the need for individuals who have recovered from COVID-19 to donate convalescent plasma and "The Fight Is In Us" campaign. "We need a concerted effort to collect blood plasma, along with clinical trials to determine when its benefits outweigh the risks so we can treat the right people at the right time...The good news is the work is already underway. A broad coalition of medical and research institutions, blood centers, life science and technology companies, philanthropic organizations and COVID-19 survivor groups has already come together to launch a campaign. This group, called 'The Fight Is In Us', is working to drive awareness and recruit plasma donors across the country." America's Blood Centers is part of the coalition of medical and research institutions, blood centers, life science companies, technology companies, philanthropic organizations, and COVID-19 survivor groups that have collaborated on the campaign to support the rapid development of potential new therapies for patients with COVID-19. The organizations hope to mobilize tens of thousands of people in the U.S. who have recovered from COVID-19 to donate convalescent plasma. The coalition offers more than 1,500 locations at which COVID-19 survivors can choose to donate. Donations can be made at both blood and plasma donor centers. This week, the National Basketball Association (NBA) partnered with "The Fight Is In Us" and arranged a new campaign video starring Marcus Smart of the Boston Celtics which has been posted on both the NBA and "The Fight Is In Us" social media channels.

(Source: *The Washington Post*, <u>4 former FDA commissioners: Blood plasma might be the covid-19 treat-</u> ment we need, 8/3/20) •

GLOBAL NEWS

NHS Blood and Transplant (NHSBT), the national blood provider for England and transplant services for the United Kingdom has reported preliminary data from a national clinical trial suggesting individuals who have been hospitalized with COVID-19 produced antibody levels high enough for their COVID-19 convalescent plasma donations to be used as part of the trial. High antibody titer was defined as EUROimmun >=6.0 for all first-time donations from April 26th through July 26th. According to NHSBT, 76 percent of COVID-19 positive individuals who were hospitalized had antibody levels that allowed their donations to be used in the trial compared to 30 percent of COVID-19 positive individuals who were not hospitalized but had sufficient antibody levels for the trial. "These figures demonstrate how important it is for people who were hospitali[z]ed with coronavirus to donate – they are most likely to be able to save the lives of other seriously ill people," said Dr. Lise Estcourt, head of the NHSBT Clinical Trials Unit in a news release. "These donors have higher antibody levels because while initially your immune system will try and fight off a virus with white blood cells, if you become more ill, your immune system needs to produce more antibodies that neutrali[z]e or kill the virus."

(Source: NHSBT News Release, 8/6/20)

A report from the Netherlands indicates that Sanquin, the national blood provider for the Netherlands and an international coalition of plasma manufacturers developing a plasma therapy derived from the antibodies of individuals who have recovered from COVID-19 expect to perform a clinical trial in October to determine efficacy results. Sanquin issued a call for convalescent plasma donors in June as the Ministry of Public Health asked the organization to collect 30,000 kg of plasma, which Sanquin estimated would require plasma donations from 16,000 donors. "Since March we have laid a solid foundation with our research into antibodies," said Sanquin Director Daphne Thijssen in the *NL Times* report. "In

<u>GLOBAL NEWS</u> (continued from page 7)

the research we looked at how they work, the development of a reliable antibody test, and how many donors have those antibodies."

(Sources: *NL Times*, <u>Dutch Blood Bank's COVID Medicine could be ready by October</u>, 8/13/20; *NL Times* <u>Blood Donors wanted for coronavirus medicine</u>, 7/27/20)

Canadian Blood Services and the COVID-19 Immunity Task Force (CTIF) of Canada revealed initial findings from the first 10,000 blood samples collected as part of SAR-CoV-2 seroprevalence study. Less than 1 percent of the samples collected from May 9th through June 8th tested positive for antibodies virus that causes COVID-19. "What is clear is that only a small percentage of adult Canadians has been infected by SARS-CoV-2," said CITF Co-Chair Catherine Hankins in a news release. "By far, the majority of us remain vulnerable to infection. We need to ramp up testing and tracing capacity across the country to interrupt any chains of transmission quickly to prevent unchecked spread." CITF Co-Chair Professor David Naylor added, "these data suggest there are several undetected infections for every case confirmed with swabs and RNA tests. That lends weight to current public health advice."

(Source: CTIF News <u>Release</u>, 7/23/20)

Facebook has <u>expanded</u> its blood donation tool to Taiwan. Individuals throughout in the country will now be able to sign-up to be blood donors as well as receive messages and alerts from the Taiwan Blood Services Foundation when donors are needed. Taiwan joins Bangladesh, Brazil, India, Pakistan, the United States, South Africa, Egypt, Senegal, Kenya, Burkina Faso, and Cote d'Ivoire as places where the blood donation tool is currently offered to Facebook users.

(Source: Focus Taiwan News Channel, <u>Facebook's blood donations feature launched in Taiwan</u>, 7/24/20)

COMPANY NEWS

Siemens Healthineers has received Emergency Use Authorization (EUA) for a SARS-CoV-2 antibody test (COV2G) from the U.S. Food and Drug Administration (FDA). The COV2G test is the first semi-quantitative antibody test to receive FDA EUA designation. It also provides a numerical value that can be used to determine the level of IgG antibodies in a patient's blood sample. "Our high-quality antibody test helps clinicians assess the level of a person's immune response, which is an important tool to have at this stage of the pandemic," said Deepak Nath, PhD, president of Laboratory Diagnostics for Siemens Healthineers in a <u>news release</u>. The FDA stated in a separate <u>news release</u> announcing the EUA designation, "Being able to measure a patient's relative level of antibodies in response to a previous SARS-CoV-2 infection may be useful as we continue to learn more about the virus and what the existence of antibodies may mean," said Tim Stenzel, MD, PhD, director of the Office of In Vitro Diagnostics and Radiological Health in the FDA's Center for Devices and Radiological Health. "There are still many unknowns about what the presence of SARS-CoV-2 antibodies may tell us about potential immunity, but today's authorizations give us additional tools to evaluate those antibodies as we continue to research and study this virus. Patients should not interpret results as telling them they are immune, or have any level of immunity, from the virus." The test also registered a CE mark for use in Europe

(Source: Siemens Healthineers <u>News Release</u>, 8/4/20; FDA <u>News Release</u>, 7/31/20)

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COMPANY NEWS (continued from page 8)

The Hong Kong Red Cross Blood Transfusion Service (BTS) will be using **Cerus Corp.'s** INTERCEPT blood system to provide pathogen inactivated platelets. "We are pleased to be selected by the Hong Kong Red Cross BTS to supply INTERCEPT Blood System for platelets," said Pascal Maillard, Cerus' vice president of Commercial Operations for the Asia Pacific region in a company <u>news release</u>. "This is an important contract for Cerus. The Hong Kong Red Cross BTS is a member of the influential Asia Pacific Blood Network (APBN) and a key opinion leader globally. This tender award presents a unique opportunity to expand the use of INTERCEPT in Asia-Pacific." Cerus also <u>announced</u> this week that the INTERCEPT Blood System has now been used to provide more than 7.5 million "treatable platelet and plasma doses" since its commercial inception. "This is a significant milestone for Cerus and highlights the scope our technology has had within the transfusion industry and on the millions of patients worldwide transfused with INTERCEPT treated platelet and plasma components," said Cerus President and Chief Executive Officer William 'Obi' Greenman in a news release.

(Source: Cerus Corp. <u>News Release</u>, 8/7/20; <u>News Release</u>, 7/31/20)

Haemonetics recently <u>announced</u> an agreement with French private equity firm Abénex to sell its whollyowned subsidiary, Inlog Holdings France SAS. The transaction should be finalized later this year. Inlog Holdings France SAS "develops and sells": software solutions to both hospitals and blood banks in France and several other nations outside of the U.S. "This divestiture and the recent sale of our U.S. blood donor software help shift our portfolio toward our growth segments," said Haemonetics President and Chief Executive Officer Chris Simon in a news release. "Software that supports our growth and sector leadership remain an important part of our Innovation Agenda." Abénex Director Thomas Peretti added, "we are enthusiastic about continuing what Haemonetics and the Inlog team have achieved over the last decade...[and] are convinced that Inlog has strong assets to grow within the European market."

(Source: Haemonetics <u>News Release</u>, 7/24/20) ♦

CALENDAR

Note to subscribers: Submissions for a free listing in this calendar (published weekly) are welcome. Send information to <u>newsletter@americasblood.org</u> or by fax to (202) 899-2621. (For a more detailed announcement in the weekly <i>"Meetings" section of the newsletter, please include program information.)

2020

Aug. 26-27. Advisory Committee on Blood and Tissue Safety and Availability Meeting (Virtual). More details available <u>here</u>.

Aug. 28-29. South Central Association of Blood Banks (SCABB) 2020 Annual Meeting & Exhibit Show (Virtual). More details and registration available <u>here</u>.

Sept. 9. 10th Annual Symposium Red Cell Genotyping 2020: Visionary Solutions (Virtual). More details available here.

Sept. 10. 39th Annual Immunohematology and Blood Transfusion Symposium (Virtual). More details available here.

Sept. 16, 23, 30. ADRP Digital Marketing Solutions Virtual Master Class. More details available here.

Oct. 3-5. 2020 AABB Annual Meeting (Virtual). More information available here.

Oct. 27. Biomedical Advanced Research and Development Authority (BARDA) Industry Day 2020 (Virtual). More information available <u>here</u>.

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<u>CALENDAR</u> (continued from page 9)

Nov. 22-24. 2020 ADRP Conference, Phoenix, Ariz. More details available here.

2021

Mar 8-10. ABC Annual Meeting, Washington, D.C. More details coming soon.

June 25-26. 64th Annual California Blood Bank Society Annual Meeting, Santa Clara, Calif. More details coming soon.

Sept. 15-17. 4th European Conference on Donor Health and Management, Hamburg, Germany. More details available <u>here</u>.

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 <u>newsletter@americasblood.org</u> 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.

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

Transfusion Lab Manager (Recruitment Bonus Eligible!!). Join Florida's leading blood bank, OneBlood, as a Lab Manager in Northwest Florida (Tallahassee, FL). Bring your leadership, technical expertise, and management experience to support the transfusion testing procedures on patient and/or donor samples. Qualified candidates should possess five plus years in a clinical laboratory, preferably blood banking environment, Valid and current Florida Clinical Laboratory Supervisor license in Immunohematology or Blood Banking required. SBB certification strongly preferred. To apply and view a complete Job Description of this position, visit www.oneblood.org/careers. OneBlood, Inc. is an Equal Opportunity Employer/Vet/Disability.

Associate Medical Director. Blood Assurance is seeking an Associate Medical Director to work in our Nashville, TN facility. This position will assist the Medical Director with providing medical and professional guidance to employees of the company and to area medical professionals. Qualified applicants should possess: MD degree required; board certification or eligibility in pathology required (board certification must be secured within 1 year of hire); Transfusion Medicine board certification or eligibility preferred. Must be licensed to practice medicine in the states of our fixed facilities if required by that state (state licensure can be secured after hire). Minimum 5 years prior related experience; blood bank management and cellular therapy experience preferred. Advanced communications skills required, including ability to speak to groups; computer skills and ability to effectively interact with coworkers. Qualified candidates are encouraged to submit an online application at <u>www.bloodassurance.org</u>. Blood Assurance is an EOE and Tobacco Free Workplace.

Medical Apheresis Nurse/RN. Gulf Coast Regional Blood Center is accepting applications for a Medical Apheresis Nurse/RN. This position is responsible for the operation and performance of apheresis and therapeutic apheresis procedures on donors and patients. This role assists in the development of new procedures and review of procedures/policies pertaining to the apheresis program. Other essential duties include: Performing required apheresis equipment maintenance. Performing general nursing duties. Evaluating and maintaining technical procedures and policies as appropriate to the apheresis

POSITIONS (continued from page 10)

program. Communicating with physicians regarding patient status. Adhering to policies, procedures and standards within regulatory compliance, budgetary specifications, including time management, productivity, and accuracy of practice; ensures an adequate supply inventory. Maintaining all records required by AABB, FDA, and other accrediting agency or vendor standards, including procedure/patient care data forms. Participating in management of and coordination of clinical research studies using apheresis, when necessary. The successful candidate must be a Graduate of an accredited School of Professional Nursing with a current RN license in good standing. Minimum of three years of recent direct patient nursing experience, preferably in an acute-care hospital environment. Prior RN experience in apheresis or acute/chronic dialysis is required. Current unrestricted Texas RN license or current unrestricted RN license from another state with the ability to acquire a Texas license within 90 days of hire. Certified in Basic Life Support. To apply, visit www.giveblood.org today! We are an EOE.

Technical Supervisor in our Consultation and Reference Lab. Gulf Coast Regional Blood Center is accepting applications for a Technical Supervisor in our Consultation and Reference Lab. This position reports to the Consultation & Reference Laboratory Manager and is refor all technical aspects sponsible of the Immunohematology Reference Lab program to include assisting in supervision of staff, development and maintenance of policies and procedures, and monitoring of quality assurance activities of the department. Other essential duties include: Organizes and supervises daily technical activities to ensure compliance with AABB IRL standards. Function as IRL Technical Supervisor/Consultant (CLIA >88), and maintain departmental documents as required. Performs testing and reviews of IRL cases. Performs other duties in the Consultation and Reference Laboratory as assigned. Evaluates/Monitors performance and quality of test results. Prepares lectures for and actively participates in local/regional industry committees/programs (AABB, ABC, other). Manages training and competency programs. Assists in interviewing, hiring, evaluating, counseling and dismissal of employees. Assists in preparation and maintenance of Standard Operating Procedures. Participates in QC and QA improvements within the department. The successful candidate must be an MLS (ASCP or equivalent) from an accredited program; SBB with a minimum of three years recent (within past two years) experience in blood banking and immunohematology plus supervisory experience. To apply, visit www.giveblood.org today! We are an EOE.

Executive Director. The International Plasma and Fractionation Association (IPFA) is the international umbrella association supporting the interests and activities of its



member organizations involved in the collection of human blood and plasma, and the manufacture and supply of essential medicines derived from human plasma. IPFA is now looking for an Executive Director to exercise leadership and vision by providing strategic direction in support of its members' contribution to an increased supply of Plasma Derived Medicinal Products (PDMPs) from the not-for-profit sector. The Executive Director will work closely with members of the association to support and promote their interests and contributions to the global supply of PDMPs for patients. The successful candidate will have a track record of demonstrable leadership and advocacy in a relevant and/or related field and act as ambassador to the global stakeholder community for the goals and principles underpinning the activities of IPFA and its members. We are looking for a candidate with the following management qualities and competencies: Leadership, Operational planning, Program planning, Human resources planning, Financial planning, Community relations / Advocacy, and Risk management. Further information on the role and activities of IPFA can be found on its website at www.ipfa.nl. Should you be interested in this position and wish to receive the full job description including an overview of the requested qualifications and experience, please contact IPFA at info@ipfa.nl, expressing your interest.

Outside Sales Representative/Event Planner (Fort Smith, Ark.). Account Consultants must develop new partnerships with targeted decision makers in community organizations, educational & religious institutions and businesses to gain support in meeting the needs for volunteer blood donors. Responsibilities include organizing and promoting blood donation events; assessing, developing and implementing strategic/tactical plans to achieve recruitment objective/goals. She/he is expected to develop a customer-focused culture that will result in successful community partnerships and donation awareness. Identify opportunities for growth within current group base and facilitate a plan to achieve growth percentage for total unit collection within territory. Book recurring blood drives for the following year. Develop and maintain relationships with key accounts. Give presentations in order to promote blood collection. Identify and provide feedback on issues regarding customer needs/requirements, customer issues/concerns and satisfaction, competitor activities/strategies, etc. Interact effectively and professionally with team members and all internal/external contacts. Qualifications: Associate/Bachelor's degree preferred, one to three years sales related experience, public speaking/presentation experience preferred, excellent communication skills, and valid driver's license with access to vehicle. 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. How to apply: http://arkbi.org/careers/.

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Chief Medical Officer (Associate Professor, Full Professor). The University of Washington, Department of Laboratory Medicine and Pathology and Bloodworks Northwest is accepting applications for Chief Medical Officer (Associate Professor, Full Professor). This position involves overall responsibilities for providing medical direction and support for all aspects of Bloodworks' activities. The position requires licensure as a physician (M.D. or D.O.) and board certification in Blood Banking/Transfusion Medicine. In lieu of board certification, candidates who meet the requirements for CLIA laboratory director with 3 years' experience in blood collections, immunohematology, apheresis, and cellular therapy will also be considered. University of Washington faculty engage in teaching, research, and service. Please apply at https://usr57.dayforcehcm.com/CandidatePortal/en-US/bloodworks/. EO employer _ M/F/Vets/Disabled

