



ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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October 2, 2020

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Please Note: The ABC Newsletter will not be published on October 9th. We will resume regular publication on October 16th. Thank you for your continued interest.

HHS ACBTSA Develops Recommendations for U.S. Assistant Secretary for Health

The U.S. Department of Health and Human Services Advisory Committee on Blood and Tissue Safety and Availability (ACBTSA) held its 52nd meeting on Friday, September 25th. The purpose of the meeting was to discuss recommendations from working groups, formed by the committee after their August meeting, that will be presented to the Assistant Secretary for Health (ASH), Admiral Brett Giroir, MD. Specifically, the committee sought to answer two questions:

- what recommendations should be made to ASH to further improve the blood community's response to public health emergencies and can be acted on in the next two to four years?
- What additional resources are required to act on the recommendations?

The working groups were tasked with prioritizing specific actionable recommendations for the nation's blood system that were structured into seven focus areas. The committee voted in favor of submitting the following recommendations to the ASH:

- **Supply Chain to Produce Blood Products – Recommendation:** Develop policies and provide funding to strengthen the resiliency of the blood and plasma supply in order to ensure product availability to hospitals during national emergencies.
- **National Disaster Planning Business Continuity – Recommendation:** Develop and fund a comprehensive national disaster plan for the blood and plasma supply and include it in the National Recovery Framework to ensure coordination between private and government sectors at the federal and state levels.
- **Blood and Plasma Donor Engagement, Growth, and Research – Recommendation:** Fund social science research to generate efficient and effective strategies to engage and retain younger and more diverse blood and plasma donors.
- **Innovation – Recommendation:** Establish a public-private partnership to proactively explore and develop policy solutions intended to encourage innovation, promote quality and efficiencies, and advance the continued safety and availability of the blood supply. Establish training and education workshops to instruct the general healthcare community on appropriate approaches and

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ACBTSA Recommendations (continued from page 1)

processes to use for regulatory approvals for the use of blood products (existing and new) under emergency use authorization (EUA), expanded access protocol (EAP), and other appropriate approval mechanisms.

- **Governance/Locus of Authority – Recommendation:** Establish a defined locus of authority for national blood and plasma policy, the ASH, coordinating with the U.S. Food and Drug Administration, Centers for Disease Control and Prevention, National Institutes of Health, Health Resources and Services Administration, the Office of the Assistant Secretary for Preparedness and Response, Centers for Medicare & Medicaid Services, the Department of Defense, the Department of Veteran Affairs, and those non-government organizations that provide and transfuse blood and plasma products, and develop and implement a National Blood Policy inclusive of all blood and plasma products.
- **Data Infrastructure Solutions – Recommendation:** Establish, implement, and fund comprehensive, sustainable, minimally burdensome infrastructure that monitors and makes available real-time data on blood availability and utilization. Building on current infrastructure and gap analysis, develop a plan for a hemovigilance, and transfusion outcomes system and determine funding mechanism.
- **Finance – Recommendation:** Identify and secure stable funding sources and mechanisms to support the national blood system in order to cover (but not be limited to the following initiatives):
 - innovation that has the potential to improve the safety, efficacy, or reliability of the blood supply;
 - creation of redundant capacity in the blood system to reduce risk of blood product or critical shortages;
 - implementation of new mandated regulatory requirements that improve blood safety; and
 - urgent financial needs of blood centers during national emergencies (e.g. CARES Act).

These recommendations will be outlined and prioritized in a letter that will be sent to the ASH. The letter and recommendations will be published on the ACBTSA [website](#) when available. 💡

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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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RESEARCH IN BRIEF

Convalescent Plasma—Focused Gap Analysis and Research Recommendations. Researchers in *Vox Sanguinis* published “[t]he deliverables from [a] project [that] will facilitate study design and analysis of clinical data to determine COVID-19 convalescent plasma (CCP) efficacy and safety, and outcomes [that] can be used to identify areas that need to be explored.” They describe how “[t]he International Society of Blood Transfusion (ISBT)...establish[ed] a [global] multidisciplinary working group...[which held] weekly teleconferences (April to May 2020)” to form recommendations. The researchers suggested that “[r]andomized controlled trials (RCTs) with careful study designs and appropriate control group(s) are preferable...The comparative arm may include standard care, or another intervention, such as non-convalescent plasma or crystalloid fluid.” They noted that, “COVID-19 convalescent plasma should only be offered as [a] therapy to patients with a laboratory-confirmed COVID-19 diagnosis or as prophylaxis in well-monitored clinical trials exploring prevention of COVID-19 infection in high-risk populations...[The] [d]ecision to initiate a CCP trial should be made early in a pandemic.” The authors acknowledge that “[a]t this stage, there is no evidence for which dose and timing is best to optimize patient outcome...Factors to be analyzed include transfused volume, response to treatment, and the risk of adverse events...Limited early data on CCP use suggest clinical benefit with reductions in body temperature, improved Sequential Organ Failure Assessment (SOFA) score, less need of respiratory support, improved lymphocyte count and inflammatory markers, increases in IgG, IgM, and neutralizing antibody titers, and reduction in viral load.” They believe that the “[u]se of globally accepted objective disease severity definitions and mobility endpoints when assessing response to CCP is preferred to enable comparison between studies...[and note] [i]n the first Cochrane review of reported case series, the adverse events rates were reported to be very low.” The researchers add that “under reporting of adverse events cannot be excluded...Donor and patient adverse events need to be reported within institutional and national hemovigilance frameworks using internationally agreed definitions to gather more information on the safety of CCP collection and its use in adult and pediatric patients...The adoption of CCP for treatment of COVID-19 has introduced a number of ethical challenges. Foremost, it remains an unproven therapy.” The authors concluded by acknowledging that they have “identified key questions and gaps in knowledge pertaining to the clinical use of CCP, and suggest points to consider for developing new trials.”

Citation: Al-Riyami, A.Z., Schafer, R., van den Berg, K., *et al.* Clinical use of Convalescent Plasma in the COVID-19 pandemic: a transfusion-focused gap analysis with recommendations for future research priorities. *Vox Sanguinis*. 2020. Doi: [10.1111/vox.12973](https://doi.org/10.1111/vox.12973).

Contributed by Richard Gammon, MD, Medical Director at OneBlood

NIH COVID-19 Treatment Guidelines Panel Elaborate on Their Position on Convalescent Plasma Emergency Use Authorization (EUA). The National Institutes of Health (NIH) COVID-19 Treatment Guidelines Panel issued a [statement](#) last month regarding the EUA of convalescent plasma as a treatment option for COVID-19. Members of the panel published a “special article” in the *Annals of Internal Medicine* last week to add additional context to their position. They state “[d]espite clearly meeting the “may be effective” criterion for EUA issuance, the analyses of the [expanded access protocol] EAP data are not sufficient to establish the efficacy or safety of convalescent plasma because of the lack of an untreated control group. For example, the possibility that differences in outcomes are attributable to harm from low-titer plasma rather than benefit from high-titer plasma cannot be excluded. In addition, the EAP data may be subject to several confounders, including regional differences and temporal trends in COVID-19 management. There is no widely available and generally agreed-upon best test for measuring neutralizing antibodies, and the antibody titers in convalescent plasma from patients who have recovered from COVID-19 are highly variable. In addition, the analyses focused on early mortality, which may not be clinically meaningful in the context of the prolonged disease course of COVID-19. The efficacy analyses rely on a subset of EAP patients and thus represent only a fraction of patients who received plasma through the EAP.

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RESEARCH IN BRIEF (continued from page 3)

In this regard, additional analyses of the EAP cohort and completion of the current [randomized clinical trials] (RCTs) will be of critical importance.” The panel, “taking everything into account” felt “that currently the data are insufficient to recommend for or against convalescent plasma for treating COVID-19” in the absence of “prospective, well-controlled, and adequately powered RCTs.” They acknowledge that the “COVID-19 pandemic has intensified the tension between providing rapid access to promising therapies and generating the scientific evidence needed to establish whether those therapies are safe and effective... Conversely, the lack of access to large RCTs at many healthcare centers during the COVID-19 pandemic may exacerbate issues of equity in access to care. Expanded Access Programs continue to be an important mechanism to provide promising therapies for patients who do not otherwise have access to them (that is, through clinical trials). Balancing this tension is challenging but imperative to maintaining the ability to generate rigorous and convincing evidence during a public health crisis. Despite the challenges of the COVID-19 pandemic, conducting well-controlled, adequately powered RCTs is possible... This approach is the quickest and most efficient way to generate the answers needed to provide the best evidence-based patient care.”

Citation: Pau, A., Aberg, J., Baker, J., *et al.* Convalescent plasma for the treatment of COVID-19: Perspectives of the National Institutes of Health COVID-19 Treatment Guidelines Panel. *Annals of Internal Medicine*. 2020. Doi: [10.7326/M20-6448](https://doi.org/10.7326/M20-6448). ♦

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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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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.

ADRP Annual Conference Goes Virtual

[Register](#) today for the [ADRP Annual Conference](#), now a virtual event. The dates may have changed, but the content has not! Please plan to join us November 16th-18th. Over the course of three days, individuals will have access to abstract presentations, roundtables, and an interactive virtual exhibit hall. As an attendee, you will be able to use the virtual conference platform for one year and have the opportunity to experience all of the sessions that you may not have been able to participate in at an in-person conference, an increase of more than 10 education hours! This event will benefit blood center staff in multiple disciplines including donor recruitment, collections, marketing, and communications. We encourage staff from all levels to attend, to enhance the collaboration within their individual donor center. Group discount rates are available for ADRP subscribers. More information is available [here](#). The full conference program can be viewed [here](#).



WORD IN WASHINGTON

Rep. Rodney Davis (R-Ill.) donated convalescent plasma this week at America's Blood Centers member Central Illinois Community Blood Center (Springfield, Ill.), a part of Mississippi Valley Regional Blood Center. He previously announced on August 5th that he had been diagnosed with COVID-19 and has since recovered. "The plasma donating process at Central Illinois Community Blood Center in Springfield was quick and easy," said Rep. Davis in a [news release](#). "I encourage anyone who has recovered from COVID-19 and meets the donation criteria to consider making a convalescent plasma donation as soon as possible because it helps our medical researchers learn more about COVID-19, while also helping to treat symptomatic individuals who are suffering from this virus."



(Source: Rep. Rodney Davis [News Release](#), 9/28/20) 💧

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.



PEOPLE



LifeSouth Community Blood Centers President and Chief Executive Officer (CEO) **Nancy Eckert** has announced her retirement commencing January 2021. Ms. Eckert has been LifeSouth's CEO for 26 years and worked at the organization for more than 40 years. Under her leadership, LifeSouth has grown from a Florida-based community blood center into an organization serving more than 120 hospitals across Alabama, Florida, and Georgia. "It has been my honor to lead LifeSouth and serve alongside the best in blood banking," said Ms. Eckert in a LifeSouth News Release. "I have always been proud of our team, and the great work we have been able to accomplish, and as I leave, I know this will continue." LifeSouth Board Chairman Rob Smith added, "Nancy's guidance and vision positions us where we are today. With her direction, we have grown and prospered without losing sight of our lifesaving mission." Ms. Eckert will be succeeded as CEO by **Kim Kinsell, JD** according to an announcement from the LifeSouth Board of Directors. Ms. Kinsell has 16 years in blood banking and currently serves as general counsel for LifeSouth and is a member of the America's Blood Centers Board of Directors.



(Source: LifeSouth Community Blood Centers Announcement, 10/1/20)



Geri Venable, MHA, has been named the Chief Operating Officer of LifeShare Blood Center's new division focused on plasma following a nationwide search. LifeShare is launching its first plasma center early next year with plans to expand quickly. Ms. Venable will lead all aspects of this new endeavor. She currently serves as LifeShare's Executive Director of Blood Operations with responsibility for overseeing the planning, organizing, recruitment, collection, processing, and distribution of blood products. Before joining LifeShare, she was the Director of in-center and mobile collections at LifeSource (now Vitalant) in Chicago, Ill.

(Source: LifeShare Announcement, 9/25/20) ◆

MEMBER NEWS

Vitalant recently [enlisted](#) the help of three mayors in Arizona to assist in raising awareness of the need for convalescent plasma donations from individuals who have recovered from COVID-19. The mayors of Glendale, Phoenix, and Tempe held a joint news conference and blood drive with Vitalant representatives to encourage convalescent plasma donation. "This is a promising tool, and although not a cure, it has helped many people overcome the virus and recover," said Phoenix Mayor Kate Gallego to the *Arizona Republic*. Tempe Mayor Corey Woods, who was previously diagnosed with COVID-19 but has since recovered, donated convalescent plasma to begin the drive, "I know some people don't like being around needles, but I can say that it's not painful at all," said Mayor Woods to the *Arizona Republic*. "I promise the toughest part is keeping your arm straight for 45 minutes."



Photo Courtesy of the Arizona Republic: Tempe Mayor Corey Woods donates convalescent plasma.

(Source: *Arizona Republic*, [Effort to double plasma donations from COVID-19 survivors launches in Phoenix area](#), 9/30/20)

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MEMBER NEWS (continued from page 6)

Gulf Coast Regional Blood Center has partnered with Kiadis Pharma N.V of The Netherlands, a biopharmaceutical company that develops innovative immunotherapies, to be its supplier of “universal donor starting material” for the manufacturing of K-natural killer (NK)-cell based therapies in the U.S. “Our collaboration with Gulf Coast Regional Blood Center gives us access to their broad donor network to identify universal donors using our proprietary algorithm and selection analytics,” said Kiadis Chief Executive Officer Arthur Lahr in a [news release](#). “We then take the donor immune cells as source material to produce off-the-shelf K-NK cells. This collaboration further helps us ensure a continued supply of universal donor material for our K-NK cell therapy programs.” Hope Guidry-Groves, director of Cellular Life Solutions at Gulf Coast Regional Blood Center added in the news release, “Our mission is to partner with the community to help save and sustain lives by providing a safe supply of blood, biotherapies, and related services. With our history of excellence and proven expertise, we can help drive more treatment options to patients through advanced blood therapies. By helping researchers locate willing and eligible participants for these specialized collections, we are doing our part in bringing new hope to patients.”

(Source: Kiadis Pharma N.V [News Release](#), 9/28/20) 💧

GLOBAL NEWS

A Report in *Science* [warns](#) of the presence in Africa of an Asian mosquito that carries malaria “that has adapted to urban life.” The publication describes a modeling study that forecasted the “potential” for the *Anopheles stephensi* mosquito “to spread to dozens of [African] cities.” Researchers used existing data on “every place where *Anopheles stephensi* is now known to occur—including variables such as annual mean temperature, rainfall seasonality, and human population density—to produce maps of the places in Africa where the mosquito might take up residence next.” The model found that 44 of 68 cities in Africa, each with a population of greater than a million individuals, “seem [to be] suitable habitats” for the mosquito. The research has been [published](#) in the *Proceedings of the National Academy of Sciences*.

(Source: *Science*, [Spread of city-loving malaria mosquitoes could pose grave threat to Africa](#), 9/15/20) 💧

COMPANY NEWS

Grifols acquired 11 plasma collection centers in the U.S. this week and a plasma fractionation plant in Montréal in two separate transactions. The company purchased the plasma collection centers from Green Cross Corporation for \$90 million and the Canadian plant for \$370 million. “This deal reflects our long-term vision and strategy of sustainable growth, and wholly aligns with our commitment to continue helping countries reach self-sufficiency of life-sustaining plasma-derived medicines, which are critical for patients who need them,” said Grifols co-CEO Víctor Grifols Deu in a company [news release](#). Raimon Grifols Roura, co-CEO of Grifols added in the release, “[t]he addition of 11 U.S.-based plasma centers will reinforce our leadership and competitive advantages provided by our plasma-center network. By increasing our plasma collection and fractionation capacity, we are able to continue ensuring that patients worldwide have safe and secure access to these life-saving plasma-derived medicines.”

(Source: Grifols [News Release](#), 10/1/20)

Regeneron Pharmaceuticals, Inc. released preliminary data from a clinical trial of its investigational monoclonal antibody cocktail (REGN-COV2) as a therapy to fight COVID-19. According to a company [news release](#), the randomized, double-blind trial has shown “reduced viral load” and lowered the amount of “time to alleviate symptoms in non-hospitalized patients with COVID-19.” Regeneron also saw “positive trends” in decreasing the number of medical visits as part of the randomized, double-blind trial. George D.

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COMPANY NEWS (continued from page 7)

Yancopoulos, MD, PhD, president and chief scientific officer of Regeneron noted in the news release, “we are extremely gratified to see that [REGN-COV2] rapidly reduced viral load and associated symptoms in infected COVID-19 patients. The greatest treatment benefit was in patients who had not mounted their own effective immune response, suggesting that REGN-COV2 could provide a therapeutic substitute for the naturally-occurring immune response. These patients were less likely to clear the virus on their own, and were at greater risk for prolonged symptoms. We are highly encouraged by the robust and consistent nature of these initial data, as well as the emerging well-tolerated safety profile, and we have begun discussing our findings with regulatory authorities while continuing our ongoing trials. In addition to having positive implications for REGN-COV2 trials and those of other antibody therapies, these data also support the promise of vaccines targeting the SARS-CoV-2 spike protein.”

(Source: Regeneron Pharmaceuticals, Inc. [News Release](#), 9/29/20) ♦

CALENDAR

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

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 [here](#).

Nov. 16-18. **2020 ADRP Annual Conference (Virtual)**. More details available [here](#).

Nov. 17. **FDA Public Meeting – Communications About the Safety of Medical Devices (Virtual)**. 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.

May. 11-13. **2021 ADRP Conference, Kansas City, Mo.** More details coming soon.

Sept. 15-17. **4th European Conference on Donor Health and Management, Hamburg, Germany.** More details 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

Executive Director, Blood Operations (Shreveport, LA). LifeShare Blood Center is seeking an experienced Executive Director to provide leadership and strategically direct all blood operations and donor support operations, in fulfillment of the Company’s strategic goals and business plan; plan, develop and oversee the execution of blood collection, component manufacturing and product distribution strategies, ensuring compliance with company policies, SOPs and applicable regulatory and

accreditation guidelines; develop and coach teams for achievement of established goals and KPI’s; and maintain a quality first mentality and continuous improvement culture throughout the division. In leadership of the blood operations teams, the Executive Director will model LifeShare’s mission and values, integrating them into

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POSITIONS (continued from page 8)

daily decisions, behaviors and actions. The ideal candidate holds a master's degree in a health or business-related field and brings significant blood operations management experience, exceptional leadership and communication skills and demonstrates strategic and critical thinking. Come be a part of the LifeShare team, "connecting donors and the lives they impact!" LifeShare offers a competitive salary and generous benefits package, including employer-paid medical, life and disability insurance; 401k with employer contributions and PTO. Click [here](#) to apply.

Operations Director – Plasma. LifeShare Blood Center is seeking an enthusiastic Operations Director to oversee plasma collection operations for our new Shreveport center. The Director will be instrumental in launching the new plasma division and opening our first donation center, including tactical planning, project managing, hiring and training team members, and business development. Ongoing, the Director will develop and implement strategic and tactical plans for collection activities and donor recruitment and retention efforts; ensure compliance with standards and regulations governing plasma services, including FDA, PPTA, cGMP, and OSHA; direct, develop and coach teams for achievement of established goals and key performance indicators; and represent LifeShare to communicate our business needs and mission throughout the community. In leadership of center staff, the Director will model LifeShare's mission and values, integrating them into daily decisions, behaviors and actions. The ideal candidate has a background in healthcare administration or operations management, including supervisory experience in the direction and coaching of other employees and champions teamwork, communication and continuous improvement. Come be a part of the LifeShare team, "connecting donors and the lives they impact!" LifeShare offers a competitive salary and generous benefits package, including employer-paid medical, life and disability insurance; 401k with employer contributions and PTO. Click [here](#) to apply.

Med Techs (Schedule: Monday – Thursday, 12p noon – 10:30pm, with on-call rotation). We need YOUR laboratory knowledge to help save lives! Kentucky Blood Center is seeking a qualified medical technologist to perform and interpret serological procedures on specimens submitted for compatibility testing. This position also acts as an expert problem solver, and will resolve issues related to antibodies, blood typing, and cross-matching. The role regularly interacts with hospital laboratories, helping them find answers, and communicating findings. Qualifications: MT, MLS, CLS (4-year degree) with a minimum two years recent blood bank experience, required; ASCP is a plus. Must have strong verbal and written communication skills, and be proficient with MS Office, with the ability to navigate web applications, and custom systems. Reference Laboratory employees must

exhibit great teamwork, a positive attitude, and a "Do What It Takes" work ethic, with the goal of helping our hospital customers and patients. Proof of education must be provided during the interview process. Benefits: Health/Dental/Vision/Life/Short Term Disability/Long Term Disability/Cancer Insurance/Accident Insurance/Flexible Spending Accounts/Health Savings Accounts/Paid Time Off/Paid Holidays/Employee Assistance Program/Retirement Savings Plan. For more info, and to apply, go to: <https://kybloodcenter.org/aboutus/careers/>.

Director of Information Technology (Fresno, CA). Central California Blood Center is seeking an experienced Director of IT. For over six decades, the Central California Blood Center provided blood and blood products to California's Central Valley. We are dedicated to advancing transfusion medicine and excellence in customer service through innovative thought leadership, technology and research. We are seeking an IT Director who is passionate about our vision, who will be an integral part of our dynamic team. Primary Duties: Participates in strategic and operational decision-making as a member of the Senior Management Team; Leads IT strategic and operational planning; Develops and maintains IT organizational structure; Strives to lower IT overhead and costs; Establishes, monitors and upgrades informational security, threat detection, mitigation and disaster recovery processes. Establishes goals, objectives and operating procedures consistent with regulatory requirements and strategic plans; Identifies opportunities for cost-effective investment of financial resources; Develops, tracks and controls operating and capital budgets; Oversees vendor agreements and monitors systems' performance; Collaborates on hardware, software, maintenance and cloud contracts; Develops RFPs to assure best acquisitions and fair purchasing practices. Monitors trends in IT and blood industries; Oversees relationships between internal and external IT resources; Supervises recruitment, development, and retention of staff. Bachelor's Degree and/or five years' experience in related technologies. Five years' experience managing and/or directing an IT operation. Master's Degree preferred. Offering up to \$4K relocation benefit. To apply and view the complete job description, click [here](#).

Medical & Laboratory Director (Denver, CO). Do you want to be a part of a lifesaving organization? Since 1948, Vitalant has proudly served as a leader in the blood banking industry. Under minimal direction, this position provides field medical director oversight for the patients, donors, center staff, and healthcare professionals in assigned areas. Requirements: MD or DO or equivalent degree. Knowledge of federal, state, and local regulations for assigned areas. Two years Fellowship/Post-Doc in Histocompatibility or equivalent. Active applicable state licenses and/or certificates within first 6 months. Board

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POSITIONS (continued from page 9)

certification in Clinical Pathology, Internal Medicine, Pediatrics, or other clinical specialty. Board certification in Transfusion Medicine OR Hematology or eligibility followed by certification within two years of employment. American Society of Histocompatibility and Immunogenetics Histocompatibility Director certification. Fellowship training or equivalent experience in blood banking/transfusion medicine. Experience at a blood center and/or hospital transfusion service including provision of education, clinical consultations, and some combination of therapeutic apheresis, cell therapy, laboratory, immunohematology, etc. experience. Eligible to serve as FACT Laboratory Director within two years of employment. Living and Deceased Solid Organ Transplantation, Transfusion Support, Related and Unrelated HSC/BM Transplantation, and Histocompatibility testing for other clinical purposes. Click [here](#) to apply. EEO

Assistant/Associate Director Blood Transfusion Service (Massachusetts General Hospital, Harvard Medical School). The Blood Transfusion Service at the Massachusetts General Hospital seeks a full-time, early or mid-career, academically oriented transfusion medicine physician. The successful candidate will combine clinical and teaching activities with a research program in a field relevant to transfusion medicine, hematology or hemostasis. Our service encompasses an FDA-licensed donor center, therapeutic apheresis, an outpatient transfusion/infusion clinic, a transfusion service, and progenitor cell collection and processing. We collaborate closely with clinical colleagues in bone marrow and solid organ

transplantation, CAR-T cell therapy, cardiac surgery, trauma and critical care, neurology, and pediatrics. Service and teaching responsibilities will be shared with three other full and part-time staff physicians. Candidates must be BC/BE in Transfusion Medicine, with primary training in either Pathology or Hematology/Oncology (adult or pediatrics). Academic rank and salary will be based on experience and accomplishments. Please send a curriculum vitae and a description of interest to: Robert Makar, MD, PhD, GRJ148, Massachusetts General Hospital, 55 Fruit Street, Boston, MA 02114-2696; or email to rmakar@mgh.harvard.edu. The Massachusetts General Hospital is an equal opportunity/affirmative action employer.

Information Systems Compliance Specialist – Req.: 201038 (Scottsdale, AZ). Do you want to be a part of a lifesaving organization? Since 1948, Vitalant has proudly served as a leader in the blood banking industry. Primary Purpose: Under minimal supervision, this position is responsible for reviewing quality systems and compliance in all areas of computerized medical devices and computer applications for Blood Systems and business units. This position serves as a resource to department and operations on computer-related quality and regulatory issues. Requirements: Bachelor's degree required. Knowledge of computer environments, standards development, and system life cycle methodology required. Knowledge of regulations as they relate to the blood industry quality and IT activities preferred. IT related certifications (i.e., ITIL, COBIT, CISA, CSQE, etc.) preferred. Four years of related experience in a regulated industry required. To include: Two years of experience in IT quality, regulatory, and/or auditing. Please apply [here](#). EO/Minorities/Females/Disabled/Veterans ♠