



# ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

Visit ABC's Web site at: [www.americasblood.org](http://www.americasblood.org)

2020 #37

October 23, 2020

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## National Blood Community Issues Joint Statement Urging Blood Donation as Supply Declines

America's Blood Centers, AABB, and the American Red Cross issued a [joint statement](#) encouraging eligible individuals to donate blood amid increasing shortages across the country. "The blood supply in the United States is critically low and the majority of the country's blood centers are reporting significant declines in their blood collections. As the nation confronts new surges of COVID-19 cases, AABB, America's Blood Centers and the American Red Cross are joining together to urge eligible individuals to make and keep an appointment to donate blood now..." Blood has a short shelf life and the supply must constantly be replenished. Blood donors are needed now and will continue to be needed to ensure patients continue to have access to blood products throughout the remainder of 2020."

The statement notes that demand is increasing "as more hospitals throughout the country resume normal surgery schedules and more patients require blood," while blood centers nationwide have, "experienced unprecedented fluctuations in both supply and the need for blood. A variety of events — including wildfires in the western states, recent hurricanes and other storms — have led to additional disruptions to the collection of blood, compounding the impact of canceled blood drives at schools, businesses and community organizations due to remote work and closures."

The call to action has begun to garner national attention as *USA TODAY* published an [article](#) describing the concerns of the blood community as demand for blood increases and the industry continues to work through the challenges brought on by the COVID-19 pandemic in the form of blood drive cancellations. "We're able to collect less but demand is up and that's what created this perfect storm," said Kate Fry, MBA, CAE, chief executive officer of America's Blood Centers, to *USA TODAY*. The article reports that members of America's Blood Centers have seen a 30 percent decline in blood drives scheduled for the rest of the year compared with last year — equating to about 250,000 missed donations."

She added, "[a] month or two ago, we were at probably a good place...because so many heard that message to come out [and donate]. But now it's lost that momentum [and we are seeing] the blood supply steadily decrease."

ABC will continue to provide additional [resources](#) for member blood centers to use as they become available. Additional updates to member blood centers on our national outreach efforts to external stakeholders to communicate the status of the U.S.

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### Blood Community Joint Statement on Blood Shortages (continued from page 1)

blood supply and the importance of the need for blood donors to schedule and keep appointments to donate will be also be shared. Please contact [us](#) with any questions.

(Sources: *USA TODAY*, [‘It’s a sad irony, isn’t it?’: Blood donations continue to drop off as COVID-19 cases rise and hospitals increase demand](#), 10/22/20; America’s Blood Centers, AABB, American Red Cross, [Joint Statement](#), 10/16/20) ♦

### **ACBTSA Publishes Recommendations to ASH from September Meeting**

The U.S. Department of Health and Human Services (HHS) Advisory [Committee](#) on Blood and Tissue Safety and Availability (ACBTSA) has published its official [recommendations](#) submitted to the Assistant Secretary for Health (ASH) at HHS from last month’s meeting. The recommendations address challenges and weaknesses such as the “lack of accurate, real-time information on blood supply and utilization affected informed decision making and patient care, particularly for patients who need surgical procedures that require large volumes of transfusion (for example, liver transplantation) and people who need regular transfusion (for example, people with sickle cell disease and cancer).” Additional areas for improvements included:

- lack of coordination in national and local public messaging efforts about the status of blood supply and donation;
- significant concerns from blood donors and staff about the safety of the work environment;
- lack of existing stockpiles of critical blood supplies;
- lack of plans for addressing transportation logistics; and
- significant financial impact of the pandemic on blood center operations.

The committee and industry stakeholders feel that several strengths have emerged over the past few months as a result of coordinated and collaborative efforts in response to the COVID-19 pandemic that can be built upon, such as:

- national public awareness campaigns about blood shortage;
- collaboration between blood centers, hospitals, government agencies, and industry with defined outcomes;
- changes to regulatory requirements such as donor deferrals; and
- blood centers’ rapid adjustments to their operations.

A detailed description and additional information on each recommendation and past recommendations is available on the HHS [website](#).

(Source: ACBTSA [Recommendations](#), 10/20/20) ♦

#### **Upcoming ABC Webinars – Don’t Miss Out!**

- **ADRP Webinar: How to Get The Most out of Donor Promotions and Incentives** – October 28<sup>th</sup> from 1 – 2 p.m. (EDT). Register [here](#).
- **ABC SMT Journal Club Webinar** – December 3<sup>rd</sup> from 12 – 1 p.m. (ET). Additional details coming soon.



## BRIEFLY NOTED

The Centers for Disease Control and Prevention (CDC) updated its [definition](#) for what is considered “close contact” with an individual who has COVID-19. “Close contact” is now defined as “[s]omeone who was within six feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period starting from two days before illness onset (or, for asymptomatic patients, two days prior to test specimen collection) until the time the patient is isolated.” It previously considered “close contact” as being within six feet of an individual with a confirmed case of COVID-19 for at least 15 consecutive minutes.

(Source: CDC [Guidance](#), 10/21/20)

The U.S. Department of Health and Human Services is seeking nominations for the Tick-Borne Disease Working Group (TBDWG) according to a recent [notice](#) in the *Federal Register*. Nominations are due via [email](#) to the agency by 5 p.m. E.T. on November 5<sup>th</sup>. The agency is looking for non-federal public individuals “who represent diverse scientific disciplines and views” and are subject matter experts. Nominations should include:

- A letter of nomination that clearly states the name and affiliation of the nominee, the basis for the nomination, and a statement from the nominee that indicates that the individual is willing to serve as a member of the TBDWG, if selected;
- the name, address, telephone number, and email address of the nominee; and
- current copy of the nominee’s curriculum vitae or resume, which must be limited to 10 pages.

The TBDWG is made of 14 voting members (seven public and seven federal) and meets at least twice a year and “is charged to provide a report to the HHS Secretary and Congress biennially on its findings, including advances made and gaps in research, and to make recommendations regarding appropriate changes or improvements to such activities and research.” More information on the TBDWG is available on the HHS website.

(Source: *Federal Register* [Notice](#), 10/6/20) 💧



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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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**Annual Subscription Rate: \$390**

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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.*

### **Call for Nominations Opens for 24<sup>th</sup> Annual Awards of Excellence**

ABC members are encouraged to nominate blood donation sponsors, corporations, and advocates for the 24<sup>th</sup> Annual Awards of Excellence. This program provides members with the opportunity to offer national recognition and showcase the best and brightest in the blood donation community. Additional details are available in MCN 20-093 for ABC member blood centers. The online submission form for each award is hyperlinked below. If your nomination is selected, you will be asked to upload a video of your award recipient being presented with the award (ABC will mail the award to the blood center). We will upload videos of all award winners to our website as part of national recognition of these individuals/organizations.

ABC members are permitted to submit up to three nominations per category. A full description of the awards is [available](#).

We encourage member blood centers to take advantage of this opportunity to recognize your supporters by submitting your nominations before Friday, November 20, 2020. Nominations are currently being accepted for the following awards:

- [ABC Outstanding Blood Drive of the Year](#)
- [Outstanding Public Relations Campaign](#)
- [Corporation of the Year Award](#)
- [Larry Frederick Award](#) (jointly presented by ABC and ADRP)
- [Thomas F. Zuck Lifetime Achievement Award](#)

Please contact [Leslie Maundy](#) with any questions about the Awards of Excellence or to receive a copy of the MCN.

(Source: MCN 20-093, 10/22/20)

### **ADRP Webinar: How to Get the Most out of Donor Promotions and Incentives**

[Register](#) today for the Wednesday, October 28<sup>th</sup> ADRP webinar titled “How to Get the Most out of Donor Promotions and Incentives.” This [webinar](#) will take place at 1 p.m. EDT and will describe how two blood centers have successfully engaged donors through promotions. Additionally, FCI Promos will discuss promotional items that “speak to donors” and other trends in creative culture. Registration for this ADRP webinar is free.

(Source: ADRP [Announcement](#), 8/11/20) 💧

### **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 16<sup>th</sup>-18<sup>th</sup>. Over the course of three days, individuals

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## INSIDE ABC (continued from page 4)

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](#). ♦

## RESEARCH IN BRIEF

**Characterization of 100 Convalescent Plasma Donations.** A report in *Transfusion* studied “the characterization of the first 100 convalescent plasma (CP) units collected for functionally active neutralizing antibodies by [virus micro-neutralization test (MNT)] as well as by a binding antibody assay.” The authors note that “[a]ll CP donors had polymerase chain reaction (PCR)-confirmed SARS-CoV-2 infections...Plasma was pooled [minimum two] based on titers of 300 or greater...[T]he pooled plasma was pathogen inactivated...Anti-SARS-CoV-2 IgG antibodies were quantified by ELISA.” SARS-CoV-2 virus was added to Vero cells “and incubated for five to seven days, when cells were evaluated for cytopathic effect and the SARS-CoV-2 microneutralization titer (NT50), that is, the reciprocal sample dilution resulting in 50 percent virus neutralization.” The researchers state that, “[o]n average the CP units had a high neutralizing antibody titer, with a mean NT50 of approximately 230...[F]or individuals who had successfully recovered from PCR-confirmed SARS-CoV-2 infection, neutralizing antibodies were undetectable in one plasma unit, and for six units the NT50 was below 23...A binding antibody assay was performed on CP units, to establish a correlation between the functionally more relevant MNT and the more accessible ELISA, as well as an ELISA threshold to allow for the elimination of subpotent units.” They explain that “the correlation between results from MNT and ELISA was highly significant ( $P < .0001$ ), yet quantitatively limited ( $R^2 = 0.2830$ )...Exclusion of units with particularly high titers ( $>500$ ) from analysis improved correlation ( $R^2 = 0.5386$ )...Of the 100 plasma donors, 90 were classified into World Health Organization (WHO) disease severity scores of one and two, with an average NT50 of 208, vs. only six donors with disease severity scores of three to six, who had a mean NT50 of 696...A tendency of higher-titer plasma units from donors with increased disease severity, of advanced age, and of male sex was seen, yet the functional relevance is questionable.” The authors concluded that they had established an “ELISA-based correlation to the MNT, with a threshold proposal that could eliminate lower titer units for COVID-19 treatment.” An adequate pooling strategy of CP may level out variations of antibody titers and quality in the therapeutic units.

**Citation:** Jungbauer, C., Weseslindtner, L., Weidner, L., *et al.* Characterization of 100 sequential SARS-CoV-2 convalescent plasma donations. *Transfusion*. 2020. Doi: [10.1111/trf.16119](https://doi.org/10.1111/trf.16119).

Contributed by Richard Gammon, MD, Medical Director at OneBlood ♦

### 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!





## MEMBER NEWS

**LifeServe Blood Center** recently received a visit from U.S. Department of Health and Human Services (HHS) Secretary Alex Azar, HHS Assistant Secretary for Preparedness and Response (ASPR) Robert Kadlec, MD, and Iowa Governor Kim Reynolds. They toured the blood center and Gov. Reynolds discussed the need for blood donations and for individuals who have recovered from COVID-19 to donate convalescent plasma. In a [tweet](#) she stated, “Grateful to all those working hard on cutting edge treatments for #COVID19. @SecAzar joined me at @McFarlandClinic and @LifeServeBldCtr to see the unprecedented collaboration, communication, and coordination [firsthand].” Secretary Azar provided updates on the progress towards a COVID-19 vaccine and urged individuals to continue to take appropriate precautions to limit the transmission of COVID-19.



*Photo courtesy Iowa Public Radio: Secretary Azar (left) and Gov. Reynolds (right) at LifeServe Blood Center*

(Sources: WQAD News 8, [US is 'building up stockpiles' of coronavirus vaccines, top health official says during Iowa visit](#), 10/15/20; Governor Kim Reynolds [Tweet](#), 10/15/20)

**New York Blood Center** [unveiled](#) plans for a potential redevelopment and expansion of its Manhattan headquarters. According to a report in *The Wall Street Journal*, “[t]he project, which is subject to zoning approvals, calls for replacing the Blood Center’s current building on East 67th Street with a 16-story, nearly 600,000-square-foot campus built by Longfellow Real Estate Partners, a private life-science developer. The New York Blood Center would be an anchor tenant, occupying five floors, with the upper stories marketed to startups, industry groups and venture-capital firms.” City officials see the project as an infusion of “much needed research space.” New York



*Photo courtesy of The Wall Street Journal: New York Blood Center in Manhattan.*



*Photo courtesy of The Wall Street Journal: Rendering of potential expansion of New York Blood Center.*

Blood Center President and Chief Executive Officer Christopher Hillyer, MD told *The Wall Street Journal* that more space is needed for research purposes and “to expand the number of companies it incubates in its offices. The Blood Center expects to more than double the number of jobs it has on-site, to 580 from its current staffing level of 210 employees.”

(Source: *The Wall Street Journal*, [New York Blood Center Plans Expansion on Upper East Side](#), 10/13/20) 💧



## GLOBAL NEWS

**Sanquin, the national blood provider for the Netherlands, has agreed to sell “85 percent of its plasma products arm in the Netherlands and Belgium” to an international consortium [reported Dutch News](#).** “I am pleased with this agreement, because the Dutch market for plasma-derived medicines is too small to maintain a plasma-derived medicine company in a cost-efficient way, said Sanquin Chair of the Executive Board Tjark Tjin-A-Tsoi in a Sanquin [news release](#). “In isolation and without partners, SPP is not sustainable. The market for plasma-derived medicines is growing strongly, so now is the time for SPP to expand and achieve economies of scale. This requires investments to moderni[z]e and increase the efficiency of the production facilities. Then we can make more lifesaving and life-improving drugs, for less money, with proportionally less plasma. Not only does this preserve the knowledge and infrastructure in the Netherlands, it also maximizes the utility of each plasma donation.” The consortium includes:

- BioSolutions; Epstein Capital and Fortissimo Capital;
- OBF investments; and
- Mesola Inversiones SL.

Mr. Tjin-A-Tsoi added in the release, “[t]he Netherlands is a frontrunner in Europe in the collection and processing of anti-COVID-19 plasma, precisely because we have local infrastructure. SPP is the only company in the Netherlands able to process high-quality plasma. This gives the Netherlands the opportunity to rapidly organize the manufacturing medicine for high-risk groups and to make its own policy choices in this matter, which is what Minister De Jonge did. This makes the Netherlands less dependent on the international market, where there is a supply constraint. With our new partners, we can maintain that position.”

(Sources: *Dutch News*, [Blood company Sanquin to sell 85% of plasma operations to international investors](#), 10/13/20; Sanquin [News Release](#), 10/12/20)

**The Nambian Blood Transfusion Service (NamBTS) has [partnered](#) with Facebook to encourage blood donation through the release of a blood donation tool on the social media platform.** “We are truly excited by the partnership with Facebook, the tool will [help] us bolster our blood collections during the pandemic and beyond, as only 1 percent of the population donate blood,” said Zita Tobin, manager of Donor Recruitment and Public Relations for NamBTS, to the *Nambian Economist*. The tool is now available in 12 African countries including:

- Burkina Faso;
- Côte d’Ivoire;
- Chad;
- Egypt;
- Guinea;
- Kenya;
- Mali;
- Niger;
- Senegal;
- South Africa; and
- Zimbabwe.

(Source: *Nambian Economist*, [Facebook, Namibia, partner to boost local blood donations](#), 10/15/20)

**A four-month deferral period for plasma donors in Australia who get a tattoo has been waived according to a [report](#) from Australia’s ABC News.** “The deferral still stands for whole blood, but if you’ve just got a tattoo you can come straight on in and donate plasma,” said Janine Dietrich from Australian Red

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## GLOBAL NEWS (continued from page 7)

Cross Lifeblood to *ABC News*. The organization hopes that the deferral change could lead to an additional 50,000 plasma donations annually and indicated that approximately 15 percent of individuals in the country associate getting a tattoo with meaning “you can’t donate blood at all.” Lifeblood’s Donor Services Executive Director Cath Stone added, “People with tattoos are perfect plasma donors because we know they’re not afraid of needles — one of the biggest barriers for new donors donating blood or plasma for the first time.”

(Sources: *ABC News*, [Inked up Aussies called on to donate plasma as Australian Red Cross Lifeblood eases rules](#), 10/8/20) ◆

## WORD IN WASHINGTON

**The U.S. Department of Defense (DOD) has collected [close to 11,000 units of convalescent plasma](#).** This surpasses DoD’s previously [stated](#) goal of 8,000 units from May. Defense Secretary Mark T. Esper announced the accomplishment on October 15<sup>th</sup> and credited DoD’s strategy and the donors for supporting DoD’s efforts to collect convalescent plasma. The units collected by the Armed Services Blood Program (ASBP) will be prioritized for “patients receiving treatment in military treatment facilities and operating units” though the “ASBP will continue to work closely with industry partners to support patients receiving care at the [Veterans Affairs Department] and in civilian hospitals,” according to the Military Health [web-site](#).

(Source: *Air Force Magazine*, [Esper: Military exceeded COVID-19 convalescent plasma collection goal](#), 10/15/20; DoD [News Release](#), 5/29/20) ◆

## COMPANY NEWS

The U.S. Department of Health and Human Services (HHS) and U.S Department of Defense (DoD) have [partnered](#) with **AstraZeneca** for development and manufacturing of the company’s investigational monoclonal antibody cocktail as a therapy to fight COVID-19. “In addition to Operation Warp Speed’s historic progress on vaccines, we are supporting promising monoclonal antibodies for prevention and treatment all the way through to supply, allowing faster distribution if trials are successful,” said HHS Secretary Alex Azar in a news release. “More good news about COVID-19 treatments is constantly emerging, and President Trump’s commitment to supporting lifesaving measures, like AstraZeneca’s antibody candidate which may help deliver these products to our nation’s most vulnerable populations.” In an October 9<sup>th</sup> [news release](#) announcing that phase III clinical trials were underway for the investigational therapy, AstraZeneca Chief Executive Officer (CEO) Pascal Soriot stated, [t]his agreement with the U.S. Government will help accelerate the development of our long-acting antibody (LAAB) combination which has the potential to provide immediate and long-lasting effect in both preventing and treating COVID-19 infections. We will be evaluating the LAAB combination in different settings from prophylaxis, to outpatient treatment to hospitali[z]ation, with a focus on helping the most vulnerable people.” One trial will seek to “evaluate safety and efficacy of the product to prevent infection for up to 12 months in approximately 5,000 volunteers” and the other will “evaluate if [monoclonal therapy] can help prevent infection in people who have come in contact with someone with COVID-19 in a post-exposure prophylaxis setting” with an estimated 1,100 volunteers to be enrolled.

(Source: HHS & DoD Joint [News Release](#), 10/14/20; AstraZeneca [News Release](#), 10/9/20)

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COMPANY NEWS (continued from page 8)

A randomized, phase II clinical trial for monoclonal antibody therapies [developed](#) by **Boehringer Ingelheim** and **AbbVie**, and another from **Humanigen** to treat COVID-19 has begun. The ACTIV-5 Big Effect Trial (BET) is a collaboration between the companies and the National Institute of Allergy and Infectious Diseases (NIAID), part of the National Institutes of Health (NIH). “The goal here is to identify as quickly as possible the experimental therapeutics that demonstrate the most clinical promise as COVID-19 treatments and move them into larger-scale testing,” said NIAID Director Anthony S. Fauci, MD in an agency news release. “This study design is both an efficient way of finding those promising treatments and eliminating those that are not.” The trial is expected to enroll up to 100 hospitalized COVID-19 patients respectively at as many 40 sites across the country. NIH Director Francis S. Collins, MD, PhD added in the news release, “the ACTIV-5/BET study aims to streamline the pathway to finding urgently needed COVID-19 treatments by repurposing either licensed or late-stage-development medicines and testing them in a way that identifies the most promising agents for larger clinical studies in the most expedient way possible.” The trial is a combination therapy clinical trial and will include each monoclonal antibody therapy “in conjunction with the antiviral drug remdesivir, compared to a placebo plus remdesivir,” according to the NIAID announcement.

(Source: NIAID [News Release](#), 10/13/20)

The National Hemophilia Foundation (NHF) [announced](#) earlier this month that it had revised its “treatment recommendations” for congenital fibrinogen (Factor I) deficiency to include **Octapharma’s** Fibryga®, a plasma-derived fibrinogen concentrate. “The NHF recommendations are great news for patients and providers who must manage the life-altering challenges of bleeding in congenital fibrinogen deficiency,” said Octapharma USA President Flemming Nielsen in a news release. “We are committed to providing life-saving treatment options to people with rare bleeding disorders, including Factor I deficiency.” According to the release, the therapy “is not indicated for dysfibrinogenemia.”

(Source: Octapharma [News Release](#), 10/7/20)

**GlaxoSmithKline** (GSK) and **Vir Biotechnology, Inc.** recently [announced](#) a global expansion of phase III clinical trial for its monoclonal antibody therapy to treat COVID-19 in patients at high risk for hospitalization. The expansion will include the addition of sites in North America, South America, and Europe, in the wake of “a positive assessment of unblinded safety data from the lead-in portion of the trial by an Independent Data Monitoring Committee last month. “The rapid achievement of this important milestone reflects the urgency with which we’re mobilizing our resources in the hope of preventing the worst consequences of this deadly virus,” said Vir CEO George Scangos, PhD in a joint news release. “[The characteristics of this therapy] may enable it to prevent hospitalization or death via multiple mechanisms. We look forward to continuing to collaborate with GSK to accelerate its development.” GSK Chief Scientific Officer and President of Research and Development Hal Barron, MD added in the announcement, “[g]iven the urgent patient need I am very pleased that we have progressed [this therapy] from pre-clinical studies to a Phase III trial in only six months since announcing our collaboration with Vir. We believe this neutralizing antibody’s high barrier to resistance, notable effector function, and enhanced delivery into the lung suggest it has best-in-class potential in the fight against this global pandemic.”

(Source: GSK and Vir Biotechnology, Inc. Joint [News Release](#), 10/6/20) 💧

### 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](mailto: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.



## CALENDAR

*Note to subscribers: Submissions for a free listing in this calendar (published weekly) are welcome. Send information to [newsletter@americasblood.org](mailto: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.)*

### 2020

Oct. 27. **Biomedical Advanced Research and Development Authority (BARDA) Industry Day 2020 (Virtual)**. More information available [here](#).

Nov. 16-18. **2020 ADRP 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 available [here](#).

May 11-13. **2021 ADRP Conference, Kansas City, Mo.** More details coming [soon](#).

Aug. 4. **ABC Medical Directors Workshop, Cleveland, Ohio.** More details coming [soon](#).

Aug. 5-6. **ABC Summer Summit, Cleveland, Ohio.** More details coming [soon](#).

Sept. 15-17. **4<sup>th</sup> 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](mailto:newsletter@americasblood.org)

## POSITIONS

**Laboratory Technician- Stanford Blood Center (Req# 57715).** Stanford Blood Center is seeking a Laboratory Technician. Under the direction of the Laboratory Supervisor, prepares and labels blood components; monitors component inventory to assure proper levels are maintained; receives orders for blood products and issues, packs and ships blood components; processes deliveries of blood products into inventory and maintains accurate and detailed records of all work performed. Performs quality control on equipment and blood components, reviews quality control and maintains equipment as required. May be required to operate delivery vehicle for transport of blood products when necessary. Responds to blood storage alarms; cleans and disinfects areas and equipment according to laboratory policy and maintains a clean and organized work area. Answers telephones promptly; route calls or take messages as appropriate. Rotates beeper on-call for off hours emergency blood needs or equipment failure. This is not a research position. For complete job description and to apply, please

visit [www.stanfordhealthcarecareers.com](http://www.stanfordhealthcarecareers.com) and reference req# 57715.

**Components Manufacturing Manager (Bradenton, FL).** SunCoast Blood Centers is accepting applications for a Components Manufacturing Manager to work at our Lakewood Ranch Head Quarters. This position manages and oversees component manufacturing activities and operations, and supervises Staff assigned to the department. Other Duties include: Assures that activities are conducted in compliance with SOPs and regulatory guidelines. Assists with the development and implementation of effective corrective action plans in response to non-compliance, deviations, or operational problems. Assists with the preparation and scheduling of periodic maintenance, calibration and validation of instruments and equipment and other duties as required to fulfill the organizations mission and vision. Qualified applications

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**POSITIONS** (continued from page 10)

should possess an associate degree or equivalent experience. Prefer applicant to have MT or MLT licensure, but not required. Applicant must have four years component processing or other cGMP regulated environment, plus two years supervisory responsibility. To apply and view a complete Job Description of this position please visit <https://www.scbb.org/careers.html>. EOE. Applicant drug testing required.

**Quality Assurance Specialist.** Quality Assurance Specialist. The Quality Assurance Department at Hoxworth Blood Center provides regulatory, quality oversight for all processes at the Center. The position is responsible for conducting audits, quality assurance oversight and CLIA regulated laboratories processes. Assists with development of SOPs, data, report results, process and equipment validations, and compliance with applicable regulations. Ideal candidate will have experience with the following: 21 CFR Parts 210, 211, 600, 601, 606, 607, 610, 630, 640, 660, 42 CFR Part 493, ASHI standards, FACT standards, and AABB Standards. Have experience working in a clinical laboratory or FDA regulated environment; auditing experience; knowledge of histocompatibility testing; experience with quality management software and project management. Required Qualifications: Bachelor's degree with three (3) years of experience; -OR- Associate's degree with five (5) years of experience; -OR- seven (7) years of experience. Degree and experience must be in a related field. Experience may require at least one (1) year supervision. Apply [here](#) – Requisition # 49502.

**QA Specialist.** Stanford Blood Center is seeking a QA Specialist to work in the Technical Services Laboratory. Under the general supervision of the Operations Support Supervisor, the QA Specialist will perform the quality assurance duties of the Technical Services department by writing/revising department equipment and process validation plans, managing equipment preventative maintenance program, manage training records, perform process and computer audits, write/revise procedures for regulatory compliance as necessary. Prepare training binders for new staff and monitor new and incumbent staff training is up to date. Ensure annual SOP and label review performed, review departmental records, help determine corrective actions for events by performing root cause analysis, and is involved in process improvement. Perform post-donation information follow-up that affects safety, purity, and quality of the product by quarantine/discard of units, notification of customers and tracking of recalls. Provide notification to hospitals, regulatory agencies and other customers of test results that affect patients/general population safety. For complete job description and to apply, please visit [www.stanfordhealthcarecareers.com](http://www.stanfordhealthcarecareers.com) and reference req# 58277. ♦