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ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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

2021 #15 **April 30, 2021**

INSIDE:

Blood Community Joint Letter Requests Access to HOV Lanes for Vehicles Transporting Blood Products

America's Blood Centers, AABB, and the American Red Cross sent letters to members of Congress requesting "support and leadership to allow vehicles transporting life-saving blood and blood components to access HOV/carpool lanes." The April 21st letters are addressed to the Senate Committee on Environment and Public Works Chair Sen. Tom Carper (D-Del.), Ranking Member Sen. Shelley Moore Capito (R-W.V.), Senate Subcommittee on Transportation and Infrastructure Chair Sen. Ben Cardin (D-M.D.), Ranking Member Kevin Cramer (R-N.D.), House Committee on Transportation and Infrastructure Chair Rep. Peter DeFazio (D-Ore.), Ranking Member Rep. Sam Graves (R-M.O.), House Subcommittee on Highways and Transit Chair Rep. Eleanor Holmes Norton (D-D.C.), and Ranking Member Rep. Rodney Davis (R-Ill.).

The blood community explains that "[b]lood center vehicles with access to the HOV lanes will be transporting blood to laboratories for processing or to hospitals to meet patients' needs. Particularly in times of an ASAP order or STAT order from hospitals, time is of the essence. Having access to HOV lanes will reduce the current transport time between destinations, maximizing the availability of these life-saving therapies." The letter describes challenges that can be faced in transporting blood products such as "high volume traffic, construction, or possible accidents may clog the roads and surface streets, preventing needed blood and blood components from reaching their destination in a timely manner."

The blood community concludes the letter by explaining, "Some states have already passed legislation allowing blood transport vehicles access to HOV lanes, and other state legislatures are considering doing so. However, federal law currently does not allow these laws to go into full effect…we respectfully request your assistance to ensure federal law allows blood center vehicles with appropriate signage to access HOV lanes."

(Source: Senate HOV Letter, 4/21/21; House HOV Letter, 4/21/21) ♦

FDA & CDC Remove Pause of Janssen COVID-19 Vaccine After Safety Review

The U.S. Food and Drug Administration (FDA) and the Centers for Disease Control and Prevention (CDC) announced that the recommended pause of the Janssen (Johnson & Johnson) vaccine had been lifted and vaccine use "should resume." The announcement followed a "thorough safety review" and two meetings of the CDC's

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FDA & CDC Remove Pause of Janssen COVID-19 Vaccine (continued from page 1)

Advisory Committee on Immunization Practices (ACIP). "Safety is our top priority. This pause was an example of our extensive safety monitoring working as they were designed to work—identifying even these small number of cases," said Janet Woodcock, M.D., Acting FDA Commissioner in a statement. "We've lifted the pause based on the FDA and CDC's review of all available data and in consultation with medical experts and based on recommendations from the CDC's Advisory Committee on Immunization Practices. We have concluded that the known and potential benefits of the Janssen COVID-19 Vaccine outweigh its known and potential risks in individuals 18 years of age and older. We are confident that this vaccine continues to meet our standards for safety, effectiveness, and quality. We recommend people with questions about which vaccine is right for them have those discussions with their health care provider."

Determinations from the agencies include:

- "Use of the Janssen COVID-19 Vaccine should be resumed in the U.S.;
- the FDA and CDC have confidence that this vaccine is safe and effective in preventing COVID-19;
- the FDA has determined that the available data show that the vaccine's known and potential benefits outweigh its known and potential risks in individuals 18 years of age and older;
- at this time, the available data suggest that the chance of Thrombosis-thrombocytopenia syndrome (TTS) occurring is very low, but the FDA and CDC will remain vigilant in continuing to investigate this risk; and
- health care providers administering the vaccine and vaccine recipients or caregivers should review the Janssen COVID-19 Vaccine Fact Sheet for Healthcare Providers Administering Vaccine (Vaccination Providers) and Fact Sheet for Recipients and Caregivers, which have been revised to include information about the risk of this syndrome, which has occurred in a very small number of people who have received the Janssen COVID-19 Vaccine."

CDC Director Dr. Rochelle P. Walensky added in the statement, "[a]bove all else, health and safety are at the forefront of our decisions. Our vaccine safety systems are working. We identified exceptionally rare events – out of millions of doses of the Janssen COVID-19 administered – and we paused to examine them more carefully. As we always do, we will continue to watch all signals closely as more Americans are vaccinated. I continue to be encouraged by the growing body of real-world evidence that the authorized COVID-19 vaccines are safe and effective, and they protect people from disease, hospitalization, and death. I urge anyone with questions about the COVID-19 vaccines to speak with their healthcare provider or local public health department."

The decision came in the wake of concerns, "reports of six cases of a rare and severe type of blood clot in individuals following administration of the Janssen COVID-19 Vaccine. During the pause, medical and scientific teams at the FDA and CDC examined available data to assess the risk of thrombosis involving the cerebral venous sinuses, or CVST (large blood vessels in the brain), and other sites in the body (including but not limited to the large blood vessels of the abdomen and the veins of the legs) along with thrombocytopenia, or low blood platelet counts. The teams at FDA and CDC also conducted extensive outreach to providers and clinicians to ensure they were made aware of the potential for these adverse events and could properly manage and recognize these events due to the unique treatment required for these blood clots and low platelets, also known as TTS."

The Janssen vaccine received emergency use authorization from the FDA earlier this year, making it the third vaccine to be granted the designation for use in the U.S. by the agency.

(Source: FDA Statement, 4/23/21)

REGULATORY NEWS

The Office of the Assistant Secretary for Health (OASH), the Office of the Secretary, and the U.S. Department of Health and Human Services (HHS) have issued a request for information (RFI) for "Developing the National Public Health Strategy for the Prevention and Control of Vector-borne Diseases in Humans" in the *Federal Register.* The RFI specifically seeks public input with regards to strengthening and improving response efforts to vector-borne diseases as the agencies look to address areas including:

- "what do you recommend as the top priorities to address vector-borne diseases in the United States during the next five years? Why are these the most important priorities?
- What goals, objectives, and strategies would you propose for each of your top priority areas?
- Do you have recommendations on specific research or programmatic efforts to improve surveillance, diagnosis, prevention, and treatment of vector-borne diseases?"

Any feedback or additional topics that individuals wish to provide input on must be submitted prior to midnight eastern standard time on June 11th. The development of a national strategy on vector-borne diseases including tickborne diseases was previously mandated by Congress.

(Source: *Federal Register* Notice, 4/27/21)

Sunquest Information Systems, Inc. has received a substantial equivalence determination from the U.S. Food and Drug Administration for the Sunquest Transfusion Manager™ Version 3.0 which is classified as a blood establishment computer software (BECS). The software received an enhancement to "now support ISBT 128 Product Codes beyond E9999. This is an add-on support at Lab10.0 in dealing with EAnnn codes along with current Ennnn codes."

(Sources: FDA Letter, 4/16/21; Sunquest Information Systems Inc., Summary, 4/12/21)

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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

Transfusion Reactions – National Healthcare Safety Network Hemovigilance Module 2013-2018. A study in *Transfusion* "analyzed data from the National Healthcare Safety Network Hemovigilance Module (NHSN HM) during 2013–2018 to quantify the burden of infectious and non-infectious adverse reactions." The authors state that "facilities participating in the NHSN HM completed an annual survey [reporting] transfusion-related adverse reactions…From 201 facilities, 18,308 met case definition…[A]llergic (7,668; 41.8 percent) and febrile non-hemolytic transfusion reactions (7,609; 41.5 percent)" were the most common, followed by "delayed serologic transfusion reaction[s] (1,053; 6 percent) and transfusion-associated circulatory overload (934; 5 percent)." The researchers note that "[t]ransfusion-transmitted infections were uncommon (37; <1 percent); of these, 18 were bacterial, 18 parasitic, and 1 viral...Transfusion-transmitted infections were primarily attributed to platelet (18/37) and red blood cell (RBC) transfusions (19/37). They found that "1,340 (7.3 percent) were considered serious (severe, fatal or life threatening) and 23/1,340 (1.7 percent) [and] serious reactions resulted in a transfusion-associated fatality…Most fatalities (65 percent) were associated with transfusion-associated circulatory overload, transfusion-associated dyspnea, and transfusion-related acute lung injury." The authors explained that "uncommon transfusion-transmitted infections (37; <1 percent), acute hemolytic (75, <1 percent), and transfusion-associated circulatory overload (936, 5 percent) were most often reported as serious…Overall, rates of adverse reactions were nearly two-fold higher among platelets (373.1/100,000) than RBCs (182.5/100,00) and 3.5 times higher than plasma (101.9/100,000)…When comparing collection methods, adverse reactions among apheresis platelets (486.0/100,000) were nearly eight-fold higher than whole blood-derived platelets (61.1/100,000)." The researchers note that "[t]he overall transfusion-related adverse reaction rate for pathogen-reduced platelets was 579.3/100,000 components transfused, which was approximately 30 percent higher than the rate of non-pathogen-reduced apheresis platelets (458.8/100,000)…No transfusion-transmitted infections were associated with a pathogen reduced (PR) platelet component and no PR-plasma products were associated with an adverse reaction…The rate of transfusion-transmitted infections was three-fold higher among platelets (1.1/100,000) compared to RBCs (0.37/100,000)…Compared to whole blood-derived platelets, the rate of transfusion-transmitted infections was nearly three-fold higher among apheresis platelets…One in 455 blood components transfused was associated with an adverse reaction although the risk of serious reactions (1 in 6224) or transfusion-transmitted infections (1 in 225,440) was lower." The authors explain that "[t]hese findings suggest that while transfusions are generally safe, additional blood safety measures are needed as many serious adverse reactions may be preventable."

Citation: Kracalik, I., Mowla, S., Basavaraju, S.V., *et al*. National Healthcare Safety Network Hemovigilance Module — United States, 2013–2018. *Transfusion*. 2021.

Contributed by Richard Gammon, MD, Medical Director at OneBlood

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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 New Website Is Launching Soon

ADRP, an International division of America's Blood Centers (ABC) is excited to announce that an updated website will be launching on May 5th. Users will experience a fresh design and have access to new tools for improved interaction with both their peers and the organization. Additional features include:

- streamlined navigation to most visited pages and easy access to tools such as webinar recordings;
- a new community platform for posting questions, sharing resources, and connecting with other ADRP subscribers; and
- expanded public awareness resources, ensuring a more unified voice for the blood community.

The ADRP website will be down on May 4th as a part of the transition. If you need anything during this time, please contact us.

ABC Highlights Need for Diverse Blood Supply in *USA TODAY*

America's Blood Centers participated in a campaign with *USA Today*, by authoring an article titled "Why the Nation Needs a Diverse Blood Supply." The article is included as an insert in the publication. The campaign highlights those living with blood disorders and features Tionne "T-Boz" Watkins, a member of the four-time Grammy Award winning group TLC, who lives with sickle cell disease. The estimated circulation of the insert is 200,000 copies reaching approximately 600,000 readers.

Participate in the ABC Employee and Retention Survey

ABC has launched our Employee Turnover and Retention Survey for calendar year 2020. We would like to achieve a 100 percent response rate. Questions focused on COVID-19 experiences and policies have been added to the survey. Your participation in completing this survey helps ensure the results will be a valuable tool for the entire ABC membership, particularly in addressing the human resources sections of your emergency and disaster preparedness plans. Survey results will be reported in the aggregate and made available on the ABC Member Portal.

Please contact us for a copy of the MCN which includes a link to the survey.

(Source: MCN 21-033, 4/12/21)

ADRP Master Class Designed for Your Collections and Recruitment Teams

This year's workshop is focused on elevating the donor journey and is catered to the needs of your collections and recruitment teams, the latter of which have a unique role in setting the foundation with donors, communicating key details on what they can expect during the blood donation process. Your collections teams provide the donor the experience which will stay with them forever, dictating if and when they return.

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Both teams are integral in the donor journey. The Master Class program will also address staff management and how to create a culture to deliver top-notch service. It includes a great mix of presenters, both from blood centers across the globe and from well-known companies such as Chick-fil-A and The Ritz-Carlton. In addition to these speakers, the workshop will have attendees from community blood centers, hospitals, and the American Red Cross, representing U.S., Canada, Scotland, Ireland, and China. Registration remains open. View the complete program and register here today.

PEOPLE

Vitalant Executive Vice President and Chief Information Officer (CIO) **Anthony Bobos, MBA** has been recognized by ArizonaCIO as a recipient of the 2021 CIO of the Year® ORBIE® Award in the Large Enterprise category. According to the announcement from ArizonaCIO, "ORBIE winners demonstrate the significance of strong technology leadership in these uncertain times," said Lindsey Estep, executive director of ArizonaCIO in a news release. "Over the past year, CIOs are leading in unprecedented ways and enabling the largest work-from-home experiment in history. The ORBIE Awards are meaningful because they are judged by peer CIOs who understand how difficult this job is and why great leadership matters." Mr. Bobos joined Vitalant in 2017 after previously serving as the CIO and Chief Security Officer for Aurora Diagnostics. He also held several leadership positions at the BloodCenter of Wisconsin (now Versiti Blood Center of Wisconsin) including Chief Technology Officer. He received his Bachelor of Science degree from Saint Joseph's College and a Master of Business Administration from the University of Wisconsin Milwaukee.

(Source: ArizonaCIO Announcement, 4/23/21)

MEMBER NEWS

Oklahoma Blood Institute (OBI) recently achieved its fundraising goal for the purchase of a new bloodmobile. The blood center raised more than $375,000 thanks to contributions from various community partners including:

- McCasland Foundation;
- the Lions and Leo Clubs of Oklahoma (including the Lawton Noon Lions Club, Lions Club of Tulsa, and the Eastern Oklahoma District) and
- the Oklahoma Blood Institute Foundation.

Photo courtesy of The Lawton Constitution: The Lions Club of Lawton presented a $10,000 check to OBI's John Armitage, MD

"The McCasland Foundation is honored to be a part of the purchase of a new bloodmobile," said Barbara Brought, executive director of the McCasland Foundation to *The Lawton Constitution*. "We can

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see the need for a bloodmobile with updated technology and furnishing for clients and staff. OBI now can have the ability to continue their important work to efficiently and safely service the rural communities in Southwest Oklahoma. We are proud to be included." Kasinda Brown, president of the Lawton Noon Lions Club added "The Lawton Noon Lions Club is extremely excited and proud that we were able to help in achieving this tremendous need. We understand the need for blood is never ending so, to be able to help in the purchasing of a new bloodmobile has been our pleasure." OBI anticipates the new bloodmobile servicing 11 counties throughout Southwest Oklahoma and the Texoma region.

(Source: *The Lawton Constitution*, Oklahoma Blood Institute raises funds for new bloodmobile, 4/21/21)

COVID-19 Convalescent Plasma Updates

- Members of America's Blood Centers collected 1,421 COVID-19 convalescent plasma (CCP) units this week and distributed 2,132. The national stockpile of high titer units sits at 46,191 units.

GLOBAL NEWS

The World Health Organization (WHO) has created a new program to end malaria transmission in 25 additional countries by the year 2025. The April 21st announcement preceded World Malaria Day (April 25th). "Many of the countries we are recognizing today carried, at one time, a very high burden of malaria," said Tedros Adhanom Ghebreyesus, PhD, WHO Director-General in news release. "Their successes were hard-won and came only after decades of concerted action. Together, they have shown the world that malaria elimination is a viable goal for all countries." According to the WHO, "[o]f the 87 countries with malaria, 46 reported fewer than 10,000 cases of the disease in 2019 compared to 26 countries in 2000. By the end of 2020, 24 countries had reported interrupting malaria transmission for 3 years or more. Of these, 11 were certified malaria-free by WHO."

(Source: WHO News Release, 4/21/21)

The WHO also issued a statement from its Strategic Advisory Group of Experts (SAGE) on Immunization that updated its interim guidance for the use of the AstraZeneca vaccines produced from several manufacturers to prevent COVID-19. It states, "[the] WHO continues to support the conclusion that the benefits of these vaccines outweigh the risks. Pursuant to the latest data, further clarification of precautions and types of risk (i.e., Thrombosis with Thrombocytopenia Syndrome) has been added. More data have been obtained on the effectiveness of the vaccines in different population groups, such as older adults, making the evidence base more robust. Clarifications and specifications have been added as to the vaccination of specific population groups (pregnant and lactating women, person with previous SARS-CoV2 infection and others). The changes to these Interim Recommendations apply to multiple sections of the document. While AstraZeneca has not yet applied for emergency use authorization from the U.S. by the Food and Drug Administration for its vaccine, the U.S. has produced some supply of the vaccine as part of its pandemic response efforts and "expects to have about 60 million doses" of the vaccine that [it] could share with other countries as they become available over the next two months."

(Sources: WHO Statement, 4/22/21; White House Press Briefing, 4/26/21)

COMPANY NEWS

Haemonetics Corp. announced the publication of "the full peer-reviewed results" from the Improving Plasma CollecTion (IMPACT) trial. The multicenter, randomized, double-blinded, controlled study compared two plasma collection systems with one "collect[ing] plasma based on a donor's weight per the current industry standard nomogram" versus the other which used "personalized Percent Plasma Nomogram (PPN) based on body mass index (BMI) and hematocrit, to enable a more tailored collection target." The results indicate that the latter method using the NexSys PCS® with Persona® Technology "[had] a non-inferior safety profile, and demonstrated a yield increase of +8.2 percent more plasma per collection on average as compared to the control, based on the donor population in the trial." The complete results are available in *Trasnfusion*. "Plasma is a critical ingredient for important medicines that can have a life-changing impact on patients suffering from hundreds of conditions including primary immunodeficiency, hemophilia, trauma and more," said Haemonetics Vice President of Medical Affairs, Clinical Development, and Medical Safety Jan Hartmann in a company news release. "We are committed to innovation and using the best available science to change the paradigm for plasma collection with our proprietary technology."

(Source: Haemonetics News Release, 4/29/21)

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.

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!

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.)*

2021

May 4-6. **IPFA/PEI 27th International Workshop on Surveillance and Screening of Blood-borne Pathogens (Virtual).** More details available here.

May 6. **FDA CBER OTAT Patient Engagement and Regenerative Medicine Workshop (Virtual).** More details available here.

May 12-13. **Elevate Your Donor Journey: ADRP Master Class in Finding Your XFactor (Virtual).** More details available here.

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CALENDAR (continued from page 8)

May 21-22. **64th Annual California Blood Bank Society Annual Meeting (Virtual).** More details available here.

Aug. 4. **ABC Medical Directors Workshop, Cleveland, Ohio.** More details coming soon.

Aug. 5-6. **ABC Summer Summit, Cleveland, Ohio.** More details coming soon.

Aug. 17-19. **2021 ADRP Conference, Kansas City, Mo.** Registration is open. More details available here.

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

Oct. 16-19. **AABB Annual Meeting.** 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

Innovation and Product Development Manager. Stanford Blood Center (SBC) is seeking an Innovation and Product Development Manager. Under the general direction of the CEO and Medical Directors, the SBC Innovation and Product Development Manager will provide scientific direction to the Innovation team and serve as a core resource to all diagnostic laboratories for diagnostic assay development and improvement, and technology assessment, while providing leadership and management for the Innovation team, to ensure the ongoing vitality, expansion, and innovation of the labs. Will work effectively with all Medical Directors to define research and development priorities, assess the diagnostic operational needs, and new diagnostic opportunities, allocate resources and ensure the successful conclusion of projects. Core duties include Laboratory Operations, Planning, Scientific Leadership, Quality Assurance & Regulatory Compliance, Team Leadership, Financial Management, Customer Service. For a complete job description and to apply, please visit: https://careers.stanfordhealthcare.org/us/en, and reference job # R213807. Thank you for your interest!

Bring your talent and expertise to the beautiful sunny state of Florida in one of these exciting opportunities with OneBlood: **Compatibility Testing Lab Supervisor (Tallahassee, FL - $7.5k Bonus Eligible).** Bachelor's degree in medical technology, biological science, or related field and three plus years in a clinical laboratory, preferably in blood banking. Requires a current Florida Technologist license in Immunohematology or Blood Banking; FL Supervisor License preferred. **Medical Technologist (Tallahassee and Ft. Lauderdale, FL - $5k Bonus Eligible).** A valid and current Florida Clinical Laboratory Technologist license in Immunohematology or Blood Banking is required. Prior blood banking experience preferred. Multiple shifts available. **Registered Nurse (Ft. Lauderdale, FL - $7.5k Bonus Eligible).** Current and valid Florida RN license, current BLS CPR certification, and a valid and clear driver's license is required. Flexibility in scheduling needed to meet the needs of the department; travel within the tri-county market in the South Florida area is required. OneBlood offers competitive benefits, including excellent shift differential pay for night and weekend schedules, Paid Time Off, Student Loan Repayment Program, a FREE medical coverage option, 403(b) Retirement Plan, company-paid annual CEU training & CE Broker account and MORE! To apply visit our OneBlood careers website at www.oneblood.org/careers.

Manager of Donor Recruitment. The Manager of Donor Recruitment will be responsible for overseeing all Donor Recruitment and Telerecruitment staff. They will be expected to take initiative to come up with fresh ideas and be able to successfully implement them utilizing both teams. The Manager of Donor Recruitment will work fluidly with the Mobile Collections department to ensure mobile drive success and maximize blood collection. In addition, they will work routinely with the Director of Communications to plan events and coordinate donor incentives. The Manager of Donor Recruitment will be expected to support the Donor Recruiters in managing their large client accounts, and in some cases may manage special client accounts. Requirements include a bachelor's degree in Business or related field, supervisory experience, and account management experience. Anyone interested can send their resume to Katy Stout at kstout@medicblood.org.

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POSITIONS (continued from page 9)

Manager of Mobile Collections. The Manager of Mobile Collections will be responsible for overseeing all of the Mobile Collections staff and operations. Primary functions will include ensuring all equipment is prepared and ready for use, confirm adequate staffing levels for all mobile blood drives, and provide support to the team where needed daily. They will be required to work fluidly with the Manager of Donor Recruitment to ensure mobile blood drive success and maximize blood collection. Requirements include a High School Diploma or equivalent, supervisory experience, clinical experience, and BLS certification. Anyone interested can send their resume to Katy Stout at kstout@medicblood.org.

Blood Donor Collections Manager (Blood Donor Center; Massachusetts General Hospital, Harvard Medical School). The Massachusetts General Hospital Blood Donor Center is currently hiring a Collections Manager. The Donor Collections Manager is responsible for the organization and management of Donor Service In-House collection facilities, the Blood Donor Mobile Units, and the Component Processing Laboratory, as well as, the implementation of policies and procedures, staffing and evaluation of all staff. The Donor Collections Manager has a primary reporting relationship to the Medical Director and a secondary reporting relationship to the Director of Operations, Lab and Molecular Medicine. The Donor Collections Manager is functionally responsible for coordinating clinical, educational, and administrative activities of the Blood Donor Center, Blood Donor Mobile Units, Apheresis Collections, and the Component Processing Lab. The Donor Collections Manager is an extension of the Medical Director and works to ensure competent, compassionate care to the donors, and to their families. The Standards of Practice of the AABB and the Philosophy of the Blood Donor Center form the basis of such care. The ideal candidate will have three to five years of supervisory experience in blood collection and bachelor's degree. To view the complete job posting and apply, please click here. Interested candidates can also contact Elana Greenfield at egreenfield1@mgh.harvard.edu.

Executive Director of Coffee Memorial Blood Center (Amarillo, Texas). Coffee Memorial Blood Center is seeking **a "community spirited" professional to LEAD its Amarillo team** in fulfilling the mission to recruit blood donors, drive sponsors, and volunteers and to store and deliver blood units for local hospitals. This public-facing, "visible" position not only requires an outgoing, bright, and energetic personality to foster relationships, but also demands detailed attention to planning, communication, regulations, finances, and personnel. Significant successes in project management and organizational expansion and entrepreneurship are desirable. Connectivity with regional leaders and access to key social networks would also be positives. The successful candidate will present and maintain a credible, positive image of Coffee Memorial Blood Center in the local community. He/She will act as a liaison between Coffee Memorial Blood Center and the community, organizations, and residents. Applicants should be goal-driven self-starters who have strong interpersonal, organizational, and analytic skills. They should be able to motivate and inspire diverse constituencies including donors, sponsors, staff, and volunteers. 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: https://www.thegiftoflife.org.

Phlebotomy Manager (Tempe, AZ). Vitalant is a non-profit organization that collects blood from volunteer donors and provides blood, blood products and services across the United States. Under limited direction, this position is responsible for managing the daily operational activities of the collections department, drawing centers and/or mobile teams. Implements assigned policies, projects, and goals towards the successful achievement of total collection goals. This position is responsible for management of other professional and administrative staff. Bachelor's degree in a directly related field (e.g., Medical Technology, relevant hard science, business) required. Three years relevant experience required. Two years supervisory experience required (healthcare-related preferred). OR: High school graduate GED required. Seven years directly related healthcare supervisory experience required. Please click here to apply.