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ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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2021 #25 **July 16, 2021**

INSIDE:

Blood Community Advocates to Congress for Inclusion in U.S. Preparedness and Response Infrastructure

America's Blood Centers, AABB, and the American Red Cross (ARC) asked Congress "to consider opportunities to improve the resiliency of the nation's blood supply throughout the bill intended to strengthen the nation's preparedness and response infrastructure." In the comments, the national blood community expresses its commitment "to improving the nation's preparedness and response capabilities."

The organizations explained that Congress should:

- [i]nclude the blood supply in all pandemic preparedness and response policies. The blood supply needs to be considered early and often in the disaster preparedness process…As a vital part of the U.S. health care system, the blood community must be considered as an integral part of emergency preparedness; the essential role of blood collectors must be considered right from the start by federal, state, and local officials during disasters, including public health emergencies;
- [i]nclude blood banking and transfusion medicine occupations in all policy proposals intended to strengthen the laboratory workforce. Unfortunately, a variety of blood banking and transfusion medicine positions are impacted by laboratory workforce shortages, including phlebotomists, medical laboratory technologists (also referred to as medical laboratory scientists), medical laboratory technicians, and supervisory staff roles in blood banking. The workforce shortages of qualified personnel for blood banking and transfusion medicine present risks to patient safety and blood availability and reduce the nation's preparedness and response capabilities;
- [d]edicate funding to support a campaign to raise awareness for the importance of blood donation. Congress recognized the value of a national message on blood donation by including in the Coronavirus Aid, Relief, and Economic Security (CARES) Act a requirement that HHS carry out a national blood donor awareness campaign. This messaging is important for both prospective blood donors as well as the community partners that support blood donation events. We encourage Congress to continue to support a culture of blood donation by committing funding to support the effort; and

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Congressional Comments (continued from page 1)

- [i]mplement the September 2020 recommendations made by the Advisory Committee on Blood and Tissue Safety and Availability (ACBTSA) and the recommendations in the Department of Human Services' Report to Congress on the adequacy of the national blood supply.

The blood community also highlighted specific recommendations from the ACBTSA as priorities which included:

- [e]stablish[ing], implement[ing], and fund[ing] comprehensive, sustainable, minimally burdensome infrastructure that monitors and makes available real-time data on blood availability and utilization;
- [d]eveloping policies and providing funding to strengthen the resiliency of the blood supply chain to ensure product availability to hospitals during emergencies;
- [d]edicating funding to support research intended to generate efficient and effective strategies to engage and retain younger and more diverse blood donors;
- [e]ncouraging HHS to establish a defined locus of national authority for blood policy, inclusive of the Assistant Secretary for Health, FDA, CDC, NIH, HRSA, ASPR, CMS, DoD, VA, and those non-government organizations that provide and transfuse blood products; and
- [u]rging HHS to identify and secure stable funding sources and mechanisms to support the national blood system.

The comments were sent to Sens. Patty Murray (D-Wash.) and Richard Burr (R-N.C.) The full comments are available on the ABC website.

(Source: Blood Community National Preparedness and Response Infrastructure Comments, 7/2/21)

The *ABC Newsletter* (ISSN #1092-0412) is published by America's Blood Centers® and distributed by e-mail.
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 health care 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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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.

Deadline Extended to Book Hotel for 2021 ABC Medical Directors Workshop & Summer Summit

Register today for America's Blood Centers (ABC) 2021 Medical Directors Workshop and Summer Summit. Secure hotel reservations now before the July 23rd deadline. The Summer Summit and Medical Directors Workshop will take place in-person in Cleveland, Ohio August 4th-6th. Virtual registration options also exist for those unable to attend including group discounts for virtual registration to allow as many blood center staff members to participate as possible. The program is available here. ABC is working with its event location partner to ensure the safety and well-being of all attendees in accordance with local, state, and national guidelines. More information and updates will be provided as they become available.

ADRP Develops New Blood Donor Awareness Resources

ADRP, an international division of ABC, has created a new video aimed at first-time blood donors. The video is part of a series of resources made possible from a grant from Terumo Blood and Cell Technologies, created to assist blood centers in further educating individuals of the ongoing need for blood donors. Other resources include:

- the universal "Your Community is Counting on You" videos (available in English and Spanish);
- the "Turn Your Day Around" PSA and toolkit; and
- a Video Marketing Instructional Guide, and more are available on the ADRP website. ♦

ABC Develops Talking Points on COVID-19 Vaccines and Blood Transfusions

America's Blood Centers (ABC) has created talking points to assist member blood centers in regard to advising physicians who have questions from patients concerning COVID-19 vaccines and blood transfusions. The talking points emphasize that:

- the blood supply remains safe from COVID-19. There is no evidence that COVID-19 can be transmitted through blood;
- in the U.S., there are three COVID-19 vaccines authorized for use (Pfizer, Moderna, and Janssen (Johnson & Johnson)); and
- the FDA explicitly allows donors who have received an authorized COVID-19 vaccine to donate blood provided they are healthy and meet all other eligibility criteria for blood donation.

These talking points in their entirety and an additional library of talking points on other topics are available on the ABC member portal.

(Source: MCN 21-049, 7/6/21) ♦

BRIEFLY NOTED

The U.S. Department of Labor's (DoL) Occupational Safety and Health Administration (OSHA) has extended the comment period for the COVID-19 Healthcare Emergency Temporary Standard (ETS). The deadline is now August 20th. According to the rule published in the *Federal Register*, the ETS aims to "protect health care and health care support service workers from occupational exposure to COVID-19 in settings where people with COVID-19 are reasonably expected to be present. During the period of the emergency standard, covered healthcare employers must develop and implement a COVID-19 plan to identify and control COVID-19 hazards in the workplace. Covered employers must also implement other requirements to reduce transmission of COVID-19 in their workplaces, related to the following: [p]atient screening and management; [s]tandard and [t]ransmission-[b]ased [p]ecautions; personal protective equipment (PPE), including facemasks or respirators; controls for aerosol-generating procedures; physical distancing of at least six feet, when feasible; physical barriers; cleaning and disinfection; ventilation; health screening and medical management; training; anti-retaliation; recordkeeping; and reporting. The standard encourages vaccination by requiring employers to provide reasonable time and paid leave for employee vaccinations and any side effects."

(Source: OSHA News Release, 7/8/21)

A June 24th article in *ProPublica* reported that the U.S. government is "closing a legal loophole that allowed U.S.-based blood plasma companies to harvest plasma from thousands of Mexicans a day, who were lured by bonus payments and hefty cash rewards." The article cited a June 15th U.S. Customs and Border Protection announcement that, "effective immediately, it would no longer permit Mexican citizens to cross into the U.S. on temporary visas to sell their blood plasma. A statement provided to [ProPublica] said that donating plasma is now considered "labor for hire," which is illegal under the visitor visa most border residents use to cross into the United States to make donations." The Plasma Protein Therapeutics Association (PPTA) issued a statement in response to the article that explained, "[t]ens of thousands of people safely donate their plasma every day in the U.S., with every donation directly contributing to helping nearly 125,000 Americans with serious and often life-threatening conditions live healthy and normal lives, as well as countless others facing trauma and emergency medical needs every day. PPTA and its member companies, as well as national and international patient advocacy organizations and the individuals they represent, feel the action taken last week by U.S. Customs and Border Protection to reverse a longstanding policy regarding permissible activities by Mexican nationals with B1/B2 visas was improper. We are engaged in discussions with the Biden Administration and other officials to understand the intent of the change and to explain the devastating consequences to patients' lives, should it remain in place. Plasma protein therapies, derived from donated plasma, replace missing or deficient proteins for the millions of people worldwide with these conditions. Without these treatments, many patients would either not be able to survive or would have a substantially diminished quality of life and productivity. Plasma protein therapies are truly unique, lifesaving biologic medicines. Plasma donor safety is of paramount concern to PPTA and all its members…Considering the nearly 20 percent decline in plasma donations seen nationwide in 2020 because of the COVID-19 pandemic, our collective focus– including that of the news media – should be on encouraging plasma donation."

(Sources: *ProPublica*, The U.S. is closing a loophole that lured Mexicans over the border to donate blood plasma for cash, 6/24/21; PPTA Statement, 6/24/21) ♦

WORD IN WASHINGTON

America's Blood Centers (ABC) sent a letter to Assistant Secretary for Preparedness and Response (ASPR) Dawn O'Connell, JD on June 30th welcoming her to the new role. The letter provides her with an overview of the association and the important role that community blood centers play with the U.S. health care system. "During the COVID-19 pandemic, ABC partnered with the Biomedical Advanced Research and Development Authority (BARDA) to ensure COVID-19 Convalescent Plasma (CCP) was available for all patients in need. The BARDA contract provided essential startup costs as well as payment upon collection that allowed the independent community-based blood centers and hospital blood banks to collect about 75 percent of all CCP collected and used for patient care. The blood supply needs to be considered early and often in the disaster preparedness process. The Pandemic and All-Hazards Preparedness and Innovation Act (PAHPIA) took a substantial step towards this goal, but more work is necessary to make the mandate of that law into a reality. Through ABC's participation as a health care readiness partner, we have been able to increase awareness within the health care community of the need to consider the blood supply in readiness planning, however, more work remains. We look forward to continuing to work with your office to ensure the essential role of the blood supply is enshrined in all disaster preparedness efforts." The letter also outlines challenges faced by community blood centers and outlines opportunities that the ASPR and her team can help. "For the past several years, the blood community and our government partners have examined the resilience of the blood supply and policy changes required to ensure blood centers can continue their mission of providing life-saving blood components for patients in need. Among these recommended changes is an increased focus on promoting a robust and available pool of blood donors. The current donor base has been increasingly strained by evolving societal norms and behaviors, loss of traditional venues for blood drives, including workplaces and schools, and increased donor deferrals stemming from regulatory changes. In addition, unfunded federal mandates, decreased utilization of blood, and changing hospital practices have all resulted in blood centers operating at break-even margins. The COVID-19 pandemic and 2020-2021 winter storm season have brought their own unique challenges to the blood community in the form of significant disruption to the blood supply…support from multiple offices with the Department of Health and Human Services has been critical in raising public awareness to the need for blood donors and to ensure inclusion of the blood supply in disaster preparedness and pandemic response. We hope you will continue to work with the blood community to serve as a trusted source of information to the public. In addition, the CARES Act called for a public-private public awareness campaign surrounding blood donation that has yet to be implemented. ABC and our member blood centers stand ready to serve as a resource in this initiative."

(Source: ABC Letter to ASPR, 6/30/21)

The U.S. Food and Drug Administration (FDA) and the Centers for Disease Control and Prevention (CDC) issued a joint statement regarding the current stance of federal health officials on COVID-19 vaccine booster shots. It states, "[p]eople who are fully vaccinated are protected from severe disease and death, including from the variants currently circulating in the country such as Delta. People who are not vaccinated remain at risk. Virtually all COVID-19 hospitalizations and deaths are among those who are unvaccinated. We encourage Americans who have not yet been vaccinated to get vaccinated as soon as possible to protect themselves and their community. Americans who have been fully vaccinated do not need a booster shot at this time. FDA, CDC, and NIH are engaged in a science-based, rigorous process to consider whether or when a booster might be necessary. This process takes into account laboratory data, clinical trial data, and cohort data – which can include data from specific pharmaceutical companies but does not rely on those data exclusively. We continue to review any new data as it becomes available and will keep the public informed. We are prepared for booster doses if and when the science demonstrates that they are needed."

(Source: FDA & CDC Joint Statement, 7/8/21)

MEMBER NEWS

LIFELINE Blood Services recently held a ribbon cutting to celebrate the opening of a new location in Dyersburg, Tenn. "[We're] [v]ery excited to see a good turn out today, and a community that is so excited to have us here," said Caitlin Roach, director of Marketing at LIFELINE to WBBJ-TV. "Mobiles are awesome, and we need the mobiles, but to have a place where you can have a greater range of schedule to come and pick a day that works for you, that's what we're excited about." The new facility becomes the 2nd fixed-site location for LIFELINE in Dyersburg.

(Source: WBBJ-TV, LIFELINE opens new center in Dyersburg, 7/13/21)

GLOBAL NEWS

The World Health Organization's (WHO) International Health Regulations (2005) Emergency Committee held its 8th meeting on July 15th regarding the COVID-19 pandemic. The committee recommended to the WHO Director-General that the COVID-19 pandemic "remains a public health emergency of international concern (PHEIC)." Additional temporary recommendations included:

- [c]ontinue to use evidence-informed public health and social measures (PHSM) based on real time monitoring of the epidemiologic situation and health system capacities, taking into account the potential cumulative effects of these measures. The use of masks, physical distancing, hand hygiene, and improved ventilation of indoor spaces remains key to reducing transmission of SARS CoV-2;
- [i]mplement a risk-management approach for mass gathering events by evaluating, mitigating, and communicating risks;
- [a]chieve the WHO call to action to have at least 10 percent of all countries' populations vaccinated by September 2021;
- [e]nhance surveillance of SARS-CoV-2 and continue to report to WHO to enable rapid identification, tracking, and evaluation of variants and continued monitoring of the pandemic's evolution;
- [i]mprove access to and safe administration of WHO recommended therapeutics, including oxygen, to treat COVID-19;
- [c]ontinue a risk-based approach to facilitate international travel and share information with WHO on use of travel measures and their public health rationale;
- [d]o not require proof of vaccination against COVID-19 for international travel as the only pathway or condition permitting international travel, given limited global access and inequitable distribution of COVID-19 vaccines;
- [r]ecognize all COVID-19 vaccines that have received WHO Emergency Use Listing in the context of international travel; and
- [a]ddress community engagement and communications gaps at national and local levels to reduce COVID-19 transmission, counter misinformation, and improve COVID-19 vaccine acceptance, where applicable.

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GLOBAL NEWS (continued from page 6)

WHO Director-General Tedros Adhanom Ghebreyesus, PhD accepted the committee's recommendations and will reconvene the committee again in three months or earlier at his discretion.

(Source: WHO News Release, 7/15/21)

Recommendations on human genome editing and the advancement of public health have been published by the WHO this week. According to a news release WHO, the reports "provide the first global recommendations to help establish human genome editing as a tool for public health, with an emphasis on safety, effectiveness, and ethics. "Human genome editing has the potential to advance our ability to treat and cure disease, but the full impact will only be realized if we deploy it for the benefit of all people, instead of fueling more health inequity between and within countries," said WHO Director-General Tedros Adhanom Ghebreyesus, PhD in the news release. The WHO stated that the recommendations outlined in the report will deliver, "governance and oversight of human genome editing in nine discrete areas, including human genome editing registries; international research and medical travel; illegal, unregistered, unethical or unsafe research; intellectual property; and education, engagement, and empowerment. The recommendations focus on systems-level improvements needed to build capacity in all countries to ensure that human genome editing is used safely, effectively, and ethically. The reports also provide a new governance framework that identifies specific tools, institutions, and scenarios to illustrate practical challenges in implementing, regulating, and overseeing research into the human genome." The agency added that next steps will include:

- [convening] small expert committee to consider next steps for the Registry, including how to better monitor clinical trials using human genome editing technologies of concern;
- [convening] multisector stakeholders to develop an accessible mechanism for confidential reporting of concerns about possibly illegal, unregistered, unethical, and unsafe human genome editing research and other activities; and
- [a]s part of a commitment to increase 'education, engagement, and empowerment', lead regional webinars focusing on regional/local needs. Work within the Science Division to consider how to build an inclusive global dialogue on frontier technologies, including cross-UN working and the creation of web-based resources for reliable information on frontier technologies, including human genome editing."

(Source: WHO News Release, 7/12/21) ♦

COMPANY NEWS

The U.S. Food and Drug Administration (FDA) has awarded **Valneva SE**'s single-shot chikungunya vaccine candidate the Breakthrough Therapy Designation according to a news release from the company. "We are extremely pleased with FDA's recognition of VLA1553 as a Breakthrough program," said Valneva SE Chief Medical Officer Juan Carlos Jaramillo, MD in the news release. "Chikungunya is a major, growing public health threat and VLA1553 targets long lasting protection against the chikungunya virus with a single shot. We will continue to work closely with the FDA to bring a preventative solution to the market as soon as possible. The FDA designation is "intend[ed] to facilitate and expedite development and review of new drugs for serious or life-threatening conditions where preliminary clinical data demonstrates that the drug may have substantial improvement for at least one endpoint over available therapies." Earlier this year, the company finished enrolling individuals in a phase III clinical trial for the vaccine candidate.

(Source: Valneva SE News Release, 7/7/21)

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COMPANY NEWS (continued from page 7)

Vor BioPharma and **Janssen Biotech, Inc.** have agreed to a partnership to explore the use of engineered hematopoietic stem cells (eHSC) in combination with bi-specific antibodies being developed to treat acute myeloid leukemia (AML). "We are thrilled to enter into this collaboration with Janssen as we continue to explore our platform's potential to pair with a broad spectrum of targeted therapy modalities for the treatment of patients with blood cancer," said Vor BioPharma Chief Scientific Officer Tirtha Chakraborty, PhD in the news release. "We believe this unique combination will leverage each technology's strengths, while protecting patients against off-target effects of these powerful immunotherapies."

(Source: Vor BioPharma & Janssen Biotech, Inc. Joint News Release, 7/8/21)

Jasper Therapeutics, Inc. recently announced a collaboration with **Aruvant Sciences** as the two companies work to advance therapeutic treatment options for patients suffering from sickle cell disease (SCD). As a part of the partnership, Jasper Therapeutics' investigational monoclonal antibody therapy (JSP191) will be used "as a targeted, non-toxic conditioning agent" with Aruvant Sciences' investigational lentiviral gene therapy (ARU-1801) to treat SCD. "[Our] collaboration with Aruvant is the first to use a clinical-stage antibody-based conditioning agent and a novel clinical-stage gene therapy, giving this combination a clear advantage by moving beyond the harsh conditioning agents currently used for gene therapy and establishing this next-generation potentially curative treatment as a leader in SCD," said Kevin N. Heller, MD, executive vice president of Research and Development at Jasper Therapeutics in a joint news release. "Our goal is to establish JSP191 as a potential new standard of care conditioning agent, broadly in autologous gene therapy and allogeneic hematopoietic stem cell transplantation." Aruvant Sciences Chief Executive Officer (CEO) Will Chou MD added in the news release, "[t]he unique attributes of ARU-1801 enable us to bring a potentially curative one-time therapy to individuals with sickle cell disease that can be delivered in the safest way possible. By partnering with Jasper to evaluate the use of JSP191 with ARU-1801, we are one step closer to developing a next-generation definitive therapy with an even more patient-friendly conditioning regimen. We believe that this combination may be able to further expand the number of patients who can benefit from ARU-1801 in the future, including potentially those with more moderate disease."

(Source: Jasper Therapeutics, Inc. & Aruvant Sciences Joint News Release, 6/21/21) ♦

Upcoming ABC Webinars – Don't Miss Out!

- **ABC QA Education Webinar: What Worked? What Didn't? Doing Business in a Different Way During the Pandemic** – July 20th from 3 – 4:30 p.m. (EDT). More details including login information is available for ABC members in MCN 21-050 (contact us for a copy of the MCN).
- **ABC SMT Journal Club Webinar** – July 26th from 3 – 4 p.m. (EDT). More details available in MCN 21-051.
- **ABC Human Resources Forum Call** – July 28th from 3 – 4 p.m. (EDT). More details coming soon.
- **"Rising from Adversity Towards Renewed Resilience" Webinar** – August 12th from 3 – 4 p.m. (EDT). More details coming soon.
- **ABC QA Forum Call** – August 19th from 2 – 3 p.m. (EDT). More details coming soon.

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

July 19-23. **U.S Food and Drug Administration (FDA) Regulatory Education for Industry (REdI) Annual Conference 2021 (Virtual).** Registration is open.

July 21-22. **Trans-National Institutes of Health (NIH) Workshop on Sickle Cell Disease (SCD) Pain: Approaches to Effective Therapeutic Management of Pain for People with SCD (Virtual)**. Registration is open.

Aug. 4. **ABC Medical Directors Workshop, Cleveland, Ohio.** Registration is open.

Aug. 5-6. **ABC Summer Summit, Cleveland, Ohio**. Registration is open.

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

Sept. 15-17. **4th European Conference on Donor Health and Management, Hamburg, Germany.** Registration is open.

Sept. 22. **11th Annual Symposium on Red Cell Genotyping 2021: The New Normal, Bethesda, MD (Hybrid).** For more information click here or contact Natasha Leon.

Sept. 23. **NIH Clinical Center Department of Transfusion Medicine and The American Red Cross40th Annual Immunohematology and Blood Transfusion Symposium. (Virtual).** For more information click here.

Sept 27-30. **Advanced Medical Technology Association (AdvaMed) MedTech Conference, Washington D.C., and Minneapolis Minn. (Hybrid).** Registration is open.

Oct. 17-19. **AABB Annual Meeting (Virtual).** Registration is open.

Nov. 3-4. **The Biomedical Advanced Research and Development Authority (BARDA) Industry Day (Virtual).** 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

Nurse Supervisor, Clinical Apheresis. Memorial Blood Centers is seeking a Nurse Supervisor, Clinical Apheresis in our St. Paul, MN headquarters to join our mission Saving Lives! Responsibilities: Provide cellular therapy collections program leadership and guidance to ensure a clinically consistent and compliant collection operation that exceeds customer expectations. Works with medical staff to review all patient treatments and plans. Qualifications: Associate degree in Nursing. Three years of nursing experience. One year of apheresis or cellular collection. One year leadership experience. To apply go to: https://www.mbc.org/about-us/careers/.

Medical Technologist 1 – JPS (Carter BloodCare; Fort Worth, TX). Principal Accountability: The Medical Technologist 1 will report to the Manager or designee of Reference & Transfusion Services at John Peter Smith located in Fort Worth, TX. The incumbent will participate in all activities in the R&T Services to include but not limited to: Support Carter BloodCare's (CBC) vision, mission, and core values. Maintain compliance with the Carter BloodCare's attendance policies and department schedules as outlined in the CBC Employee Handbook. Perform testing and services associated with assigned departmental duties. These duties are in the scope of complexity according to accrediting agencies. Participation in competency, proficiency, and educational

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POSITIONS (continued from page 9)

opportunities. Education: Bachelor's degree required. MT (ASCP), BB (ASCP), MT (AMT) or equivalent certification required. Experience: Recent graduate from an accredited Clinical Laboratory Sciences (CLS) program within the last five years and currently board eligible. NOTE: Must successfully obtain, maintain board certification (i.e., MLS (ASCP) or equivalent) and provided board certification documentation to the CBC Human Resources department within 12 months of hire date. Equal Opportunity Employer: disability/veteran. Apply at www.carterbloodcare.org, click Careers & search Req # 26791.

Manager, Training & Documentation (Carter BloodCare; Bedford, TX). Principal Accountability: Under the direction of IS Directors or the Vice President of Corporate Services, the Manager of Training & Documentation works with IT subject matter expert in developing documentation and training programs for the department. The candidate will ensure that all the controlled documentation, training courses, and train-the-trainer programs are current. Also, will assist in planning, organizing, and maintaining the integrity of online and hard copy documents. Develops, maintains, and enforces the use of change control. The candidate is also responsible for the maintenance of internal websites. Regular full-time attendance is required during office hours. Education: Bachelor's degree in a communication field or equivalent work experience. Certificates in word processing and Office Automation Products preferred. Experience: Knowledge in technical and/or journalistic style writing. Four to five years of writing experience in

the IS department with close familiarity with IS operation. Four to five years of experience in training, course development, guide, and job-aid development. Strong experience with various office related software packages (e.g.: Word, Excel, Access, etc.). Experience in developing and maintaining controlled documents in a regulated environment. Equal Opportunity Employer: disability/veteran. Apply at www.carterbloodcare.org, click Careers & search Req # 25128.

Manager, Immunohematology Reference Laboratory (QualTex Laboratories – San Antonio, TX). Exciting opportunity to work for QualTex Laboratories as a Manager, Immunohematology Reference Laboratory. This position manages the IRL for our organization which boasts a 3 shift, 7 day per week operation that serves multiple clients. Sign on bonus and relocation available! Requirements are: Bachelor's degree in an area of applied science; Six years of Immunohematology Reference Laboratory Experience or Blood Bank experience; Two years of leadership experience; and MT/MLS certification from an accredited body. If you are ready to take the next step in your career and manage a high performing group of blood bankers, please use the link below to find out more and apply. QualTex Laboratories offers competitive salary and benefit package, Paid Time Off, Paid Holidays, 401(k) plan, and other benefits. Please click here to apply.

VP/Chief Medical Officer. LifeStream Blood Bank, located in San Bernardino, California, is seeking a VP/Chief Medical Officer to provide leadership and direction for the medical programs needed to support the organization. This includes all laboratories, product management, hospital relations, donor collections, therapeutic and clinical services, clinical research, donor counseling, national marrow programs and quality departments. LifeStream distributes approximately 130,000 Red Cells and 30,000 Platelets to 80 hospitals in southern California. LifeStream has a vibrant and growing therapeutic apheresis program, active cellular collections program and a strong reference laboratory. This position reports to the President/CEO, is a member of the executive team and has administrative responsibility for the Reference Laboratory and an Assistant Medical Director. Qualifications for this position include a minimum of five years medical experience at a blood center or hospital-based transfusion medicine practice, California medical license eligibility, Board Certification in Clinical Pathology or other relevant medical specialty and Board Certification in Transfusion Medicine. The compensation package includes a strong competitive salary, relocation package and best in class benefits including 100% employer paid family medical and dental insurance. Interested candidates are encouraged to send their resume/CV to Judy Taylor, Director, Human Resources at taylorju@lstream.org.