



ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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2021 #26

July 23, 2021

INSIDE:

HHS Tick Borne Disease Working Group to Hold August Meeting2

Registration Remains Open for 2021 ABC Medical Directors Workshop & Summer Summit3

ABC Bylaws Webinar July 29th3

Webinar: Why Automation?3

RESEARCH IN BRIEF4

PEOPLE5

WORD IN WASHINGTON5

MEMBER NEWS.....6

GLOBAL NEWS7

COMPANY NEWS8

CALENDAR.....9

POSITIONS.....10

HHS ACBTSA to Meet in August

The U.S. Department of Health and Human Services (HHS) Advisory Committee on Blood and Tissue Safety and Availability (ACBTSA) will hold its next public meeting virtually on August 17th-18th. This meeting will include discussions of the “recommendations to improve the supply chain and data infrastructure that supports the blood industry, especially during public health emergencies. In order to facilitate this discussion, key stakeholders from across the nation and around the world will present on hemovigilance, preparedness, inventory management systems, and other relevant issues.”

Both meeting days are tentatively scheduled to be full day meetings from 10 a.m. – 6 p.m. EDT. The meeting agenda and any other accompanying materials will be available on the HHS [website](#) prior to the meeting. Individuals will have “an opportunity to present their views to the ACBTSA orally during the meeting’s public comment session or by submitting a written public comment. [All are asked to ensure their] comments [are] pertinent to the meeting discussion. Persons who wish to provide verbal comment should review [instructions](#)” and submit an [email request](#) by midnight on August 9th. Written public comments can also be [submitted](#) and they will be accessible to the public on the ACBTSA webpage prior to the meeting.

An official notice will be published in the *Federal Register*.

Earlier this year, HHS submitted its [report](#) to Congress on the “Adequacy of the National Blood Supply.” The 100-page report was in response to Section 209 of the Pandemic and All-Hazards Preparedness and Advancing Innovation Act (PAHPAIA) which states that the Secretary of HHS shall submit to Congress a report containing recommendations related to maintaining an adequate national blood supply. It specifically outlines how “a robust, readily accessible blood supply is essential to support the U.S. health care system” and identifies the “significant threats and challenges in the current environment” to the nation’s blood supply including:

- “challenges associated with the continuous recruitment of blood donors (including those newly eligible to donate);
- ensuring the adequacy of the blood supply in the case of public health emergencies;
- implementation of the transfusion transmission monitoring system; and
- other measures to promote safety and innovation, such as the development, use, or implementation of new technologies, processes, and procedures to improve the safety and reliability of the blood supply.”

(continued on page 2)

HHS ACBTSA August Meeting (continued from page 1)

The report incorporated the recommendations of the ACBTSA and its working groups which prioritized specific actionable recommendations regarding the U.S. blood supply. Themes throughout the report included:

- “collecting real-time data to meet [daily] needs, respond to public health emergencies, monitor the safety of transfusion therapy, and establish research agendas to improve patient outcomes;
- expanding the blood donor base by creating a culture of blood donation and engagement—particularly among young people and people of color—by understanding donor motivation and improving access to donation;
- modernizing the current business model for blood collection, innovation, and adoption of new technology; and
- addressing the erosion of blood center balance sheets and net revenue secondary to treating blood as a commodity rather than a public good.”

(Source: ACBTSA Announcement, 7/17/21; HHS Congressional [Report](#), 2/7/21) 💧

HHS Tick Borne Disease Working Group to Hold August Meeting

The HHS Tick Borne Disease Working Group (TBDWG) has announced its next meeting will take virtually on August 26th. The purpose of the meeting is to “focus on plans to develop the next report due December 2022 on federal tick-borne activities and research, taking into consideration the 2018 and 2020 reports. The 2022 report will address a wide range of topics related to tick-borne diseases, such as, surveillance, prevention, diagnosis, diagnostics, and treatment; identify advances made in research, as well as overlap and gaps in tick-borne disease research; and provide recommendations regarding any appropriate changes or improvements to such activities and research.” [Registration](#) for the meeting is open. Individuals “will have an opportunity to present their views to the TBDWG orally during the meeting’s public comment session or by submitting a written public comment. Comments should be pertinent to the meeting discussion. Those who wish to comment should respond by midnight on August 17th EDT.” Verbal comment requests should be emailed [here](#). “Written public comments will be accessible to the public on the TBDWG [webpage](#) prior to the meeting.” Individuals can submit written comment requests [here](#). More information including the agenda will be available on the HHS [website](#) in the coming weeks. An official notice will be published in the *Federal Register*.

(Source: HHS Announcement, 7/17/21) 💧

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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 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.

Registration Remains Open for 2021 ABC Medical Directors Workshop & Summer Summit

[Register](#) today for America's Blood Centers (ABC) [2021 Medical Directors Workshop and Summer Summit](#). 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.

ABC Bylaws Webinar July 29th

America's Blood Centers (ABC) will be hosting a webinar on July 29th at 4 p.m. EDT to review proposed changes to the ABC Bylaws. An email was distributed to members earlier this week containing:

- webinar login details;
- slides outlining the proposed changes and rationale; and
- a MS Word version of the ABC Bylaws with the proposed changes marked up.

ABC members may [contact us](#) with any questions.

Webinar: Why Automation?

Please join us for the "Why Automation?" webinar sponsored by Macopharma on August 11th at 2 p.m. EDT. [Registration](#) is open to everyone. The webinar will feature a panel of community blood center speakers sharing their experiences in automation. At the conclusion of the webinar, attendees will be able to:

- [d]escribe how automation can ensure that they are able to make the most out of every drop of blood by utilizing advanced technology in blood collection and component processes;
- [use] estimated blood volume features to lead to a safer donation for each donor;
- [identify] the benefits of [using] automation in blood collection and component manufacturing.

Note: The content of this sponsored event was developed independently from the ABC continuing education program. Opinions expressed during these events are those of the faculty and are not necessarily a reflection of ABC's opinions, nor are they supported, sponsored, or endorsed by ABC. Continuing education (CE) or continuing medical education (CME) credits are not offered. 💧





RESEARCH IN BRIEF

U.S. Hospitals – Survey of Platelet Inventory, Transfusion Practice and Availability. A survey published in *Transfusion* “was performed to increase understanding of platelet (PLT) practices and availability in U.S. hospitals.” The researchers explained that “there has been limited information related to inventory management, including stocking levels, shelf life extension, ability to return or transfer PLTs, and use of apheresis PLTs with a dose less than 3.0×10^{11} ...In 2019, [a] 27-question online survey was distributed to 995 U.S. hospitals and through blood centers to many more...Of the respondents, 21.6, 53.2, and 25.2 percent were characterized as small, medium, and large, respectively.” Questions asked in the survey included, “if hospitals had a policy for appropriate PLT transfusion thresholds and 25 percent responded they did not...The lack of a policy correlated with low PLT usage, but 19.2 percent with high usage also reported not having a policy and 65 percent performed stem cell transplants.” The data also revealed that, “[t]he majority of hospitals (80 percent) responding to the survey stock[ed] five or fewer PLTs in inventory...Hospitals that stocked one to three and three to five PLTs had the highest outdate rates with 22.7 percent, and 17.4 percent, respectively...For PLT shelf life extension, 10 percent reported extending the shelf life of PLTs beyond five days with nine percent using a rapid test and one percent using a secondary culture method...[H]ospitals that [were] able to transfer PLTs back to their supplier or to another hospital had lower outdate rates compared with hospitals that did not.” The authors also noted that, “[i]n this study, 28.3 percent reported transfusing PLT units with a dose of less than 3×10^{11} PLTs when inventory was low and 9.1 percent transfused routinely.” The survey found “22.3 percent of hospitals reported decreased PLT availability once or more a month...Delays in one or more surgeries in the past 12 months due to reduced PLT availability were reported by 18.7 percent, and 31.8 percent reported a delay in one or more outpatient transfusions.” The researchers concluded that the “survey indicates that U.S. hospitals currently face challenges with PLT availability, which can impact patient care...[and] [t]here are opportunities to improve PLT transfusion practice, inventory management, outdate rates, and availability in the U.S.”

Citation: Pandey, S., Belanger, G.A., Rajbhandary, S., *et al.* A survey of U.S. hospitals on platelet inventory management, transfusion practice, and platelet availability. *Transfusion*. 2021.

Contributed by Richard Gammon, MD, Medical Director at OneBlood 

Upcoming ABC Webinars – Don’t Miss Out!

- **ABC SMT Journal Club Webinar** – July 26th from 3 – 4 p.m. (EDT). More details available to ABC members in MCN 21-051.
- **ABC Bylaws Webinar** – July 29th from 4 – 5 p.m. (EDT). Contact [us](#) for more details.
- **Why Automation? Webinar** sponsored by Macopharma – August 11th from 2 – 3 p.m. (EDT). [Registration](#) is open and complimentary.
- **“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.
- **ABC Human Resources Forum Call** – August 25th from 3 – 4 p.m. (EDT). More details coming soon.





PEOPLE



Connie Westhoff, PhD, of New York Blood Center Enterprises, has been [recognized](#) by the American Society of Hematology (ASH) with an Honoric Award. This distinction honors “exemplary hematologists who have made significant contributions to the field and have been nominated by ASH members.” Specifically, Dr. Westhoff is the 2021 E. Donnell Thomas Lectur and Prize honoree, “named after the late Nobel Prize Laureate and past president of ASH E. Donnell Thomas, MD, recognizes pioneering research achievements in hematology that have represented a paradigm shift or significant discovery in the field.” According to the announcement she is “an internationally recognized investigator in the field of transfusion medicine known for her discovery that Rh genetic diversity and mutation contributes to Rh incompatibility following blood transfusion. Dr. Westhoff is also credited with establishing high-throughput DNA-based methods to genotype blood group antigens more efficiently, which has led to

advances that fundamentally changed and improved standard practice in blood transfusion. These contributions have been especially significant for patients in need of long-term transfusion support, as well as for individuals with sickle cell disease who need more precise matching for blood transfusion. She has served as a board member of the AABB, as the chair of the ASH Scientific Committee on Transfusion Medicine, and as a member of the board of the National Blood Foundation, demonstrating her enduring commitment to the transfusion community.”

(Source: ASH [Announcement](#), 6/30/21) 💧

WORD IN WASHINGTON

U.S. Department of Health and Human Services (HHS) Secretary Xavier Becerra, JD [announced](#) that the public health emergency for COVID-19 has been extended for 90 days. The declaration was scheduled to expire this month and this extension will continue the public health emergency into November 2021. The declaration allows the Administration to provide response aid to local state health departments in addition to flexibility for government-run health insurance programs and emergency approvals of new drugs and tests.

(Source: HHS [Announcement](#), 7/19/21)

The Centers for Medicare and Medicaid Services (CMS) has [published](#) the calendar year 2022 Medicare Hospital Outpatient Prospective Payment System and Ambulatory Surgical Center Payment System Proposed Rule (CMS-1753-P) proposed rule. A 60-day comment period will end on September 17th with the final rule scheduled to be released in November. The rule includes a proposed market basket increase of 2.5 percent reduced by a 0.2 percent productivity adjustment for an overall increase of 2.3 percent for hospitals meeting relevant quality reporting requirements. America’s Blood Centers is continuing to review the proposed rule. Please contact [Diane Calmus, JD](#), senior director of Federal Government Affairs, with any questions or comments on the proposed rule.

(Source: CMS Announcement, 7/19/21)

A recent U.S. Food and Drug Administration (FDA) *Voices* blog [post](#) from Acting Commissioner Janet Woodcock, MD, describes the agency’s plans for a new Resilient Supply Chain and Shortages Prevention Program (RSCSPP) in the Center for Devices and Radiological Health (CDRH). FDA

(continued on page 6)



WORD IN WASHINGTON (continued from page 5)

included funding for the program within its fiscal year 2022 budget and views the program as providing “resources to establish a permanent program for U.S. supply chain resilience for medical devices. The funding will help to stand up this program, which will build on the work done to implement the CARES Act during the COVID-19 public health emergency, and will focus on strengthening the domestic supply chain through investments in preventive measures, identifying potential medical product supply short-falls, continuing surveillance, and rapid intervention... Supply chain disruptions were already beginning to occur before COVID-19 cases were identified in the U.S., as other nations had outbreaks and needed personal protective equipment (PPE), testing supplies, and other equipment in excess of supply. Moreover, there are situations such as hurricanes and other natural disasters that may not ever rise to the level of a public health emergency (PHE), but for which disruptions in device availability could significantly impact patient care. To assure a more resilient domestic supply chain, prevent shortages before they occur, and reduce dependence on foreign production, the FDA needs expanded authority to obtain supply disruption notifications for critical devices any time there is the potential for a shortage (removing the temporal limitation to PHEs). In addition, the FDA has requested that these notifications include production volume information to help facilitate conducting fuller oversight of supply chain disruptions. The FDA has also requested authority to require manufacturers to develop and share risk management plans and identify alternate suppliers and manufacturing sites, as well as authority for the FDA to allow temporary importation of unapproved devices, with appropriate controls, when in the interest of the public health. The RSCSPP will enhance CDRH’s capacity to enable rapid intervention to prevent and mitigate supply chain interruptions through:

- [p]roactive regulatory measures and partnerships with industry, health care providers, patients, and others;
- [d]evelopment and application of state-of-the-art supply chain intelligence for predictive modeling;
- [e]arly signal detection and continuous surveillance; and
- [f]ostering a more resilient domestic supply chain through investments in preventive measures that help to avert shortages before they occur.

This dedicated funding will strengthen CDRH’s capability to respond in everyday situations, as well as in emergencies. Funding for a permanent device shortages program at the FDA is critical to decrease or eliminate the risk of medical device supply chain shortages, and part of the agency’s overall investment in core FDA safety programs.”

(Source: *FDA Voices*, [FDA’s Budget: Medical Device Supply Chain and Shortages Prevention Program](#), 7/21/21) 💧

MEMBER NEWS

Memorial Blood Centers, a part of Innovative Blood Resources, a division of New York Blood Center Enterprises, recently [partnered](#) with the National Basketball Association’s (NBA) and the Women’s National Basketball Association’s (WNBA) Minnesota Timberwolves and Lynx to host a blood drive. “In our continued commitment to the community, we encourage Minnesotans to consider being a blood donor,” said Minnesota Timberwolves and Lynx Chief Executive Officer Ethan Casson in a news release. “This is another opportunity for eligible individuals to give back as we come out of the pandemic. The need for all blood types is at an all-time high and we are proud to play our part in bringing our communities together to make an impact.”

(Source: Minnesota Timberwolves and Lynx [News Release](#), 7/15/21)

(continued on page 7)

MEMBER NEWS (continued from page 6)

Shepard Community Blood Center recently [opened](#) a new donation site in Dublin, Ga. A ribbon-cutting ceremony celebrated the occasion earlier this month. We are community based and we really believe in giving back and staying local, said Shepard Community Blood Center Resources Director Ashley Whitaker to 41NBC/WMGT. This is the blood center’s fourth location.

(Source: 41NBC/WMGT, [Shepard Community Blood Center opens fourth location in Dublin](#), 7/6/21) ♦

GLOBAL NEWS

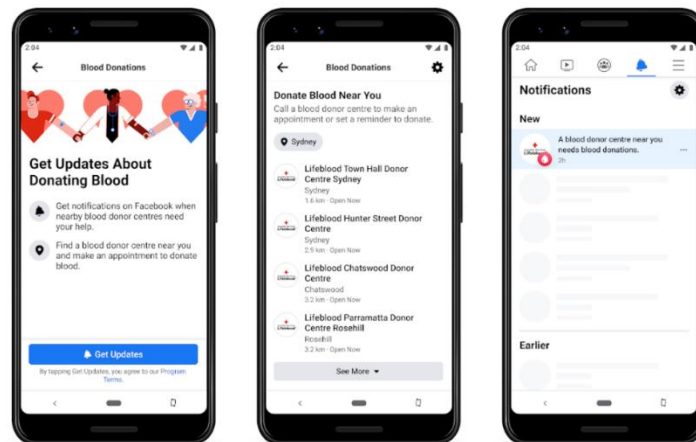
The International Plasma and Fractionation Association (IPFA) and the Transfusion Medicine Forum, Arabic-speaking countries (ATMF) have [announced](#) a joint series of four webinars. With a theme centered on “national strategies to ensure safe and adequate supply of blood, blood components, and plasma derived medicinal products, the webinars will include:

- Assessment of national needs for blood components (September 17th);
- Governance, strategic planning, and challenges (September 24th);
- Assessment plans to meet national requirements of plasma derived medicinal products (October 1st); and
- Challenges, and various approaches to plasma fractionation (October 8th).

Registration opens on August 1st and is complementary.

(Source: IPFA and ATMF [Announcement](#), 7/19/21)

Facebook has [partnered](#) with the Australian Red Cross Lifeblood to make its Blood Donation Tool available for individuals to use throughout the country as of June 14th. Now individuals between the ages of 18 and 75 can sign-up for updates and notifications on opportunities to donate blood locally. “The work undertaken by Lifeblood saves lives every day,” said Facebook Australia and New Zealand Director of Public Policy Mia Garlick in a news release. “[t]he need for blood in Australia is on-



going, with one blood donation needed every 24 seconds and a new blood donor needed every 5 minutes. We want it to make it as easy as possible for our Australian community to donate blood and save lives, and within a few clicks you can sign up, be notified when your local donor cent[er] needs more donors to book in, as well as encourage others to do the same. During the COVID-19 crisis, we’ve seen many Australians come together on Facebook to help each other, for example by offering to help others in Facebook Groups. This product launching today is another way Australians can come together and use our services to learn about how and where they can donate blood, no matter where they are in Australia.” Lifeblood Marketing Director Samantha Bartlett added in the news release, “[w]e know Facebook is a great way to spread the message about giving blood and for people to encourage others to get involved as well, so we’re excited

(continued on page 8)



GLOBAL NEWS (continued from page 7)

about the blood donation feature. In Australia this means we're able to let people who have updated their profile know when a blood donor cent[er] nearby needs their help. Over the last 12 months, with the rise of people working from home, people's donating habits have changed, so this is a great way for people to know when their 'new' local donor cent[er] needs a helping hand."

(Source: Lifeblood [News Release](#), 6/14/21) 💧

COMPANY NEWS

Pfizer Inc. and **BioNTech SE** recently [announced](#) that the U.S. Food and Drug Administration (FDA) granted the Priority Review designation for the Biologics License Application (BLA) of their COVID-19 vaccine "to prevent [illness] in individuals 16 years of age and older." The announcement states that "[t]he Prescription Drug User Fee Act (PDUFA) goal date for a decision by the FDA is in January 2022." The companies included clinical [data](#) from a phase III of the vaccine "where the vaccine's efficacy and favorable safety profile were observed up to six months after the second dose." The FDA issued a [statement](#) explaining that "the vaccine is authorized for emergency use [in the U.S.] to prevent COVID-19 in individuals ages 12 and older. The PDUFA [g]oal [d]ate of January 2022 reflects the PDUFA deadline for Priority Review and does not mean approval will not happen before that time. Quite to the contrary, the review of this BLA has been ongoing, is among the highest priorities of the agency, and the agency intends to complete the review far in advance of the PDUFA [g]oal [d]ate."

(Source: Pfizer, Inc. and BioNTech SE Announcement, 7/16/21; FDA [Statement](#), 7/16/21)

The European Medicines Agency (EMA) "[validated](#)" **BioMarin Pharmaceutical Inc.**'s Marketing Authorization Application (MAA) for the company's investigational gene therapy (valoctocogene roxaparvovec) to treat severe hemophilia A in adults. "We look forward to working with the [EMA] as it evaluates the robust data set in this application, which we believe address the requests made during the prior MAA review," said Hank Fuchs, MD, president of Worldwide Research and Development at BioMarin, in a company news release. "This pivotal study demonstrated superiority of valoctocogene roxaparvovec compared to the standard of care, prophylactic Factor VIII replacement. The extensive data set for valoctocogene roxaparvovec is supported by decades of scientific and clinical research in the field of gene therapy. We continue to contribute to the body of scientific knowledge and will be sharing results from our Phase I/II and Phase III studies with the community at the International Society on Thrombosis and Haemostasis (ISTH) 2021 Congress. We believe that this gene therapy has the potential to fulfill the unmet medical needs in the community." According to a news release, the EMA previously granted the company's request for an "accelerated assessment of the application." BioMarin also stated in the news release that it "intends to submit two-year follow-up safety and efficacy data on all study participants from the Phase 3 GENER8-1 study to support the benefit/risk assessment of valoctocogene roxaparvovec, as previously requested by the FDA. BioMarin is targeting a BLA resubmission in the second quarter of 2022, assuming favorable study results, followed by an expected six-month review by the FDA."

(Source: BioMarin Pharmaceutical Inc. [News Release](#), 7/15/21)

Sigilon Therapeutics, Inc. issued a [news release](#) explaining that the FDA has placed a "clinical hold" on its phase I/II trial on the company's novel encapsulated cell therapy to treat individuals with severe or moderately severe hemophilia A. The hold comes in the wake of Sigilon reporting a serious adverse event (SAE) and temporary enrollment halt to the FDA. "[A patient] who received the highest dose of study drug, developed inhibitors to Factor VIII (FVIII) — a well-known complication of FVIII therapy. The patient is responding well to medical treatment and his condition continues to improve. Among other things, the FDA

(continued on page 9)

COMPANY NEWS (continued from page 8)

has requested additional information or data on factors potentially contributing to the development of inhibitors in this patient, such as family history and immune stimulation from a recent vaccination. All three patients enrolled in this study will continue to be followed per study protocol, while the company investigates the SAE.” Sigilon President and Chief Executive Officer (CEO) Rogerio Vivaldi, MD added in the news release, “[p]atient safety is our top priority, and we are encouraged that the patient is recovering. In collaboration with the regulatory agencies and our advisors, we are conducting a thorough investigation of this event to confirm whether there was a causal relationship between the development of inhibitors and SIG-001. We are committed to working with the FDA to resolve the clinical hold.”

(Source: Sigilon Therapeutics, Inc. [News Release](#), 7/9/21) ♦

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

Aug. 4. **ABC Medical Directors Workshop, Cleveland, Ohio.** Registration is [open](#).

Aug. 5-6. **ABC Summer Summit, Cleveland, Ohio.** Registration is [open](#).

Aug. 17-18. **U.S. Department of Health and Human Services (HHS) Advisory Committee on Blood and Tissue Safety and Availability (ACBTSA) (Virtual).** More information available [here](#).

Aug. 17-19. **2021 ADRP Conference, Kansas City, Mo.** Registration is [open](#).

Aug. 26. **HHS Tick-Borne Disease Working Group (TBDWG). (Virtual).** More information available [here](#).

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 Cross 40th 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

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; MT/MLS certification from an accredited body; and SBB required. 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.

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 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 fulltime 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. ♦