



# ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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2021 #32

September 10, 2021

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## White House “Path Out of Pandemic” Action Plan Proposes Vaccinations or Weekly Testing of Employees

President Biden [announced](#) his Administration’s “Path Out Of the Pandemic” action plan on September 9<sup>th</sup>. The plan includes a six-step national strategy “that employs the same science-based approach that was used to successfully combat previous variants of COVID-19 earlier this year.” As part of the plan, the Administration is proposing “requiring all employers with 100+ employees to ensure their workers are vaccinated or tested weekly.” It states, “[t]he Department of Labor’s Occupational Safety and Health Administration (OSHA) is developing a rule that will require all employers with 100 or more employees to ensure their workforce is fully vaccinated or require any workers who remain unvaccinated to produce a negative test result on at least a weekly basis before coming to work. OSHA will issue an Emergency Temporary Standard (ETS) to implement this requirement. This requirement will impact over 80 million workers in private sector businesses with 100+ employees.”). This regulation is expected to take effect without notice or a prior comment rulemaking period. Time will be needed after promulgation of the new rule for actual vaccinations to occur and America’s Blood Centers (ABC) anticipates that the ETS will allow time for that to take place.

The White House also issued an [executive order](#) on September 9<sup>th</sup> requiring government contractors to mandate vaccinations with the Safer Federal Workforce Task Force called upon to issue guidance by September 24<sup>th</sup>. In that guidance, ABC anticipates learning the specifics of what would fall under this mandate and whether there is an impact on existing versus new contracts. We do not expect this guidance to be implemented without a prior public comment period. ABC will continue to monitor this issue and will review the rules upon publication. Please contact ABC Senior Director of Federal Government Affairs [Diane Calmus, JD](#) with any questions, concerns, or feedback.

(Source: White House [Announcement](#), 9/9/21; Presidential Executive [Order](#), 9/9/21) ♦

## ABC Launches CollABORate — New Online Community for ABC Members

America’s Blood Centers (ABC) has created a new online community for its member blood centers that replaces its previous listserv platform. [CollABORate](#) launched at the beginning of this month as a place for individuals who work at ABC member blood centers to share ideas, discuss challenges impacting the blood community,

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## ABC Launches CollABORate Online Community (continued from page 1)

and ask question of their peers, while also providing the opportunity for networking. The community features an improved interface that is more intuitive and user-friendly to facilitate discussions. Users also have the ability of connecting their social media profiles to their account and can access CollABORate via single-sign-on using their login credentials used for the ABC member [portal](#).

## **COLLABORATE**

SHARE STRATEGIC ADVICE | SOLVE CHALLENGES | DEVELOP NEW APPROACHES

The new community also allows members to post questions, search post archives, and includes a directory of users across the ABC membership, while allowing all individuals to customize their communication settings and frequency of notifications (e.g., real-time, daily, or weekly digests, etc.). We encourage all ABC members to join the conversation at the CollABORate community as ABC migrated all listserv users from ABC's previous platform to the new community and subscribed them to the same discipline-based groups in the new platform (e.g., communications and donor management, human resources, collections, etc.). Some recent discussion topics on CollABORate include:

- [Methotrexate](#) (MEDICAL ISSUES)
- [Employee referrals or signing bonuses](#) (HUMAN RESOURCES)
- [Continuing Education](#) (QUALITY BYTES)
- [Washed RBCs](#) (TECHNICAL DIRECTORS)

All members can sign-up for additional communities by clicking the "Join" button to reply and post in the community. If you have any questions, please contact [ABC Member Services](#).

## **Blood Emergency Readiness Corps Formed**

Seven community blood centers announced the creation of the [Blood Emergency Readiness Corps](#) (BERC) this week. Through this partnership the participating blood centers aim to "prepare their areas for emergency situations where blood needs are high." BERC includes the following ABC member blood centers:

- Oklahoma Blood institute Oklahoma City, O.K.;
- Houchin Community Blood Bank (Bakersfield, Calif.);
- The Community Blood Center (Appleton, Wisc.);
- Central Pennsylvania Blood Bank (Hummelstown, Penn.);
- We Are Blood (Austin, Texas);
- South Texas Blood & Tissue center (San Antonio, Texas); and
- Carter BloodCare (Bedford, Texas)

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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.

### **America's Blood Centers**

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## BERC Formed (continued from page 2)

According to a news release from BERC, the organization anticipates the network of participating blood centers will be “expanding rapidly.” The Alliance for Community Transfusion Services (ACTS) has partnered with BERC to “coordinate the activation of the emergency reserve when needed. Each blood center will be collecting extra blood products as part of its on-call schedule. Drive coordinators and donors will be asked to step up to a higher calling of guardianship to cover possible coast-to-coast needs. If no emergency situation arises, the blood products will be returned to the collecting center’s general inventory, to be used for local blood needs. Participating centers will rotate inventory coverage, starting on a three-week cycle.” ACTS CEO Nelson Hellwig added, “[w]hen faced with a mass-need event, blood centers across the country have relied on patchwork pleas for additional blood resources. States that had extra blood on hand might send units, but there was nothing that a blood center could count on other than undefined goodwill. With BERC, partner blood centers will know exactly how much emergency blood is available and where it will come from.”

(Source: BERC News Release, 9/9/21) ♦

## REGULATORY NEWS

The U.S. Food and Drug Administration made a technical [amendment](#) to the final rule titled “Requirements for Blood and Blood Components Intended for Transfusion or for Further Manufacturing Use” from [May 2015](#). The revision published in the *Federal Register* had an “incorrect citation.” The agency “is removing the [incorrect] reference to § 640.65(a)(2)(ii). Additionally, to improve the clarity of the regulation, we are also amending § 610.40(h)(2)(vii) to replace the reference to § 640.65(b)(2)(i) through (iv) with a reference to § 640.65(b)(2)(ii) through (iv). This amendment aligns with the preamble of the May 2015 final rule, which stated that FDA was “removing [the citation to] § 640.65(b)(2), and replacing it with the more precise citation to § 640.65(b)(2)(ii) through (b)(2)(iv)” (May 2015 final rule, 80 FR 29842 at 29886). FDA notes that donor protein composition assessment under § 640.65(b)(2)(i) is required for plasmapheresis procedures irrespective of whether or not the syphilis screening requirements under § 640.65(b)(2)(ii) through (iv) are applicable.”

(*Federal Register* [Revision to Restrictions on Shipment or Use for Human Blood and Blood Components Exceptions: Technical Amendment](#), 9/7/21)

The U.S. Department of Health and Human Services (HHS) [published](#) a notice in the *Federal Register* on September 3<sup>rd</sup> for the next Advisory Committee on Blood and Tissue Safety and Availability (ACBTSA) meeting set to take place virtually on September 23<sup>rd</sup> from 1-4 p.m. EDT (tentatively). During this public meeting, “[t]he committee will discuss and vote on recommendations to improve the supply chain and data infrastructure that supports the blood industry, especially during public health emergencies.” Additional information including the meeting agenda and any other accompanying materials will be available on the HHS [website](#) prior to the meeting.

(Source: *Federal Register* [Notice](#), 9/3/21) ♦

## RESEARCH IN BRIEF

**Iron Deficiency, Surgical Patients, and Red Blood Cell Transfusions.** Researchers in *Vox Sanguinis* performed and published a “retrospective study in a large cohort of surgical patients to investigate whether iron deficiency (ID) is associated with perioperative red blood cell transfusion (RBCTs) and whether the transfusion requirement is associated with the absolute or functional/mixed type of ID.” They explained

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## RESEARCH IN BRIEF (continued from page 3)

that “ID can either be an absolute ID (AID) due to blood loss or insufficient dietary intake, or functional, as a consequence of chronic inflammation leading to insufficient utilization of the iron stores and decreased uptake by the enterocytes.” The study included “adult patients who underwent elective inpatient surgery between September 2016 and November 2017...Patients were considered iron deficient when transferrin saturation (TSAT) was <16 percent...[A] patient was considered to have AID when ferritin was <30 µg/L and not AID (FMID: functional/mixed ID) when ferritin was ≥30 µg/L...[H]emoglobin and details of peri-operative red cell transfusions were collected.” The investigators noted that there were “2,711 [patients] included in [the] analyses” with “618 (22.8 percent) ha[ving] ID preoperatively, 173 (6.4 percent) ha[ving] AID, and 445 (16.4 percent) ha[ving] FMID. Of the 618 patients with ID, 32.4 percent were anemic (54.9 percent of patients with AID and 23.6 percent of FMID).” The study found that “[o]verall, patients with ID receive more RBCTs than non-ID patients (6.5 percent and 1.7 percent, respectively.;  $p < 0.001$ )...This is the case for both AID: 7.5 percent (13/173) and FMID: 6.1 percent (27/445;  $p < 0.001$  for both types, compared to non-ID)...After correction for Hb level, sex, and age, ID was still correlated with a significantly larger number of red blood cell units transfused compared to non-ID ( $p = 0.026$ )...In the subgroup analysis, AID was not independently associated with a larger number of RBCTs than non-ID ( $p = 0.12$ ), whereas patients with FMID did receive more RBCTs than non-ID ( $p = 0.021$ ).” The authors concluded “that preoperative ID, corrected for Hb level, is clearly associated with the number of RBCTs given to patients. As the association of FMID with the need for RBCTs is stronger than that of AID, [the] data support distinguishing between the types of ID.”

**Citation:** Tonino, R.P.B., Wilson, M., Zwaginga, J.J., Schipperus, M.R. [Prevalence of iron deficiency and red blood cell transfusions in surgical patients](#). *Vox Sang*. 2021

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

## PEOPLE



LifeSouth Community Blood Centers Chief Financial Officer (CFO) **Paul Grebe** recently celebrated his 40<sup>th</sup> year with the organization. He joined the organization in 1981 for what was intended to be a two-year assignment to write their first computer system and install the hardware. Mr. Grebe remained with LifeSouth and was promoted to CFO in 1993. During his tenure, the organization has grown from a small community blood bank in Gainesville, Fla. to expand its operations across Florida, Georgia, and Alabama, now serving more than 125 hospitals. “His leadership, guidance and expertise have been invaluable, helping us grow into the organization we are today,” said Kim Kinsell, JD, president and chief executive officer of LifeSouth. “There are very few as passionate about blood banking and being a member of the LifeSouth team as Paul, and he is admired and respected for his unwavering enthusiasm for the work we do and how we help the patients we serve.”

(LifeSouth Community Blood Centers Announcement, 9/8/21) ♦

## 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!



**America's Blood Centers®**  
It's About *Life.*

## 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.*

### **Results Available from COVID-19 Vaccination Status Survey #2 Available**

ABC has distributed the results of the second COVID-19 vaccination status survey. It includes the current and future plans related to COVID-19 vaccines and the blood center workforce of the ABC membership. Members can find the data in MCN 21-073. Please contact ABC Director of Quality Services [Toni Mattoch](#) to receive the data or a copy of the MCN.

### **Results Available from ABC 2021 Workplace Violence Risk Reduction Survey**

ABC has published the results of the ABC 2021 Workplace Violence Risk Reduction Survey. It was developed jointly by ABC and BCx, a reciprocal insurance company owned and operated by blood centers, for members regarding security initiatives and activities at blood centers. Knowing what the industry standards for security helps blood centers in assessing their workplaces. Members can find the data in MCN 21-074. Please contact ABC Director of Quality Services [Toni Mattoch](#) to receive the data or a copy of the MCN.

### **ADRP Partners with Sickle Cell Disease Association of America**

With National Sickle Cell Awareness Month beginning September 1<sup>st</sup>, ADRP, an international division of ABC, is announcing a partnership with the Sickle Cell Disease Association of America. To raise awareness of the need for blood donations from a diverse group of donors to help treat individuals with sickle cell disease, the two organizations have created social media [graphics](#) and a [video](#). Blood centers are encouraged to use these resources and designated hashtags (#sicklecellmatters2021, #sicklecellawarenessmonth, #SCDSCTMatters, and #SickleCell) throughout the month of September. 💧

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

- **United Kingdom's Transition to an Individual Risk Assessment** – Sept. 21<sup>st</sup> from 12 – 1 p.m. (EDT). Login information available to ABC members [here](#).

### **We Welcome Your Letters**

The *ABC Newsletter* welcomes letters from its readers on any blood-related topic that might be of interest to ABC members. Letters should be kept relatively short and to the point, preferably about a topic that has recently been covered in the *ABC Newsletter*. Letters are subject to editing for brevity and good taste and published after editorial review. Please send letters to the Editor at [newsletter@americasblood.org](mailto:newsletter@americasblood.org) or fax them to (202) 899-2621. Please include your correct title and organization as well as your phone number. The deadline for letters is Wednesday to make it into the next newsletter.



## WORD IN WASHINGTON

The National Institutes of Health's (NIH) National Heart, Lung, and Blood Institute (NHLBI) **named Julie Panepinto, MD, MSPH, deputy director of the agency's Division of Blood Diseases and Resources.** She has "been involved in chronic disease research and caring for children with sickle cell disease" and "spearheaded the establishment of an international registry (the SECURE-SCD [Registry](#)) to collect data on clinical outcomes of COVID-19 patients who also had sickle cell disease... [Researchers use] the registry to identify risk factors that help explain this vulnerability and possibly help save lives." Dr. Panepinto is "is formerly the director of the Center for Clinical Effectiveness Research in the Children's Research Institute at the Medical College of Wisconsin/Children's Hospital of Wisconsin. She was also a professor of pediatric hematology there. Although her research has mostly focused on children with sickle cell, she expanded her research to other areas including cancer, diabetes, and asthma."

(Source: NHLBI [Announcement](#), 6/24/21)

NIH is providing approximately \$185 million in **funding to the Impact Genomic Variation on Function (IGVF) consortium over five years.** Investigators with the consortium "will work to understand how genomic variation alters human genome function, and how such variation influences human health and disease... The IGVF consortium will develop a catalog of the results and approaches used in their studies. All information generated by the consortium will be made freely available to the research community via a web portal to assist with future research projects."

(Source: NIH News [Release](#), 9/9/21) 💧

## GLOBAL NEWS

NHS Blood and Transplant (NHSBT), the national blood provider for England and transplant services for the United Kingdom (UK), **announced** this week the addition of "blood, organ, and stem cell donation" to national education curriculum for all secondary school children in England. The [resources](#) are designed to be used on their own or combined and include lots of notes so teacher preparation is minimal. There are optional extra activities and schools can request a speaker, many of whom have personal connections to donation, to present at a school assembly" stated the news release. "We're delighted that donation is now part of the national curriculum, young people can make such a difference, by donating but also by talking to their family and friends about donation and encouraging others to become lifesavers," said NHSBT Head of Marketing Alex Cullen in the news release. "We see considering the types of donation as a rite of passage to becoming an adult, these lessons will allow pupils to discuss donation and empower them to make their own informed decision. If young people support donation after learning about it, we know they can be hugely influential and can help advocate for us and ultimately help us save more lives. We're excited to be working with teachers to educate 11 to 16 year-olds about donation and would encourage teachers to check out our free resources to help them with these lessons. We know young people can save lives too but also inspire others around to think about the gifts they can give."

(Source: NHSBT [News Release](#), 9/7/21)

*Global News* **reported** last week that Canadian Prime Minister Justin Trudeau stated that he expects the country to "soon" revise its blood donation criteria for men who have sex with other men (MSM). The news outlet attributed the following statement to the Prime Minister, "[w]e have said consistently right back since 2015 that the ban on blood donation, on giving blood, for men who have sex with men is unacceptable, discriminatory, and wrong. We are very, very hopeful and we expect Canadian Blood Services to announce soon that the ban will be lifted shortly. It is something that we are working on, continue to work

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## GLOBAL NEWS (continued from page 6)

on, it is something we will ensure happens.” In June, Canadian Blood Services indicated that the organization would request by the end of 2021 that Canada’s regulatory authority, Health Canada, replace the country’s blood donor deferral policy for MSM with an individual risk-based policy. A [statement](#) published by Canadian Blood Services at that time noted that, “[our] goal is to remove the current waiting period for [MSM] and use sexual behavi[o]r-based screening for all donors instead...Currently, men are eligible to give blood if it has been more than three months since their last sexual contact with a man. As an incremental step, in 2019 we started the process of making a change in our source plasma eligibility criteria. In May 2021 we submitted the request for changes to Health Canada. If approved, some gay, bisexual, and other men who have sex with men will be able to donate plasma at select cente[r]s beginning this fall.”

(Source: *Global News*, [Trudeau expects to overturn blood donation ban for gay, bisexual men soon](#), 9/3/21)

**The Asian Association of Transfusion Medicine (AATM) has developed a certificate program that launched on September 9<sup>th</sup> with a kickoff event.** The Advance Certificate in Transfusion Medicine (ACTM) program targets individuals who work at blood banks and transfusion services worldwide including doctors, technologists, nurses, administrators, transfusion physicians, and more. The certificate program is open to AATM members and nonmembers (with special benefits).

(Source: AATM Communication, 9/6/21) ◆

## **COMPANY NEWS**

**InVita Healthcare Technologies** announced the [launch](#) of a mobile application (app) for blood product deliveries. According to a company news release, the HemaControl Driver App “tracks blood products in transit from the blood center to the final destination at the hospital. Using Title 21 CFR Part 11 digital signature technology, the HemaControl Driver App eliminates paper, provides transparency to all parties on product deliveries, and overlays product pickups and deliveries with GPS traffic data to avoid transportation delays and reduce transportation costs.” ABC member LifeSouth Community Blood Centers has begun using the app “across all delivery operations” stated the news release and according to the blood center’s chief operating officer J.D. Pettyjohn, “[t]he driver app adds efficiencies and transparency throughout the process, making it easy to close out orders quickly and monitor the status of our deliveries.”

(Source: InVita Healthcare Technologies [News Release](#), 9/8/21)

The U.S. Food and Drug Administration (FDA) has [accepted](#) the “filing and review” of **Global Blood Therapeutics, Inc.’s** (GBT) supplemental new drug application (sNDA) seeking accelerated approval of the company’s therapy (Oxbryta®) to treat sickle cell disease (SCD) in children ages four to 11 according to a news release. The oral therapy is already approved for SCD patients that are age 12 and older and it “directly targets hemoglobin polymerization, the root cause of red blood cell sickling in SCD” states the news release. GBT is also seeking approval for “a new age-appropriate dispersible tablet dosage form of Oxbryta suitable for pediatric patients” according to its new drug application (NDA) filing. “The FDA’s acceptance of our regulatory submissions for Oxbryta for the treatment of sickle cell disease in children ages four to 11 years and a pediatric-friendly dosage form of Oxbryta is an important step toward achieving GBT’s goal of bringing Oxbryta to all eligible patients suffering from this devastating disease,” said Ted W. Love, MD, president and chief executive officer of GBT in the news release. “There are few current therapeutic options for children under 12 years of age with sickle cell disease, which can cause irreversible

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COMPANY NEWS (continued from page 7)

multi-organ damage in the first few years of life. Given the profound unmet need, we appreciate the FDA prioritizing the review of potential treatments for the long-overlooked sickle cell disease community.”

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

**Novavax, Inc.** began [enrolling](#) participants in a phase I/II clinical trial assessing “the safety and immunogenicity of a combination vaccine using Novavax’s seasonal influenza and COVID-19 vaccines.” According to the announcement, the study “will evaluate the safety, tolerability, and immune response [of the combination vaccine]...in 640 healthy adults 50 to 70 years of age. Participants will have been either previously infected with the SARS-CoV-2 virus that causes COVID-19 or vaccinated through an authorized vaccine at least eight weeks prior to enrollment. All participants will be randomly assigned to cohorts to evaluate multiple formulations and will be dosed on Day 0 and again at Day 56. The trial will be conducted in Australia at up to 12 study sites, with results expected during the first half of 2022.”

(Source: Novavax, Inc. [News Release](#), 9/8/21) ◆

## CALENDAR

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

### 2021

Sept. 15-17. **4<sup>th</sup> European Conference on Donor Health and Management, Hamburg, Germany.** Registration is [open](#).

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

Sept. 23. **U.S. Department of Health and Human Services (HHS) Advisory Committee on Blood and Tissue Safety and Availability (ACBTSA) (Virtual).** More information available [here](#).

Sept. 23. **NIH Clinical Center Department of Transfusion Medicine and The American Red Cross 40<sup>th</sup> 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. 12-15. **American Association of Tissue Banks (AATB) Annual Meeting, Atlanta, Ga.** More information available [here](#). 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](#).

### 2022

Mar. 7-10. **ABC Annual Meeting, Washington, D.C.** Additional details coming [soon](#).

May 10-12. **2022 ADRP Conference, Phoenix, Ariz.** Additional details coming soon. ◆



## CLASSIFIED ADVERTISING

Classified advertisements, including notices of positions available and wanted, are published free of charge for a maximum of three weeks per position per calendar year for ABC institutional members. There are charges for non-members: \$139 per placement for ABC Newsletter subscribers and \$279 for non-subscribers. A six (6) percent processing fee will be applied to all credit card payments. Notices ordinarily are limited to 150 words. To place an ad, e-mail: [newsletter@americasblood.org](mailto:newsletter@americasblood.org)

## POSITIONS

**Chief Clinical Officer.** The Central California Blood Center seeks ideal candidates for new position of Chief Clinical Officer (CCO). Looking for an exceptional blood banking/transfusion medicine leader who can successfully navigate the ever-changing health care provider and blood industry landscapes to provide ever increasing value to our clients. The CCO will provide clinical, scientific, and technical expertise, supporting our senior management team, for our innovative and independent community blood center. The CCO will report to the President and CEO and oversee blood donor services, blood component manufacturing, donor testing lab, R&D programs, IRL, donor services, and IT departments. The CCO will shape and guide our team of high-achieving department directors to consistently exceed standards and goals for cGMP, productivity, and customer service. The CCO will continue our trend of bringing innovation to our successful independent community blood center. The ideal candidate will enhance our stature in blood banking, cellular therapies, and other mission compatible partnerships with biotech. We envision the successful candidate will have opportunities to advance towards future CMO and/or CEO roles in the mid-decade. MS, SBB, PhD or MD preferred. Strong and progressive blood industry leadership experience required. Please send inquiries to [lchristiansen@donateblood.org](mailto:lchristiansen@donateblood.org).

**Immunohematology Technician.** Join our team! LifeServe Blood Center currently has one full-time opening for a Medical Technician at our Omaha, NE location. This laboratory reference position serves hospital patients across Iowa, Nebraska, and South Dakota. Testing includes basic blood banking and complex antibody identification. Primary Responsibilities for this Position Include: Accepts, verifies, processes, and tests incoming samples; Performs various testing procedures, including immunohematology, on donor and patient blood products; Performs quality control, equipment maintenance and calibration; Utilizes computer system to obtain necessary data and to record test results; and Participates in the ongoing monitoring for each testing process to identify errors or potential problems. Education and/or Experience: MT/MLS or MLT from American Society for Clinical Pathology or equivalent; Bachelor's degree in medical technology or chemical, physical, or biological science or related scientific field from an accredited college or university or an equivalent combination of education, certification, training and or experience; and Meet current CLIA or ABB requirements for testing personnel. Interested applicants should visit our website: <https://www.lifeservebloodcenter.org/about-us/join-our-team/>. LifeServe Blood

Center is fully committed to equal employment opportunity. All applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, age, sexual orientation, gender identification, genetic information, marital status, pregnancy, disability, veteran status, or any other legally protected status.

**Cord Blood Operations Manager.** LifeSouth Community Blood Centers is currently seeking an individual to join our team as a Cord Blood Operations Manager in Gainesville, FL. This position oversees all Cord Blood processing operations, including assessment, record review, processing, long-term storage, and shipment/distribution of cord blood and cellular manufacturing operations. Applicants should apply here: <https://lifesouth.csod.com/ux/ats/careersite/5/home/req-uisition/2203?c=lifesouth>.

**Donor Testing Laboratory Director.** The National Blood Testing Cooperative (NBTC) and LifeSouth Community Blood Centers is currently seeking a skilled individual for the Donor Testing Laboratory Director position in our Donor Testing Laboratory in Stone Mountain, GA. This position is responsible for the strategic planning, development, organization, coordination, management, and daily oversight of all activities associated with a blood testing laboratory. This position will also ensure the laboratory performs in accordance with all regulatory requirements and will possess the oversight and responsibility of all standard operating procedures (SOPs) within the lab. Applicants should apply here: <https://lifesouth.csod.com/ux/ats/careersite/5/home/req-uisition/2241?c=lifesouth>.

**Donor Testing Manager.** LifeSouth Community Blood Centers is currently seeking a skilled individual for the Donor Testing Manager position in our Donor Testing Laboratory in Stone Mountain, GA. This position is responsible for providing management and oversight of assigned laboratory departments and staff. Applicants should apply here: <https://lifesouth.csod.com/ux/ats/careersite/5/home/req-uisition/2240?c=lifesouth>.

**Regional Donor Services Manager.** Lifeline Blood Services, sole provider of blood products to twenty counties in West Tennessee, is seeking an experienced manager to oversee the regional operations of our fixed site blood centers. This position will be located in Dyersburg, TN and will be required to travel in between fixed sites to

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## POSITIONS (continued from page 9)

regularly monitor the operations to ensure compliance of company policies, FDA, AABB, State, and other industry guidelines and oversee new site renovations as needed. The successful candidate will also proactively manage phlebotomy staff to achieve high performance by effectively utilizing feedback, coaching, and performance reviews while scheduling phlebotomy staff to ensure smooth workflow to meet established turnaround times. The Regional Donor Services Manager will create and sustain an environment conducive to an engaged and high performing team to achieve a positive donor experience. As a member of the leadership team, the Manager will model Lifeline's mission and values, integrating them into their daily routine. Associate's degree or comparable experience in management required. Bachelor's degree preferred. One to two years of administrative/management experience required, three plus years preferred. Lifeline offers a competitive beginning salary and generous benefits package, including medical, dental, and vision insurances, life insurance, paid time off, extended illness benefit, discount club membership, 401(k) with employer match, and tuition reimbursement. Click [HERE](#) to apply.

**Manager of Donor Notification.** The Manager of Donor Notification is responsible for supervision of all donor notification activities and personnel. Ensures department provides outstanding customer service to internal and external customers. This position has access to very confidential information and requires maintaining donor information confidentiality at all times except where reporting is required by law. Regular full-time attendance is required during office hours. Education: Texas licensed RN, MLS (ASCP), or MT (ASCP). Bachelor's degree. Experience: Three (3) years' experience working in a blood bank or other healthcare-related facility. Experience/familiarity in donor eligibility-related area preferred. One to two years' supervisory experience required. Background in infectious disease testing preferred. Carter BloodCare is an EEO/Affirmative Action employer. Carter BloodCare provides equal employment opportunities (EEO) to all employees and applicants and will not discriminate in its employment practices due to an employee's or applicant's race, color, religion, sex, sexual orientation, gender identity, age, national origin, genetic, and veteran or disability status. In addition to federal law requirements, Carter BloodCare complies with applicable state and local laws governing nondiscrimination in employment in every location in which the company has facilities. Carter BloodCare is a Pro Disabled & Veteran Employer. We maintain a drug-free workplace and perform pre-employment substance abuse testing. Apply at [www.carterbloodcare.org](http://www.carterbloodcare.org).

**Clinical Apheresis Registered Nurse.** The Clinical Apheresis Registered Nurse (CARN) collects leukocytes and performs therapeutic apheresis procedures for Carter BloodCare (CBC) clients in and around the Dallas/ Fort Worth area. The CARN follows CBC SOP's, assesses, and monitors patient/donor while receiving an apheresis treatment; contacts patient physicians or a CBC Medical Director as situation warrants consults or order clarification, transfusion reactions and/or emergency situations; and ensures that excellent customer service is provided to CBC customers. Education: RN with active unencumbered licensure in the State of Texas. CPR Certification. Experience: Minimum one (1) year nursing experience in a hospital setting, oncology unit, or clinic. Intensive care unit, dialysis, ER, oncology, and/or pediatric experience preferred. Apheresis experience preferred. Equal Opportunity Employer: disability/veteran. Apply at [www.carterbloodcare.org](http://www.carterbloodcare.org), click Careers & search "Registered Nurse."

**Clinical Apheresis Manager.** The Manager of Clinical Apheresis Services provides oversight for a team that performs therapeutic procedures on hospitalized patients for treatment of disease, or collection of cells blood for various cell therapy treatments. Manage business activities required to meet the needs of customer accounts. Responsible for staffing field assignments and performing procedures in the field as needed. Responsible for maintaining quality indicators of procedures and records of preventative/responsive maintenance. Education: Bachelor of Science in Nursing. RN active licensure in the State of Texas (Hemapheresis Practitioner (HP) or Qualification in Apheresis (QIA) credentialing preferred). Experience: Five (5) years' apheresis experience of which three (3) years should be in therapeutic/PBSC apheresis. Two (2) years' management experience. Equal Opportunity Employer: disability/veteran. Apply at [www.carterbloodcare.org](http://www.carterbloodcare.org), click Careers & search Req # 27905. 💧