

2022 #34

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Study Examines Effects of Donor Gender on RBC Transfusion Patient Mortality

Researchers in *eClinicalMedicine*, part of *The Lancet Discovery Science*, reported on their findings from a randomized clinical trial being conducted “where 8,850 adult patients are assigned male-only or female-only donor transfusions” to assess the impact of “donor sex on transfusion recipient survival.” The authors “hypothesize[d] that the donors’ sex may affect the survival of red blood cell [RBC] transfused patients. Using large Danish observational data, we explicitly emulated several sex-stratified target trials determining the causal effect of donor sex on the risk of death after RBC transfusion in male and female patients, respectively. The doubly robust targeted maximum likelihood estimation (TMLE) method coupled with ensembled machine learning was used to adjust for confounding and estimate average treatment effects (ATEs) of actionable interventions.”

The study used “TMLE to estimate the ATEs [and] had the entire study population receive the treatment from baseline up to 28 days after the start of follow-up: [t]ransfuse the patients with RBC units exclusively from female donors; and [t]ransfuse the patients with RBC units exclusively from male donors.” The authors noted that the study included “patients of 18 years or older receiving an in-hospital RBC transfusion in the Capital Region of Denmark between January 2009 and April 2018, with no history of RBC transfusions within the past year at baseline. The first transfusion episode meeting the eligibility criteria was defined as the baseline-transfusion (day $k = 0$), and all transfusion episodes up to 28 days from the baseline-transfusion represented a transfusion history (day $k = \{0 \dots 28\}$). Patients were only allowed to participate once.”

The authors reported that “[i]n male patients, transfusing RBC units exclusively from male donors compared with exclusively from female donors was found to increase the 28-day survival by 2.06 percentage points (pp) (95 percent confidence interval [CI]: 1.81-2.32, $P < 0.0001$), while no evidence of an effect was found for female patients (0.02pp [-0.18-0.22, $P = 0.84$]). Transfusing RBC units exclusively from male donors compared with the current transfusion practice was found to increase the 28-day survival by 1.83pp (1.67-2.00, $P < 0.0001$) in male patients. In female patients, the estimated ATEs between the current practice and exclusively transfusing RBC units from either female or male donors were similar, with an increased 28-day survival of 0.62pp (0.49-0.75, $P < 0.0001$), and 0.64pp (0.52-0.76, $P < 0.0001$), respectively.”

The researchers concluded that their preliminary findings suggest that “[i]n the absence of high-powered randomized clinical trials, explicitly emulating target trials

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Donor Gender RBC Transfusion Patient Mortality Study (continued from page 1)

using real-world data and targeted learning may provide better evidence on the effect of donor sex on patient mortality. In this study, exclusively transfusing RBC units from male donors to male recipients increased the 28-day survival compared with the current practice. In female patients, exclusively transfusing RBC units from either male or female donors increased the 28-day survival compared with the current practice. Further, transfusing RBC units from female donors was found to be harmful for male patients while no evidence of a sex-specific effect was found for female patients.”

Citation: Rasmussen, P.B, Andersen, P.K., *et al.* “[Estimating the effect of donor sex on red blood cell transfused patient mortality: A retrospective cohort study using a targeted learning and emulated trials-based approach.](#)” *eClinicalMedicine*. 2022. ♡

Shepard Community Blood Center Reports Results of Donor Motivation and Compensation Pilot in White Paper

A white paper [published](#) by Shepard Community Blood Center examines donor motivations and donor compensation. Specifically, the authors sought:

- “[to] layer human behavioral motivation theory over a defined customer experience model to predict individual action after completing a donation; and
- to determine if a customer compensated model increases the risk of positive infectious disease rates.”

In a pilot study at the blood center, a new collection site in Dublin, Ga. was established, and the researchers segmented the donor experience into three phases:

- “before needle enters arm: [i]ndustrial décor with a cantina and coffee bar serving a custom blend of [roasted coffee beans] labeled ‘B-positive;’
- while needle is in arm: [d]edicated one-on-one service with large TV monitors and comfortable chairs; and
- after needle is removed: [c]antina with mobile charging stations and a choice to use points for the following purpose:
 - [g]ift card (\$20 [w]hole [b]lood (WB), \$30 [p]lasma, \$50 [p]latelets)
 - Donate to a non-profit (\$20 WB, \$30 plasma, \$50 platelets)
 - Donate back to Shepard (\$20 WB, \$30 plasma, \$50 platelets).”



Courtesy of Shepard Community Blood Center

The authors hypothesized “that 25 percent [of donors] would take the gift card, 50 percent would give to a non-profit, and 25 percent would donate back to the blood center.” Their research found that after the center was open for one year, resulting in “570 WB donations, 165 apheresis platelets products, and four plasma donations, [the] [d]ata show[ed] “that 30 percent of whole blood donors used the points for gift cards, 4 percent gave to a non-profit, and 56 percent did not use the points. The individuals who donated apheresis platelets indicated that 97 percent of the individuals used the points for gift cards, 3 percent gave to a non-profit, and 0 percent did not use the points. 100 percent of the individuals who donated plasma used the points for gift cards. The repeat donor rate for WB was 40 percent, platelets 60 percent, and plasma 0 percent.” The white paper also noted that the “infectious disease positive rate for all markers was 2 percent in Dublin compared to 1.03 percent for all other fixed sites. There was no statistical significance of percentage of positive markers between the compensated model and a non-compensated model.”

The authors concluded that “compensation had a positive impact on first-time donor repeat rates and may

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Shepard Community Blood Center White Paper (continued from page 2)

have been the motivator for choosing apheresis platelet and plasma procedures. Variables such as demographics, geography, education, and personal experience will impact results. Additional studies and focus groups should be performed while continuing to gather data to support future blood collection program decisions.”

(Source: Shepard Community Blood Center White Paper, “[Predicting Individual Behavior Using A Compensated Customer Experience Model](#),” 9/19/22) 💧

RESEARCH IN BRIEF

Positive Blood Cultures are Associated with Lower Hemoglobin Increments. A study in *Vox Sanguinis* “tested the hypothesis that the recipient environment in patients with septicemia would blunt the desired increase in post-transfusion blood hemoglobin (Hb).” The investigators used “data from the Transfusion Research, Utilization, Surveillance, and Tracking (TRUST) database to perform a retrospective cohort study...Inclusion criteria [was]: adult inpatients transfused with at least one red blood cell (RBC) unit between April 1, 2010 and March 31, 2017.” The study’s “primary outcome was the change in Hb after a RBC transfusion...Among transfused patients, 6,252 had complete blood count test results available pre and post their first transfusion episode and had at least one blood culture prior to the first transfusion episode. [Of the 6,252] patients, 596 (9.5 percent) patients’ blood culture tested positive prior to transfusion and 5,656 (90.5 percent) tested negative.” The authors explained that “[a]t the time of hospital admission, the study patients had a median Hb of 99 g/dL, IQR 8.6–11.5; during their hospital stay, the median Hb of culture-positive patients fell to 76 g/L, IQR 70–80, and that of culture-negative patients to 75 g/L, IQR 70–80...[T]he primary outcome, Hb increment, was significantly affected by blood culture status, with a modelled deficit of -0.150 mg/dL ($p = 0.0017$) in blood culture-positive patients after any transfusion episode, after adjustment for covariates. All covariates [e.g., number of RBC units transfused, diagnosis, patient age, and sex] had a significant effect on Hb increment except for the age of the transfused RBCs.” The study concluded that the “findings support the general concept that the increase in recipient Hb following RBC transfusion can be influenced by recipient factors and provides evidence that blood culture positivity can be added to the growing list of such factors. The reduction in Hb increment, while statistically significant, was not likely clinically significant in isolation but was of a similar magnitude to other recipient factors reported in the literature.”

Citation: Qadri, S.M., Liu, Y., Barty, R.L., Heddle, N.M., Sheffield, W.P. [A positive blood culture is associated with a lower haemoglobin increment in hospitalized patients after red blood cell transfusion.](#) *Vox Sang.* 2022.

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

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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.

ADRP Webinar: “vCJD Implementation Webinar — Soup to Nuts”

[Register](#) today for the Wednesday, October 12th ADRP webinar titled “vCJD Implementation Webinar — Soup to Nuts.” This webinar will take place at 1 p.m. EDT and feature Rita Reik, MD, FCAP (America’s Blood Centers and OneBlood), Peggy Barlow Flug (Oklahoma Blood Institute) Allie Van Dyke (The Blood Connection), and Amanda Hess (ImpactLife). They will share their experiences with implementation of the U.S. Food and Drug Administration [guidance](#) titled “Recommendations to Reduce the Possible Risk of Transmission of Creutzfeldt-Jakob Disease and Variant Creutzfeldt-Jakob Disease by Blood and Blood Components.”

(Source: ADRP [Announcement](#), 9/13/22)

Member Employee Retention & Turnover Survey Results Are Available

Results of the America’s Blood Centers (ABC) Member Employee Retention & Turnover Survey are available to ABC members in MCN 22-077. Please contact [us](#) to receive a copy. This benchmarking survey provides ABC members with insights into blood center experiences, the impact of human resources-related issues to blood center operations, and policy solutions centers have implemented to promote employee retention. In addition to the aggregate data from 2021, the report includes turnover rates for the first five months of 2022, providing a quick check-in on the progress centers are making this year. Results of the survey will also be presented in the upcoming [ADRP 2022 Master Class](#) on September 28th. [Registration](#) is open.

(Source: MCN 22-077, 9/2/22) 💧

BRIEFLY NOTED

According to data [reported](#) in the “The Current State of Hospital Finances Fall 2022 Update” from Kaufman Hall, hospital “margins remain depressed relative to pre-pandemic levels.” Additional insights from the update include:

- “[m]ore than half of hospitals are projected to have negative margins through 2022;
- [e]xpenses are significantly elevated from pre-pandemic levels;
- [h]ospitals have faced a profound financial toll;
- U.S. hospitals are likely to face billions of dollars in losses in 2022 under both optimistic and pessimistic models.”

(Source: Kaufman Hall, [The Current State of Hospital Finances Fall 2022 Update](#), 9/15/22) 💧





WORD IN WASHINGTON

The U.S. Department of Health and Human Services (HHS) published a [fact sheet](#) on September 14th outlining the actions that the agency will take in the wake of the [Executive Order](#) signed by President Biden to “launch” the National Biotechnology and Biomanufacturing Initiative (NBBI). According to the fact sheet, HHS intends to “leverage biotechnology and biomanufacturing in order to achieve medical breakthroughs, reduce the overall burden of disease, and improve health outcomes.” As part of the NBBI, HHS will:

- “[s]upport development of Food and Drug Administration (FDA) research programs for advanced manufacturing technologies, in the Center for Drug Evaluation and Research (CDER) and the Center for Biologics Evaluation and Research (CBER), fueling multiple intramural and extramural research projects (e.g., smart data analytics and novel process analytic technology for bioprocessing, and continuous manufacturing of biological products) to build a knowledge base in support of regulatory assessment, as well as scientific standard, guidance, and policy development;
- [c]ontinue to innovate treatments using pilots such as the National Centers for Advancing Translational Sciences Platform Vector Gene Therapy (PaVe-GT) pilot program which is testing whether it is practical to use the same gene delivery system and manufacturing methods for multiple rare diseases in gene therapy clinical trial. The results from PaVe-GT will be made publicly available and can therefore be used to benefit subsequent adeno-associated virus gene therapy efforts;
- [e]xpand cell engineering capabilities and platforms, and establish synthetic biology approaches through programs such as the Biopharmaceutical Development Program at the Frederick National Lab which is developing a new cell line to treat acute myeloid leukemia, a particularly aggressive form of pediatric blood cancer; [and]
- [w]ill launch a Biosafety and Biosecurity Innovation Initiative, in collaboration with the National Institutes of Health, to reduce risk associated with advances in biotechnology, biomanufacturing, and the bioeconomy. Along with other agencies that fund life sciences research, HHS will prioritize investments in applied biosafety and biosecurity innovation and use federal investments to incentivize and enhance biosafety and biosecurity practices throughout the United States and its partners abroad from biological incidents, whether naturally occurring, accidental, or deliberate in origin. HHS will build the U.S. innovation base for cutting-edge countermeasures, diagnostics, and biosurveillance information technologies, and advance the biomedical industries’ biodefense capabilities consistent with the Bioeconomy Executive Order.”

(Source: HHS NBBI [Fact Sheet](#), 9/14/22) 💧

PEOPLE



San Diego Blood Bank has named **Bryan Eleazar, MBA, CPA** chief financial officer. According to a blood center announcement, Mr. Eleazar “has over 20 years of diversified finance experience, with the last 13 in private equity-backed multi-site healthcare services including ophthalmology, hospice and home health, and medical labs. [He] started in healthcare as controller at Pathology, Inc., where he was part of the team that extended the company’s reach beyond anatomic pathology into clinical pathology, doubling revenue through a period of severe Medicare reimbursement cuts, shepherding its sale and integration into Laboratory Corporation of America. [Mr. Eleazar has also] held positions of increasing responsibility

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PEOPLE (continued from page 5)

on the finance side of other medical specialties, most recently serving as chief financial officer of American Eye Associates, expanding that company's geographical footprint during its rebranding from California Retina into a full service eyecare practice...Prior to healthcare services, he had diversified technical accounting exposure working at top financial consulting firms, specializing in insolvency, and restructuring as well as dispute analysis and investigations. [Mr. Eleazar began his accounting and finance career at PricewaterhouseCoopers in New York, N.Y., San Diego, Calif., and Los Angeles, Calif. spanning both Audit and Advisory service lines. He graduated with honors from Georgetown University with a Bachelor of Science degree in accounting and a minor in Classics and continues as an alumni interviewer after serving on the Admissions Committee as an undergraduate. He earned his Master's in Business Administration with a focus in Marketing and Strategy from The Anderson School at UCLA. Mr. Eleazar received his Certified Public Accountancy license from the State of New York in 1998.]

(Source: San Diego Blood Bank Announcement, 9/22/22) 💧

MEMBER NEWS

Representatives from **The Blood Connection** recently participated in a roundtable discussion with U.S. Department of Health and Human Services (HHS) Assistant Secretary for Health Admiral Rachel Levine, MD on September 20th. The roundtable also included the American Red Cross, physicians and staff from various North Carolina hospitals, sickle cell disease advocates, and North Carolina State Department of Health officials. The discussion focused on blood donation, sickle cell disease, and related issues. Topics included diversity in the blood supply, challenges faced during the pandemic, and the blood supply in general. Many [participants] brought up how staff and labor shortages, persistent supply chain constraints, and lingering COVID-19 struggles continue to impact blood centers and hospital blood banks, creating a domino effect that [impacts] hospital patient care. Other discussion centered around engaging the younger generation to become committed blood donors, creating a nationwide sickle cell antibody database available for healthcare providers, and engaging and educating minority populations. The Blood Connection is honored to have been invited to participate in this important discussion highlighting factors impacting the blood supply and looks forward to future actions and outcomes that will improve and stabilize the blood supply.



Photo courtesy of The Blood Connection

(Source: The Blood Connection Announcement, 9/21/22)

Contributed by Ellen Kirtner, Partnerships and Media Coordinator at The Blood Connection



Versiti Blood Center of Wisconsin is [celebrating](#) its 75th anniversary this year. As part of the celebration, the blood center partnered with "its founding institution, the Junior League of Milwaukee, to host an anniversary blood drive on August 27th." Erin Donegan, president-elect of the Junior League of Milwaukee, added in a news release, "[i]n 1947, the Junior League of Milwaukee founded the blood center to deliver blood from donors to patients. 75 years later, our partnership with Versiti remains strong and core to our mission to support our community to create a healthier, more vital place to live."

(Source: Versiti Blood Center of Wisconsin [News Release](#), 8/19/22) 💧



Abbott

**UNLOCKING
POSSIBILITIES**

At Abbott, we believe that blood and plasma donation puts the power of saving lives and better health into the hands of everyone.

Explore how you can unlock the possibilities of your organization with Abbott's personalized solutions, purpose-built for transfusion medicine, at the **2022 AABB Annual Meeting**.

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GLOBAL NEWS

Magen David Adom (MDA), Israel's national blood provider, has published a [tender](#) “for the leasing and operating of the fractionation institute located at the Blood Bank Compound at the Tel HaShomer Hospital.” The [announcement](#) of the tender from MDA states that “[t]he tender aims to identify an external entity that shall operate the fractionation institute which shall manufacture the IVIg product, the [d]rug [s]ubstance, as well as other products.” Bid submissions are due on November 20th. A bidder convention for clarifications and additional information will take place via [Zoom](#) on September 28th. Please contact [Tomer Elbaz](#) with questions and requests for additional information.

(Source: MDA [Tender](#), 9/15/22)



Photo courtesy of Who is Hussain

Who is Hussain [announced](#) this week that its “Global Blood Heroes” campaign has set a world record for most blood donations in one calendar day. According to the news release, the campaign spanned 27 countries and more than 350 collection sites, including several member blood centers of America’s Blood Centers, resulting in 37,018 blood donations being made. The record has been “authenticated” by the Official World Records as the “campaign saw large numbers of first-time donors take part; with 50 percent of donations in Canada and 25 percent in the United Kingdom coming from those giving blood for the very first time.” Muntazir Rai, director of Who is Hussain, added in the news release, “[t]he pandemic hit blood reserves across the world hard. With hospitals struggling to meet demands, Who is Hussain volunteers rallied together and launched our Global Blood Heroes campaign. Donating blood is a universal act of compassion that can unite people all around the world — we all bleed

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GLOBAL NEWS (continued from page 7)

the same. We're so excited that so many first-time donors came forward and many have committed to donating again, and will continue to, hopefully, for years to come."

(Source: Who is Hussain [News Release](#), 9/17/22)

A report from Reuters [states](#) that the World Health Organization (WHO) “no longer” recommends monoclonal antibody treatments developed by Regeneron and GlaxoSmithKline for the treatment of COVID-19 due to the lack of effectiveness of therapies against the Omicron variant and its offshoots. According to the publication, due to the evolution of SARS-CoV-2 “mounting evidence from lab tests suggests the two therapies have limited clinical activity against the latest iterations of the virus. As a result, they have also fallen out of fav[or] with the U.S. health regulator...Back in January, the FDA revised its stance on the treatment, limiting its use to a smaller group of patients, citing its diminished potency against the Omicron variant. Both therapies continue to be recommended for use by the European drugs regulator.”

(Source: Reuters, “[WHO ‘strongly advises against’ use of two COVID treatments](#), 9/15/22) 💧

COMPANY NEWS

Excision BioTherapeutics has [dosed](#) the first participant in a phase I/II clinical trial of the company’s *in vivo* CRISPR-based therapy “designed to cure HIV infections after a single intravenous infusion.” According to a company news release, “the participant was dosed in July 2022, with initial findings indicating [the therapy] has been well tolerated to-date. The participant continues to be monitored for safety and is expected to qualify for analytical treatment interruption (ATI) of their background anti-retroviral therapy (ART) in an evaluation of a potential cure...[The therapy] employs an adeno-associated virus (AAV) to deliver CRISPR-Cas9 and dual guide RNAs, enabling a multiplex editing approach that simultaneously targets three distinct sites within the HIV genome. This allows for the excision of large portions of the HIV genome, thereby minimizing potential viral escape.”

(Source: Excision BioTherapeutics [News Release](#), 9/15/22)

CSL Behring recently [announced](#) that its investigational gene therapy to treat hemophilia B has received the “Orphan Drug Designation from the Therapeutic Goods Administration (TGA), the regulatory body in Australia for blood products, therapeutics, and medical devices. This designation “is reserved for health technologies involved in treatment, prevention or diagnosis of a life-threatening or seriously debilitating and rare disorder, and which provide a significant benefit in efficacy, safety, or patient care compared to current treatments,” according to a news release from the company. CSL Behring anticipates “prepar[ing] a market authorization application for submission to the TGA, seeking review for market registration approval.”

(Source: CSL Behring [News Release](#), 9/8/22) 💧

ABC Calendar of Events

ABC offers a variety of meetings, workshops and virtual opportunities for education and networking as well as participation in ABC business. The [calendar of events](#) includes annual and summer meetings, board meetings, workshops, and webinars, and details will be updated as confirmed. We look forward to your support and participation!



CALENDAR

Note to subscribers: Submissions for a free listing in this calendar (published weekly) are welcome. Send information to newsletter@americasblood.org. (For a more detailed announcement in the weekly "Meetings" section of the newsletter, please include program information.)

2022

Sept. 28-29. **2022 ADRP Master Class (Virtual)**. Registration is [open](#).

Sept. 28-29. **BEST Meeting LXIV, Cocoa Beach, Fla.** More information available [here](#).

Oct. 1-4. **Association for the Advancement of Blood & Biotherapies Annual Meeting, Orlando, Fla.** Registration is [open](#). More information available [here](#).

Oct. 4-5. **U.S. Department of Health and Human Services (HHS) Tick-Borne Disease Working Group Meeting (Virtual)**. More information available [here](#).

Oct. 25. **(HHS) Tick-Borne Disease Working Group Meeting (Virtual)**. More information available [here](#).

Nov. 15-16. **The Biomedical Advanced Research and Development Authority (BARDA) Industry Day (Virtual)**. More details available [here](#).

Dec. 7. **(HHS) Tick-Borne Disease Working Group Meeting (Virtual)**. More information available [here](#).

2023

Mar. 6-8. **ABC Annual Meeting, Washington, D.C.** More information coming soon.

April. 24-28. **ABC Blood Center Advocacy Week**. More information coming soon.

May 9-11. **2023 ADRP Conference, Charlotte, N.C.** More information coming soon.

Sept. 17-20. **American Association of Tissue Banks Annual Meeting, National Harbor, Md.** More information available [here](#). 💧

Upcoming ABC and ADRP Webinars – Don't Miss Out!

- **ADRP vCJD Implementation – Soup to Nuts Webinar** – October 12 from 1-2 PM EDT. [Registration](#) is open.



America's Blood Centers®
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We Welcome Your Letters

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



EQUIPMENT AVAILABLE

For Sale. New and Unused CompoMat G5 Units. The Blood Bank of Alaska has three new and unused CompoMat G5 Units for sale. These units have not been validated or used. If interested, please contact Bryan Baynard at bbaynard@bbak.org or (907) 222-5664.

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

Executive Director of Business and Administration/Chief Financial Officer (Hoxworth Blood Center). As one of the oldest medical schools in the country, the University of Cincinnati College of Medicine (COM) has a reputation for training best-in-class health care professionals and developing cutting-edge procedures and research that improves the health and clinical care of patients. Hoxworth Blood Center (HBC) is located within the College of Medicine and is the only Regional Blood Center owned and operated by a University in United States. The University of Cincinnati, College of Medicine is seeking an Executive Director of Business and Administration/CFO for Hoxworth Blood Center. This position will direct the financial and administrative activities including income generation and expense management and will function as the most senior-level financial and administrative officer. This includes tactical and strategic planning, fiscal management, annual budget development, personnel management, program development, and other administrative matters. Required Education: Bachelor's Degree in Business or related field. Required Experience: Seven (7) years of relevant work experience. Additional Qualifications Considered: MBA; Experience in a blood center, medical school, university, research organization and/or healthcare organization is desired. If interested, please apply at: <https://bit.ly/3QXm2kE>. **The University of Cincinnati is an Affirmative Action / Equal Opportunity Employer / Minority / Female / Disability / Veteran.**

Quality Assurance Specialist. SunCoast Blood Centers is looking for a QA Specialist in Sarasota, FL. This position conducts internal audits and ensures follow-up correction action occurs. The QA Specialist coordinates and performs product lookback activities, including monitoring of daily quarantine reports. The role also requires leading annual staff trainings, document management, writing or revising SOPs, maintaining Error Management and Donor Adverse Reaction databases, follow-up investigations, and performing validations prior to implementation of new processes, equipment, or software version updates. We offer a generous benefits package

including medical as well as employer paid dental and vision benefits, 401(k) with 100% company match, yearly increases, education reimbursement and so much more! Join our team and help make an impact in your community today! Click [here](#) to apply.

Director of Marketing & Communications (Shreveport, LA). LifeShare Blood Center is seeking a skilled Marketing and Communications Director to provide leadership and direction to our marketing, branding and community engagement team. Reporting to the Executive Director of Blood Operations, the Director will develop and direct effective strategies and campaigns to recruit and influence blood donors; develop and execute a clear public relations strategy and tactical plan to aggressively build brand awareness in traditional and non-traditional venues; oversee production of marketing materials; and develop and maintain strong media relations in all of LifeShare's operating regions. LifeShare offers a competitive beginning salary, commensurate with experience and a generous benefits package, including employer paid medical, life and disability insurance; 401(k) with employer contributions; employee wellness program; and paid time off. Please visit our [Careers Page](#) to apply.

Executive Director, Blood Operations (Shreveport, LA). LifeShare Blood Center is seeking an experienced operations manager as our **Executive Director** to provide leadership and strategically direct all blood operations and donor support operations, in fulfillment of the Company's strategic goals and business plan. Reporting to the Chief Operating Officer, the Executive Director will strategically lead LifeShare's community outreach, branding, marketing, and blood donor recruitment efforts; provide high-level direction of blood collection operations; and provide oversight of hospital services and component manufacturing to meet customer needs. **Please join us in our important mission to connect blood donors and the lives they impact!** LifeShare offers a competitive beginning salary, commensurate with experience and a generous benefits package, including employer-paid medical, life and disability insurance; employer base retirement and matching contributions to the

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POSITIONS (continued from page 10)

401(k) savings plan, paid time off bank, and employee wellness program. Please visit our [Careers Page](#) to apply.

Director, Regulatory Affairs and Public Policy. America's Blood Centers (ABC), North America's largest network of community-based, independent blood programs, is seeking a **Director, Regulatory Affairs and Public Policy**. The position is a key role for ABC and will provide the successful candidate an opportunity to lead a strategic area of work while benefitting from the flexibility of a fully remote office environment. The Director, Regulatory Affairs and Public Policy will assist in the development, implementation, execution, and advancement of the ABC Advocacy Agenda before federal agencies and other stakeholders. Responsibilities: Analyze, evaluate, communicate, and track the impact of new regulatory and science, medical, technical (SMT) developments on ABC member centers, including working with members and staff in the development of policy positions, public statements, and comment letters and responses to information requests from federal agencies. Build strategic relationships as a liaison with appropriate staff at FDA and other federal agencies as necessary (including HHS, OSHA, DOL, NCR, CDC, DOD, and others), and non-governmental industry partners. Serve as an ABC representative and spokesperson to industry coalitions. Conduct routine operational and ad hoc member surveys that support the ABC Advocacy Agenda. Work includes the creation of survey forms and protocols, analysis of data, and preparation and dissemination of reports. Educational Requirements: Bachelor's required. Experience, Knowledge, Skills and Abilities: Seven plus years of experience with public policy and regulatory affairs, preferably with FDA. Click [here](#) to view the full job description. Interested applicants should send a cover letter and resume to careers@americasblood.org.

Territory Representative. Dedicated team members are the vital link between volunteer blood donors and hospital patients who rely on lifesaving blood transfusions and work diligently to ensure their friends, families, hospitals have access to a strong blood supply. LifeServe Blood Center's foundation is based on local blood donors supporting the needs of their local hospitals. F/T employees are eligible for medical, dental, vision, critical illness, supplemental insurance, short/long-term disability, life insurance, 403b and four weeks of PTO. Primary Responsibilities: Recruit, direct, and train volunteers to organize drives. Establish sales strategies to grow donor base. Coordinate resources associated with blood drives to ensure success. Conduct speaking engagements and participates in workshops/presentations/health fairs. Proactively works to meet individual monthly goals while also working collaboratively with the team to ensure weekly, monthly, and yearly blood goals are met. Follow all guidelines for completion of recruiting materials and

scheduling mobile drives. Maintaining accurate records to provide tracking and statistical data on account performance. Education and/or Experience: Bachelor's degree in business, marketing, advertising, or communications is preferred. H.S. diploma and five plus years of recruitment, sales, marketing, volunteer management required. Interested applicants should apply at: [Join Our Team - LifeServe Blood Center](#).

Immunohematology Technician. LifeServe Blood Center is currently looking for a certified Medical Technician with the desire to provide exceptional customer service to our hospital partners and the patients they serve in IA, NE, and SD. Work in our state-of-the-art laboratory and will handle basic blood banking and complex antibody identification. F/T employees are eligible for a full benefit package including medical, dental, vision, critical illness, supplemental insurance, short/long term disability, life, company matching 403b, and four weeks of PTO. Shift differential is available for hours worked after 6:00 PM. Primary Responsibilities: Accepts, verifies, processes, and tests samples according to policies. Performs and interprets various testing procedures, including immunohematology, on donor and patient blood products. Performs quality control, maintenance, and calibration. Utilizes computers to obtain necessary data and to record test results. Monitoring testing processes to identify errors or problems leading to errors and takes effective and preventive corrective actions when indicated. Mentors and trains other laboratory team members and students. Education and Experience: MT/MLS or MLT from ASCP 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. Meet current CLIA or ABB requirements for testing personnel. Interested applicants should apply at: [Join Our Team - LifeServe Blood Center](#).

Manager of Technical Services. The Blood Connection is looking for a Manager of Technical Services in Morrisville, NC. This is a new role that will be responsible for supervising and managing the daily operations of the technical departments: Hospital Services, Component Manufacturing/Biologics Processing and Immunohematology Reference Laboratory. We offer a generous benefits package including a great 401k match, tuition reimbursement, yearly increases, company bonus, cell phone stipend, and 30 days PTO. Join our team and help make an impact in your community today! Relocation assistance offered. Click [here](#) to apply.

Medical Director (Gulf Coast Regional Blood Center). Reporting to the Chief Medical Officer, this individual

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POSITIONS (continued from page 11)

will assist in providing oversight of operational and implementation expertise across multiple areas of a large community blood center. Areas of responsibility include medical oversight of selection and care of donors, collection, processing, and testing of blood, and disease notification. In addition, this individual will provide guidance for The Blood Center's transfusion service activities and cellular therapy programs, as well as serving as a liaison with medical staff in the community to address transfusion concerns and assure the appropriate utilization of blood products. Requirements: Doctor of Medicine or Doctor of Osteopathy degree from an accredited university with at least four years of combined education and experience in blood banking/transfusion medicine or related field. Board certified or board-eligible in Pathology, Hematology, or related field. Specialty training and/or certification in Blood Banking, Hematology, or a similar related field is highly desirable. Eligible for medical license in the state of Texas. Applicants with additional medical or management experience in apheresis related to cellular therapy and transplant are strongly encouraged to apply. Click [here](#) to apply.

Donor Testing Laboratory Director. LifeSouth Community Blood Centers and The National Blood Testing Cooperative (NBTC) are currently seeking a skilled individual for the Donor Testing Laboratory Director position in the NBTC owned 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. Must have bachelor's degree in: chemical, physical, biological, clinical laboratory science, or medical technology. Scientific and technical knowledge from current sources, such as the AABB Standards and relevant guidances related to FDA, CLIA, and CMS, both state and federal. Minimum of four years of management/supervisory experience required; Equivalent combination of demonstrated work experience and education may be considered. Starting salary range is \$135,000 - \$150,000 annually. Click [here](#) to apply. 💧