



# ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

Visit ABC's Web site at: [www.americasblood.org](http://www.americasblood.org)

2022 #1

January 13, 2023

## INSIDE:

Review of Evidence for COVID-19 Convalescent Plasma (CCP) to Treat Immunocompromised Patients .....	2
HHS Promotes Blood Donation for NBDM .....	3
RECENT REVIEWS .....	4
REGULATORY NEWS .....	4
ABC & ADRP NBDM Webinar Series: "Building an Engaged Donor Base" .....	5
Call for ABC Committee Nominations Opens .....	5
WORD IN WASHINGTON .....	6
BRIEFLY NOTED .....	6
MEMBER NEWS .....	6
COMPANY NEWS .....	7
Upcoming ABC Webinars – Don't Miss Out! .....	7
CALENDAR .....	7
POSITIONS .....	8

## OIRA Reviewing FDA Draft Guidance on Shift to Individual Risk-based Deferrals

The White House Office of Information and Regulatory Affairs (OIRA) has received a draft guidance [submission](#) from the U.S. Food and Drug Administration (FDA) titled "Recommendations for Evaluating Donor Eligibility Using Individual Risk-Based Questions to Reduce the Risk for HIV Transmission by Blood and Blood Products." [OIRA](#) is the federal government's "central authority for the review of Executive Branch regulations, approval of Government information collections, establishment of Government statistical practices, and coordination of federal privacy policy." It obtained the FDA draft guidance on January 5<sup>th</sup>. Currently there is no estimate for how long the review of the draft guidance will take.

The Association for the Advancement of Blood & Biotherapies (AABB) [announced](#) last month that its Donor History Task Force had "proactively developed and submitted" a [draft](#) Individual Risk Assessment Donor History Questionnaire Example Model" to FDA based on Canada's implementation of an individual risk-based deferral policy. The AABB model aimed to:

- "develop an example model demonstrating one of several approaches that FDA is likely considering as new data from the [Assessing Donor Variability And New Concepts in Eligibility \(ADVANCE\) Study](#) is under review;
- to prepare the Donor History Task Force as much as possible before the release of new recommendations via FDA guidance;
- to help FDA and our community visualize the implementation of an individual risk assessment system of documents using Canada's eligibility criteria;
- to provide validation of test cases demonstrating a safe and effective individual risk assessment approach based on how Canada's eligibility criteria might be used; [and]
- to continue our long-standing commitment to support the transition to an evidence-based approach for IRA that continues to protect the safety of the blood supply."

This news comes in the wake of the November 2022 [report](#) from the *Wall Street Journal* that the FDA was developing a guidance that would potentially allow more sexually active gay and bisexual males to donate blood without the current three-month deferral period. America's Blood Centers (ABC) [continues](#) to strongly support a safe and available blood supply that treats all potential donors with fairness,

(continued on page 2)

## OIRA Reviews FDA Draft Guidance on Shift to Individual Risk-based Deferrals (continued from page 1)

equality, and respect. ABC previously supported the FDA change in 2020 that reduced the donor deferral period from 12 to three months for sexually active gay and bisexual men and the data collection efforts of the ADVANCE study as a potential pathway to the establishment of donor-screening based on individual risk behaviors, not sexual or gender identity. ABC maintains that the use of rational, science-based deferral periods must be applied fairly and consistently among all blood donors.

(Sources: FDA [Submission](#) to OIRA, 1/5/23; AABB “[Individual Risk Assessment Donor History Questionnaire Example Model](#),” 12/21/22; *Wall Street Journal*, [FDA Plans to Allow More Gay, Bisexual Men to Donate Blood](#), 11/30/22) 💧

## **Review of Evidence for COVID-19 Convalescent Plasma (CCP) to Treat Immunocompromised Patients**

A systematic review and meta-analysis have been [published](#) in *JAMA Network Open* examining the increased reports of “clinical experiences of patients with COVID-19 who are immunocompromised and treated with specific neutralizing antibodies via CCP.” The authors conducted a review of literature using recommendations from the *Cochrane Handbook for Systematic Review of Interventions* and described their findings “according to the Preferred Reporting Items for Systematic Reviews and Meta-analyses (PRISMA) reporting guideline.”

The review aimed to assess “the impact” of CCP “on COVID-19 mortality in [immunocompromised] patients.” Studies that took place between January 2020 and August 2022 were included. “Eligible patients had primary or secondary immunosuppression with a confirmed diagnosis of COVID-19. The intervention investigated was transfusion with [CCP] of any dosage. The control group was treated with standard of care according to local treatment guidelines, with or without a placebo. Eligible studies reported information on patients’ clinical outcomes after transfusion with [CCP].”

(continued on page 3)



The *ABC Newsletter* (ISSN #1092-0412) is published by America’s Blood Centers® and distributed by e-mail. Contents and views expressed are not official statements of ABC or its Board of Directors. Copyright 2023 by America’s Blood Centers. Reproduction of the *ABC Newsletter* is forbidden unless permission is granted by the publisher. (ABC members need not obtain prior permission if proper credit is given.)

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**

Chief Executive Officer: Kate Fry

Chief Medical Officer: Rita Reik

Editor: Mack Benton

Subscriptions Manager: Leslie Maundy

**Annual Subscription Rate: \$390**

Send subscription queries to

[memberservices@americasblood.org](mailto:memberservices@americasblood.org)

America’s Blood Centers

1717 K St. NW, Suite 900, Washington, DC 20006

Phone: (202) 393-5725

Send news tips to [newsletter@americasblood.org](mailto:newsletter@americasblood.org).



### CCP Review (continued from page 2)

The authors stated that “three randomized clinical trials (RCTs) enrolling 214 participants and five matched cohort studies enrolling 1,560 participants were included in the meta-analysis. Descriptive and exploratory analyses were performed on uncontrolled studies...The mean (SD) number CCP units transfused per patient was 2.3 (1.7), while the mean cumulative CCP volume transfused per patient was 460 ml (372 mL).” They noted that “[u]nfortunately, it was not possible to calculate the mean neutralizing antibody titer or to correlate the patients’ outcome with neutralizing antibody titers due to the wide heterogeneity of tests used (virus neutralization or high-throughput serology). No severe adverse reactions to CCP were reported. The median (range) time between symptom onset and CCP therapy was 17 (1 to 132) days, while the median (range) time between hospital admission and CCP therapy was 11 days (0 to 120).”

The review concluded that “[t]he hypothesis of a significant beneficial effect of CCP on mortality in patients who are immunocompromised cannot be definitively demonstrated with the present data, but very strong elements support its efficacy. The efficacy of antibody-based therapies for immunocompetent individuals is predicated on early administration with sufficient dosage. This principle was validated by the experience of CCP...The efficacy of CCP in patients who are immunocompromised and had reported symptoms for weeks or months paves the way to the hypothesis that CCP retains clinical efficacy until the recipient is seronegative and there is no irreversible parenchymal damage...While most studies reported in this systematic review used CCP from unvaccinated donors (with a few exceptions), it is noteworthy that Vax-Plasma is now widely available from regular donors and retains higher neutralizing antibody titers and efficacy against most SARS-CoV-2 variants.”

**Citation:** Senefeld, J.W., Franchini, M., Mengoli, C., *et al.* [COVID-19 convalescent plasma for the treatment of immunocompromised patients: A systematic review and meta-analysis](#). *JAMA Network Open*. 2023. 💧

### HHS Promotes Blood Donation for NBDM

U.S. Department of Health and Human Services (HHS) Assistant Secretary for Health (ASH) Admiral Rachel Levine, MD [encouraged](#) eligible individuals to schedule an appointment to donate blood as a part of a January 11<sup>th</sup> blog post recognizing National Blood Donor Month (NBDM). In this post, Admiral Levine stated “[t]here is no substitute for blood, so in honor of National Blood Donor Month this January, I hope you will join me in spreading the word about the importance of blood donation...If you are [eligible to donate blood](#), then I encourage you to make an appointment to donate today — then donate again and again to ensure there is a steady, ongoing supply to help those in need. Visit the [Giving = Living website](#) to [find a donation center](#) near you...If you are not eligible to donate blood, then there are still many ways to help. You can help us find more blood donor heroes by promoting the campaign. From hosting a blood drive to sharing [campaign materials](#) on your social media feed or in your community, there are many ways we can all be involved. Let’s celebrate the lifesaving act of giving blood. The more donors there are, the more lives we can save.” The blog post also includes two videos that feature patient stories.

(Source: HHS Blog, [Giving Blood Saves Lives](#), 1/11/23) 💧





## RECENT REVIEWS

**Not as “D”eadly as Once Thought.** A [review](#) in *Hematology* studied “the latest evidence on rates of D-alloimmunization and [the] potential for adverse fetal/neonatal outcomes from hemolytic disease of the fetus and newborn (HDFN) if an RhD-negative female of childbearing potential (FCP) is transfused with RhD-positive red blood cells (RBCs) during trauma resuscitation.” The authors explained that one of the “consequences of D-alloimmunization” is that “[t]he patient could experience HDFN during a subsequent pregnancy...[T]he cumulative risk of a FCP experiencing fetal harm or loss due to anti-D that was stimulated by the transfusion of RhD-positive RBCs during her trauma resuscitation was calculated...If other adverse fetal/neonatal events, such as requiring an intrauterine transfusion or neonatal exchange transfusion, are considered along with fetal demise, the risk [is] two percent.” Their review noted that “[a] model [of] the London air ambulance predicted that the receipt of RhD-positive RBCs would be expected to cause 0.13 fetal/neonatal major morbidity events and 0.18 fetal/neonatal mortality events in the future due to HDFN caused by D-alloimmunization during the resuscitation...The overall rates of HDFN have been modeled to range between 0 for the youngest patients to a maximum of approximately 6.5 percent for those who are between 18–20 years [of age]...A recent survey of adult American Level I trauma centers found that 22/43 (51 percent) transfuse low titer group O whole blood (LTOWB) to their injured patients [and they] would administer RhD-positive LTOWB to FCPs who are either RhD-negative or RhD type unknown...A survey of women in and around the St. Louis, Mo. metropolitan area presented the participants with two different sets of probabilities following an emergency transfusion: a fixed rate of fetal harm of 0.3–4.0 percent and an absolute risk reduction in her mortality should she receive a transfusion during her trauma resuscitation...When the absolute risk reduction of her mortality was given as four percent, which was equivalent to the upper limit of a risk occurring to a future fetus, the transfusion acceptance rate [was] 90 percent.” The authors concluded that “it is clear that the general public values their own survival over the highly manageable risks that might occur following an RhD-positive RBC transfusion.”

**Citation:** Yazer, M.H., Panko, G., Holcomb, J.B., Kaplan, A., Leeper, C., Seheult, J.N., *et al.* [Not as “D”eadly as once thought – the risk of D-alloimmunization and hemolytic disease of the fetus and newborn following RhD-positive transfusion in trauma.](#) *Hematology*. 2023.

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

## REGULATORY NEWS

**According to *Inside Health Policy*, the U.S. Food and Drug Administration (FDA) has added a proposed [rule](#) to its regulatory agenda for this fiscal year titled “Requirements for Requesting Records in Advance of or in Lieu of an Inspection, and Participation in a Remote Interactive Evaluation, of an Establishment that Manufactures Certain [Human cells, tissues, and cellular and tissue-based products] (HCT/Ps).”** The proposed rule states that since, “HCT/Ps that are regulated solely under section 361 of the Public Health Service Act (PHS Act) [42 U.S.C. 264] and the regulations in 21 CFR part 1271 (361 HCT/Ps) are not regulated as drugs under the Federal Food, Drug, and Cosmetic Act (FD&C Act), [the FDA’s] statutory authority under section 704(a)(4) of the FD&C Act to request records or other information in advance of or in lieu of a drug establishment inspection does not apply to these products.” Thus, the FDA can request voluntary record submission “in advance or in lieu of an inspection for 361 HCT/Ps but cannot require that HCT/P establishments provide such records.” The proposed rule would “establish requirements for the submission of records or other information to FDA upon request, in advance of or in lieu of an inspection of establishments that manufacture 361 HCT/Ps and require the participation in a remote interactive evaluation of such establishments, upon request by FDA.”

(Source: *Inside Health Policy*, [FDA Proposed Rule](#), 1/9/23) 💧



**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.*

### **ABC & ADRP NBDM Webinar Series: “Building an Engaged Donor Base”**

[Register](#) today for the Wednesday, January 25<sup>th</sup> and Wednesday, February 1<sup>st</sup> America's Blood Centers (ABC) & ADRP National Blood Donor Month (NBDM) Webinar Series titled “Building an Engaged Donor Base.” These webinars will take place at 1 p.m. EST on their respective dates. Featured speakers include representatives from the U.S. Department of Health and Human Services (HHS), the Georgia Health Alliance, and HOSA-Future Health Professionals. The webinar series aims to bring together a variety of stakeholders to discuss the latest efforts to recruit and retain a younger more diverse base of blood donors.

(Source: ADRP [Announcement](#), 1/4/23)

### **Call for ABC Committee Nominations Opens**

ABC is encouraging all individuals who work at ABC member blood centers to volunteer to serve on an ABC Committee to assist in guiding the association's work on accomplishing the goals of the ABC [Strategic Plan](#). Interested individuals are invited to submit their committee nominations by completing the online [sign-up form](#) by Tuesday, January 31<sup>st</sup>. ABC and its Board of Directors rely on staff volunteers from member blood centers to do much of the great work that is accomplished by the association.

All current membership of the committees will sunset on March 31<sup>st</sup>. A list of committees is provided below:

- Bylaws Committee
- Communications & Partnerships Committee (*New*)
- Membership Committee
- Public Policy Council
- Quality Committee
  - Education Subcommittee
  - Blood & HCT/P Regulatory Review Subcommittee
- Scientific, Medical, Technical Committee (SMT)
  - SMT Journal Club
  - SMT Publications Subcommittee (*Blood Bulletin*)

Please review the [descriptions](#) of the committees to determine your interest in serving on a particular committee. Selection notifications will be sent in early March. Thank you for your time, consideration, and commitment to helping ABC achieve excellence. Please feel free to contact [us](#) with any questions.

(Source: MCN 23-004, 1/11/23) 💧



## WORD IN WASHINGTON

**U.S. Department of Health and Human Services (HHS) Secretary Xavier Becerra, JD has [extended](#) the COVID-19 public health emergency (PHE) effective January 11<sup>th</sup>, 2023.** The PHE began in January 2020 and has been extended in 90-day increments as required by law. It allows several pandemic response measures and flexibility to continue. This includes multiple donor deferral changes made by the U.S. Food Administration (FDA) early in the pandemic, such as reducing blood donor deferral for sexually active gay and bisexual men to three months, which are currently in effect until 60 days after the end of the PHE. HHS has committed to providing no less than 60 days of notice prior to terminating the PHE declaration.

(Source: HHS COVID-19 PHE [Renewal](#), 1/11/23) ◆

## BRIEFLY NOTED

**The Centers for Medicare and Medicaid Services (CMS) has [published](#) the “2021 National Health Expenditures (NHE) Report.”** According to its findings, “U.S. health care spending grew 2.7 percent to reach \$4.3 trillion in 2021, slower than the increase of 10.3 percent in 2020. The slower growth in 2021 was driven by a 3.5 percent decline in federal government expenditures for health care that followed strong growth in 2020 due to the COVID-19 pandemic response. This decline more than offset the impact of greater use of health care goods and services and increased insurance coverage in 2021.” The annual report is “often referred to as the ‘official’ estimate of U.S. health spending. The NHE measures total annual U.S. spending for the delivery of health care goods and services by type of good or service (hospital, physician, prescription drugs, etc.); type of payer (private health insurance, Medicare, Medicaid, etc.); and type of sponsor (businesses, households, and federal/state governments). The [report] also includes spending on government public health, investment in structures and equipment, and non-commercial research, as well as information on insurance enrollment and uninsured estimates.”

(Source: CMS News [Release](#), 12/14/22)

**The National Heart, Lung, and Blood Institute (NHLBI) of the National Institutes of Health (NIH) announced that it has [updated](#) the *Blood Health Network Partner Toolkit*.** The resources contained within the toolkit are designed to assist individuals with learning more about blood donation, diseases, disorders, and safety.

(Source: Blood Health Network [Toolkit](#), 1/9/23) ◆

## MEMBER NEWS

The Dallas County Commissioners Court recently “passed a [resolution](#) recognizing January as National Blood Donor Month and honoring **Carter BloodCare**.” The resolution “was presented by Dallas County Commissioner Dr. Elba Garcia and read into the record at the court’s public meeting Tuesday, January 10<sup>th</sup>.” Dr. Garcia is a “longtime blood donation advocate and Carter BloodCare donor [and] noted that January is typically a difficult season for blood collection and a time for all eligible donors to support the community. ‘Donating blood is a matter that unites us all as human beings from coast-to-coast. We encourage donors from all diverse communities to donate. This will ensure an abundance of supply ready for all patients and the certainty that there will always be compatible blood product for all circumstances. Timely access to safe blood and blood products is essential.’”



(Source: Carter BloodCare [Announcement](#), 1/10/23) ◆



## COMPANY NEWS

**Abbott and Blood Centers of America, Inc. (BCA)** have [partnered](#) to “unveil an innovative new mixed reality experience for use during blood donation.” According to news release from Abbott, the “mixed reality technology is an immersive digital experience designed to improve the blood donation process, attract new donors, and motivate a younger generation to give blood. The effort intends to address the global challenge of sustaining a reliable blood supply...The mixed reality experience allows blood donation professionals to safely conduct the donation and interact with donors at every step of the process. Donors’ eyes are always visible during donation to ensure constant monitoring and evaluation. Participants wear lightweight mixed reality headsets to enter a digital world but remain fully aware of their surroundings, ensuring a seamless, convenient, and safe donation...The mixed reality experience was designed based on research that natural settings are the most preferred environment as donors give blood. Participants visit a whimsical garden while listening to soothing music, planting seeds that grow into colorful trees and flowers. The experience is currently being piloted on a limited basis at select BCA locations nationwide.”

(Source: Abbott [News Release](#), 1/6/23) 💧

### Upcoming ABC Webinars – Don’t Miss Out!

- **ABC & ADRP National Blood Donor Month Webinar Series: Building an Engaged Donor Base (Part I)** – January 25 from 1-2 PM EST. [Registration](#) is open. More information is available [here](#).
- **ABC & ADRP National Blood Donor Month Webinar Series: Building an Engaged Donor Base (Part II)** – February 1 from 1-2 PM EST. [Registration](#) is open. More information is available [here](#).
- **ABC Webinar: Veteran’s Employment** – February 9 from 2-3 PM EST. More information coming soon.
- **ABC Scientific, Medical, and Technical Committee Journal Club Webinar** – March 29 from 3-4 PM EDT. More information coming soon.



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



## 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). (For a more detailed announcement in the weekly “Meetings” section of the newsletter, please include program information.)

2023

Jan. 19. **ADRP Think Tank, San Antonio, Texas.** [Registration](#) is open (Blood center employees-only at Director or Executive level). Additional information is available [here](#).

Jan. 25 & Feb. 1. **ABC & ADRP National Blood Donor Month Webinar Series: Building an Engaged Donor Base.** [Registration](#) is open. Additional information is available [here](#).

(continued on page 8)

## CALENDAR (continued from page 7)

Mar. 6-8. **ABC Annual Meeting, Washington, D.C.** [Registration](#) is open. Additional information is available [here](#).

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

May 9-11. **2023 ADRP Conference, Charlotte, N.C.** [Registration](#) is open. Additional information is available [here](#).

May 10-11. **29<sup>th</sup> IPFA/ Paul-Ehrlich-Institut[e] (PEI) International Workshop on Surveillance and Screening of Blood-borne Pathogens, Bologna, Italy.** More information available [here](#).

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

Oct. 9-11. **Advanced Medical Technology Association (AdvaMed) The MedTech Conference, Anaheim, Calif.** More information available [here](#).

Oct. 14-17. **AABB Annual Meeting, Nashville, Tenn.** More information 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](mailto:newsletter@americasblood.org)

## POSITIONS

**Registered Nurse (Gainesville, FL and Jacksonville, FL).** LifeSouth Community Blood Centers is seeking Registered Nurses in Gainesville, FL and Jacksonville, FL. This position is responsible for traveling to area hospitals to perform apheresis procedures alongside hospital staff. The RN will perform routine and complex therapeutic plasma exchanges, red cell exchanges, stem cell collections, white cell depletions and platelet reductions. Minimum qualifications include ASN/BSN, at least two years' experience as a nurse, meet hospital credentialing requirements and be licensed in the State of Florida. Apheresis training provided. Visit our [careers page](#) to learn more about LifeSouth and to apply.

**Cellular Therapy Scientist (Gainesville, FL).** LifeSouth Community Blood Centers is seeking a Cellular Therapy Scientist in Gainesville, FL. This position is responsible for performing and developing testing, processes, troubleshooting and investigation related to cellular therapy and manufactured biologics. Duties and projects may relate to products intended for research, commercial and clinical use. Minimum qualifications include a bachelor's degree in Clinical Lab, Chemical or Biological Science, knowledge of cGMP regulations and FDA guidelines applicable to biologics and cell therapy manufacturing. The ideal candidate will possess national certifications such as MLS (ASCP or AMT) or CABP from AABB. Visit our [careers page](#) to learn more about LifeSouth and to apply.

**Cellular Therapy/Transfusion Medicine Specialist.** The Department of Laboratory Medicine is seeking a Clinical Pathology and Transfusion Medicine and/or Hematopathology specialist for a faculty position at the Benioff Children's Hospital in Oakland (BCH-Oak), CA. The successful candidate will work with the other Medical Directors at the other UCSF sites to implement the academic mission of the UCSF Clinical Pathology service, which includes training of residents and fellows. The successful candidate will be part of a team of Pathologists working in the BCH-Oak Clinical Laboratories. Candidates must be board certified/board eligible in Clinical Pathology and have completed a Blood Banking /Transfusion Medicine and/or Hematopathology fellowship. Applicants who have expertise in these fields are encouraged to apply. Candidates with interest and/or research experience in Cellular Therapies are preferred. Candidates must be eligible for a California Medical license. For more information and to apply please submit a curriculum vitae, a cover letter outlining your interests and experience, a statement of contributions to diversity, and the names of three (3) references (in confidence) to <https://apptrkr.com/3715610>.

**President and CEO.** LifeStream Blood Bank, headquartered in San Bernardino, California, an independent blood center serving 80 hospitals in six counties in Southern California is seeking a President and CEO to lead the

(continued on page 9)



## POSITIONS (continued from page 8)

organization. Reporting to the Chair, Board of Directors, the preferred candidate is one who has demonstrated successful leadership in other blood centers or healthcare related organizations. The successful candidate must possess strong strategic planning skills to navigate a competitive environment and strong interpersonal and communication skills to develop strong relationships in the community and within the organization. Primary emphasis for this position is to ensure effective beneficial business/service affiliations, strong community supported blood donor collections, loyal employee relations, solid asset management and ongoing financial stability. The candidate must have at least five years' experience serving as an executive team member (reporting to CEO) and/or CEO for a blood center or healthcare organization and hold a bachelor's degree from an accredited college or university. A graduate degree such as MBA, MHA, MPH, or equivalent is preferred. Competitive salary, relocation package and excellent benefits. Please submit cover letter, resume and salary requirements to Judy Taylor, Director, Human Resources at [taylorju@lstream.org](mailto:taylorju@lstream.org). The deadline for applications is **February 3, 2023**.

**Director, Marketing and Public Relations.** LifeStream, a local nonprofit organization providing blood services for more than 80 hospitals in Southern California, is searching for a Director, Marketing and Public Relations. Reporting to the Vice President, Operations, and managing a staff of four employees, the Director of Marketing and Public Relations is responsible for developing and implementing marketing and communication strategies to ensure daily, monthly, and annual collection targets are achieved. Also responsible for account planning, staffing (marketing and creative resources), and oversight of all day-to-day marketing and public relations activities to ensure quality work is being achieved and delivered. This individual will monitor the effectiveness of marketing efforts, including; campaigns, promotions, special events, and communications with internal and external key stakeholders. Takes proactive steps when results are not meeting organizational needs. This position works closely with multiple departments to ensure successful market delivery. The ideal candidate will possess a bachelor's degree (BA) in Marketing, Advertising, Business, Communications, Public Affairs, or a related field. Three to five years' work experience and a minimum of one year management experience in marketing and/or public relations. Demonstrated strategic thinking and analytical skills to help set marketing agendas. Apply online: [www.LStream.org](http://www.LStream.org). E-mail: [recruitment@LStream.org](mailto:recruitment@LStream.org). EOE.

**Technical Manager.** LifeSouth Community Blood Centers is seeking a full time certified Medical Laboratory Technician (MLT) with experience in transfusion services for our Mobile, AL center. This position is

responsible for managing production through subordinator coordinators and staff. The selected candidate will also be fully accountable for costs, methods, personnel, quality, inventory and distribution within the Components Laboratory and Hospital Services departments. The applicant should be knowledgeable of FDA and AABB standards and other regulatory requirements, have strong planning and process management skills. Visit our [careers page](#) to learn more about us and apply.

**Regional Manager.** LifeSouth Community Blood Centers is seeking a full time Regional Manager in McDonough, GA. This position is responsible for overseeing daily operations of the region to ensure daily and long-range commitments of the blood bank are met. This includes overseeing blood collection, donor recruitment, components production, blood labeling and blood distribution in assigned region. Minimum qualifications include a bachelor's degree in a related field, three years of relevant management experience, knowledge of general budgeting, accounting, and personnel management techniques. Visit our [careers page](#) to learn more about us and apply.

**Chief Medical Officer.** America's Blood Centers (ABC), North America's largest network of community based, independent blood programs, is seeking a **Chief Medical Officer**. Reporting to the Chief Executive Officer (CEO), the Chief Medical Officer (CMO) is responsible for implementing strategies and tactics, consistent with the best scientific and medical evidence and regulatory requirements, that support America's Blood Centers' (ABC) mission, maintain our values, and realize our vision. The CMO works as part of the ABC Senior Executive Team (SET) to communicate ABC's issues to members, regulators, legislators, the media, and external groups and mobilizes ABC members and professional staff to achieve the strategic goals of the organization. Primary Responsibilities: Represent independent nonprofit community blood centers on scientific, medical, and technical matters as well as donor and patient safety concerns before federal agencies, industry, and other business partners, allied domestic and international organizations, scientific societies, the media, and the public. Education & Experience: Medical Degree required. U.S. medical license required with board certification in a medical specialty. Board certification in pathology, transfusion medicine, hematology, or infectious disease preferred. Ten or more years' experience related to blood banking or transfusion medicine. Three or more years' experience with healthcare and/or blood banking issues at a national level via committee work, offices held, or other appropriate experience. Administrative experience in a leadership role preferred. Work Environment and Conditions: This position is a consultant with an expected 40-60 hours per month. Additional time may be required (and paid) for travel. The

(continued on page 10)

## POSITIONS (continued from page 9)

CMO office may be located anywhere in the United States with travel to the ABC Washington, DC office as required and domestic travel on behalf of ABC to ABC meetings, to interact with government decision makers, and to liaison with external organizations as assigned. Click [here](#) to view the full job description. Interested applicants should send a cover letter and resume to [careers@americasblood.org](mailto:careers@americasblood.org).

**Director of Finance.** LifeSouth Community Blood Centers is seeking an experienced CPA as our Director of Finance. The Director is responsible for ensuring the stability of LifeSouth's finances through planning, directing, and controlling financial functions, including establishing appropriate control environments, preparing financial reports for management, financial analysis, overseeing development and implementation of effective financial and accounting systems. This position oversees all staff in the Accounting and Purchasing departments. Join our team and help us continue our dedication to making sure the blood is there when you or your family is in need. Visit our [careers page](#) to learn more about us and apply.

**Medical Technologist – 2nd Shift or 3rd Shift.** LifeSouth Community Blood Centers is seeking Medical Technologists to perform specialized lab testing for cellular therapies and lab testing for the quality control of cellular therapies and blood components. Additional responsibilities include performing specialized lab testing for RBC and HPA genotyping, HLA typing and HLA and HPA antibody identification, perform DNA extraction and adhere to clinical laboratory's quality control policies. The individual will have a bachelor's in Clinical Lab, Chemical or Biological Science and a current Florida Medical Technologist license. Join our team and help us continue our dedication to making sure the blood is there when you or your family is in need. Visit our [careers page](#) to learn more about us and apply.

**Compensation and Benefits Manager.** LifeSouth Community Blood Centers is seeking an experienced Compensation and Benefits Manager to join our Human Resources team at our headquarters in Gainesville, FL. This position is responsible for facilitating the organization's compensation and benefits programs as well as providing strategic leadership for its administration, including enrollment, maintenance, and compliance with regulations. Join our team and help us continue our dedication to making sure the blood is there when you or your family is in need. Visit our [careers page](#) to learn more about us and apply.

**Laboratory Technologist.** LifeSouth Community Blood Centers is seeking a skilled Laboratory Technologist in our immunohematology Reference Laboratory in Atlanta, Georgia. The position is a full-time evening shift with the option of working 4-10 hour shifts or 5-8 hour shifts per week. The candidate for this position must be able to work independently, communicate effectively and can perform and interpret clinical laboratory tests for providing blood for a patient in need of a transfusion. This position requires extensive understanding of blood group serology, compatibility testing and selection of blood for a patient in need of a transfusion. This position requires extensive understanding of blood group serology, compatibility testing, and selection of blood for patients with complex serological problems. Visit our [careers page](#) to learn more about us and apply.

**Manager of Donor Resources.** The Blood Connection is seeking a Manager of Donor Resources in Charlotte, N.C. and Greenville, SC to provide oversight to our recruitment teams within these divisions. This position directs Account Managers and Business Development Representatives to strategically manage our existing portfolio of blood donor groups and new business to reach collection targets. The Manager of Donor Resources monitors progress to goal proactively and effectively coaches and manages the team to success. The ideal candidate will have a strong background in territory management and team building. Candidates must possess excellent interpersonal, analytical, and strategic planning abilities. We offer an exceptional benefits package including a generous 401k match, 30 days PTO, company bonuses, tuition reimbursement, cell phone stipend, and yearly increases. Join one of the fastest growing blood centers in the country and help make an impact in your community today! How to apply: [Manager of Donor Resources Application](#)

