

2023 #37

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INSIDE:

Red Blood Cell
Transfusion International
Guidelines Available 1

BRIEFLY NOTED 3

RECENT REVIEWS 3

Letter to the Editor
Regarding Source
Plasma Donation
Frequency Studied in
Transfusion..... 5

Registration Opens for
2024 ABC Annual
Meeting 6

ABC Advocacy Forum Set
for November 1st 6

Registration Opens for
ADRP's October
Webinar 6

Register for the ABC
WELC Webinar
Featuring Dr. Meghan D.
Kinter..... 7

Save the Date: SMT
Journal Club on
December 15th 7

MEMBER NEWS 7

GLOBAL NEWS 8

COMPANY NEWS..... 8

CALENDAR..... 10

EQUIPMENT AVAILABLE
..... 11

POSITIONS..... 11

Red Blood Cell Transfusion International Guidelines Available

The Red Blood Cell (RBC) 2023 Transfusion Association for the Advancement of Blood & Biotherapies (AABB) International Guidelines have been [published](#). They appear in the *Journal of the American Medical Association (JAMA)* and aim to describe recommendations “for [the] use of RBC transfusion in adults and children.”

The authors explained that the recommendations answer two questions,

- “[f]or hospitalized, hemodynamically stable adult patients, should clinicians transfuse with a restrictive strategy (typical hemoglobin level <7-8 g/dL) vs. a liberal strategy (typical hemoglobin level <9-10 g/dL)?
- For hospitalized, hemodynamically stable pediatric patients (a) without congenital heart disease (infancy to 16 years), should clinicians transfuse with a restrictive strategy (hemoglobin level <7-8 g/dL) vs a liberal strategy (hemoglobin level <9-10 g/dL); and (b) with congenital heart disease, should clinicians transfuse with a restrictive vs. liberal strategy based on the cardiac lesion?”

They noted that the recommendations are based on values and preferences that include, “[a]void the adverse effects after RBC transfusion (high value), [c]onserve resources related to RBC transfusions (high value) to ensure blood is available for individuals who need it most, [and] refer the demonstrated benefits of a restrictive transfusion policy despite the remaining possibility of a small increase in mortality.”

The recommendations were developed from conducting a systematic review of 45 randomized controlled trials (RCTs) with more than 20,000 adults. “The systematic reviews included RCTs in which the transfusion groups were assigned based on a clear transfusion threshold, described as the hemoglobin concentration or hematocrit level required before RBC transfusion. Outcomes in adults included 30-day mortality, nonfatal myocardial infarction, pulmonary edema or congestive heart failure, stroke, thromboembolism, acute kidney injury, infection, hemorrhage, mental confusion, proportion of patients with an allogeneic or autologous RBC transfusion, hemoglobin concentration (postoperative or discharge), number of RBC units transfused, and quality of life.”

For adults, the recommendations included:

- “[f]or hospitalized adult patients who are hemodynamically stable, the international panel recommends a restrictive RBC transfusion strategy in which the transfusion is considered when the hemoglobin concentration is less than 7 g/dL (strong recommendation, moderate certainty evidence).

(continued on page 2)



Red Blood Cell Transfusion International Guidelines (continued from page 1)

- For hospitalized adult patients, the panel suggests a restrictive RBC transfusion strategy in which transfusion is considered when the hemoglobin concentration is less than 7 g/dL in those with hematologic and oncologic disorders (conditional recommendation, low certainty evidence).”

Recommendations for children were:

- “[f]or critically ill children and hospitalized children at risk of critical illness who are hemodynamically stable and without a transfusion-dependent hemoglobinopathy, cyanotic cardiac condition, or severe hypoxemia, the international panel recommends a restrictive transfusion strategy in which a transfusion is considered when the hemoglobin level is less than 7 g/dL compared with one of less than 9.5 g/dL (strong recommendation, moderate certainty evidence).
- The international panel suggests considering a transfusion threshold for hemodynamically stable children with congenital heart disease that is based on the cardiac abnormality and stage of surgical repair: 7 g/dL (biventricular repair), 9 g/dL (single-ventricle palliation), or 7 to 9 g/dL (uncorrected congenital heart disease) (conditional recommendation, low certainty evidence).”

The authors also explained that, “[g]iven the findings indicating the safety of restrictive thresholds, new trial designs should focus on the safety of lower transfusion thresholds (e.g., 5-6 g/dL), incorporation of physiologic parameters, and the conduct of health economic analyses. They concluded that, “[o]ur panel recommends restrictive transfusion strategies, typically with a threshold of 7 g/dL for both adult and pediatric patients. The panel recognizes important additional considerations, including signs, symptoms, comorbid conditions, and patient values and preferences, that will differ between patients. The recommendation is strong, based on moderate certainty evidence for most patients, but conditional, based on lower certainty evidence subgroups that include hematologic and oncologic disorders in adults and cyanotic cardiac condition in infants.”

Citation: Carson, J.L., Stanworth, S.J., Guyatt, G., *et al.* “[Red Blood Cell Transfusion 2023 AABB International Guidelines](#).” *JAMA*. 2023. ♦



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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 recognizes 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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BRIEFLY NOTED

An October 12th “[Viewpoint](#)” in the *Journal of the American Medical Association (JAMA)* titled, “*The Bloody Transfusion Problem*,” addresses barriers to the availability of blood transfusions in the pre-hospital setting. The authors explained that, “three significant hurdles to overcome [include]: “enabling a reliable strategy for insuring an adequate blood product supply by developing new shelf-stable blood products and by providing greater financial support for donor blood collection and processing; insuring adequate reimbursement for current and new blood products in the hospital setting and removing the limitation of prehospital provider scope of practice and ability to bill for all blood products; and sustaining consistent and appropriate research funding for trauma studies of hemorrhagic shock in both pediatric and adult populations.” They concluded that, “[e]arly prehospital and hospital blood products are lifesaving...It is imperative that the U.S. government and the entire health care community work together to address the disparity in availability of all current and future blood products to all persons, regardless of where they live. Improving the quality of care not only saves lives but also is cost-effective. Appropriately resourcing and implementing the three initiatives described will significantly improve the outcomes of bleeding patients, whether domestically or abroad on future battlefields.”

Citation: Holcomb, J.B., Hoots, W.K., and Polk, T.M. “[The bloody transfusion problem](#).” *JAMA*. 2023.

The Equal Employment Opportunity Commission (EEOC) recently [published](#) a notice in the *Federal Register* on “Proposed Enforcement Guidance on Harassment in the Workplace.” The proposed guidance presents “a legal analysis of standards for harassment and employer liability applicable to claims of harassment under the equal employment opportunity statutes enforced by the Commission.” Specifically, the proposed enforcement guidance focuses on the three components of a harassment claim:

- Covered Bases and Causation: Was the conduct based on the individual’s legally protected characteristic under the federal EEO statutes?
- Discrimination with Respect to a Term, Condition, or Privilege of Employment: Did the harassing conduct result in discrimination with respect to a term, condition, or privilege of employment?
- Liability: Is there a basis for holding the employer liable for the conduct?

The guidance also addresses systemic harassment and provides links to other EEOC harassment-related resources, including Promising Practices for Preventing Harassment, a resource to assist employers in preventing and addressing harassment. The proposed guidance is open for [comment](#) until November 1st.

(Source: *Federal Register* [Notice](#), 10/2/23) ♦

RECENT REVIEWS

Next Generation Sequencing of Red Blood Cell Antigens. A study in *Transfusion Medicine Reviews* “aims to evaluate the agreement between next-generation sequencing (NGS) and standard molecular methods for the determination of polymorphisms associated with erythrocyte antigens. A comparison with serological results is also presented when available.” The authors conducted a, “systematic review [and the] search yielded a total of 864 potentially eligible articles [and] at the end of the process, 10 articles were selected...All included studies adopted a prospective study design for NGS analysis...The overall agreement between the NGS results and the other molecular analysis methods was determined by analyzing the genotypes obtained for the main alleles of the Kell (rs8176058), Duffy (rs2814778, rs12078) and Kidd (rs1085396) systems.” The researchers noted that a, “[m]eta-analysis revealed that the pooled proportion agreement for the overall concordance of the included studies was 0.992 (95 percent CI 0.982-0.998) for Duffy rs2814778 (FY*01N.01 or FY*02N.01), 0.990 (95 percent CI 0.979-0.997) for Duffy rs12078 (FY*01/FY*02), 0.994 (95 percent CI 0.985-0.999) for Kell rs8176058 (KEL*01/KEL*02) and 0.982 (95

(continued on page 4)



RECENT REVIEWS (continued from page 3)

percent CI 0.967-0.993) for Kidd rs1085396 (JK*01/JK*02)...Comparison of NGS with phenotyping results were also presented with the proportion of agreement of individual studies ranging from 95.65 to 100 percent, [a] meta-analysis was not performed for serological data.” The authors concluded that, “[the] results of the present systematic review and meta-analysis show evidence that NGS presents high agreement in relation to other molecular methods for single nucleotide polymorphism (SNP) analysis, and can be used for the prediction of blood groups...NGS also showed high agreement with phenotyping, with the most of discrepancies being in favor of NGS. Despite the great potential, issues such as costs, the required infrastructure and the need for specialized personnel to analyze the results still limit this technology to a few blood banks...The cost reduction, the availability of widely validated panels, the establishment of clear quality parameters and access to bioinformatic analysis tools that are easy to access and operate are necessary conditions for the worldwide dissemination of this technology in blood banks.”

Citation: Matosinho, C.G.R., Silva C.G.R., Martins M.L., and Malta, M.C.F. “[Next generation sequencing of red blood cell antigens in transfusion medicine: Systematic review and meta-analysis.](#)” *Transfusion Medicine Reviews*. 2023.

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

NEW on CollABORate

COLLABORATE

SHARE STRATEGIC ADVICE | SOLVE CHALLENGES | DEVELOP NEW APPROACHES

Recent discussion topics on the ABC [CollABORate](#) Online Member Community include:

- [Ultracrit Verification after Repair](#) (COLLECTIONS & DONOR SERVICES)
- [Procedure Change Process](#) (COLLECTIONS & DONOR SERVICES)
- [Reentry SOPs](#) (TECHNICAL DIRECTORS)
- [Terumo COBE 2991 Cell Processor Question](#) (TECHNICAL DIRECTORS)
- [Proficiency Testing for Sysmex XN with Blood Bank Module](#) (TECHNICAL DIRECTORS)
- [Donor Collections Training-completed Phlebotomies for Training](#) (MEMBER EMPLOYEE TRAINING AND DEVELOPMENT)

ABC members are encouraged to [login](#) and join the conversations today!

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 meetings, workshops, and webinars, and details will be updated as confirmed. We look forward to your support and participation!



Letter to the Editor Regarding Source Plasma Donation Frequency Studied in *Transfusion*

Please note: The views/comments expressed in submitted letters from external parties are those of the author(s) and are not to be interpreted as the viewpoint of America's Blood Centers.

Dear Editor,

We are troubled by the synopsis, “Source Plasma Donation Frequency Effects Studied in *Transfusion*,” published in the September 1st [ABC Newsletter](#). The article presented the findings of a Plasma Protein Therapeutics Association (PPTA) sponsored study [published](#) electronically in *Transfusion*. The study’s primary research is significantly flawed in its design, methodology, and conclusions. Notable flaws include the conflict of interests presented by the primary authors and the funding agency.

A few deficiencies are worth highlighting:

- The study relies solely on participants’ self-reported survey scores to capture impressions of their health over a year-long period and to then associate resulting averages to plasma harvest frequency cohorts. This tool is inherently subjective and unreliable for the time span under evaluation.
- The study subjects were likely influenced both by cash compensation for completion of the survey and by their vendor relationship to the plasma centers administering the tool.
- The methodology of an English language-only, self-administered questionnaire excludes non-English speaking and illiterate individuals.
- The sampling is skewed by exclusion criteria that eliminate deferred, lapsed, recently (last 6 months) pregnant, etc. plasma purveyors.
- Data distortions due to the “healthy donor effect” are ignored. It is well established that volunteer donors of blood and paid sellers of plasmas will enjoy above-average health because they must pass fitness qualifications set by regulators.
- Survey questions are not worded neutrally. For example, a previously recognized side effect of plasma collection is assessed by asking whether subjects experienced “fatigue all the time.”
- Statistical adjustments, which tend to normalize confounding effects, are neither given justifications nor defined mathematically.
- Results are not fully explained. Data anomalies, such as the subjects’ high average BMIs, are ignored, without regard to implications for health status. Likewise, the small subset of subjects with heavy collections and lower health ratings are not further characterized.
- Many of the conclusions are unsupported. For example, stating “that monetary compensation does not contribute to a less healthy [Source Plasma] donor” is entirely unsubstantiated in a paper devoid of payment data or financial analysis.

These are some of the issues with the study. Time and attention are valuable commodities for blood bankers, and we cannot afford to dissipate them on biased and skewed content. Even more critically, we should resist weak inputs into our common discourse lest they bleed into our clinical practice, policy setting, and resource allocation decisions.

[Tina S. Ipe, MD, MPH](#)

Chief Medical Officer at Our Blood Institute ♦

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. 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.



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 staffs only, unless otherwise specified.

Registration Opens for 2024 ABC Annual Meeting

[Registration](#) is open for the America's Blood Centers (ABC) [2024 Annual Meeting](#). The meeting will take place March 4th-6th in Arlington, Va. at the Ritz-Carlton, Pentagon City and features several exciting changes including expanded content offerings and a new format. With a focus on advocacy, leadership, operations, and science and medicine, the program will feature a mix of general and breakout sessions, external speakers and blood center-led case studies, committee and council meetings, networking events, and more. *Awards of Excellence* (AoE) winners will be recognized throughout the Annual Meeting and at a reception on Capitol Hill, where we can celebrate their achievements with fellow meeting attendees, members of Congress and their staff, our federal agency partners, Blood Advocacy Week partners, and more. The call for AoE nominations is [open](#). Secure your [room](#) today to take advantage of the group rate. The deadline to book a room is February 16th. [Sponsorship](#) opportunities are also available. [Contact us](#) with any questions.

ABC Advocacy Forum Set for November 1st

ABC will hold its next Advocacy Forum: Congressional, Agency, and State Updates on Nov. 1st from 2-3 p.m. EDT. The forum will include updates and discussions on:

- the ABC meeting on surge capacity and preparedness with the Biomedical Advanced Research and Development Authority (BARDA) and the Office of the Assistant Secretary for Preparedness and Response (ASPR);
- congressional updates;
- licensure reform efforts; and
- state advocacy and the ABC Council of States.

Additional information including a link to registration is available to ABC members in [MCN 23-083](#).

(Source: [MCN 23-083](#), 10/5/23)

Registration Opens for ADRP's October Webinar

Join ADRP, the Association for Blood Donor Recruitment Professionals on Wednesday, October 25th at 1 p.m. EDT for the "[Innovations in Donor Recruitment and Inventory Growth](#)" webinar. This event will feature successful case studies from blood center professionals as they describe the creative programs and incentives that their blood centers have implemented, while taking risks that ultimately resulted in substantial inventory boosts. This strategy ensured that their local hospital partners consistently had blood products on their shelves, especially during challenging times of the year. [Registration](#) is open. Donor recruitment professionals will find this webinar particularly enriching, as speakers share data, results, and new and effective ways that can help you meet your collection goals. Join us to hear speakers from:

- Our Blood Institute;
- LifeSouth Community Blood Centers;
- ConnectLife; and
- Memorial Blood Centers.

(continued on page 7)



INSIDE ABC (continued from page 6)

Register for the ABC WELC Webinar Featuring Dr. Meghan D. Kinter

America's Blood Centers (ABC) [Women's Executive Leadership Community](#) (WELC) will host its first [webinar](#), titled "Taming the Tyranny of the Urgent," on October 26th at 2 p.m. EDT. Meghan D. Kinter, PhD, will be the guest speaker. This webinar will feature breakout sessions for attendees and a question-and-answer session with Dr. Kinter who has, according to her bio, spent more than two decades "expertly guid[ing] businesses and individuals through the complexities of their challenges, helping them navigate from feeling 'stuck' to achieving clarity and momentum." By the end of the event, attendees will discover the Power of the 3Ms – Mindful Mindset, Managing Time, and Mastering Habits, understand the psychology behind urgency and its impact on productivity, develop a resilient, proactive approach to daily challenges, and curate a personal toolkit of habits, tools, and strategies to optimize every day. WELC is a complimentary offering open to all employees of ABC member blood centers and ABC sponsor partners. Through this initiative, ABC strives to empower leaders throughout the blood community through networking and professional development. ABC encourages eligible individuals to [join](#) WELC and its [LinkedIn Community](#), and share this information with those who may be interested.

Save the Date: SMT Journal Club on December 15th

The next ABC Scientific, Medical, and Technical Journal Club Webinar will take place on December 15th from 12-1:15 p.m. EST. The webinar is free to all ABC members. An email announcement with a registration link and the articles to be reviewed on the webinar is forthcoming. 💧

MEMBER NEWS

Central California Blood Center was recently [featured](#) in the October Wellness [issue](#) of the Central Valley's lifestyle magazine, *CVLUX*. The article focuses on the significance of blood donation and the Central California Blood Center's partnership with the New York Yankees' Aaron Judge's ALL RISE Foundation, which was aimed at raising awareness for blood donation. This recognition is a tremendous honor and highlights the pivotal role the Central California Blood Center plays in supporting the wellness of the community's blood supply.

(Source: *CVLUX*, "[Uniting for a greater cause.](#)" 9/28/23)

Contributed by Arax Martirosian, Director of Marketing and Donor Recruitment at Central California Blood Center

New York Blood Center Enterprises' (NYBCe) NYBC Ventures has [invested](#) in Aronora, Inc., a clinical stage biotechnology company aiming to "revolutionize blood clot treatment and prevention." According to a news release, "[t]he funding will support team expansion, manufacturing, and regulatory activities as Aronora, Inc. prepares for late-stage clinical development of their lead investigational products E-WE thrombin (AB002) and Gruticibart (AB023). Both drug candidates have completed phase 2a clinical trials, with compelling top-line data."

(Source: Aronora, Inc. [News Release](#), 10/12/23) 💧





GLOBAL NEWS

NHS Blood and Transplant (NHSBT), the national blood provider for England and transplant services for the United Kingdom (UK), and the UK Health and Security Agency (UKHSA) have [published](#) their annual blood safety and surveillance [report](#). According to a news release from NHSBT, the report titled “Safe Supplies 2022: monitoring safety in donors and recipients” revealed that the policy shift in blood donor eligibility criteria to individual donor assessments had, “no impact on blood safety.” Additionally, the report, “found that during 2022, the residual risk of a blood donation with a newly acquired hepatitis B, hepatitis C, or HIV infection being released into the blood supply remained at less than one in a million. [It] noted the number of infections in donors remained very low overall. And when a blood donation had markers of infection, the donors had good compliance with the For the Assessment of Individuali[z]ed Risk (FAIR) questions on sexual behavi[o]r.” NHSBT Interim Clinical Director of Microbiology and Public Health, and FAIR Steering Group Chair Dr. Su Brailsford added in the news release, “[t]hese data are really encouraging, and I am pleased to be able to continue to give reassurance of safety for recipients across the UK.” According to the report, “[i]n 2022 approximately 950,000 whole blood donors made 1.8 million blood donations in the UK. All donations repeat reactive on screening were removed from the blood supply. Of the 1.8 million donations, 7.4 percent were made by new (first-time) donors. Of the whole blood donors, 52.9 percent were female and 28.4 percent were under 35 years old, rising to 52.9 percent under 35 years old in new donors.”

(Source: NHSBT [News Release](#), 10/12/23)

The Queensland Health Minister in Australia has urged federal regulators to revise the country’s blood donor eligibility criteria and shift to individual donor assessments, according to a [report](#) from *The Guardian*. Queensland is Australia’s second largest state. *The Guardian* explained that the state’s Health Minister Shannon Fentiman wrote a letter to Australia’s national health minister, Mark Butler, urging federal officials to “‘expedite’ the consideration of applying individual risk assessments to whole blood donations ‘should the research support making the change. We know that many people who could safely donate blood, and who want to help others, are unable to do so under the current rules. I was pleased to see that [the country’s national blood provider] is removing donor deferrals for plasma donations, and removing barriers for whole blood donations would be a further step in the right direction. Obviously, it is critical that we ensure our blood supply is safe for all Australians requiring a transfusion. We have seen individual risk assessment models operate safely and successfully in other countries.’”

(Source: *The Guardian*, “[Restrictions on gay men donating blood should be scrapped, Queensland health minister says](#),” 10/8/23) ◆

COMPANY NEWS



Fresenius Kabi has [announced](#) the new inductees into the National Blood Donation Hall of Fame for 2023. This year marks the 25th anniversary of the honor and the company’s collaboration with blood centers around the country. The National Blood Donation Hall of Fame recognizes individ-

uals who have shown, “exemplary commitment to donating blood and/or encouraging blood donation,” according to a news release from Fresenius Kabi. This year’s inductees include several donors from ABC member centers:

(continued on page 9)

COMPANY NEWS (continued from page 8)

- Scott and Samantha Baker, OneBlood;
- Jim Walker, San Diego Blood Bank;
- Kirk Hunter, Carter BloodCare;
- Larry Turner, Solvita;
- Yvonne Dauterive, LifeServe Blood Center;
- Darlene Olson, Rhode Island Blood Center;
- Pat Henry, LifeSouth Community Blood Centers;
- Scott MacGregor, Vitalant;
- Nanette Allen, Vitalant; and
- Kelly Robinson, Versiti Blood Center of Illinois.

Additional information including all the 2023 inductees and those from previous years are also located at the Fresenius Kabi Donation Hall of Fame [website](#).

(Source: Fresenius Kabi [News Release](#), 10/10/23)

Be The Match BioTherapies® has [partnered](#) with **Cryoport** to “provide access to standardized and optimized apheresis collection, cryopreservation and bioprocessing processes throughout the U.S. and Europe.” According to a joint news release from the companies, the collaboration will also provide, “cell and gene therapy researchers, developers and manufacturers with consistent starting materials cryopreserved to improve manufacturing slot utilization leading to increased yields bringing new cell and gene therapies to market faster and more affordably.”

(Source: Be The Match BioTherapies and Cryoport [News Release](#), 10/9/23) ♦

Upcoming ABC Webinars & Virtual Events – Don’t Miss Out!

- **ADRP Webinar: Innovations in Donor Recruitment and Inventory Growth** – Oct. 25. [Registration](#) is open. More information available [here](#).
- **ABC Women’s Executive Leadership Community (WELC) Webinar** – Oct. 26. More information and a link to registration are available to ABC Members in [MCN 23-081](#).
- **ABC Advocacy Forum: Congressional, Agency, and State Updates** – Nov. 1. More information and a link to registration are available to ABC Members in [MCN 23-083](#).
- **ABC Scientific, Medical, and Technical Journal Club Webinar** – Dec. 15. More information coming soon!
- **2023 ADRP International Showcase** – Nov 15. [Registration](#) is open. More information available [here](#).





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.)

2023

Oct. 14-17. **AABB Annual Meeting, Nashville, Tenn.** [Registration](#) is open. More information available [here](#).

Oct. 18-20. **American Society for Clinical Pathology (ASCP), Long Beach, Calif.** More information available [here](#).

Oct. 25. **ADRP, The Association for Blood Donor Professionals Webinar: Innovations in Donor Recruitment and Inventory Growth.** [Registration](#) is open. More information available [here](#).

Oct. 26. **America's Blood Centers (ABC) Women's Executive Leadership Community (WELC) Webinar.** More information and a link to registration are available [here](#).

Oct. 31. **U.S. Food and Drug Administration (FDA) Cellular, Tissue, and Gene Therapies Advisory Committee Meeting (Virtual).** More information available [here](#).

Nov 1. **ABC Advocacy Forum: Congressional, Agency, and State Updates (Virtual).** More information and a link to registration are available [here](#).

Nov. 8-10. **Blood Centers of America, Inc. (BCA) Innovation Summit, Oklahoma City, O.K.**

Nov. 13-14. **U.S. Department of Health and Human Services (HHS) Biomedical Advanced Research and Development Authority (BARDA) Industry Day 2023. (Hybrid), Washington, D.C.** [Registration](#) is open. More information available [here](#).

Nov 15. **ADRP, The Association for Blood Donor Professionals International Showcase (Virtual).** [Registration](#) is open. More information available [here](#).

Nov. 18-21. **ISBT Regional Congress, Cape Town, South Africa.** [Registration](#) is open. More information available [here](#).

Dec. 15. **ABC Scientific, Medical, Technical (SMT) Journal Club Webinar.** More information coming soon.

2024

Feb.7-8. **International Plasma and Fractionation Association & EBA Symposium on Plasma Collection and Supply. Leiden, Netherlands.** [Registration](#) is open. More information available [here](#).

Mar. 4-6. **ABC Annual Meeting, Arlington, Va.** [Registration](#) is open. More information available [here](#).

April 12-13. **BEST Meeting, Amsterdam, Netherlands.** More information coming soon.

May 14-16. **2024 ADRP Annual Conference, St. Louis, Mo.** More information available [here](#).

May 15-16. **International Plasma and Fractionation Association/Paul-Ehrlich Institut[e] 30th International Workshop on Surveillance and Screening of Blood-borne Pathogens, Aarhus, Denmark.** 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 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

EQUIPMENT AVAILABLE

For Sale. Two refurbished Aurora Plasmapheresis System devices with Certificate of Compliance for each device. Both devices have Software 2.0 installed. Asking for best offer. Location: Jackson, TN. Please contact LaTrina Morman, (731) 427-4431, or email latrinamorman@lifelinebloodserv.org.

For Sale. Two NEW Aurora Plasmapheresis System devices with Certificate of Compliance. NEVER USED. Currently, both have Software 2.0 installed. Asking for best offer. Location: Jackson, TN. Please contact LaTrina Morman, (731) 427-4431, or email latrinamorman@lifelinebloodserv.org.

POSITIONS

Divisional Director. The Blood Connection is expanding our operations into Virginia! We are one of the fastest growing blood centers in the country and we are seeking a Divisional Director who will be responsible for our day-to-day operations and help direct our expansion of services into this new territory. The ideal candidate is a proven and results-focused self-starter with progressive leadership experience and the capacity and drive to help fulfill the needs of our community partners. We offer a generous benefits package including a substantial 401k match, 30 days PTO, potential company bonuses, cell phone stipend, and tuition reimbursement. Join our team and help make an impact in your community today. *Open to candidates residing in localities state-wide. Prospective candidates may be eligible for relocation assistance.* How to apply: [Divisional Director Application](#)

Manager of Technical Services. The Blood Connection is seeking a proactive and results-driven Manager of Technical Services to oversee and manage the daily operations within our technical departments which include Hospital Services, Biologics Processing, and Reference Laboratory. This position requires an understanding of laboratory operations, including specialist (SBB) skills, and involves supervising staff while performing essential functions within the laboratory. The ideal candidate will hold their SBB and have a background in the Reference Laboratory. We offer a generous benefits package including a substantial 401k match, 30 days PTO, potential company bonuses, cell phone stipend, and tuition reimbursement. Join our team and help make an impact in your community today. *This role is based in Morrisville, NC. Prospective candidates may be eligible for relocation assistance.* How to apply: [Manager of Technical Services Application](#).

Phlebotomist 2 – Donor Centers (Carter BloodCare). Principal Accountability: The Phlebotomist 2 assists in smooth and efficient donor flow, determine donor acceptability, performs sterile venipuncture for the collection of blood, provides excellent customer service and ensures

compliance with regulations and standard operating procedures throughout the donation process. In the absence of a supervisor, this position will oversee and assign responsibilities to collections staff, except for hiring and/or terminations. This includes effectively and discreetly solving personnel and donor problems, addressing procedural or behavioral problems, and making verbal or written reports to management. Additionally, the Phlebotomist 2 will be required to attend and complete annual leadership/development training resources, to mentor/assist with on-the-job development of new employees and subordinate staff. This position may be required to participate in special projects or programs. Regular full-time attendance is required during operational hours. Education: High school diploma or equivalent. Some college a plus. Experience: One-year general work experience, preferably working with the public, or education that includes comparable experience such as an internship or externship. Customer service experience required, intern and/or externship experience will satisfy this requirement. Previous Phlebotomy 1, blood banking experience or medical field experience. Background in a highly regulated industry. Bilingual skills and CDL driver a plus. Equal Opportunity Employer: Disability/Veteran. Apply at www.carterbloodcare.org, click Careers & search for job # Phlebotomist 2.

Employee Relations Manager. LifeSouth Community Blood Centers is seeking a highly skilled leader with proven management and HR experience, and a passion for making a difference. The Employee Relations Manager at our headquarters location in Gainesville, FL is responsible for facilitating employee relations and resolving personnel issues. The Employee Relations Manager deals with grievances and violations invoking disciplinary action, provides guidance, advice, and support to managers and employees on HR related issues, and oversees the work of eight Human Resources Coordinators.

(continued on page 12)

POSITIONS (continued from page 11)

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 this position, and [apply here!](#)

Immunohematology Reference Lab Manager.

LifeSouth Community Blood Centers is seeking an individual who enjoys leading a team of lab professionals dedicated to providing high quality products and services for patients. Our Birmingham, AL IRL is supported by Board Certified Pathologists in Transfusion Medicine, and by LifeSouth's accredited HLA Lab, Molecular Lab, and IRLs in Gainesville, FL and Atlanta, GA. The IRL Manager is responsible for providing onsite day-to-day supervision of testing personnel, ensuring compliance with regulatory agency requirements, and reporting of test results under the direction of the laboratory director. 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 this position, and [apply here!](#)

Regional Manager. LifeSouth Community Blood Centers is seeking a highly skilled leader with proven management experience and a passion for making a difference in the community. The Regional Manager in The Villages, FL, oversees daily operations of the region, is organized and decisive, and can motivate the team to reach daily and long-range blood collection goals. 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 this position, and [apply here!](#)

Medical Director (Memorial Blood Centers). Memorial Blood Centers (MBC.ORG), a division of Innovative Blood Resources, now a major partner in the NYBC Enterprise, has been saving and sustaining lives since 1948, and we're seeking a Medical Director who will help further our efforts and expand our success. This challenging medical directorship serves as co-medical director at a nationally recognized Children's hospital transfusion service, a national quality leading safety net hospital that is the largest local level 1 trauma center (both adult and pediatric), and associate medical director for blood centers in Minnesota (Duluth and Twin Cities, Nebraska (Lincoln and Omaha) and Greater Kansas City (Kansas and Missouri). The role will provide medical support across the Enterprise and for the assigned blood centers and transfusion services. Memorial Blood Centers supplies blood and blood components, state-of-the-art laboratory services, and biomedical expertise to area healthcare partners, national blood centers, biotechnology companies, research institutions, and international clients. The blood centers in Minnesota, Nebraska and the Greater Kansas City area serve nearly 100 hospitals and more than a dozen air ambulances with life-saving blood. Ample opportunity for research and clinical publication as well as direct patient and donor involvement. Click here to apply: <https://www.kleinhersh.com/positions/medical-director-2/>. 💧