



# A B C N E W S L E T T E R

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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2023 #40

November 3, 2023

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The Centers for Medicare and Medicaid Services (CMS) has [released](#) an [un-published version](#) of the hospital outpatient prospective payment system (OPPS) final rule. In the document, the agency finalized OPPTS payment rates for hospitals and Medicare ambulatory surgical centers (ASCs) that meet applicable quality reporting requirements by 3.1 percent. This update is based on the projected hospital market basket percentage increase of 3.3 percent, reduced by a 0.2 percentage point for the productivity adjustment.

Beyond that, America’s Blood Center’s (ABC) comments were generally about the inclusion of blood as an essential medicine. Under the proposed rule, CMS had solicited public comments about the potential to pay for a “buffer stock” of essential medicines under the inpatient prospective payment system (IPPS) and OPPTS payment rules. The list of essential medicines was pulled from an “Essential Medicines Supply Chain and Manufacturing Resilience Assessment” developed by the U.S. Department of Health and Human Services (HHS) Office of the Assistant Secretary for Preparedness and Response (ASPR) and [published](#) in May 2022.

In the final rule, CMS noted the following:

- “CMS is not finalizing any changes at this time, but intends to propose future policy addressing aspects of hospital practices with respect to pharmaceutical supply, including in future payment rules and through Conditions of Participation.”
- CMS noted the lack of consensus of stakeholders on the proposal. “The majority of commenters however, including MedPAC, stated they did not support the specific potential payment policy as described and discussed in the request for comment.”
- They cited comments about the use of alternative lists of essential medicines (which ABC proposed). “Many commenters agreed with the use of the 86 essential medicines prioritized in the report “Essential Medicines Supply Chain and Manufacturing Resilience Assessment (also referred to as ‘ASPR’s list’ by commenters).” Other commenters proposed other lists, including the list the U.S. Food and Drug Administration (FDA) was directed to issue under [Executive Order \(EO\) 13944](#) (referred to as the “FDA list” by many commenters), the World Health Organization’s Essential Medicines List, Vizient’s Essential Medications For High-Quality Patient Care, a list of drugs developed by the National Association of EMS Physicians, and a Pediatric Drug List. Many commenters stated the EO 13944 list is more inclusive (including blood products) than ASPR’s list and some stated that health care workers are most familiar with it.”

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### CMS Final Rule Available (continued from page 1)

Stated next steps included, “we appreciate the broad consensus regarding the need to curtail pharmaceutical shortages of essential medicines and promote resiliency in order to safeguard and improve the care hospitals are able to provide to beneficiaries. We agree with commenters that a multifaceted approach is likely necessary. As part of our initial efforts, we intend to propose new Conditions of Participation in forthcoming notice and comment rulemaking addressing hospital processes for pharmaceutical supply. Although in this final rule with comment period we are not adopting a policy regarding payment under the IPPS or OPFS for establishing and maintaining access to essential medicines, in response to the comments received, we continue to seek feedback from interested parties on ways to address the additional costs hospitals face to address pharmaceutical shortages and prepare for future emergencies. We will consider this feedback in future payment policy. We look forward to continuing to engage with the public on this critical issue in future rulemaking.”

The Physician Fee Schedule final rule was also [released](#). In the unpublished [final rule](#), CMS said the following concerning [joint comments](#) submitted by the blood community regarding therapeutic apheresis: “[s]everal commenters were in favor of establishing a specific new Therapeutic Apheresis Nurse Specialist labor category for CPT codes 36514, 36516, and 36522 because they did not believe the current RN/LPN labor code accurately captured their nurses’ specialized skills, experience, work, and time. Commenters pointed out that recruiting and retaining nursing personnel has been challenging, and when competing for an experienced specialized apheresis nurse, salary demands are higher to attract and keep them. The nominator also mentioned that a typical apheresis nurse tends to have an extensive clinical background and specialized therapeutic apheresis experience. Additionally, commenters noted that these nurses spend significant time with patients during apheresis procedures, often not leaving the patient’s bedside during the long procedure. Commenters noted that these nurses are trained to set up specialized equipment, work with hospital blood banks to acquire blood products, work with pharmacies for required medications, and consult with medical and nursing staff. [We] thank commenters for their detailed description of the typical duties of an apheresis nurse and how they might differ from a general RN/LPN nurse. Several commenters opposed the nomination of CPT codes 36514, 36516, 36522 as potentially misvalued and advised us to review the results of the forthcoming American Medical Association (AMA) Physician Practice Information Survey (PPIS) before making any changes. One commenter added that there might be a clinical labor type gap that CMS could resolve. We thank commenters for their feedback and for acknowledging the forthcoming AMA PPIS survey. After considering the public comments, we believe there may be a possible disparity with the clinical labor type for this service and that these codes would benefit from additional review in future rulemaking. We believe that it is likely that a general RN/LPN labor category is not adequately equivalent to an Apheresis Nurse Specialist and while there is currently no Apheresis Nurse category listed in the [physician fee schedule], there may be existing nurse categories that can act as a substitute, such as an oncology nurse. Therefore, for CY 2024, we are finalizing CPT codes 36514, 36516, and 36522 as potentially misvalued.” 💧

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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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## ABC Partners with Body Interact

America's Blood Centers (ABC) is partnering with [Body Interact](#), a leading provider of virtual patient simulators for potential and current healthcare professionals, to strengthen ABC members' blood donation education efforts, particularly among younger donors. As part of this partnership, Body Interact will develop 10 digital scenarios to illustrate the life-saving impact of blood donation. When finalized, these resources will enhance the ABC/ADRP, The Association for Blood Donor Professionals, [Vein-to-Vein](#) education program and provide a more engaging learning experience for students.

During the five-year partnership, ABC members will have full, unlimited access to these scenarios and can incorporate them into school visits and efforts to showcase the Vein-to-Vein program. ADRP members and educators using Vein-to-Vein will also benefit from a 30-day trial period to explore these scenarios with an option to purchase them. The digital scenarios will be finalized in the coming weeks, with the goal of having them available to members in an updated Vein-to-Vein program early in 2024. Please Contact ABC Director of Strategic Communications and National Partnerships [Jeff Gohringer](#) with questions.

(Source: [MCN 23-090](#), 10/31/23) ♦

## WORD IN WASHINGTON

The U.S. Food and Drug Administration's (FDA) Center for Biologics Evaluation and Research (CBER) has announced the launching of a "crowdsourcing campaign to ask stakeholders what they see as major advancements for biologic products that are likely to emerge in the next three to 10 years, including novel products and new manufacturing methods" according to a [report](#) from *Inside Health Policy*. "Researchers, developers, and others involved in medical innovation are asked to submit their ideas through an [online portal](#). CBER is seeking information about products, processes, manufacturing methods, and advances in science and technology that may impact its regulated products. Submissions will be open through Nov. 17<sup>th</sup>."

(Source: *Inside Health Policy*, "[CBER asks stakeholders what scientific advances will impact future products](#)," 10/31/23)

The U.S. Department of Defense (DoD) Combat Casualty Care Research Program (CCCRP), in conjunction with the Biomedical Advanced Research and Development Authority (BARDA) Radiation/Nuclear Medical Countermeasures Branch, with support from the Medical Technology Enterprise Consortium (MTEC), will be [holding](#) a "Blood and Blood Products State of the Technology" meeting November 29<sup>th</sup>-30<sup>th</sup> in Washington, D.C. [Registration](#) is open. The meeting's described purpose is, "to inform the U.S. Government and the greater scientific community of innovative research for blood and blood products, in support of current and future military and civilian blood needs for future large scale combat operations, as well as domestic mass casualty and disaster response. Additionally, the meeting will assist the US Government in identifying capability gaps and prioritizing efforts toward blood product development within DoD and across the inter-agency enterprise. The meeting will give an opportunity for a dynamic exchange of ideas among all participants and provide support to identify and overcome challenges." A preliminary program is [available](#).

(Source: DoD Announcement) ♦





## RECENT REVIEWS

**Does Cold Stored Blood Stop Syphilis Transmission?** A systematic review in *Vox Sanguinis* [sought](#) to answer the PICO question: “[c]an syphilis be transmitted (O) to people receiving a transfusion with infected blood, plasma or platelets (P) following cold storage (1-6 degrees Celsius) or storage at room temperature for different durations (I)?” The authors explained that, “[t]he following databases were searched from the time of inception up to January 2023: MEDLINE, PMC and NCBI bookshelf, the Cochrane Library, Embase, Web of Science and CINAHL.” They noted that, “[a] total of 10 studies were included in the review, comprising nine experimental animal studies and one observational human study... Meta-analysis showed that storing artificially infected human (six studies; risk ratio [RR] = 0.37, 95 percent confidence interval [CI]: 0.22–0.64,  $p = 0.0003$ ) or rabbit (two studies; RR = 0.08, 95 percent CI: 0.01 to 0.55,  $p = 0.01$ ) blood for more than 72 hours (h) before intratesticular injection significantly decreased the number of recipient animals that develop syphilis... Nonetheless, the possibility of syphilis transmission remained for up to seven days.” The researchers noted that, “[o]ne study investigated the infectivity of artificially infected human plasma after intratesticular inoculation in rabbits and found that syphiloma could develop after the plasma had been stored cold for up to 3 h, but this could not be shown after it was stored for 24, 48, or 72 h... Differences could not be found for rabbit plasma ( $p = 0.60$ ) or naturally infected rabbit blood ( $p = 0.28$ )... There was limited evidence from one study in fav[or] of the storage of artificially infected human platelets for over 72 h at cold temperatures (RR = 0.13, 95 percent CI: 0.03–0.52,  $p = 0.004$ ) but not at room temperature ( $p = 0.12$ ).” The review concluded that, “based on the currently available evidence, it remains highly uncertain whether prolonged storage can be relied upon to eradicate the risk of transfusion-transmitted syphilis (TTS). Even if the infectivity of *T. pallidum* in blood (components) may decrease after 72 h of cold storage, the evidence is very uncertain and the possibility for TTS may remain for several days after.”

**Citation:** D’aes, T., Van de Sande, D., De Buck, E., Zachée, P., Compennolle, V., and Vandekerckhove, P. “[Does cold storage of blood before transfusion prevent the transmission of syphilis? A systematic review and meta-analysis.](#)” *Vox Sanguinis*. 2023.

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

## PEOPLE



**Laurie J. Sutor, MD, MBA**, vice president of Medical Services and chief medical officer at Carter BloodCare, has announced that she will be retiring in August 2024. “Dr. Sutor’s long-standing relationship with the university represents all that is good about Carter BloodCare in the halls of academia. That’s been an incredibly valuable contribution,” said Dr. Merlyn Sayers, president and chief executive officer of Carter BloodCare, in an announcement. “Carter BloodCare has so many interfaces with the community – volunteers, businesses, places of worship, schools – and Dr. Sutor has contributed to every one of those interfaces. The professionalism, dedication, and creativity she has brought to Carter BloodCare and the community we serve is beyond compare.” Dr. Sutor has been in health care for more than 40 years including a 30-year career at Carter BloodCare, where she, “leads the Department of Medical Services, a team of medical directors with training and expertise in blood banking and transfusion medicine. In addition, Dr. Sutor’s leadership responsibilities include Carter BloodCare’s departments of Clinical Apheresis, Reference and Transfusion, Procedure Development, Donor Notification, and the Cellular Therapy Laboratory. Dr. Sutor

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PEOPLE (continued from page 4)

also serves as professor of Pathology at the University of Texas Southwestern Medical Center in Dallas, where she practices and teaches blood banking and transfusion medicine, and Medical Director at the Transplant Services Center.” Dr. Sutor holds, “[a] bachelor’s degree in biology from Colorado College in Colorado Springs and her medical degree from Emory University in Atlanta, Georgia...[She] is board certified by the American Board of Pathology and has an MBA from the University of Texas at Dallas...Throughout her career, Dr. Sutor has held leadership roles with many regional and national medical professional groups. These include President of the North Texas Society of Pathologists, Chair of the Scientific Medical Technical Committee with America’s Blood Centers, Chair of the Physician’s Council with the American Association of Tissue Banks, Chair of the Council of Science and Public Health for the Texas Medical Association, member and Treasurer of the Board of Directors with America’s Blood Centers, and member of the Board of Directors of Blood Centers Exchange (BCx). Awards and recognition include the Larry L. Trow Memorial Educational Award, presented by the South Central Association of Blood Banks, and the Vernie A. Stembriage Annual Teaching Award from the University of Texas Southwestern Department of Pathology. Dr. Sutor is the published author of numerous research articles to expand the awareness and in-depth understanding of transfusion medicine, blood component usage, therapeutic apheresis and many other crucial disciplines.” She has also been a tremendous supporter and advocate of America’s Blood Centers during her career including serving on and chairing the Scientific, Medical, and Technical Committee.

(Source: Carter BloodCare Announcement, 11/1/23)

**Gail McGovern**, president and chief executive officer (CEO) of the American Red Cross, will [retire](#) effective June 30<sup>th</sup>, 2024. According to announcement from the organization, “[i]n line with its succession plan, the Board of Governors elected Chief Operating Officer **Cliff Holtz** as the next president and CEO. Ms. McGovern served as CEO for more than 15 years after joining in 2008 “from the faculty of Harvard Business School.” Mr. Holtz has, “overseen all mission delivery” for the organization and currently “leads strategy.”

(Source: American Red Cross [Announcement](#), 10/31/23) 💧

## MEMBER NEWS

**Héma-Québec** recently [participated](#) in the 30<sup>th</sup> edition of the Canadian Organ and Tissue Donors Association (CODA) ceremony to honor donors for their altruism. “Over the past three decades, thousands of people have benefited from transplants across the country,” said Héma-Québec Vice-President of Medical Affairs and Innovation Dr. Marc Germain in a news release. “Every one of these thousands of donations marked by humanity deserves to be recognized. They fit in perfectly with our mission, whose scope ranges from blood to mother’s milk to stem cells and human tissues – always with the same objective of healing others through the gift of self.” A [recording](#) of the ceremony is available.

(Source: Héma-Québec [News Release](#), 10/20/23)

**Stanford Blood Center** (SBC) has [opened](#) a new location in Dublin, Calif. A ribbon cutting ceremony included Dublin Councilmembers Jean Dandy and Michael McCorrison, Pleasanton Vice-Mayor Jack Balch, Stanford Blood Center leadership, and representatives from the Major League Soccer’s San Jose Earthquakes. “We’re thrilled to open a location in the Tri-Valley, bringing convenience and a sense of community to our East Bay blood donors,” said Stanford Blood Center Executive Director Harpreet Sandhu, in a news release. “Over the last few years, SBC has seen a growing number of Alameda and Contra Costa County residents coming in to donate blood at our mobile drives. This location provides an easy way for Tri-Valley community members to make consistent donations of this life-saving gift at a day and time that works for them, while bringing a more diverse pool of blood types to our reserves.”

(Source: Stanford Blood Center [News Release](#), 10/24/23) 💧



**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 staffs only, unless otherwise specified.*

### **Advocacy Agenda Input Requested by November 10<sup>th</sup>**

America's Blood Centers (ABC) in consultation with the ABC Board of Directors and Policy Council is developing its Advocacy Agenda for 2024. As a part of the development process, member blood center feedback is being sought. Please complete the brief survey linked in [MCN 23-089](#) to share your input and make your voice heard by Friday, November 10<sup>th</sup>. The 2024 Advocacy Agenda will build upon the work completed over the past year. ABC thanks the many volunteers and partners who helped advance the policy issues outlined in the [2023 Advocacy Agenda](#). Please contact ABC Chief Executive Officer [Kate Fry, MBA, CAE](#) with any questions.

(Source: [MCN 23-089](#), 10/10/23)

### **Call for ABC Council of States Representatives**

ABC recently announced the formation for the Council of States, a first-of-its-kind project that convenes member blood center representatives to conduct state-based advocacy work in a unified manner. Through the Council, ABC is seeking interested individuals from member blood centers to identify proactive state-based advocacy priorities, share best practices, and monitor state legislation and regulations. While this effort will not replace the need for state-by-state lobbying activities and strategies, it will mobilize and build on our collective strength and synergies when we work together. Additional information including the charter and sign-up form for the Council are available in [MCN 23-091](#). The deadline to complete the sign-up form is December 1<sup>st</sup>. Please contact ABC Chief Executive Officer [Kate Fry, MBA, CAE](#) with any questions. The first meeting of the ABC Council of States will take place on March 6<sup>th</sup> at the [2024 ABC Annual Meeting](#).

(Source: [MCN 23-091](#), 11/2/23)

### **Registration Opens for 2024 ABC Annual Meeting**

[Registration](#) is open for the ABC [2024 Annual Meeting](#). The meeting will take place March 4<sup>th</sup>-6<sup>th</sup> in Arlington, Va. at the Ritz-Carlton in 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,

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### **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!



## INSIDE ABC (continued from page 6)

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 16<sup>th</sup>. [Sponsorship](#) opportunities are also available. [Contact us](#) with any questions.

### **Register for the 2023 ADRP International Showcase on November 15<sup>th</sup>**

The [2023 ADRP International Showcase](#) will take place on November 15<sup>th</sup> from 1-2:30 p.m. EST. [Registration](#) is open. Blood center professionals worldwide are encouraged to take part in this annual event that provides them a forum to share, connect and learn from each other. The featured speaker this year is Iryna Slavinska, chief executive officer and founder of DonorUA, an initiative to recruit and coordinate blood donors in Ukraine, who will share experiences of managing blood donations during a crisis. Other topics and speakers include: Perceptions and Effects of a Loyalty Program for Plasma Donors, Marloes Spekman, Sanquin, The Netherlands; Recruiting and Retaining Donors at the Western Cape Blood Service, Michelle Vermeulen, Western Cape Blood Service, South Africa; Bringing Customer Experience to Donor Experience, Mark Croucher, NHS Blood and Transplant, United Kingdom; Creating an Attitudinal Segmentation, Based on Motivations and Barriers, that Incorporates Donors and Non-donors, David Stephen, Australian Red Cross Lifeblood; and High Volume TikTok Presence – How to Do It!, Tracy-Lee Lewis, South Wales Police.

### **Save the Date: SMT Journal Club Webinar Set for December 15<sup>th</sup>**

The next ABC Scientific, Medical, and Technical Journal Club Webinar will take place on December 15<sup>th</sup> at 12 p.m. EST. The webinar is free to all ABC members. An email announcement is forthcoming with additional details including a link to registration and the articles to be reviewed on the webinar. 💧

## **GLOBAL NEWS**

**Switzerland has [revised](#) its blood donor deferral policy shifting to individual donor assessments.** According to a report in *Reuters*, “[u]nder Switzerland’s new regulations, a four-month waiting period applies to all people after their last sexual encounter with a new partner, [regardless of sexual orientation], or a 12-month waiting period if sexual contacts have taken place with more than two partners within the last four months.” The country previously had a 12-month deferral policy for sexually active gay and bisexual men. According to *Reuters*, the country’s blood provider, Swiss Transfusion SRC, previously, “submitted a request to medical authorities to revise the criteria based on a risk assessment of sexual behavi[o]rs, the epidemiological situation in Switzerland, and data from countries that have already lifted restrictions.”

(Source: *Reuters*, “[Switzerland lifts extra restrictions against gay men giving blood](#),” 11/1/23) 💧

## **COMPANY NEWS**

**Bloodbuy and Cerus Corp. have [partnered](#),** “to offer Pathogen Reduced Cryoprecipitated Fibrinogen Complex via the Bloodbuy online marketplace.” A news release from Bloodbuy explained that Cerus’ Intercept® fibrinogen complex (IFC), “a pathogen reduced blood component for fibrinogen supplementation with a 5-day post-thaw shelf life... The 5-day post-thaw shelf life allows IFC to be thawed in advance and available for immediate use, and it minimizes wait times and wastage rates, addressing common inventory challenges.” Bloodbuy is, “[ a] healthcare software and services company focused on developing

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COMPANY NEWS (continued from page 7)

cloud-based technologies that transform how biological products are managed and disseminated.”

(Source: Bloodbuy [News Release](#), 11/1/23)

CSL [announced](#) that the Canadian regulatory authority, Health Canada, has authorized the company’s gene therapy for the treatment of hemophilia B. According to a news release, Hemgenix® is the “first and only” gene therapy treatment in Canada, “indicated for the treatment of adults with hemophilia B who require routine prophylaxis to prevent or reduce the frequency of bleeding episodes.” A phase III open label, single-dose, single-arm, multi-center (HOPE-B) is ongoing. Trial data so far has shown that, “people with hemophilia B treated with a single infusion of [the gene therapy] demonstrated significant increases in mean FIX activity levels (as measured by one-stage assay) of 36.9 percent at 18-months, that were sustained at 36.7 percent at 24-months post-treatment, compared to the six-month lead in period. Seven to 18 months post-infusion, the mean ABR was reduced by 58 percent compared to the six-month lead-in period (4.13 to 1.73). Following infusion of [the gene therapy], 96 percent of patients (52 out of 54) discontinued use of prophylaxis and remained free of previous continuous routine prophylaxis therapy. Of the adverse events reported based on phase 2b and phase 3 trial (Hope-B), most frequently reported adverse drug reactions were ALT elevations, headache, influenza-like illness and AST elevations.” The U.S. Food and Drug Administration [approved](#) the gene therapy in November 2022, and Hemgenix® has also been “granted conditional marketing authorization by the European Commission (EC) for the European Union and European Economic Area, and the United Kingdom’s Medicines and Healthcare products Regulatory Agency (MHRA)…There is no clinical experience of Hemgenix® use in patients with mild or moderate hemophilia B (FIX activity >2 percent).”

(Source: CSL [News Release](#), 10/26/23) 💧

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

- **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](mailto:newsletter@americasblood.org). (For a more detailed announcement in the weekly "Meetings" section of the newsletter, please include program information.)

### 2023

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] 30<sup>th</sup> International Workshop on Surveillance and Screening of Blood-borne Pathogens, Aarhus, Denmark.** More information available [here](#).

Sept. 4-6. **American Society for Clinical Pathology (ASCP), Chicago, Ill.** More information coming soon.

Sept. 30- Oct. 3. **American Association of Tissue Banks (AATB), Denver, Colo.** More information coming soon.

Oct. 19-22. **Association for the Advancement of Blood & Biotherapies (AABB) Annual Meeting, Houston, Texas.** More information coming soon. 💧

## CLASSIFIED ADVERTISING

Classified advertisements, including notices of positions available and wanted, are published free of charge for a maximum of three weeks per position per calendar year for ABC 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)

## EQUIPMENT AVAILABLE

**For Sale.** Spectra Optia – device purchased pre-pandemic and has only had 45 procedures performed on it. Total Run Hours are 181; Current Software Version is 11.3. Optia is in excellent condition and has no known defects. The Blood Bank of Alaska will include a Blood Warmer, as well as cover the cost of shipping. For more information, send inquiries to [bbaynard@bbak.org](mailto:bbaynard@bbak.org) or call (907) 222 – 5664.

**For Sale.** 2 iBF125-GX, i.Series Plasma Upright Freezers. Purchased April of 2023. The freezers were validated in June and have been in use since July. Freezers are in excellent condition and have no known defects. Buyer to cover the cost of shipping. For more information, send inquiries to [bbaynard@bbak.org](mailto:bbaynard@bbak.org) or call (907) 222 – 5664.

## POSITIONS

**Chief Operating Officer.** Suncoast Blood Centers is seeking a talented and passionate Chief Operating Officer to join their growing team. As a member of the senior leadership team, the Chief Operating Officer plans, organizes, directs and evaluates all activities associated with the operations of the blood center, including recruitment and retention of donors and sponsor groups, the collection of blood from donors and further manufacturing and distribution of donations in the laboratory. In addition, this executive is accountable for the functions and staff relating to operations planning, contact center, supply chain, research, and continuous process improvement. At SunCoast Blood Center, we lead our teams while keeping our mission, vision, and values at the forefront of all we do. As a leader, you will inspire, train, coach, and collaborate within your department and the within the broader organization, with a focus on strategic goal achievement. Suncoast Blood Centers is the only local blood center that has been in the community for over 75 years. Providing blood services to many local hospitals and cancer centers in SWFL. To apply: [Chief Operating Officer - SunCoast Blood Centers](#)

**Vice President, Quality & Regulatory Affairs (VPQRA).** The Vice President, Quality & Regulatory Affairs (VPQRA) leads the Organization's adherence to regulations and standards established by governing agencies (AABB, FDA, CLIA, State, OSHA, NRC, EU, etc.). Kentucky Blood Center is seeking qualified candidates to fill this key executive leadership role which is responsible for our Quality Assurance (QA) program and regulatory compliance activities. The position has oversight of the QA department and team, and reports to the CEO. Qualifications include MLS/CLS (ASCP) with preference given to candidates with a graduate degree, and blood banking experience. Relocation to the Lexington, Kentucky area required (assistance provided). For more information or to apply, visit <https://www.kyblood-center.org/about-us/careers>

**Manager of Donor Services | Manager of Donor Resources | Manager of Hospital Services.** 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 Manager of Donor Services, a Manager of Donor Resources, and a Manager of Hospital Services who will be responsible for day-to-day operations within each of their respective departments as we expand our services into this new territory. 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. *These roles are based in Roanoke, VA. Prospective candidates may be eligible for relocation assistance.* How to apply: [Manager of Donor Services Application](#) | [Manager of Donor Resources Application](#) | [Manager of Hospital Services Application](#).

**Director of Human Resources (San Diego, CA).** The San Diego Blood Bank is seeking a dynamic Director of Human Resources. This role is directly responsible for the overall administration, coordination, and evaluation of the human resource function. This position facilitates organization and leadership development efforts with employees and managers to address root causes of human resource issues. The Director of Human Resources plays a vital role in administering talent management, workforce planning, recruitment, and employee relations through a systematic approach. This position supports executive leadership and management in the development of solutions through cultural and process perspective organizational development and drives a culture of performance and results. A strategic planner and partner to all levels of leadership acting as a cultural champion, mentor and consultant for the organization building avenues of healthy and positive work environments. Salary Range: \$100,000 - \$125,000/annual. Education: Bachelor's degree in related field required. Master's degree preferred. Experience: 10 years of directly related experience. Certifications: HR Certificate/SHRM professional certification preferred. [Please click here to view the full job description and apply.](#)

**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

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**POSITIONS** (continued from page 10)

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](#).

**Supply Chain Manager.** LifeSouth Community Blood Centers is seeking a highly skilled leader with proven management experience and a passion for making a difference. The Supply Chain Manager at our headquarters location in Gainesville, FL is responsible for vendor selection, negotiation, establishment and maintenance of all purchased materials, supplies, equipment, and services used by the company. The Supply Chain Manager oversees daily operations of the Purchasing team, is organized and decisive, and can motivate the team to reach daily and long-range 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!](#) 💧