

2023 #41

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CCP for Patients with COVID-19-Induced ARDS

Researchers in Belgium have published the findings from a randomized trial that explored the impact of COVID-19 convalescent plasma (CCP) as a treatment for COVID-19 patients on mechanical ventilation from acute respiratory distress syndrome (ARDS). The data has been [reported](#) in the *New England Journal of Medicine*. The authors explained that the, “randomized, two-group, open-label trial was conducted at 17 [Belgian] sites.”

The researchers also noted that, “[w]e encouraged inclusion soon after the initiation of invasive mechanical ventilation and stratified the randomization according to the delay between invasive mechanical ventilation and inclusion (≤48 hours vs. >48 to 120 hours). We assigned patients in a 1:1 ratio to receive either CCP with a neutralizing antibody titer against SARS-CoV-2 of at least 1:320 or standard care.” They included adult patients, “who had a score on the Clinical Frailty Scale of less than six (range, 1 to 9, with higher scores indicating greater frailty), who had been admitted to a participating intensive care unit (ICU) with a diagnosis of COVID-19–induced ARDS, and who had received invasive mechanical ventilation for a maximum of five days were assessed for eligibility.” CCP was collected from adult donors who had been diagnosed previously with SARS-CoV-2 but had since recovered, “between 28 days and 10 months earlier.”

The authors explained that the study’s, “primary outcome was death by day 28 after randomization. Secondary outcomes included adverse events, inflammatory and anti-SARS-CoV-2 antibody responses, the Sequential Organ Failure Assessment (SOFA) score, the use of organ support, the length of hospital stay, and death by day 90 and 365.” The trial included 475 patients from September 2020 to March 2022 who had COVID-19-induced ARDS. According to the researchers, “[a] total of 237 patients were assigned to receive CCP, and 238 patients were assigned to receive standard care.”

The trial found that, “[a]t day 28, mortality was 35.4 percent (84 of 237 patients) in the CCP group and 45.0 percent (107 of 238) in the standard-care group. (P=0.03, before and after adjustment for the stratification factor). These values were 32.7 percent (56 of 171) and 46.8 percent (80 of 171), respectively, among patients who underwent randomization 48 hours or less after ventilation initiation and 42 percent (28 of 66) and 40 percent (27 of 67), respectively, among those who underwent randomization more than 48 hours after ventilation initiation. The survival curves in the CCP and standard-care groups separated at approximately day 17, and the difference in restricted mean survival time (CCP minus standard care) at day 28 was 0.33 days (95 percent CI, -1.27 to 1.92). The neutralizing antibody titer of [infused]

(continued on page 2)



CCP for Patients with COVID-19-Induced ARDS (continued from page 1)

CCP was not associated with mortality.” The authors also noted that no adverse events were, “directly attributed to [CCP].”

The researchers concluded that, “[t]he administration of plasma collected from convalescent donors and documented to have neutralizing antibody titers of at least 1:160 to patients with COVID-19–induced ARDS within five days after the initiation of invasive mechanical ventilation significantly reduced mortality at day 28. In a prespecified analysis, this effect was mainly observed in the patient group that underwent randomization 48 hours or less after the initiation of invasive mechanical ventilation.” The authors also noted that limitations of this trial included, “it was not blinded...[CCP] was obtained between April 2020 and May 2021, when the ancestral virus and then its alpha variant were predominant in Belgium, and their neutralizing antibodies might have been less active against subsequent variants...[W]e have not standardized our in-house neutralizing antibody titers against an international standard...[D]ata were missing for a substantial number of quantitative nasopharyngeal PCR and antibody measurements.”

Citation: Misset, B., Piagnerelli, M., Hoste, E., *et al.* “[Convalescent plasma for COVID-19–induced ARDS in mechanically ventilated patients.](#)” 2023. *NEJM*. 💧

The Community Blood Center & Blood Center of Northcentral Wisconsin Announce Integration

The Community Blood Center (Appleton, Wis.) (CBC) and the Blood Center of Northcentral Wisconsin (BCNW) have [integrated](#). According to an announcement, the integration occurred on October 9th, and “will increase the donor base and blood collections to support local hospitals and communities throughout Wisconsin...[and allow the organizations] to streamline its processes and improve the donor experience throughout CBC’s Midwest footprint.” The organizations previously “joined forces to increase efficiency and blood collection services” in January 2022, but the new integration will allow CBC and BCNW, “to operate under the CBC name and brand. BCNW will adopt The Community Blood Center name as well as CBC’s mission, vision, and values.” John Hagins, president and chief executive officer of CBC, added in the announcement, “[t]he partnership of CBC and BCNW is a win-win for all — donors, our hospital partners, and the local communities we serve — as we work together to fulfill our mission to connect lives and share life.” Emily Jolin, president and CEO of BCNW, stated in the announcement, “the integration of CBC and BCNW allows us to leverage the best of each organization to grow the blood supply for our local hospital partners and their patients.”



has joined



(Source: CBC and BCNW [Announcement](#), 10/20/23) 💧

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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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WORD IN WASHINGTON

Monica M. Bertagnolli, MD, has been [confirmed](#) by the U.S. Senate as the director of the National Institutes of Health (NIH). According to an agency announcement, “[c]hief among her key priorities is ensuring clinical trials yield the best results by increasing the diversity of participants; embracing the rapid expansion of new learning-based analytical tools and ensuring their use improves care for all people; and restoring trust in science by making it accessible to all communities and inspiring the next generation of doctors and scientists. Dr. Bertagnolli also is committed to leveraging commonalities across all diseases — from biology to accessing care — to strengthen collaboration across the 27 NIH institutes and centers.” The agency announcement also noted that she is the, “first surgeon and the second woman to hold the position [of NIH Director]. Dr. Bertagnolli transitioned from her role as the 16th director of the National Cancer Institute (NCI), a position she has held since October 2022. NCI Principal Deputy Director Douglas R. Lowy, MD, will serve as the NCI acting director until President Biden appoints a new director...Dr. Bertagnolli replaces Lawrence A. Tabak, DDS, PhD, who was selected by U.S. Department of Health and Human Services (HHS) Secretary Xavier Becerra, JD, to serve as the acting director of NIH. Dr. Tabak [had held] the position since December 2021 when long-time director Francis. S. Collins, MD, PhD, announced he would step down after more than 12 years in the role.”

(Source: NIH [News Release](#), 11/9/23)

A [report](#) in *MedPage Today* this week indicated that the U.S. Food and Drug Administration (FDA) is considering a “proposal to classify salvaged blood irradiators as high-risk Class III devices.” *MedPage Today* quoted FDA reviewers as indicating that the proposal, “is based on a dearth of information supporting safety, and no data supporting their benefits.” The Radiological Devices Advisory Panel met to discuss and make, “recommendations on whether these devices — used to prevent metastasis during surgery — are safe enough for a Class II designation, or whether they should be designated to the highest-risk category...According to [FDA briefing documents](#), a literature review that spanned 21 years turned up only 10 studies on these devices. However, none of them specifically mentioned either of the two irradiators cleared in the U.S. Furthermore, none of these studies were randomized controlled trials, were conducted in the U.S., or discussed risks or performance issues, leading FDA staff to conclude that ‘the data to support effectiveness of irradiation of intraoperatively salvaged blood to prevent metastasis is sparse.’ They also pointed out that ‘blood irradiation of intraoperatively salvaged blood in order to prevent metastasis does not currently appear to be a widely used technique.’” The *MedPage Today* report also explained that, “the U.S. Government Accountability Office (GAO) has [previously] warned that in the hands of terrorists, some of these devices could be used as ‘dirty bombs,’ given that they can rely on high-risk radioactive materials.”

(Source: *MedPage Today*, “[Evidence of safety, efficacy for salvaged blood irradiators lacking, FDA Staff say](#),” 11/3/23 ♦)

[NEW on CollABOrate](#)

COLLABORATE

SHARE STRATEGIC ADVICE | SOLVE CHALLENGES | DEVELOP NEW APPROACHES

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

- [Blood Typing Donors Prior to Registration](#) (COLLECTIONS & DONOR SERVICES)
- [Type A Liquid Plasma](#) (MEDICAL ISSUES)
- [Cryo Licensure](#) (QUALITY BYTES)
- [Proficiency Testing for Sysmex XN with Blood Bank Module](#) (TECHNICAL DIRECTORS)

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



RESEARCH IN BRIEF

Do Donor Pregnancies Affect Recipient Mortality? A [study](#) in *Vox Sanguinis* “quantified the association between storage time of the red [blood] cell product, donor sex and pregnancy history, and mortality of patients in a large observational cohort in the Netherlands.” The authors “hypothesize[d] that mortality will be highest in male patients who received fresh units from ever-pregnant donors.” They noted that, “[t]he cohort include[d] adult (≥ 18 years of age) first-ever transfusion recipients from six hospitals in the Netherlands between 2005 and 2015...[P]atients were classified as either having received blood products from ever-pregnant, never-pregnant, or male donors, and storage was defined as fresh [1-10 days] or old [11–36 days]...A total of 42,456 patients were included in this analysis.” The researchers explained that, “[n]o statistically significant associations between exposure categories and mortality were observed among male patients. [Additionally,] [m]ale patients receiving fresh blood from ever-pregnant donors may have had higher mortality after transfusions, but this association was not statistically significant (hazard ratio (HR) 1.39, 95 percent CI 0.97–1.99). No association was present when the units donated by ever-pregnant female donors were old (HR 1.05, 95 percent CI 0.99–1.12). All HRs for female patients were around or below one, suggesting a smaller risk when compared to the reference category of old male units. Receiving fresh units from ever-pregnant donors was not associated with mortality in female patients (HR 0.83, 95 percent CI 0.52–1.30).” The authors also noted that, “[f]or female patients, receiving fresh male units was associated with a small survival benefit (HR 0.86, 95 percent CI 0.79–0.93). Due to small sample size, the HR for exposure to ever-pregnant units stored for a short duration could not be shown when the cut-off of seven days was used in both male and female patients...The p-value for the trend for the interaction between age and exposure was 0.316. The low event numbers suggest considerable uncertainty...No noteworthy associations were present between product characteristics and mortality in female patients in the stratified analysis.” The authors concluded that, “[t]he findings did not consistently support the notion that storage plays a role in modifying the association between donor characteristics and patient survival.”

Citation: Valk, S.J., Caram-Deelder, C., Evers, D., *et al.* “[Donor pregnancies and transfusion recipient mortality: A role for red blood cell storage?](#)” *Vox Sanguinis*. 2023.

Contributed by Richard Gammon, MD, Medical Director at OneBlood 



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BRIEFLY NOTED

The American Society for Clinical Pathology (ASCP) has published the [findings](#) from the “2022 Vacancy Survey of Medical Laboratories in the U.S.” The survey aimed to, “determine the extent and distribution of laboratory workforce shortages within the nation’s medical laboratories.” Key findings from the data includes, “Current Vacancy Survey data show the COVID-19 pandemic’s continued effects on medical laboratory vacancies, retirements, and certification requirements; the laboratory community must build a stronger and more resilient workforce for the future; [and the] Medical and Public Health Laboratory Coalition is encouraged to intensify its focus on solutions-based discussions in support of the laboratory workforce.”

Citation: Garcia, E., Kundu, I., Kelly, M., and Soles, R. “[The American Society for Clinical Pathology 2022 Vacancy Survey of medical laboratories in the United States.](#)” *American Journal of Clinical Pathology*. 2023.💧

MEMBER NEWS

Versiti recently [announced](#) the acquisition of Pearl Pathways, “a full-service life science consulting firm, providing regulatory affairs, quality compliance, and niche CRO services.” Versiti President and Chief Executive Officer (CEO) Chris Miskel, MBA, stated in the news release, “Pearl Pathways brings deep expertise in life science product development, which ultimately leads to getting life-saving devices, diagnostics, and therapeutics to patients faster. This strategic collaboration not only enriches the scope and diversity of our research-based solutions from Versiti Clinical Trials, but also bolsters our spectrum of capabilities to support curing diseases sooner.”

(Source: Versiti [News Release](#), 11/7/23)

New York Blood Center Enterprises (NYBCe) recently [granted](#) Big Eye Diagnostics “an exclusive commercial license [for] rights to develop a diagnostic tool for onchocerciasis or river blindness,” according to a NYBCe news release. “Under the terms of the agreement, Big Eye Diagnostics will use key biomarkers, identified by the team at NYBCe and the National Institute of Allergy and Infectious Disease (NIAID), part of the National Institutes of Health, to increase the specificity of a serological detection assay for infection with *Onchocerca volvulus*, the parasitic worm that causes river blindness.”

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

Shepard Community Blood Center recently held its 14th annual golf tournament on November 6th. Nearly 100 people from 12 states gathered for the event. This year, the tournament was renamed to honor former Shepard Community Blood Center President and CEO Kevin Belanger, DHA, MS, MT(ASCP)SBB. Dr. Belanger was the visionary who built the tournament into the successful event that it has become. Although he has relocated since retiring at the end of 2022, Dr. Belanger made the trip back to Augusta for the surprise announcement. Registration for the 15th Annual Kevin Belanger Golf Tournament is now open. Please contact [Becky Bentley](#) for additional registration information or sponsorship opportunities.



(Shepard Community Blood Center Announcement, 11/7/23)

Contributed by Benjamin Prijatelj, MBA, President and CEO at Shepard Community Blood Center 💧



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INSIDE ABC

The programs and services described in the Inside ABC section are available to ABC member blood centers and their staffs only, unless otherwise specified.

Deadline Approaching for 27th Awards of Excellence Nominations

[Nominations](#) for the 27th Annual America's Blood Centers (ABC) *Awards of Excellence* are due November 17th. This year, awardees will be recognized during the [2024 ABC Annual Meeting](#) and at a reception on Capitol Hill (Tuesday, March 5th), where a celebration of the awardees' achievements will include fellow meeting attendees, members of Congress and their staff, federal agency partners, and more. A full description of the awards is [available](#) to ABC members and all members of ABC are encouraged to submit a [nomination](#). Please contact [us](#) with any questions.

(Source: [MCN 23-094](#), 11/9/23)

Call for ABC Council of States Representatives

ABC recently announced the formation of 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 1st. 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 6th 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 4th-6th 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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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.

Register for the 2023 ADRP International Showcase on November 15th

The [2023 ADRP International Showcase](#) will take place on November 15th 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 15th

The next ABC Scientific, Medical, and Technical Journal Club Webinar will take place on December 15th 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

The European Blood Alliance (EBA) and The International Federation of Blood Donor Organizations (FIODS/IFBDO) published a [joint statement](#) on November 3rd regarding “voluntary non-remunerated donations (VNRD) in the context of the negotiations of the future substances of human origin (SoHO) intended for human application [regulation](#).” In the statement, the organizations endorse VNRD and urge government officials to do the same, “EBA, representing public/not-for-profit blood establishments in Europe, and FIODS, the international organi[z]ation representing voluntary, anonymous, and non-remunerated blood donors, call on the European Parliament, the Council of the European Union (EU), and the European Commission to adopt a final text of the SoHO regulation that reaffirms the principle of VNRD and a strict definition of the term ‘compensation.’” The organizations explain how, “VNRD have proven to secure a safe and sustainable blood supply in Europe, in the interest of patients’ safety and donors’ wellbeing...Over the past decades medical assessments have repeatedly shown that remunerated blood donors have a higher risk of blood-borne infectious diseases than voluntary non-remunerated donors. As testing for pathogens or pathogen reduction methods are not entirely fail proof, collecting blood for blood components from voluntary non-remunerated donors is an important safety measure. By contrast, for plasma-derived medicinal products (PDMP), the safety gain from collecting plasma from voluntary non-remunerated blood donors has been considered of relatively less importance, given the large number of complementary measures, including several consecutive steps of pathogen reduction, which are implemented during the production process. However, financial compensation for plasma donation raises other concerns regarding donor health and supply resilience.” The joint statement also discusses other potential negative impacts of remunerated donation. “Payment for the donation of blood (including donations of plasma and cellular components) both threatens blood safety and erodes community solidarity. Conversely,

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GLOBAL NEWS (continued from page 7)

social cohesion can be enhanced by the act of voluntary non-remunerated donation because it is highly ethical and strengthens the social and individual identity of the donors... Payments for donations, by placing an onus on under-privileged populations in need of money, also compromise the development of a voluntary, non-remunerated and stable blood donor program. There are concerns that a sufficient and sustainable supply of available and accessible blood and blood components based on VNRD may be compromised through the presence of parallel systems of paid donation.” The Plasma Protein Therapeutics Association (PPTA) also issued a [statement](#) on October 27th that noted, “[w]hile PPTA welcomes measures that protect donor health, including the proposals to increase donor monitoring, the statement that plasma donations imply a ‘significant risk’ or a ‘non-negligible risk’ is not supported by science or any evidence. Scientific studies and EU h[e]movigilance reporting have consistently shown that plasma donation is a safe procedure and presents a low risk to donors, comparable to blood donation. This reference is not consistent with well-established international risk principles and could impact Member States’ willingness to put in place the necessary infrastructure for plasma collection and donors’ willingness to donate... PPTA is committed to supporting greater strategic autonomy for Europe in plasma to manufacture PDMPs and to meeting growing patient need for PDMPs. Throughout the upcoming trilogue negotiations, we hope that the co-legislators will work together to ensure a sustainable and flexible regulatory framework that allows Member States to establish an effective plasma collection ecosystem that would protect and increase patient access to life-saving plasma-derived medicinal products (PDMPs), while ensuring the health and safety of SoHO donors.”

(Sources: EBA and FIODS/IFBDO [Statement](#), 11/3/23; PPTA [Statement](#), 10/27/23)

The Chartered Quality Institute (CQI) [celebrated](#) World Quality Week November 6th-10th. According to the organization, this “global campaign raises awareness of the quality management profession and focuses on the theme [this year] of reali[z]ing your competitive potential.” America’s Blood Centers thanks all quality management professionals at its member blood centers and within the blood community worldwide for their hard work and contributions to the lifesaving efforts of blood centers and transfusion services.



(Source: CQI [Announcement](#), 11/6/23) ◆

COMPANY NEWS

Terumo Blood and Cell Technologies (Terumo BCT) and **908 Devices** have [partnered](#), “to enable on-line monitoring of critical process parameters in Terumo BCT’s Quantum Flex Cell Expansion System.” According to a company news release regarding the collaboration, “[t]he combination of the companies’ automation technologies will help advance the development of life-saving cell and gene therapies by providing insights into and control of one of the largest components of cell therapy development and manufacturing... Terumo BCT’s Quantum Flex Cell Expansion System is an automated and functionally closed system [designed] to meet the needs of cell therapy developers throughout their commercialization journey, from process development to clinical manufacturing.”

(Source: Terumo BCT [News Release](#), 11/6/23) ◆

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!



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

- **2023 ADRP International Showcase** – Nov 15. [Registration](#) is open. More information available [here](#).
- **ABC Scientific, Medical, and Technical Journal Club Webinar** – Dec. 15. More information coming soon!



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

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.** 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](#).

Nov. 29-30. **U.S. Department of Defense Combat Casualty Care Research Program, 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), Blood and Blood Products State of the Technology Meeting, Washington, D.C.** 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](#).

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CALENDAR (continued from page 9)

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

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 or call (907) 222 – 5664.

For Sale. Two 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 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 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

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POSITIONS (continued from page 10)

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](#).

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](#). 💧