56th ABC Summer Meeting and Medical Directors Workshop

Close to 120 professionals from ABC member blood centers and industry partners traveled to Montréal, Québec July 31st – August 2nd at the Hotel Omni Mont-Royal to partake in the 56th ABC Summer Meeting hosted by ABC member Héma-Québec.

The meeting began with the ABC Medical Directors Workshop which opened by exploring the use of bacterial cultured platelets and cold storage apheresis platelets versus whole blood-derived platelets. YanYun Wu, MD, PhD, chief medical officer at Bloodworks Northwest discussed the risk of bacterial contaminated platelets and the potential for additional risk reduction and mitigation strategies from the U.S. Food and Drug Administration. Additionally, Dr. Wu discussed the benefits of cold storage platelets for patients with severe bleeds, while being suboptimal for prophylactic transfusion.

Next, Barbara Konkle, MD, associate chief scientific officer at Bloodworks Northwest, presented on the urgent reversal strategies for anticoagulant and antiplatelet agents. She examined the complications encountered with patients taking anticoagulant or antiplatelet drugs. Dr. Konkle also touched on the reversal agents that are currently available for anticoagulants and the need for additional strategies.

Cytomegalovirus (CMV) transmission in neonates was presented by Héma-Québec’s Gilles Delage, MD, MSc. Dr. Delage talked about the efficacy of leukoreduction and CMV seronegative donors in mitigating the risk of transmission. He acknowledged the importance of including neonatologists in discussions to form mutually agreeable policies, while addressing the lack of feasibility of supplying CMV-negative blood products if most of the donor pool is CMV-positive. San Diego Blood Bank Vice President of Laboratories Robert Tressler, PhD explored expanding cellular therapy collections into CAR-T. Dr. Tressler discussed the advantageous position that blood centers are in to support cellular therapy initiatives, which continue to increase. He mentioned the potential benefits of blood centers expanding cellular therapy services as a value-added service or partnership to aid “outside-the-box” partners in their research and development efforts, thereby increasing their own sustainability.

Potential iron depletion among donors continues to be an important and hot topic within the blood community, particularly teen donors. Bryan Spencer, PhD from the American Red Cross presented on data from the CHILL study discussing the role of blood donation in iron depletion, available mitigation strategies, and the unknown impact of potential interventions. Joseph Kiss, MD, medical director at the

(continued on page 2)
SUMMER MEETING & MEDICAL DIRECTORS WORKSHOP (continued from page 1)

Institute for Transfusion Medicine, a division of Blood Systems, Inc., discussed the risks of iron overload, increased ferritin levels, and their relationship to metabolic syndrome and cardiovascular disease. He examined whether blood donors would be at risk through iron supplementation mitigation strategies. Dr. Kiss pointed out that cohort studies linking increased iron status and depletion to cardiovascular disease are “largely negative” and do not support the “iron hypothesis.”

Rebecca Haley, MD of Bloodworks Northwest provided an update on the status of the “Common Rule.” She explained that the “Common Rule” now requires more simple, direct, and readable sections for important consent information. Changes for biospecimens have made the requirements for secondary use less restrictive and clarified the requirements. Additionally, the changes increased consenting obligation to include the commercial use statement.

The workshop concluded with the morbidity and mortality rounds that reviewed case studies for discussion by attendees. Richard Gammon, MD from OneBlood presented on the fortuitous case of two Rhnull individuals that met 50 years prior that led to a unique friendship that proved beneficial years later. Geeta Paranjape, MD explained a case of mistaken identity with a donor that shared the same name as his father except for the suffix. The mistaken identity resulted in an accusation of sharing sexual orientation information of a donor with other individuals.

Tom Schallert of Northern California Community Blood Bank presented on a near miss window HIV transmission that resulted in tightening of SOPs for donor updates between quality assurance and tele-recruitment. James Shikle, MD of Shepeard Community Blood Center explored the apheresis requests that were denied by the medical director, explaining that apheresis is a consult service rather than a demand service. He added that some clinicians may lack understanding of how to choose patients for apheresis. The day concluded with a networking reception for all attendees.

Please Note: The ABC Summer Meeting will be reported on in two parts. The first (Medical Directors Workshop) will be in this issue. Part 2 (SMT Forum, Business Forum, and Members Meeting) will be covered next week.
ABC Issues Talking Points on Iron Depletion of Donors and Mitigation Strategies for Member Blood Centers

ABC has provided its members with tools to assist with any inquiries regarding iron depletion of donors and mitigation strategies. MCN 18-032: Donor Iron Update was distributed this week and includes links to both talking points and a position statement. Members of ABC can access these documents through the ABC Member Website.

New Emeritus Members Approved by ABC Membership

Jay Menitove, MD, Charlie Mosher, and Tom Schallert have been elected as the latest Emeritus Members of ABC during the 56th Summer Meeting. These three individuals will be able to attend ABC meetings and events going forward. Emeritus members are elected by the active institutional members of ABC and must have previously held a position with an active or associate member of ABC and are now retired.

Rep. Mike Gallagher Visits ABC Member Community Blood Center (Appleton, Wis.)

U. S. Representative Mike Gallagher (R-Wis.) recently toured the facility and laboratory at Community Blood Center (Appleton, Wis.) during a visit to his home district. Rep. Gallagher learned about the life-saving work of the blood center, saw the innovative ground being covered from a testing and diagnostic standpoint, and heard firsthand accounts of the unique challenges facing community blood centers both locally and nationwide. Members of ABC are encouraged to reach out to their congressional members individually using the ABC Action Center and share these visits with us.

(Source: Community Blood Center Announcement 8/7/18)

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. Please send letters to the Editor at newsletter@americasblood.org or fax them to (202) 899-2621. Please include your correct title and organization as well as your phone number. The deadline for letters is Wednesday to make it into the next newsletter.
RESEARCH IN BRIEF

Disease-carrying ticks found in 83 new U.S. counties. A new, innovative, study of tick and tick-borne pathogen prevalence may have relevance to the blood community, following the U.S. Food and Drug Administration (FDA) publishing a babesia draft guidance for the blood community based on regional differences in the incidence of the infection that change over time. The study suggests that ticks capable of transmitting *B. microti* are somewhat more widespread in the U.S. than is reflected in clinical surveillance and reporting. This kind of information could be useful for enhancing clinical surveillance for pathogens of interest.

The authors used results from tick identification and pathogen testing performed, free of charge, on ticks submitted by volunteer citizens across the country. They offer insights into geographic distributions of ticks and tick-borne agents at a larger scale than that offered by typical clinical and laboratory surveillance. More than 16,000 ticks were submitted by people from 49 states. Submissions were tracked by tick species and county and were tested by nucleic acid amplification for four tick-borne pathogens, including *B. microti* and *A. phagocytophilum* that are known to be transfusion-transmitted, and *B. burgdorferi* and *myamotoi* that are not.

The data corroborates and expands the currently known geographic ranges of tick distribution. While travel history was not collected, most of the “new” counties were in locations adjacent to or in close proximity of counties already identified. Multicolored maps for various tick species are particularly useful.

Fig. 2. The county level distribution of *I. pacificus* and *I. scapularis* based on location data collected by citizen scientists. Counties outlined in red did not have previous records according to [12], no records include travel history of the submitter.

Also, the article identifies limitations, specifically including “uneven awareness of the program and variation in the motivation of people who have ticks crawling or attached to them to actually submit the ticks as samples” that may introduce bias into any passive surveillance system.

(Chart courtesy of PLoS ONE)


The Centers for Disease Control and Prevention (CDC) updates estimates of the impact of Zika infection on neurodevelopmental abnormalities. Birth defects in children with in utero Zika infections (continued on page 5)
RESEARCH IN BRIEF (continued from page 4)

were a major driver of the public health response generally and the requirement for universal donor screening with nucleic acid testing. CDC reports registry data from American Samoa, the Federated States of Micronesia, Marshall Islands, Puerto Rico, and the U.S. Virgin Islands among children ≥1 year of age born to women with laboratory evidence of confirmed or possible Zika during pregnancy for whom follow-up care was reported. Six percent had a Zika-associated birth defect and 9 percent had one or more neurodevelopmental abnormalities possibly associated with Zika infection. One percent had both. Uptake of available data was less than optimal.

* Percentages might not sum to 100 because of rounding.
† Date and location of pregnancy completion were required to document a completed pregnancy in U.S. territories and freely associated states.
§ Live-born infants include 4,199 infants from 4,165 pregnancies (includes 34 multiple gestation pregnancies).
¶ Of the 691 children with no reported follow-up care as of June 1, 2018, 99 were reported to have moved out of U.S. territories and freely associated states.
** Of the 1,450 children aged ≥1 year by February 1, 2018, with some reported follow-up care by June 1, 2018, 154 were reported to have moved out of U.S. territories and freely associated states.

Percentage of children aged ≥1 year born to mothers with laboratory evidence of confirmed or possible Zika virus infection during pregnancy reported to have received recommended clinical evaluations*†,§,¶,** among children with reported follow-up care†† (n = 1,450) — U.S. Zika Pregnancy and Infant Registry (USZPIR), U.S. territories and freely associated states, February 1, 2017–June 1, 2018. (Chart courtesy of Morbidity and Mortality Weekly Report)


Ex vivo expansion of human umbilical cord blood stem cells (hUCB) reported. The utility of hUCB has been compromised by the inability of individual cord units to supply sufficient stem cells for use in transplantation and other applications. Investigators in the U.S. and China report on the development of a method that results in their ex vivo expansion by eight-fold, without differentiating the cells into more mature blood elements. They have employed the reversible knockdown of the gene for a regulatory protein, Ythdf2, that is responsible for the decay of messenger RNAs that are critical for self-renewal. The authors speculate that “combining our method with previous ones may facilitate the expansion of not only human hematopoietic stem cells, but also other stem cells.”

Citation: Li, Z., Qian, P., Shao, W. et al. Suppression of m6A reader Ythdf2 promotes hematopoietic stem cell expansion. Cell Research. 2018.
**RECENT REVIEWS**

Red blood cell transfusions (RBC) for treatment and prevention of sickle cell complications. This paper collates data from multiple Cochrane Reviews into a single source. It aims to assess the evidence for “effectiveness and safety of RBC transfusions versus no transfusion, or restrictive (to increase the total h[e]moglobin) versus liberal (to decrease the h[e]moglobin S level below a specified percentage) transfusion, for treating or preventing complications experienced by people with [sickle cell disease].” The authors conclude that RBC transfusions are effective in the prevention of strokes in children and adolescents at high risk. The RBC transfusions may be effective in preventing silent cerebral infarcts in children with abnormal transcranial doppler examinations and may reduce the risk of acute chest syndrome. The authors also found that a lack of high quality studies of transfusion in adults with sickle cell disease and the absence and/or variability of assessment and reporting of “patient-relevant” outcomes, such as quality of life.

Citation: Fortin, P.M., Hopewell S., Estcourt, L.J. Red blood cell transfusion to treat or prevent complications in sickle cell disease: an overview of Cochrane reviews. Cochrane Database of Systematic Reviews. 2018.

**INFECTIOUS DISEASE UPDATES**

**EBOLA**

A second Ebola outbreak has hit the Democratic Republic of the Congo (DRC). Confirmed cases had reached 17 as of August 8th with 44 total cases reported. Officials have begun vaccinations in the province of North Kivu and are preparing a ring vaccination for Mangina. This Ebola outbreak came shortly after government officials had declared the end of an earlier 11-week outbreak in the DRC that included 53 recognized cases with 38 confirmed. Twenty-nine deaths occurred.

The Centers for Disease Control and Prevention (CDC) has not classified either outbreak as evidence of widespread transmission of Ebola. The U.S. Food and Drug Administration (FDA) guidance requires that “in the event that one or more countries is classified by CDC as having widespread transmission of Ebola virus, your donor history questionnaire (DHQ), including your full-length and abbreviated DHQ, and accompanying materials, must incorporate elements to assess prospective donors for symptoms of recent or current illness with Ebola virus infection or disease, and travel to, or residence in, an area endemic for Ebola virus in accordance with 21 CFR 630.10(e)(2).”

Source: (World Health Organization News Release, 8/8/18)

**BRIEFLY NOTED**

The 3rd European Conference on Donor Health and Management will take place in Copenhagen, Denmark September 5th – 7th. The conference is a collaboration between the European Conference on Donor Health and Management Committees and the European Blood Alliance. It will feature presentations and discussions on donor base management, donor recruitment, donor retention, donor collection, and donor health including iron depletion. Attendees will have the opportunity to learn from leading researchers, experienced management professionals, medical experts, recruitment professionals, and professionals from government organizations. More information and registration details can be found at http://www.ec-dhm.org/, including registration and the conference program.

(Source: European Conference on Donor Health and Management Website)
BRIEFLY NOTED (continued from page 6)

Recipients of the 2018 Memorial Awards and Lectureships have been announced by AABB. Awardees are recognized for their work in advancing transfusion medicine, cellular therapies and patient blood management. They will be honored at the 2018 AABB Annual Meeting in Boston, Mass. “The AABB Memorial Awards honor the women and men who have shaped our field with their groundbreaking research,” said AABB President Mary Beth Bassett, BS, MT(ASCP) in a news release. “Standing on the shoulders of giants, this year’s AABB Memorial Award recipients have been building on that legacy and leading the way by fulfilling policy and practice-changing research and activities in transfusion medicine, cellular therapies and patient blood management.” “As AABB President, I am proud to have the opportunity to celebrate their impressive careers and notable accomplishments.”

Recipients include:

- Laurence Corash, MD (Senior Vice President, Cerus) – 2018 Dale A. Smith Memorial Award
- Karen King, MD (posthumous award) – 2018 Emily Cooley Memorial Award
- Eva Quinley, MS, MT(ASCP)SBB, CQA(ASQ) (Regional Director, LifeSource/ITxM, a division of Blood Systems, Inc.) – 2018 Hemphill-Jordan Leadership Award
- David Williams, MD (Senior Vice President & Chief Scientific Officer, Boston Children’s Hospital) – 2018 Karl Landsteiner Memorial Award and Lectureship
- Sean Stowell, MD, PhD (Assistant Professor, Pathology & Laboratory Medicine, Emory University School of Medicine) – 2018 National Blood Foundation Award for Innovative Research
- Joann Moulds, PhD, MT(ASCP)SBB – 2018 Sally Frank Memorial Award and Lectureship
- Sherrill Slichter, MD (Director, Platelet Transfusion Research, Bloodworks Northwest & Professor of Medicine, University of Washington School of Medicine) – 2018 Tibor Greenwalt Memorial Award and Lectureship
- “Safety of the use of group A plasma in trauma: the STAT study” by Mark Yazer, MD & Nancy Dunbar, MD – 2018 RISE (Research Innovation in Scientific Excellence) Award

Additional information on each awardee can be found on the AABB website.

(Source: AABB News Release, 8/7/18)

REGULATORY NEWS

The next meeting of the Advisory Committee on Blood and Tissue Safety and Availability (ACBTSA) will take place on September 13th from 8 a.m. – 5 p.m. at the Crystal City Marriott at Reagan National Airport located at 1999 Jefferson Davis Highway in Arlington, VA 22202. The Committee will discuss “defining a tolerable risk for infectious diseases from a patient’s perspective” and will consider the history of combating infectious disease risks to the blood supply along with “ongoing” mitigation efforts and “emerging considerations.” The opportunity for public comments will be available at the meeting and limited to five minutes per speaker. Interested individuals must submit their name, email, and comment summary by the close of business on September 7th. For additional information, contact ACBTSA@hhs.gov. A webcast of this meeting will be available.

ABC Calendar of Events

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

The Senate Health, Education Labor, and Pensions (HELP) Committee held a hearing last week addressing how to reduce escalating healthcare costs and cut administrative spending. The hearing explored inefficiencies in healthcare information technology and the issues created from a lack of interoperability leading to additional costs. “Administrative costs are much higher in the United States than in other countries,” said Sen. Lamar Alexander (R-Tenn.) committee chairman in a statement at the hearing. “According to Dr. Ashish Jha, a witness at our first hearing, administrative costs accounted for 8 percent of all health care spending in the U.S., roughly, that is $264 billion compared to only 1 percent to 3 percent for other countries. While many administrative tasks in the health care system come from insurance companies or state requirements, the federal government is clearly at fault for some of this burden.

There was a lot of excitement over electronic health records in Washington – many said these records systems would make it easier for doctors and patients to access a patient’s health records and share information with other doctors. Since 2011, the federal government has spent $38 billion requiring doctors and hospitals to install electronic health records systems through the Meaningful Use program in Medicare and Medicaid. Unfortunately, electronic health records systems have ended up being something physicians too often dread, rather than a tool that’s useful.” This was the Committee’s 3rd hearing examining how to curb spending and promoted increased interoperability within healthcare. A recording of the hearing is available.

(Source: Senate HELP Committee Hearing, 7/31/18; Committee Chairman Statement, 7/31/18)

PEOPLE

Julie Zimmerman has been named vice president of Membership, Meetings, Communications, and Corporate Affairs at AABB. She held this position on an interim basis since November 2017. “It is an honor to officially join AABB during this incredibly exciting time for the association,” said Ms. Zimmerman in a news release. “Every day, across the globe, AABB members are leading the charge on new advancements and discoveries to better protect the health and safety of patients and donors. I’m looking forward to working alongside our new CEO, Debra BenAvram, and the rest of our leadership team as we enrich the value

(continued on page 9)
PEOPLE (continued from page 8)

of the AABB membership experience.” Ms. Zimmerman has more than a decade of communications experience including stints with the Regulatory Affairs Professional Society and the Parenteral Drug Association. “Julia’s leadership has proven to be invaluable during a time of transition both within the organization and in the membership,” said AABB CEO Debra BenAvram. “Julia’s vision and experience make her an ideal match to lead AABB’s efforts to meet the changing needs of our members and I am excited to partner with her on that journey.”

(Source: AABB News Release, 7/27/18)

MEMBER NEWS

Delaware Governor John Carney recently visited the Blood Bank of Delmarva to sign “Pay for Success” legislation from the Delaware General Assembly to promote private funding for economic development and social impact initiatives. Blood Bank of Delmarva has teamed up with the Longwood Foundation, Discover Bank, and the Delaware Community Foundation to increase blood donations across the state as part of the “Pay for Success” initiative through a grant. “As a recent pay-for-success partnership grant recipient, we can see how beneficial this unique arrangement is for Delaware,” said Michele Hart-Henry, vice president and chief operating officer at the Blood Bank of Delmarva in an article published on the state of Delaware’s website. “The Blood Bank of Delmarva will be expanding our operations while having both the expectation and the support to be accountable for our results.” The legislation stipulates that reimbursement of private funding is contingent on projects achieving their stated milestones, protecting state taxpayer dollars.

(Source: Delaware News, 8/8/18)

Bloodworks Northwest has received the 2018 International Council for Commonality in Blood Banking Automation (ICCBBA) Enterprise Grant for a proposal to implement “innovative technological strategy” for donor recruitment and retention in Western Kenya. “Bloodworks’ Center for Global Impact is committed to making safe blood more accessible to communities around the world,” said Bloodworks Northwest CEO James P. AuBuchon, MD in a news release. “The safest blood supply comes from donors who give again and again, from a local population of repeat blood donors. We are pleased that ICCBBA recognizes the importance of using mobile technologies to engage and involve donors.” The Bloodworks Northwest PROMISE initiative will create an electronic registry of self-identified local community members that are pre-tested and pre-blood typed for future donations. It will also be an education resource for the community. “Donor recruitment and retention are common challenges in many resource limited countries,” said Paul Ashford, executive director of ICCBBA. “The PROMISE project provides an innovative approach and ICCBBA is happy to provide Bloodworks Northwest with the support they need to pilot this solution in Kenya.”

(ICCBBA Announcement, 7/30/18)
STOPLIGHT®: Status of America’s Blood Centers’ Blood Supply

Total ABC Red Cell Inventory

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<tr>
<th>Region</th>
<th>5-Jul</th>
<th>12-Jul</th>
<th>19-Jul</th>
<th>26-Jul</th>
<th>2-Aug</th>
<th>9-Aug</th>
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Percent of Total ABC Red Cell Inventory at 2 Days Supply or Less, August 9, 2018

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<th>Region</th>
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Daily updates are available at:
www.AmericasBlood.org

CALENDAR

Note to subscribers: Submissions for a free listing in this calendar (published in the last issue of each month) are welcome. Send information to Leslie Maundy by e-mail (lmaundy@americasblood.org) or by fax to (202) 899-2621. (For a more detailed announcement in the weekly “Meetings” section of the newsletter, please include program information.)

2018

Sept. 5-7. 3rd European Conference on Donor Health and Management, Copenhagen, Denmark. More details available here.

Sept. 11. 37th Annual Immunohematology and Blood Transfusion Symposium, Bethesda, MD. More details available here.


CLASSIFIED ADVERTISING

Classified advertisements, including notices of positions available and wanted, are published free of charge for a maximum of three weeks per position per calendar year for ABC institutional members. There are charges for non-members: $139 per placement for ABC Newsletter subscribers and $279 for non-subscribers. A six (6) percent processing fee will be applied to all credit card payments. Notices ordinarily are limited to 150 words. To place an ad, contact Leslie Maundy at the ABC office. Phone: (202) 654-2917; fax: (202) 899-2621; e-mail: lmaundy@americasblood.org.

POSITIONS

Director of Project Management. Central California Blood Center is seeking a Director of Project Management. Reporting to the CFO, this position is responsible to ensure the processes and organization IT infrastructure are designed and operating at maximum efficiency/effectiveness. Continuously evaluate for potential of increasing efficiency/effectiveness in collaboration with the appropriate coworkers, develop and manage new projects as assigned as well as identify new projects for improvement. As appropriate coordinate and collaborate with Subject Matter Experts (SME’s) to complete RFP’s if outside vendors are part of the process improvement or change process. Organize/lead teams with guidance from project champion to accomplish strategic inter/intra departmental goals. Develop goals/timelines according to the priority of implementation of new or existing project/processes. Qualified candidate will have a BA or BS degree with minimum five years previous project management/coordination or management experience. Requires good working knowledge of IT Systems along with leadership/mentoring skills and excellent communication and collaboration skills. Blood Bank or medical experience preferred. Lean/Six Sigma training a plus. EOE/M/F/VET/Disability/Gender Expression. Apply at https://www.donateblood.org/career-opportunities/

Laboratory Supervisor – Processing and QC. Stanford Blood Center, a subsidiary of Stanford Health Care, is seeking a Laboratory Supervisor, to lead and administer laboratory processing functions. Core Duties: Direct and supervise the processing CLS and QC LST II staff. Lead the planning and operations for functions or programs. Schedule staff and workflow to ensure coverage for testing needs throughout the lab. Review quality control data and proficiency testing and take corrective action as needed. Serve as technical resource for instruments in the department. Oversee completion of equipment maintenance, instrumentation calibration, QC, documentation and ensure adequate supply of supplies and equipment. Perform manual and automated testing on donor and clinical samples. Evaluate programs, policies and procedures. Qualifications: Bachelor's degree in medical technology or life science and five years of relevant experience in a clinical lab or blood center required. Current California Clinical Laboratory Scientist License required. Prior supervisory experience desired. Ideal candidates will also possess: demonstrated ability to establish priorities, manage shifting priorities, and handle numerous time-sensitive projects with multiple deadlines; ability to accomplish goals working through formal and informal channels, with diplomacy and tactfulness. For a complete job description, and to apply visit: www.stanfordhealthcarecareers.com/ and reference #47128.

Chief Executive Officer. Coastal Bend Blood Center, Corpus Christi, Texas is in search of a strong individual to replace retiring Chief Executive Officer (CEO). The CEO is responsible for management and leadership to ensure that the mission and core values of the Blood Center are put into practice. Responsible for operations including compliance with all accreditation standards, federal regulations and applicable laws, and aspects of the Blood Center including fiscal, technical, administrative, recruiting and collection activities. The CEO is accountable for all functions of the Corporation and the execution of all programs and undertakings of the organization. The CEO shall have the authority to employ, dismiss, establish salaries and direct the activities of the agents and employees of the Corporation. The CEO oversees the quality management system, and enforces compliance of all quality standards, and is responsible for all matters of compliance set forth in the Code of Federal Regulations, Dept. of Health & Human Services with authority to represent the Blood Center in all pertinent matters with the Center for Biologics & Research (CBER). Strong leadership, organizational and communication skills. Minimum 10 years of experience in the blood banking field with at least five years in Management. Bachelor’s degree or higher required. Submit resume to hr@coastalbendblood-center.org.

Controller. LifeShare Blood Center is seeking a Controller. The Controller plans, organizes, and directs the Financial Services Department functions for LifeShare Blood Center, Blood Center Properties, and LifeShare Blood Center Foundation. They are responsible for keeping abreast of trends and developments in Generally Accepted Accounting Principles (GAAP), advising the CFO of pertinent issues, and developing any necessary changes to the financial statements. The Controller manages the cash flow, receipts and deposits; supervises and reviews the preparation of monthly financial statements and quarterly board reports; monitors the General Ledger and updates the Sage 100 system as needed. Provides direction to Financial Analyst, Financial Services Manager, and Payroll Administrator, as necessary, to accomplish (continued on page 12)
POSITIONS (continued from page 11)

departmental goals and objectives. Requirements include college degree with emphasis in Accounting or related field, a Louisiana CPA license, and excellent written and verbal communication skills. Must have a thorough knowledge and understanding of Generally Accepted Accounting Principles, and must be highly organized and demonstrate initiative in fulfilling established duties and responsibilities. Must have the ability to deal with the public and employees in a tactful, professional manner, maintaining a high level of confidentiality when appropriate. Review complete job description and submit applications at www.lifeshare.org/careers.

President/Chief Executive Officer. Houchin Community Blood Bank is currently seeking a President/CEO to lead our successful, local, non-profit community blood bank, serving all of Kern County for over 60 years. We operate in a state-of-the-art, 42,000 square foot facility, with an additional location for donations. Qualifications include a bachelor’s degree (master’s degree preferred) in Business Administration or a related field. The successful candidate should have several years of excellent leadership experience and exceptional strategic planning abilities. He or she should have experience in blood banking or related health services and should embrace the ever-changing regulations and advances in the industry. The CEO will be responsible for effectively leading and inspiring a staff of up to 100 people to continued success. This executive leadership position requires the ability to make sound financial decisions to ensure continued financial success. He or she will maintain a strong presence in the local community and will work with the Board of Directors to accomplish our mission of providing a safe and adequate blood supply for our community and beyond. For more information on our company, please visit us at www.hcbb.com. Interested applicants may email resumes to careers@hcbb.com.

Senior Director of Marketing and Communications. LifeShare Blood Center is seeking a Senior Director of Marketing and Communications (SDMC). The SDMC will provide leadership, strategic direction, branding, and communication for LifeShare Blood Center. The SDMC will create strategies that increase the organization’s local, regional, and national image for individuals, corporations, foundations, public and private sources, in support of the company’s mission, vision, objectives, and needs. Requirements include bachelor’s degree or equivalent preferred, with emphasis in advertising, marketing, journalism, communications, non-profit management, or public administration. A minimum of five years’ experience in public relations, government relations, or fund development for a mid-sized company. A minimum of five years of increasing responsibility and supervision of employees and/or departments. Demonstrated effectiveness in written and verbal communications. Must have excellent grammar, punctuation and spelling ability. Must have public speaking or organizational representative experience. Review complete job description and submit applications at www.lifeshare.org/careers.

Vice President, Community Engagement. Responsibilities: Work with executive management and the board in the development of We Are Blood’s corporate community engagement strategy and provide strategic direction and oversight of its community engagement programs: marketing, public relations, communications, donor engagement, corporate outreach, development, community outreach, blood and platelet recruitment, and volunteer services. Develop and maintain key relationships in the community that promote and enhance awareness of We Are Blood and its mission. Provide strategic direction and oversight of We Are Blood’s community engagement programs: marketing, public relations, communications, donor engagement, corporate outreach, development, community outreach, blood and platelet recruitment, and volunteer services. Ensure We Are Blood’s donor engagement goals are met, including mobile drive and fixed site and platelet donor recruitment. Provide strategic direction of We Are Blood marketing and communications (including collateral materials development, newsletters, events, etc.) and supervise the team. Requirements: Four to seven years of management experience; College degree or equivalent work experience; Experience in development, strategic communications and relationship management; Excellent presentation skills with experience in public speaking; Must be at least 21 years old, have a valid Texas driver’s license, acceptable driving record and proof of liability insurance. Click here for full description. To Apply: Send your CL & Resume to resumes@tcms.com. EEO Employer: Minorities/Women/Veterans/Disabled

Transfusion Safety Officer. We have an opportunity for an experienced Hospital Transfusion Safety Officer to join the Medical Services team at Bloodworks. The Hospital Transfusion Safety Officer acts as on-site consultant for physicians and nurses at an assigned hospital regarding the administration of blood and blood components. The role provides expertise and training on blood ordering, distribution, administration, monitoring, and transfusion reactions. Requirements for this position include: RN/BS - Nursing, Nurse Practitioner, or Physician’s Assistant with current Washington State license, certified Medical Technologist with a minimum of three years of Blood Bank experience, or other qualified medical or nursing training may also be considered. Two to four years’ experience in leadership roles in nursing and/or transfusion therapy is preferred. Experience with providing in-service education for health professionals is preferred. Prior experience with transfusion administration is preferred. Specific Job Skills: Knowledge of standards of practice regarding transfusion administration. Valid State Driver’s License with acceptable driving (continued page 13)
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record in Washington State; possess and maintain a driver's license for at least one year. WORKING CONDITIONS: Frequent regional travel, some overtime, on-call, evening meetings. This position has direct exposure to blood borne pathogens. Salary is DOE, DOQ. Interested candidates should apply here. Bloodworks Northwest is an EOE.

Medical Technicians. Join our team! LifeServe Blood Center currently has two part-time openings for medical technicians at our Des Moines, IA location. This laboratory reference position serves hospital patients across Iowa, Nebraska and South Dakota. Testing includes basic blood banking and complex antibody identification. Primary Responsibilities for this Position Include: Accepts, verifies, processes, and tests incoming samples; Performs various testing procedures, including immunohematology, on donor and patient blood products; Performs quality control, equipment maintenance and calibration; Utilizes computer system to obtain necessary data and to record test results; and participates in the ongoing monitoring for each testing process to identify errors or potential problems. Education and/or Experience: MT/MLS or MLT from American Society for Clinical Pathology or equivalent; bachelor's degree in medical technology or chemical, physical or biological science or related scientific field from an accredited college or university or an equivalent combination of education, certification, training and or experience; and meet current CLIA or ABB requirements for testing personnel. Interested applicants should visit our website: https://www.lifeservebloodcenter.org/about-us/join-our-team and click on JOIN OUR TEAM. LifeServe Blood Center is fully committed to equal employment opportunity. All applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, age, sexual orientation, gender identification, genetic information, marital status, pregnancy, disability, veteran status or any other legally protected status.

Director of LifeCord. LifeSouth Community Blood Centers is currently seeking an individual to join our team as the Director of LifeCord in Gainesville, FL. This position is responsible for overseeing the cord blood collections and cellular therapy initiatives within the organization through the LifeCord program. LifeCord is a public, community-based cord blood bank that collects and stores umbilical cord blood for the purpose of clinical cures and basic research in the field of stem cell transplantation. LifeCord is a program of LifeSouth which performs community and donor education, cord blood collection and processing, distribution of cord blood units and evaluation of transplant outcomes. LifeCord also works to increase the diversity of donors from which cord blood is collected. Bachelor’s degree required. Concentration in healthcare or science-related field preferred. Two years of management or supervisory experience required. Valid driver's license required. Must meet and maintain LifeSouth driver's eligibility requirements. Background check and drug test required. Equal Opportunity/Affirmative Action Employer/DFWP/Tobacco Free. Follow this link to apply: https://lifesouth.careerplug.com/jobs/791065/apps/new.