



# ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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

2015 #17

May 8, 2015

## INSIDE:

Our Space: The Value of Continuing Education ...	2
Don't Miss Out on ABC's Fund Development, Communications, & Donor Management Workshop! .....	5
RESEARCH IN BRIEF ....	6
RECENT REVIEWS .....	8
BRIEFLY NOTED.....	8
REGULATORY NEWS....	8
THE WORD IN WASHINGTON.....	9
GLOBAL NEWS .....	10
INFECTIOUS DISEASE UPDATES .....	11
STOPLIGHT®: Status of the ABC Blood Supply, 2014 vs. 2015.....	11
MEMBER NEWS.....	12

## ABC Members Gain Insights from 2015 ABO Horizon Scanning Report

Staying abreast of an ever-changing blood banking environment can be challenging, particularly on a national or international scale. America's Blood Centers' members can now benefit from large-scale international knowledge exchange and industry scanning activity, which culminated in the publication of the [Alliance of Blood Operators Horizon Scanning and Emerging Themes Report 2015](#).

The report offers an international snapshot of the current blood banking environment along with emerging issues, trends, and opportunities. It provides updates within the major themes – donor, business, and patient – previously described in ABO's 2014 report, with a particular emphasis on opportunities in blood sector data, genotyping, and new business models and streams of revenue.

Sally Thomas and Sandra Boyd, of the ABO Secretariat and Australian Red Cross Blood Service, various ABO working groups, and the European Blood Alliance (EBA) Emerging Infectious Disease Monitor authored the report using ABO member news updates, working group discussions, and knowledge exchange from 2014 to 2015, supplemented with industry scanning and review by ABO members.

ABO is an international network of non-profit blood services with voluntary non-remunerated donor bases, including ABC, the American Red Cross, Australian Red Cross Blood Service, Blood Systems, Inc. (BSI), Canadian Blood Services, EBA, and the UK's National Health Service Blood and Transplant. Through ABC's membership in ABO and participation in information sharing, all ABC member blood centers can now access this report on ABC's member website.

The section focusing on donor issues confirmed that the managing blood donor iron stores, particularly younger donors, remains a top concern in blood banking. Furthermore, tracking adverse donor events remains a priority for all blood services. International collaboration around this issue has increased, evidenced by the establishment of international standardized definitions for the surveillance of complications related to blood donation. The ABO report noted blood services are focusing donor relationship and recruitment efforts on recruiting the right donors to meet patient needs.

The patient-centered section highlights the simultaneous trends in healthcare toward low-cost, bundled services and individualized, personalized care, explaining

(continued on page 3)



## OUR SPACE

**Matt Granato, ABC's Chief Operating Officer**

### **The Value of Continuing Education**

Shortly after completing my graduate education, I pondered how I would gain knowledge in the future, assuming it would come from my routine work activities. Surely just “doing my job” would keep me updated on issues affecting my environment and prepare me to meet challenges and accomplish goals. Well, not quite. Entering a tightly regulated industry that is highly reliant on technology and the ability to touch peoples’ hearts and minds left much to learn that could not be provided by on-the-job training alone. I am grateful that ABC invests in staff education and development to familiarize me with blood banking and association management – at the core of what we do.

With the development of the ABC Professional Institute (API), we aim to afford the same opportunities to ABC member blood center staff. Despite apprehension of some employers, continuing education benefits employers too. Training and enhancing job skills boosts productivity, and employees appreciate the benefit of becoming more marketable. While companies tend to cut benefits like education when economic turmoil hits, knowledge and skill acquisition are critical to solving tough issues. Employers may fear that investing in employee development will lead more skilled staff to seek employment elsewhere. However, a survey by staffing firm, Spherion, found that 61 percent of those receiving continuing education were very likely to remain with their companies for the following five years or more.

Touching on this point, I recently read a quote online, which allegedly comes from a conversation between a chief financial officer and a CEO: “What happens if we invest in our staff’s education and then they leave?” asked the CFO. The CEO replied, “What happens if we don’t and they stay?” ABC CEOs asking that same question can look to API for solutions. This year alone, we plan to hold more than 20 webinars, develop self-directed learning units on “Blood Banking 101” for onboarding new blood center staff, and offer leadership education on generational diversity and change management. We are also developing a joint blood center board of directors and C-suite seminar.

We have brought our regular workshops into the API fold, focusing on issues reflecting the current blood center landscape, with clearly defined objectives following adult learning principles. I urge you to review the programs and sign up your staff. Coming up in June is the [Fund Development, Communications, and Donor Management Workshop](#) (register by May 22!). Registration for the [Medical Directors Workshop](#) held in conjunction with the Summer Meeting will open next week. Finally, I hope you join us for the [Financial Management Workshop](#) in September. With the hard work of ABC staff, volunteer consultants, and the ABC API Development Committee, ABC is set to provide high-quality, affordable, and relevant continuing education that meets member needs. Your participation and feedback are essential to its success.

[mgranato@americasblood.org](mailto:mgranato@americasblood.org) ♦

The *ABC Newsletter* (ISSN #1092-0412) is published 46 times a year by America’s Blood Centers® and distributed by e-mail. Contents and views expressed are not official statements of ABC or its Board of Directors. Copyright 2015 by America’s Blood Centers. Reproduction of the *ABC Newsletter* is forbidden unless permission is granted by the publisher. (ABC members need not obtain prior permission if proper credit is given.)

ABC is an association of not-for-profit, independent community blood centers that helps its members provide excellence in transfusion medicine and related health services. ABC provides leadership in donor advocacy, education, national policy, quality, and safety; and in finding efficiencies for the benefit of donors, patients, and healthcare facilities by encouraging collaboration among blood organizations and by acting as a forum for sharing information and best practices.

#### **America’s Blood Centers**

President: Susan Rossmann  
CEO: Christine S. Zambricki  
Publications Editor: Betty Klinck  
Subscription Manager: Leslie Norwood  
**Annual Subscription Rate: \$390**

Send subscription queries to  
[mnorwood@americasblood.org](mailto:mnorwood@americasblood.org).

America’s Blood Centers

725 15th St. NW, Suite 700, Washington, DC 20005

Phone: (202) 393-5725

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

ABO Horizon Scanning Report (continued from page 1)

where blood services may fit into these trends. For example, patient blood management (PBM), which has decreased blood utilization internationally, could fit into the personalized medicine context by focusing on selecting the treatment at the right time for each patient. The report highlights genotyping in blood services, integration with hospitals, and linked data sets as key enablers of providing individualized patient care.

Genotyping is emerging as another opportunity for blood services to provide individualized and improved patient care. Several blood services reported providing genotyping services for selected donors to enhance molecular surveillance of infectious diseases, and others are investigating genomic donor screening to gauge the capacity of donors to absorb and replenish iron stores.

More widespread donor genotyping would provide better matched blood for certain patients, particularly sickle cell and other chronically transfused patient groups at risk of alloimmunization. Bloodworks Northwest, previously Puget Sound Blood Center, routinely performs genotyping for multiply transfused patients and those with pre-existing RBC antibodies. Genotyping could also allow blood centers to take a public health role by sharing infectious disease data for epidemiologic purposes, providing health or wellness screening, and providing donor samples for epidemiologic studies unrelated to donor health.

Blood services are seeking to maximize opportunities for vertical integration with pathology service, providers, hospital blood banks, and transfusion departments – another opportunity to improve patient care, according to the report. BSI provided a comprehensive overview of the benefits of vertical integration, as well as integration between universities, blood service research departments, and private sector organizations. Such collaboration has enabled BSI to explore the development of clinical grade mesenchymal stem cells (MSCs) that could eventually be used in cell-based therapies once FDA approves them (see [ABC Newsletter](#), 1/23/15).

The report underscores an increasing focus on improved blood sector data on transfusion patient outcomes, donor health, and blood utilization. For a number of years, ABC has collected blood donor data from participating ABC members with the goal of enabling benchmarking and supporting advocacy initiatives; ABC is currently ramping up its Data Warehouse efforts.

BSI is working on an initiative to combine donor and patient data in a joint warehouse, first focusing on capturing retrospective and prospective blood donor information, which will then be integrated in a common data warehouse with recipient data from large regional transfusion services and key linked hospitals. This will allow Creative Testing Solutions research consortium members to monitor blood collection, use transfusion outcomes, and evaluate strategies for improving recruitment, blood collection, and adverse events.

The business section of the report details the numerous ways that ABO members are improving business efficiencies in the face of decreasing blood product demand. ABO members reported consolidating activities and facilities to improve efficiency and decrease costs. Further consolidation of blood collection organizations continues, particularly within the US. PYA, a consulting firm, predicted that the ABC membership may consolidate into 15 independent blood centers from 67 within the next several years.

(continued on page 4)

ABO Horizon Scanning Report (continued from page 3)

With a focus on cost savings, blood services are increasingly entering into single vendor contracts for critical consumables, such as blood bags and testing platforms. The report also highlighted continued growth and opportunities in fractionation, with some experts predicting that the market for plasma will outpace blood collection by 2018. Companies such as CSL Behring, Grifols, and Green Cross have invested significantly in ramping up plasma fractionation capacity.

The report highlighted new business opportunities, which include leveraging core activities like providing source plasma, testing, and educational consultancy, as well as new activities and services such as population health screening and fecal transplants. Creative Testing Solutions is one example of a successful joint venture that is now the largest independent, non-profit blood donor testing organization in the US with four labs located in Dallas, Phoenix, Seattle, and Tampa.

Genotyping, the sale of research products and blood by-products, bio-banking of cells and tissues, and human milk banking are other potential revenue streams being explored by blood services. As part of its data warehousing project, BSI is collecting donor red cell genotypes and integrating that information with transfusion recipient data. ABC member, Héma-Québec in Canada, now operates a bank for human breast milk.

The report also explores the implementation of pathogen reduction technologies and changes in the blood community workforce, as well as provides information on emerging infectious diseases such as chikungunya, dengue, and Ebola viruses. ♦



# SAVE THE DATE

## Summer Meeting

August 4-6, 2015 – Philadelphia, PA

Hosted by



**Negotiated hotel room rate at Loews Philadelphia Hotel: \$199 + tax**  
[www.loewshotels.com/philadelphia-hotel](http://www.loewshotels.com/philadelphia-hotel)

### 2015 Summer Meeting Schedule and Fees

Medical Directors Workshop: Aug 4 (\$415)  
 Medical Directors Workshop and SMT Forum: Aug 4-5 (\$445)  
 Summer Meeting: Aug 5-6 (\$625)  
 Medical Directors Workshop and Summer Meeting: Aug 4-6 (\$725)

**Don't miss the opportunity to join your fellow blood bankers on the links at the 5th Annual Links for Life golf tournament - Aug 6; Woodcrest Country Club (Cherry Hill, NJ) benefitting the FABC.**

Non-members (non-vendor), contact Lori Beaston at [lbeaston@americasblood.org](mailto:lbeaston@americasblood.org) for registration fees and information.

Sponsorship opportunities available. Contact Abbey Nunes at [anunes@americasblood.org](mailto:anunes@americasblood.org) for details.

Philadelphia, known as the “City of Brotherly Love” and the “Cradle of Liberty,” a place where sharing diversity of opinion is welcome and there is a rich history of innovation and bold new beginnings. With the passion of Rocky Balboa let us join together, interact and create change as demonstrated by our nation’s forefathers in crafting the Declaration of Independence.

- Your Hosts: Blood Bank of Delmarva, Central Pennsylvania Blood Bank and Miller-Keystone Blood Center

**New Future Leader Scholarship Program:** Don't let cost concerns hold you back from a valuable learning experience! Supported by the FABC, the Future Leader Scholarships offer non-C-suite blood center executives the opportunity to advance professionally by attending the ABC Summer Meeting. Application and details will be made available when registration opens in May.



Philadelphia International Airport (PHL) is served by most major airlines. Visit [www.phl.org](http://www.phl.org) for more information.



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

## INSIDE ABC

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

### **Don't Miss Out on ABC's Fund Development, Communications, & Donor Management Workshop!**

Registration is coming to a close soon for America's Blood Centers' [Fund Development, Communications, and Donor Management \(FDCDM\) Workshop](#), to be hosted in Chattanooga, Tenn. with Blood Assurance June 16 to 19. Blood center fund development, communications, and donor management professionals will not want to miss out on this premiere educational and networking event that will explore hot topics and issues that affect blood centers daily.

The FDCDM Workshop, one of ABC's numerous face-to-face learning [opportunities](#) available through the developing ABC Professional Institute (API), offers attendees the chance to share best practices and learn about a number of topics. They will hear from expert speakers, including Chris France, PhD, a psychology professor at Ohio University, who will discuss promoting blood donor recruitment and retention using empirically-supported interventions, and Vicki Wolfe, manager of Communications at BloodSource, Sacramento, Calif., who will present with the center's media partner on building win-win relationships with local media.



Dr. France will lead a half-day training session, which will cover research conducted by his university research team over the past decade, as well as the group's latest findings concerning the development of donor preparation strategies that can reduce donor distress; increase prospective donor confidence and intention to donate; and increase the retention of existing donors. He will describe research related to the prediction and prevention of donor syncopal reactions, as well as demonstrate how direct efforts to address donor concerns about reactions can enhance recruitment and retention by reducing anxiety and increasing donor confidence.

Dr. France's research group has conducted studies in the lab and in the field, all with appropriate control conditions, and has looked at the benefits of donor education and coping materials via print, video, or online. Many of the groups' findings have been previously published in *Transfusion* and other peer-reviewed journals. He will also present the latest findings from his laboratory and that of his research group's collaborators at the Australian Red Cross Blood Services.

As part of the communications sessions, attendees will go behind the scenes with Ms. Wolfe and KCRA 3 (NBC) special projects manager, Millicent Ozdalgar, on how to create win-win relationships with local media that last all year long. KCRA 3 is an NBC affiliate and the most-watched news channel in the greater Sacramento region.

According to Ms. Wolfe, one thing does not change for blood center media partners: stories drive news. From annual blood drives to coverage of bone marrow donor-recipient meetings, to showcasing blood collection technologies, emerging needs, or follow-up stories about featured patients – the relationship

(continued on page 6)

**INSIDE ABC** (continued from page 5)

with local news media benefits blood centers. Attendees will learn the ins and outs of what respected and successful media partners expect from a blood center relationship, including story angles, timing, coordination and logistics.

Don't miss your chance to hear these and other fascinating presentations among your blood center peers from across the country! Both ABC members and non-members interested in attending should register by **May 22** via the link e-mailed by ABC, or contact Lori Beaston at [lbeaston@americasblood.org](mailto:lbeaston@americasblood.org) for more details. To learn more about sponsorship opportunities contact Abbey Nunes at [anunes@americasblood.org](mailto:anunes@americasblood.org) ♦

**RESEARCH IN BRIEF**

**A study by Canadian researchers describes development of a more efficient enzyme to remove blood type A and B antigens from red blood cells (RBCs) to create the universal blood type – O.** Previous research has suggested that enzymes to remove the antigens that determine type A and B blood might be used to create the universal, antigen-null, type-O blood. However, to-date, this antigen-cleaving enzyme approach has been inefficient and uneconomical, requiring a large amount of the enzyme to convert just one RBC unit to type O. In a new study in the *Journal of the American Chemical Society*, David H. Kwan, PhD, and colleagues of the University of British Columbia in Canada, report how an improved version of the enzyme has been developed. To create a high-powered version of the antigen-snipping enzyme, researchers used directed evolution, which involves inserting mutations into the gene that codes for the enzyme, and selecting mutations that are more effective at inactivating the antigens. In just five generations, the enzyme became 170 times more effective, they reported. With the improved method, the researchers were able to remove the vast majority of the antigens in type A and B blood. They note that further improvements are needed before using this method in clinical trials to ensure that all antigens are removed. “The results of our work in engineering the family 98 glycoside hydrolase from *Streptococcus pneumoniae* SP3-BS71 establish that directed evolution of enzymes acting upon blood group antigens can be an effective means of developing these catalysts toward practical application in generating universal blood,” concluded the authors.

**Citation:** Kwan DH, *et al.* Toward efficient enzymes for the generation of universal blood through structure-guided directed evolution. *J Am Chem Soc.* 2015 Apr 24. [Epub ahead of print]

**An analysis of health insurance data published April 28 in *The Journal of the American Medical Association* suggests that hydroxyurea is not prescribed to many adult patients with sickle cell anemia (SCA) who could benefit from the treatment.** In 2014, the National Heart, Lung, and Blood Institute of the National Institutes of Health strongly recommended in its sickle cell treatment [guidelines](#) that all adults with SCA and three or more moderate to severe pain crises within one year be treated with hydroxyurea. Nicolas Stettler, MD, and colleagues of The Lewin Group, a healthcare consulting firm in Falls Church, Va., analyzed the use of hydroxyurea when indicated for SCA in a large insurance claims database. They collected data from the Optum Normative Health Informatics database, a nationwide sample of commercial health and pharmacy claims from more than 26 million Americans. Among those enrolled, the researchers identified 2,086 adult patients with probable SCA. Of these, 677 had at least three pain-related hospitalizations or emergency department visits within 12 months and 570 had at least three months of coverage after the third episode. Among them, 86 (15 percent) were treated with hydroxyurea within three months of their third encounter. The percentage of treated patients increased slightly to 18 percent at six months and 23 percent at 12 months. “Despite evidence demonstrating the


(continued on page 7)

**RESEARCH IN BRIEF** (continued from page 6)

benefits of hydroxyurea in patients with SCA and frequent pain crises, this analysis suggests that more than 3 out of 4 patients who might benefit were not treated with this safe and inexpensive drug,” conclude the authors. Barriers to treatment include concern about adverse events, lack of clinician training, and failure to engage in shared decision-making. The authors note that their analysis is limited by the use of ICD-9 codes to identify SCA patients (which could miss some cases), as well as the large number of uninsured patients not included. To address the hydroxyurea treatment gap, “it may be necessary to enhance patient outreach and clinician training and develop healthcare quality measures aimed at increasing the use of hydroxyurea for all patients who would benefit,” wrote the authors.

**Citation:** Stettler N, *et al.* Proportion of adults with sickle cell anemia and pain crises receiving hydroxyurea. *JAMA*. 2015 Apr 28; 313(16):1671-2.

**Researchers have reported in *Vox Sanguinis* that a patient blood management protocol for cardiac surgery patients focused on monitoring hemostatic status was associated with significant reductions in transfusion, improved outcomes, and reduced cost.** Bleeding is a frequent consequence of cardiac surgery, and as many as 10 percent of patients undergoing cardiac surgery with cardiopulmonary bypass experience excessive bleeding. Improving patient outcomes in these patients is dependent upon clinicians recognizing those with a high risk of bleeding and implementing a plan to reduce bleeding. Bronwyn Pearse and colleagues of The Prince Charles Hospital in Australia, conducted a retrospective analysis comparing blood product use, patient outcomes, and cost related to cardiac surgery patients 15 months before and after the implementation of a patient blood management (PBM) strategy at their hospital. The PBM protocol focused on incorporating point-of-care coagulation testing (POCCT) with rotational thromboelastometry (ROTEM) and a Multiplate analyzer to characterize the cause of bleeding and monitor treatment. Use of the protocol led to an overall decrease in the incidence of transfusion of red blood cells (RBCs), fresh frozen plasma, and platelets. However, the percentage of patients receiving cryoprecipitate and the number of units transfused increased during the intra-operative period. The authors observed reductions in re-exploration for bleeding, superficial chest wound, leg wound infection, and a 12 percent reduction in the mean length of stay to discharge. The cost of blood products decreased by \$1,029/patient in the 15-month period after the protocol was implemented. “The tailored bleeding management protocol guided by POCCT facilitated early identification of patients at high risk of bleeding and rapid identification of the cause of bleeding to support appropriate treatment. The observed improvements in patient outcomes, decrease in blood product use and cost, indicate improved hemostasis management,” conclude the authors. They added that their hospital is now developing tailored PBM protocols for other surgical departments and general intensive care unit patients.

**Citation:** Pearse BL, *et al.* Protocol guided bleeding management improves cardiac surgery patient outcomes. *Vox Sang*. 2015 April 30. [Epub ahead of print] 

### 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 ABC Publications Editor Betty Klinck at [newsletter@americasblood.org](mailto:newsletter@americasblood.org) or fax them to (202) 393-1282. 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.

## RECENT REVIEWS

*The New England Journal of Medicine* has published a [review](#) of advances in the understanding of **iron-deficiency anemia**. Clara Camaschella, MD, of Vita Salute University and San Raffaele Scientific Institute in Italy, discussed advances in the understanding of systemic iron homeostasis and examined causes, pathophysiological features, and treatment options in adults. Iron deficiency anemia is a global health problem, affecting more than 2 billion people worldwide, and iron-deficiency anemia remains the most frequent cause of anemia. In developing countries, iron deficiency and iron-deficiency anemia typically result from insufficient dietary intake, loss of blood due to intestinal worm colonization, or both. In high-income countries, certain eating habits – like vegetarian or red meat-lacking diets – and pathologic conditions, such as chronic blood loss or malabsorption, are the most common causes. “Persons who donate blood regularly are also at risk for iron deficiency, and their iron levels should be monitored,” wrote Dr. Camaschella. While Dr. Camaschella did not expand any further on this subject, prevention of iron deficiency in blood donors is of concern in the blood community. The author also discusses iron-refractory iron-deficiency anemia, determination of iron status, and therapy option, which includes oral iron therapy and parenteral iron therapy.

**Citation:** Camaschella C, *et al.* Iron-deficiency anemia. *NEJM*. 2015 May 7. 372(19); 1832-1842. ♦

## BRIEFLY NOTED

The International Council for Commonality in Blood Banking Automation (ICCBBA) published a [summary](#) of the Health and Human Services Advisory Committee on Blood and Tissue Safety and Availability’s (ACBTSA) recent recommendation regarding improved methods of electronically tracking tissue products. The ACBTSA recommended that the HHS Secretary take action in a step-wise, risk-based approach to establish the use of ISBT 128 code in electronically readable format as a universal standard for mandatory implementation of unique donation numbers for all human tissue products (see [ABC Newsletter](#), 4/24/15). “ICCBBA welcomes the committee’s recommendation. Adoption of ISBT 128 by tissue banks would fall in line with the industry wide acceptance of the Standard for blood transfusion, cellular therapy, and eye banking throughout the United States,” said ICCBBA in a recent announcement. (Source: ICCBBA summary of ACBTSA recommendations, 5/6/15) ♦

## REGULATORY NEWS

The Food and Drug Administration approved the biologics license application (BLA) of ProFibrin, BV in Leiden, the Netherlands. Under this license, FDA authorizes the company to manufacture the product Fibrin Sealant (Human), which is indicated as an adjunct to hemostasis in adults undergoing surgery when bleeding control by standard surgical techniques is ineffective or impractical. More information can be found in the FDA approval [letter](#). FDA also approved the BLA of Cangene Corp. for Coagulation Factor IX (Recombinant). This product is indicated for controlling and preventing bleeding episodes and for peri-operative management in adults and children  $\geq 12$  years of age with hemophilia B. More information is available [here](#). (Source: FDA BLA approval letters, 5/1/15)

During the 152<sup>nd</sup> annual meeting on April 28, the membership of the National Academy of Sciences voted to change the name of the Institute of Medicine (IOM) to the National Academy of Medicine.

(continued on page 9)



**REGULATORY NEWS** (continued from page 8)

The renamed National Academy of Medicine will continue to be an honorific society and will inherit the more than 1,900 current elected members and foreign associates of the IOM. The National Academy of Medicine will join the National Academy of Sciences and the National Academy of Engineering in advising the nation on matters of science, technology, and health. More information can be found in the [press release](#). (Source: National Academy of Medicine press release, 4/28/15)

**To help ensure that workers have a voice in their workplaces and the protection they deserve, the Occupational Safety and Health Administration (OSHA) unveiled on April 28 a new version of its “Job Safety and Health – It’s the Law!” poster.** The poster informs workers of their rights, and employers of their responsibilities in protecting the safety of employees. The newly designed poster informs workers of their right to request an OSHA inspection of their workplaces, receive information and training on job hazards, report a work-related injury or illness, and raise safety and health concerns with their employer or OSHA without being retaliated against. The poster also informs employers of their legal obligation to provide a safe workplace. In addition, it has been updated to include the new reporting obligations for employers, who must now report every fatality and every hospitalization, amputation and loss of an eye. The poster is available for download [online](#). (Source: OSHA e-mail update, 5/5/15)

**The National Institutes of Health’s National Heart, Lung, and Blood Institute (NHLBI) recently requested assistance from the public in forming its strategic goals.** NHLBI is gathering ideas for the most compelling scientific priorities in the four [NHLBI Strategic Goals](#) to address over the next decade. As a part of its “Strategic Visioning” process, NHLBI is requesting “questions and challenges” regarding its strategic goals from the public. More information and directions for submitting questions and challenges can be found [here](#). (Source: NHLBI e-mail update, 5/5/15) ♦

**THE WORD IN WASHINGTON**

**Congress has approved its Fiscal 2016 budget resolution (S Con Res 11), setting overall spending and revenue levels for next year’s appropriations bills and shaping the policy Congress may tackle later this year.** The US House of Representatives passed the resolution on April 30 with a 226-197 vote, and the Senate approved it on May 5 with a 51-48 vote. The 2016 budget resolution, agreed upon by congressional majority Republicans, recommends spending levels for fiscal year (FY) 2016, sets forth budgetary levels for FY 2017-2025, and does not need to be signed into law by the President for passage. If future appropriations, tax, and other revenue legislation follows the budget outline, the resolution would reduce spending over the next 10 years by \$5.3 trillion, compared with current anticipated levels. Relative to the spending levels allowed by current policy, the budget directs Congress to follow through by reducing spending for Medicare and Medicaid and repealing the Affordable Care Act – both of which would necessitate legislation requiring the President’s signature for its enactment into law. America’s Blood Centers is monitoring this process closely and will keep you abreast of any new developments. ♦

## GLOBAL NEWS

**The European Blood Alliance (EBA) recently published its 2014 annual report, now available in online [e-book](#) format and as a [PDF](#).** EBA is an association of non-profit blood establishments with 25 members throughout the European Union and EFTA States. The 2014 annual report includes a message from EBA President Philippe Vandekerckhove, as well as highlights EBA's accomplishments in the areas of providing a safe and sufficient blood supply provided by voluntary non-remunerated donors, performance improvement, regulatory support, and information exchange and dissemination. (Source: EBA e-mail update, 4/29/15)

**The European Directorate for the Quality of Medicines (EDQM) of the Council of Europe, on behalf of the European Pharmacopoeia, and the US Pharmacopeial Convention (USP), announced on April 28 that they have concluded a pilot project on harmonization.** The groups began the Prospective Harmonization Pilot Project in July 2008 to develop harmonized monographs and reference standards for drug substances still under patent. Ultimately, the collaboration revealed that complexities as USP and EDQM attempted to align their respective processes did not provide added value to the harmonized standards published. USP and EDQM plan to continue efforts to maintain similar standards for these monographs and both remain fully committed to pharmacopeial harmonization. They will continue to collaborate on prospectively harmonized monographs in a less formal manner, according to the press release. It is unclear if and/or how this outcome will affect an ongoing collaborative effort led by the Alliance of Blood Operators (ABO) to achieve regulatory harmonization of blood devices globally (see [ABC Newsletter](#), 3/1/13).

**The International Coalition for Commonality in Blood Banking Automation (ICCBBA) is now accepting nominations for the One World Award.** The award recognizes excellence in original research, innovative technical development, influence in the development of policy and regulation concerning international information standards in transfusion and transplant medicine. Those interested may nominate themselves or another distinguished colleague online [here](#). The ideal awardee:

- Is a recognized expert in the field of transfusion and/or transplantation information standards;
- Has international experience and influence;
- Has made an identifiable contribution to improving the understanding and application of information standards; and
- Has made contributions to the field spanning a period in excess of five years.

Questions may be directed to [oneworld@iccbba.org](mailto:oneworld@iccbba.org). 💧


### Correction

In last week's *ABC Newsletter*, an article appeared on page 1 titled "Stakeholders Explore Challenges, Opportunities in Pathogen Reduction." In the continuation of that article on page 4, we incorrectly stated that the Irish Blood Transfusion Services decided "against the use of PR Platelets." The text has now been corrected to read, "Willy Murphy, MD, discussed the factors that led the Irish Blood Transfusion Services to implement PR platelets, including its superior protection against bacterial contamination. Despite pervasive cost concerns, the blood service will implement the Mirasol PRT system within the next six months." We apologize for any confusion caused by this error and thank our readers for bringing such issues to our attention.

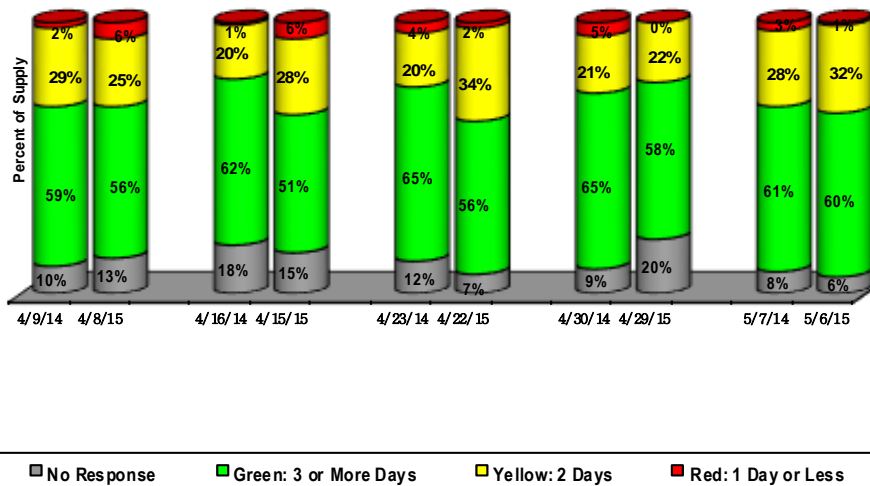
## INFECTIOUS DISEASE UPDATES

### HTLV-1

A group of Japanese researchers provided insight into the viral load needed to transmit human T-lymphotropic virus-1 (HTLV-1) via transfusion and suggest leukoreduction effectively reduces the risk of transfusion-transmitted (TT) HTLV. The infection is endemic to southwestern Japan. In 2007, universal pre-storage leukoreduction was introduced in Japan to reduce the incidence of adverse transfusion reactions. Leukoreduction was also expected to reduce the risk of TT-HTLV-1. Rieko Sobata and colleagues of the Japanese Red Cross Society conducted a study to determine the amount of HTLV-1 provirus among 300 HTLV-1-sero-positive blood donors in Japan. They used these data and historical data of TT-HTLV-1 frequency in a retrospective study of patients who received blood from HTLV-1-seropositive blood donors to estimate the proviral load necessary for infectivity, and also investigated the efficacy of leukoreduction in preventing TT-HTLV. The proviral loads in HTLV-1-seropositive blood donors ranged from <0.01 to 25.0 copies per 100 leukocytes. Based upon historical data of HTLV-1 transmission from seropositive donors, they assumed 80 percent of the 300 seropositive samples were infectious – leading to an estimate that transfusion of  $\geq 9 \times 10^4$  cells containing the provirus is required to establish TT-HTLV-1. Leukoreduction decreases the number of HTLV-1-infected leukocytes well below this level in most blood products collected from HTLV-1-positive donors, according to the authors. “Leukoreduction in addition to serological screening of donated blood minimizes the risk of TT-HTLV-1,” they conclude.

**Citation:** Sobata R, *et al.* Estimation of the infectious viral load required for transfusion-transmitted human T-lymphotropic virus type 1 infection (TT-HTLV-1) and of the effectiveness of leukocyte reduction in preventing TT-HTLV-1. *Vox Sang.* 2015 Apr 30. [Epub ahead of print] 

### STOPLIGHT®: Status of the ABC Blood Supply, 2014 vs. 2015



The order of the bars is (from top to bottom), red, yellow, green, and no response

## MEMBER NEWS

**Rock River Valley Blood Center (RRVBC), Rockford, Ill., will be celebrating National Beef Month with Stephenson County Beef Association, which will be providing all RRVBC donors with product samples beginning May 11 (while supplies last).** Beef is considered a great source of iron and protein; iron-rich diets are often recommended to help boost a donor's iron stores prior to and following blood donation. "The most common reason people can't donate blood is because of a low hemoglobin, or iron levels. We provide donors with ways in which they might be able to increase these numbers. The Stephenson County Beef Association is celebrating National Beef Month and thanking our donors at the same time," said Jennifer Bowman, public relations and marketing manager at RRVBC. (Source: RRVBC press release, 5/5/15) ♦



## 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 Norwood at the ABC office. Phone: (202) 654-2917; fax: (202) 393-5527; e-mail: [lnorwood@americasblood.org](mailto:lnorwood@americasblood.org).

## POSITIONS AVAILABLE

**Director of Community Relations, Recruitment, and Development.** Central California Blood Center (CCBC) located in Fresno, CA is seeking a senior level professional with a minimum of five years' experience in some combination or closely related to, high level community relations, donor recruitment, and fund development. The best fit candidate must have progressive and proven history in management of the management of several small departments of staff to include Donor Recruiters, Telerecruiters, Marketing and Media staff, and Volunteer Coordinator. Experience in budgeting, analytics, effective written, verbal, and interpersonal skills, with excellent facilitation, negotiation, and conflict resolution skills are all required. Experience in designing and implementing successful donor recruitment campaigns to maintain and increase donor-base strategically to meet goals and projections as directed by President/CEO. As a member of the Senior Management Team (SMT) reporting to the President/CEO, the expectations include active participation in the administrative processes of CCBC. A minimum of a bachelor's degree preferred in Management, Public Relations, Communications, or Marketing with appropriate related experience will be considered. To apply send resume and salary history to [avanderberg@donateblood.org](mailto:avanderberg@donateblood.org). All qualified applicants will receive consideration for employment without regard to race, color, sex, religion, national origin, age, protected veteran status, disability status, or any other characteristic protected by law.

**Senior Director.** The Mississippi Valley Regional Blood Center (MVRBC) is conducting a search for an experienced leader to oversee our Donor Services department as a Senior Director, Donor Services. This opportunity is a full-time position based in our Davenport, Iowa location. The Senior Director will be responsible for the oversight and performance of 400 plus employees throughout the MVRBC service territory ensuring staff perform collection activities and implement initiatives that are in accordance with all regulatory entities, and established SOPs. As Senior Director you will be tasked with the responsibility of providing and demonstrating consistent and strong leadership skills in support of MVRBC mission and regulatory compliance. This position requires a high level of critical thinking and problem solving. Position includes frequent travel within the MVRBC service territory. May require occasional travel throughout the U.S. to attend meetings and conferences as needed. Requirements: The ideal candidate will have a minimum of eight years' experience in previous blood center setting or similar health care setting and a minimum of five years' supervisory experience preferred. Graduate of accredited School of Nursing, College, or University is desired. RN license must be valid in state(s) as required and in good standing. To apply, please visit:

(continued on page 13)

**POSITIONS** (continued from page 12)

<http://www.milwaukeejobs.com/j/11568059>. Equal Opportunity Employer: Minorities, Women, Veterans, Disabilities.

**Sr. Program Manager – Donor & Volunteer Engagement (Job #7574ABC).** Puget Sound Blood Center is now Bloodworks Northwest! We've grown, and today we're touching and saving lives far beyond Puget Sound -- serving nearly 90 hospitals in Washington, Oregon, and Alaska. Every day we work to save lives through research, innovation, education and excellence in blood, medical and laboratory services. We have proudly served donors and patients in partnership with our community for 70 years. Requirements include: Bachelor's degree in Marketing, Business Management, Communications, Public Relations, or equivalent experience; minimum five years senior level experience in some combination of program management, marketing or community relations, with demonstrated experience in budgeting, analytics and public speaking. Experience with nonprofit or community giving programs preferred. Experience in designing and implementing successful social media campaigns, demonstrated effective written, verbal and interpersonal communication skills, excellent facilitation, negotiation and conflict resolution skills are all required. More information at [www.bloodworksnw.org](http://www.bloodworksnw.org). Qualified applicants send resumes to [humanresources@bloodworksnw.org](mailto:humanresources@bloodworksnw.org) Attention: Job #7574ABC. Bloodworks Northwest is an equal opportunity employer. All qualified applicants will receive consideration for employment without regard to race, color, sex, religion, national origin, age, protected veteran status, disability status, or any other characteristic protected by law.

**Director of Blood Collections Operations and Training.** Kentucky Blood Center, located in Lexington, Kentucky is seeking a resourceful, self-motivated individual to assist the Executive Director of Blood Collections in oversight of all aspects of technical and administrative functions of the Blood Collections operations and training, ensuring quality, accuracy, excellent customer service and efficiency of the departments. Responsibilities include, but are not limited to; monitoring and reviewing staff schedules; reviewing and approving Performance Evaluations; supporting Blood Collection Managers with personnel challenges; assisting with special projects; overseeing training and proficiency of Blood Collections staff to assure safe and pleasing donation experiences for donors and safe blood products for recipients; and overseeing staff competency. MLS or Registered Nurse required. Competitive salary, comprehensive benefits including health/dental, life, STD, LTD, paid sick/vacations/holidays, EAP, 403(b) retirement savings plan, and pension plan. For more information or to apply online, please visit [www.kybloodcenter.org](http://www.kybloodcenter.org). Drug-free and EOE/AAP.

**Manufacturing/Hospital Services Manager.** Blood Bank of Hawaii, a medium-size blood center (50,000 RBC distributions annually), has an exciting opportunity for a Manufacturing/Hospital Services Manager. This leadership position is responsible for overseeing the operations, staffing and management of the Component Laboratory and Hospital Services departments. Responsibilities will include: ensuring efficient and effective operations in blood product manufacturing, hospital satisfaction in meeting blood product needs and mentoring and developing a Hospital Services Supervisor and a Manufacturing Supervisor. The ideal candidate will have a BA/BS in Medical Technology or a related science, knowledge of federal and state regulations as they relate to blood center operations, and at least three years of blood center experience. Two or more years of supervisory experience required. We offer a competitive salary and excellent benefits. Please apply via our website: [www.bbh.org](http://www.bbh.org).

**Medical Technologist.** The Blood & Tissue Center of Central Texas, located in Austin, is hiring a certified lab professional to perform all patient testing functions and donor processing. This includes viral marker EIA testing, ABO testing, antibody screens and work-ups, antigen testing and cross-matching, as well as RPR and CMV testing. This position will have a direct impact on our mission and will ultimately help save lives in our community. Even better, they will work in a great environment with smart people who care about the work they do! Qualified candidates must be able to work in an area where bio-hazardous elements can exist. BS in Medical Technology (or equivalent) and ASCP or NCA Certification as a Medical Technologist or Blood Bank Technologist is required. AS and certification as MLT or BB will also be considered. Must be at least 21 years old, have a valid driver's license, proof of vehicle insurance, and an acceptable driving record. Must be able to work a rotating weekly schedule, participate in on-call, and have the availability to work on the weekends and holidays as scheduled. Familiarity with cGMP, AABB and FDA regulations is desired. Please visit [www.inyourhands.org](http://www.inyourhands.org) to apply.

**RN – Therapeutic Apheresis (Part Time).** We are looking for a Nurse to be part of our Apheresis Program. This opportunity includes collecting peripheral blood stem cells for the Be The Match program and mononuclear cells for the Dendreon Program. Responsibilities also include performing plasma exchange, red blood cell exchange, white cell depletions and photopheresis to help hospital patients with varying levels of acuity. The majority of procedures are done on a one to one nurse to patient ratio. To perform all procedures, you will work with four different apheresis instruments and develop a career in a field that is growing every year. The schedule

(continued on page 14)

**POSITIONS** (continued from page 13)

is primarily first shift, three days a week, Monday - Friday. Also involves occasional evenings and rotating on-call weekends. The ideal candidate will enjoy working independently with minimum supervision, be able to multi-task and work under high pressure situations. You will learn to apply your apheresis and nursing skills to both adult and pediatric patients. Licensure as a Registered Nurse required. Experience in intensive care, advanced hospital nursing, or dialysis is preferred. Please apply via our website: [www.miblood.org](http://www.miblood.org). EOE

**Medical Director.** Blood Systems is seeking a full-time clinically-focused Transfusion Medicine physician to join its Medical Affairs team. The Medical Director is responsible for coordinating communications between United Blood Services' district centers, the local medical community, and Corporate Medical Affairs in Scottsdale, AZ. Responsibilities include consultation with hospital staff and clinicians, hospital visits, patient blood management oversight, CLIA laboratory directorship, and medical direction to collections, manufacturing, and local clinical service functions. The successful candidate will be able to direct district medical operations from a number of hub locations within the 20 states served by Blood Systems. Requirements: 1) MD, DO or equivalent degree 2) Medical license in the state(s) of work within six months 3) Board eligibility in Transfusion Medicine 4) Blood Bank/Transfusion Medicine certification within two years of employment 5) Fellowship training or equivalent experience in blood banking/transfusion 6) Experience at a blood center and/or hospital transfusion service including provision of education, clinical consultations, and some combination of therapeutic apheresis, cell therapy, laboratory, immunohematology, etc. experience. For more information or to apply please visit: [www.bloodsystems.org](http://www.bloodsystems.org) Employment. Blood Systems provides equal employment opportunities to minorities, females, veterans, and disabled individuals, as well as other protected groups. Our organization participates in E-Verify, for more information [click here](#).

**Executive Director, Blood Operations AD001 - San Antonio, TX.** Work directly with the chief operating officer to execute the mission of South Texas Blood & Tissue Center (STBTC). This executive leadership position is accountable for operational objectives and will ensure strategic plan is met. In addition to oversight of daily operational functions, this position tracks and trends key performance indicators, quality metrics and financials and takes appropriate action to ensure business viability. Bachelor's degree in Applied Science or Business required, MBA preferred. Successful execution of strategic objectives. Demonstrable success building teams to drive operational success in challenging and highly regulated environments required. Demonstrable success with implementing and sustaining process improvement. Ten years progressive managerial experience required. Experience managing donor re-

cruitment, donor services, component manufacturing, and product management preferred. Texas Operators Driver's License. Three years driving experience with good driving record required. Visit our website at [www.biobridgeglobal.org](http://www.biobridgeglobal.org). E-mail résumé to [hr\\_dept2@biobridgeglobal.org](mailto:hr_dept2@biobridgeglobal.org). Call Human Resources (210) 757-9557. BioBridge Global and its subsidiaries are proud to be an EEO/AA-M/F/D/V/Genetic Data employer that maintains a Tobacco & Drug-Free Workplace. All qualified applicants will receive consideration for employment without regard to race, color, ethnicity, religion, sex, national origin, disability, veteran status, genetic data or other legally protected status.

**Director of Patient Services.** We are currently seeking a dynamic individual to direct our Hospital Services and Immunohematology Reference Laboratory divisions. Will oversee department staffing, budget, training, education, customer service programs and consultation services to customers and perform various projects as needed. Will assist in negotiating hospital service agreements and oversee all aspects of laboratory testing and technical operations. Must possess excellent communication (verbal/written), interaction, problem solving, negotiation leadership and organizational skills. Position requires a BS/BA in related field and four years relevant experience; Must possess eligibility for State of California Clinical Laboratory Scientist License (current CA CLS preferred) and be SBB (or equivalent) certified. To apply, visit our employment page at: <http://www.bloodcenters.org/about-us/employment/>. Requisition #15000476. Blood Centers of the Pacific provides equal employment opportunities to minorities, females, veterans, and disabled individuals, as well as other protected groups.

**Immunohematology Reference Laboratory (IRL) Assistant Director.** The Clinical Services Division, Hoxworth Blood Center seeks Immunohematology Reference Laboratory (IRL) Assistant Director. Ideal candidate will have five years' experience and SBB (ASCP) certification at supervisor level or above in areas of immunohematology reference testing and/or transfusion service. Assistant Director of this AABB accredited IRL is responsible for leadership, expertise, oversight with emphasis on customer interactions with 24 associated labs, regional transfusion services, coordinating development, training, and managing resources. Assistant Director assures that departmental processes, procedures, quality control activities are compliant with accreditation and regulatory standards. Assistant Director is responsible for testing, technical operation, employee counseling, evaluation and other supervisory functions. Other duties: developing/managing contracts, bids, budget, management of licensed regional antibody

(continued on page 15)

**POSITIONS** (continued from page 14)

registry, relevant projects, education of selected transfusion service technologists, bachelors/masters students, post-doctoral physicians/scientists. Bachelor of Science degree clinical laboratory science (or equivalent), SBB (ASCP) certification, three years' experience. Apply for this position (Required ID 2746) at <https://jobs.uc.edu>.

**IRL Technologist (Medical Technologist).** Are you looking to make a difference in the job you do? The American Red Cross collects over 6.5 million units of blood annually and provides best in class IRL/testing services via our network of 41 local IRL offices. The IRL Technologist will perform basic and advanced blood donor and patient tests and interpret results to determine blood donor-recipient compatibility as well as other duties as assigned. MT (ASCP) and/or BB (ASCP) required, blood banking experience is preferred. Positions available nationwide. For more information or to apply visit: [www.americanredcross.apply2jobs.com](http://www.americanredcross.apply2jobs.com). The American Red Cross Blood Services IRL group is accepting applications for a variety of positions in the following states: Alabama, Arizona, Arkansas, California, Georgia, Kansas, Kentucky, Maryland, Missouri, Nebraska, Ohio, Pennsylvania, Puerto Rico, South Carolina, Texas and Virginia. The American Red Cross is an Equal Opportunity/Affirmative Action employer. All qualified applicants will receive consideration for employment without regard to sex, gender identity, sexual orientation, race, color, religion, national origin, disability, protected veteran status, age, or any other characteristic protected by law.

**Field Representative.** Indiana Blood Center (IBC) is looking for two Field Representatives (Monroe and Brown County areas and Tippecanoe County area). This position will educate and motivate new and existing donor groups, chairpersons, and committees to meet IBC blood needs through sponsorship of successful blood drives. Responsible for the achievement of the monthly and annual field recruitment collection goals in whole blood and other product lines. Educates and motivates new and existing donor groups on hosting blood. Ensures the adequacy of drive sites through the site inspection procedure. Complies with current donor incentive procedure and ensures all coordinators are trained and documentation is captured. Plans and implements donor recognition and promotions. Builds relationships with coordinators and account leaders. Conducts recruitment strategy meetings. Recruits donors at on-site drives. Conducts training and promotes the use of DonorPoint and online schedules in order to maxim-

ize donor potential. Conducts cold calls on inactive/new territories and performs territory blitzes. Performs account sweeps prior to lock-down period and resolves internal coordination issues. Performs account assessments to help identify territory strategies. BS/BA degree; three to five years sales experience required, with proven success in business to business sales preferred. Must have valid Driver License, acceptable driving record and reliable transportation to reach communities in assigned territory. Please apply at [www.indianablood.org](http://www.indianablood.org). EEO Employer/Vet/Disabled

**Senior Manager, Transfusion Services (Elmsford, New York \* Full Time).** New York Blood Center seeks professional to oversee the overall operations and administration of laboratories under Transfusion Services. Requires a BS in Medical Technology, MT (ASCP), NYS Clinical Laboratory License, and six plus years of transfusion service experience, including five-plus years of progressively responsible management experience in a clinical laboratory environment. The ability to develop/manage budgets a must. MBA/MPH/SBB preferred. Competitive compensation package. Please apply online at: <http://bit.ly/1GcIRdN>. EOE AA M/F/Vet/Disability

**Account Representative – East Bay Region (\$50,176 Salary + Lucrative Incentive Program).** Blood Centers of the Pacific is a nonprofit, community-based organization that provides blood and blood components to hospitals, physicians, and patients throughout Northern California. Blood Centers of the Pacific supports over 50,000 patients every year with blood donated by our community. It also houses the Blood Systems Research Institute which conducts medical research to improve blood safety and patient care. We are currently seeking a marketing and account management oriented individual to work with corporations and organizations in the East Bay area to promote and increase blood donations by developing existing/new accounts and coordinating blood drives. Must be comfortable in an environment where an achievement of monthly/annual goals is expected. Position requires a BS/BA in related field and one year of relevant experience; valid California driver's license, acceptable driving record and own vehicle (mileage reimbursed). To apply, visit our employment page at: <http://www.bloodcenters.org/about-us/employment>. Requisition #15000344. Blood Centers of the Pacific provides equal employment opportunities to minorities, females, veterans, and disabled individuals, as well as other protected groups. 💧