



# ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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2015 #20

May 29, 2015

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**How ABC Members Are Optimizing Plasma Opportunities**

With decreasing red blood cell (RBC) utilization in the US, blood centers have been seeking new streams of revenue, and many are seizing opportunities in plasma collections. From ramping up plasma collections with automated apheresis devices, to opening collection centers specifically focused on source plasma – ABC member blood centers are increasing plasma collections and revenue.

Allogeneic whole blood and RBC collections have dropped about 12 percent from 2008 to 2013, according to preliminary results of the 2013 AABB Blood Collection, Utilization, and Patient Blood Management Survey, which has placed a financial strain on blood centers. However, the need for plasma, particularly source plasma to be manufactured into life-saving plasma therapeutic products, continues to grow in the US and worldwide. Despite this need, the volume of plasma recovered from whole blood for further manufacture has decreased due to dwindling whole blood demand.

**Source Plasma Opportunities.** “The patient need for plasma-based medicines is significant. Studies have shown that the market for source plasma is growing at about 7 percent per year for the foreseeable future,” said Rob Van Tuyle, president and chief financial officer at BloodSource, Sacramento, Calif., who spoke on the financial considerations behind source plasma at ABC’s Technical, Collections, and Quality Workshop in Orlando, Fla. earlier this month. “Migrating donors over to source plasma provides an alternative donation type and still is core to our overall mission of saving lives.”

Donating source plasma also allows certain female blood donors, who may be deferred from donating plasma for transfusion due to AABB transfusion related lung injury (TRALI) mitigation requirements, an opportunity to continue giving the gift of life in a different way, added Safet Ibisevic, quality systems director at Rock River Valley Blood Center, Rockford, Ill., who talked about the regulatory requirements related to source plasma at the recent ABC workshop.

While source plasma collection entails some unique requirements, such as annual physicals for donors and more stringent freezing requirements after collection, it has become more financially feasible because with increasing demand for source plasma, the price per liter has also increased, said Mr. Van Tuyle. Taking advantage of automated collection devices and this growing demand for source plasma, BloodSource became the first center in the US to open a voluntary

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## OUR SPACE

**ABC Board Member Mary Townsend, MD, Senior Medical Director, Blood Systems**

### **Standing on the Shoulders of Giants**

Isaac Newton once wrote to rival Robert Hooke in 1676, “If I have seen further it is by standing on the shoulders of giants.”

Many years ago, when I was a young “wet behind the ears” medical director of a small blood center in the middle of nowhere, I received a phone call that changed my professional life. Celso Bianco, MD, then-president of ABC, shocked me by calling to graciously invite me to serve as co-chair of ABC’s Scientific, Medical, and Technical (SMT) Committee, along with Lou Katz, MD. As a relative newbie from a small blood center, I felt inadequate in the face of such a challenge, but Celso assured me I would be provided lots of assistance. After consulting my CEO at the time, John Guthrie, I accepted Celso’s offer. I both survived and enjoyed my stint as SMT chair, going on to serve on other committees at both ABC and AABB. I tell this story partly to thank Celso and Lou, both of whom have become personal friends over the years, but also to highlight their generosity and graciousness in confidently handing the torch to the next generation.

If you have looked around the room in blood banking meetings lately, you may have noticed the number of grey hairs among us. We aren’t gone yet, but our generation is edging ever closer to retirement. It is time we pick up the phone, much as Celso did all those years ago, and make a call to young, upcoming blood banking professionals. We must start passing the torch *now*, while we can still mentor this talented new generation. They are ready to take their place among us as our newest leaders, but we have to open the door.

I encourage you – current blood center executives – to identify those emerging leaders in your own organizations because they are our professional future. Ask them to serve on an ABC committee. Encourage them to speak in one of the many educational venues available, including those offered through the new ABC Professional Institute (API). Metaphorically pick them up and place them on your shoulders, so they can see further than we have and take us into a bright future. It is easier than you think; so far this year we at Blood Systems have encouraged a young transfusion safety officer and two young physicians to become involved with the ABC Transfusion Safety Committee. It warms my heart to watch these young people shine and I cannot wait to see where they take our association and our profession in the future.

Finally, a belated but deepest thanks to John Guthrie, Celso Bianco, and Lou Katz. To this Texas girl, you made all the difference.

*Mary Townsend MD*

[MTownsend@bloodsystems.org](mailto:MTownsend@bloodsystems.org) 💧

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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

ABC Publications Editor: Betty Klinck

Subscriptions Manager: Leslie Norwood

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Send subscription queries to

[lnorwood@americasblood.org](mailto:lnorwood@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).

Maximizing Plasma Opportunities (continued from page 1)

donation center specifically for source plasma collection in September 2014. It now collects source plasma in four centers throughout Northern California and has entered a thriving new market.

“The donor response has been tremendous. Over the past few years leading up to opening our first center, we were educating our donors at various appreciation events about plasma-based medicines and the patient need ... We want our donors to be thought of as blood donors, not platelet donors or plasma donors. As patient needs change, we want to make sure our donor base understands that we may come to them with a different donation request,” said Mr. Van Tuyle. BloodSource is also educating fellow blood centers about the many considerations surrounding source plasma collection – from regulatory considerations to the types of freezers it uses – on its [website](#).

It is important to consider the regulatory pathway to gaining Food and Drug Administration approval for source plasma collection and distribution, as these products cannot be distributed for manufacturing without FDA licensure, said Mr. Ibisevic. For frequent source plasma collections (donors are eligible for collection every two weeks), the blood center must submit a prior approval supplement (PAS) under the center’s biologics license application (BLA). This includes considering source plasma labels, donor education materials, and standard operating procedures (SOPs). For infrequent source plasma collections, blood centers must request approval for an exception under 21 Code of the Federal Regulations (CFR) 640.120(a), commonly called a variance. Both processes take about a year, and are reliant upon early and frequent communication with the center’s FDA consumer safety officer (CSO), said Mr. Ibisevic.

FDA’s requirement that source plasma for further manufacture be frozen within two hours after collection – vs. the eight hours permitted after collection of plasma for transfusion – may present difficulties for some blood centers, like RRVBC, where some of the satellite collection centers are 15 to 20 miles from the processing facility where the product would be frozen, said Mr. Ibisevic. For now the center is not collecting source plasma at its satellite locations.

**Benefits of Automation.** The Institute for Transfusion Medicine (ITxM) continues to ramp up its robust plasma collection program with a focus on automation, collect-and-recruit-to-need strategies, and plasma product forecasting. Using automated platforms like Fenwal’s Alyx system and Terumo BCT’s Trima Accel system, ITxM has been able to increase its plasma production through large volume plasma donations that yield three to four transfusable units during a 35-minute collection procedure, said Michele Tysarczyk, executive director of Blood Bank Operations at Central Blood Bank/ITxM, who presented on this subject at ABC’s Annual Meeting in Washington, D.C. in March. This has in-turn led to a 13 percent increase in the liters of plasma recovered from whole blood that can be sent for further remanufacture from ITxM’s Central Blood Bank.

The ability to easily transport these automated devices allows ITxM to have more flexibility in the types of collections possible on mobile units, allowing the blood center to better meet patient needs. For example, a donor with blood type AB can donate much-needed AB plasma at a mobile blood drive, rather than being limited to whole blood. ITxM also uses recruit-and-collect-to-need strategies to ensure that the appropriate amount and type of blood is collected to meet patient needs and reduce waste. For example, using forecasting tools, the blood center projects inventory needs and manufacturing opportunities to determine what blood types to collect, where to collect the blood, and what collection devices to use each day.

(continued on page 4)

Maximizing Plasma Opportunities (continued from page 3)

**Recruit and Collect to Need.** To facilitate this strategy, ITxM holds daily production planning calls including key personnel in collections, manufacturing, and distribution. “We’ve found that you can’t work in silos to successfully direct collections based on inventory needs, particularly when you’re working across multiple organizations – ITxM is not comprised of just one blood center,” said Ms. Tysarczyk. During the calls, decisions about how to recruit and direct collections on the front-end are discussed, as well as guidance on what products are needed from the manufacturing side. “Really it is a collaborative effort between the front and the back end of the house,” added Ms. Tysarczyk.

To support the collect-and-recruit-to-need strategy, ITxM uses social media, e-mail, and on-site messaging to recruit donors with the appropriate ABO blood types and suggest the ideal donation type. The organization has created a vast amount of marketing materials available across multiple platforms, including its website, to explain to donors what donation might be best based on their blood type, such as suggesting plasma donation for AB donors. ITxM plans to continue developing new marketing materials, particularly those geared toward AB donors.

**Small Centers Can Get Involved Too.** During the ABC Technical, Collections, and Quality Workshop, Lane Blood Center, Eugene, Ore., now a division of Bloodworks NW, demonstrated how even a small blood center can take advantage of opportunities in plasma collections. The blood center began providing liquid plasma at the request of trauma surgeons at its hospital customers, who felt that coagulation factors were stronger in liquid plasma than in thawed plasma.

“We found that we could produce this product without adding staff, adjusting schedules, qualifying new equipment or processes, or buying new supplies or materials – and we could charge a bit more for it as an on-demand, boutique product not normally in production,” said Valerie Morris, MS, quality assurance specialist at Lane Blood Center, who presented at the workshop. The only challenge at the moment is that none of the apheresis instruments are licensed to collect this product, which limits the center to producing liquid plasma from whole blood derived plasma, meaning that precious AB liquid plasma can be collected much less frequently than it could be if an apheresis device were approved for its collection, said Ms. Morris.

These are just a few examples of many ABC member blood centers that are finding new opportunities in plasma collections to meet the demand for plasma and plasma-based therapeutics, while providing new sources of revenue. 💧

**Important Notice to Readers**

The Publications Editor will be out of the office from **June 1 to June 5**. During this time, please direct any press releases, news tips, or other inquiries regarding the *ABC Newsletter* to Mack Benton at [mbenton@americasblood.org](mailto:mbenton@americasblood.org). He will be happy to help you with any Newsletter-related business. We thank you for your cooperation.



**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. ♦*

### **ABC Board of Directors Holds Meeting in Washington**

America's Blood Centers' board of directors visited Washington, D.C., last week, home to ABC's headquarters, for a board meeting, as well as board development. The board discussed progress on the five areas of ABC's 2014-2017 strategic plan: advocacy excellence, data driven excellence, association model redesign, education excellence, and governance excellence.

ABC board members participated in an interactive half-day combined professional and board development workshop alongside the ABC staff. An instructor and performer from the Shakespeare Theater Company in Washington showed the group how principles of successful acting can translate into professional business communication. The group participated in exercises to learn about how they communicate best and explored ways to connect with an audience and convey a powerful message through public speaking. Board members also joined ABC staff for a reception at ABC's office.

Board members discussed progress and paved the path forward for several of ABC's ongoing projects, including the development of the ABC Professional Institute, a one-stop-shop for online access to all of ABC's educational offerings, which will be integrated in the soon-to-launch redesigned ABC member website. The board also approved the exploration of a political action committee (PAC) to support ABC's legislative advocacy initiatives. Stay tuned to learn more as this project develops.

### **ABC Seeks Information on Current O-Negative Donor Management Practices**

America's Blood Centers is collecting data and information to develop a report on current practices on O-negative donor management and communications. ABC is asking its member blood centers to participate in a survey on this subject in order to report the findings to the International Society of Blood Transfusion (ISBT).

Recruitment and retention of O-negative donors have become a crucial part of the blood center's supply chain; ABC members have invested time and resources in ensuring efficient management and communications practices with this group of donors. The information collected, coupled with data pulled from ABC's Data Warehouse, will be used to develop a current practices report to inform members' future plans. In addition, ABC will use the information to deliver a presentation at the end of June to the ISBT Working Party on Donors and Donations.

Both the report and the presentation will be available by mid-July to survey participants. To participate, ABC members should review the questionnaire available in [MCN 15-043](#) and coordinate one response per blood center. ABC members will also find a link to complete the online survey, which must be submitted by **June 11**. Please direct questions to Matt Granato at [mgranato@americasblood.org](mailto:mgranato@americasblood.org). ♦





# REGISTRATION NOW OPEN



## Summer Meeting

August 4-6, 2015 – Philadelphia, PA

Hosted by



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[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. Three \$725 scholarships available; see registration for details.



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

## RECENT REVIEWS

**The first systematic review of the scientific literature regarding the impact of men who have sex with men (MSM) on transfusion-transmissible infection (TTI) risk was published in *PLoS One*, reinforcing the lack of high-quality evidence in this area.** Researchers from the Belgian Red Cross-Flanders conducted a review of research databases for studies comparing MSM and non-MSM blood donors (or people eligible to give blood) living in areas most relevant to the Belgian blood service. Of the 14 studies included for analysis, 11 were unable to demonstrate significant effects of MSM behavior because the precision of the results was hampered by low numbers of MSM donors. The evidence available from the three other studies “suggested a link between MSM blood donors and HIV-1 infection.” One of the three studies suggested excluding MSM donors for at least one year after the last MSM contact. By contrast, no studies were available at all to demonstrate that blood from MSM donors is as safe as blood from non-MSM donors. “We’ve simply shown that high-quality research documenting the risk – or lack thereof – posed by MSM blood donors is lacking. But the absence of (strong) evidence doesn’t prove evidence of absence,” said EBA President Philippe Vandekerckhove, of the Belgian Red Cross and a co-author of the study. “On data that do exist, (even though of low quality) a heightened risk is suggested, certainly up to 1 year after MSM, thus confirming what can be expected based on the general epidemiology of the HIV epidemic.” The authors conclude that higher quality evidence is needed to support policy decisions regarding the MSM deferral.

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**RECENT REVIEWS** (continued from page 6)

**Citation:** De Buck E, *et al.* Is having sex with other men a risk factor for transfusion-transmissible infections in male blood donors in Western countries? A systematic review. PLoS One. 2015 Apr 15;10(4):e0122523.

**An editorial recently published in *Blood* discusses the role of rituximab in adults with warm antibody autoimmune hemolytic anemia (WAIHA), the most common form of autoimmune hemolytic anemia.** The management of WAIHA has long been mainly empirical or based on retrospective uncontrolled studies, wrote Daan Dierickx and colleagues of the University Hospitals Leuven in Belgium, in their editorial. Corticosteroids remain the cornerstone of treatment but cure only a minority of patients (<20%). Splenectomy is considered a second-line therapy when needed. Rituximab, anti-CD20, has been suggested as a second-line treatment with response rates similar to splenectomy in observational experiences, but its responses seem less sustained and no prospective study reliably supports this approach. A recent randomized study strongly suggests that in the first-line treatment, rituximab combined with steroids is superior to monotherapy with steroids. The authors reviewed the available evidence and concluded that the “most appropriate use of rituximab remains ... to be defined especially the dose, the timing of treatment, and its position compared with established treatments including splenectomy.” “More experience, especially longer follow-up after treatment with low-dose rituximab, is needed before it can be recommended in everyday practice. Maintenance with rituximab should be assessed in autoimmune disorders, such as WAIHA, especially in relapsing patients, because the underlying immunological disorder persists in most patients even after successful treatment, irrespective of nature,” they conclude.

**Citation:** Dierickx D, *et al.* The role of rituximab in adults with warm antibody autoimmune hemolytic anemia. *Blood*. 2015 May 21;125(21):3223-9. ♦

**BRIEFLY NOTED**

**A commentary published this week in *The New England Journal of Medicine* explores the potential benefits and challenges ahead as the medical field and federal regulators continue the push to implement precision medicine.** Precision medicine refers to treatments “targeted to the needs of individual patients on the basis of genetic, biomarker, phenotypic, or psychological characteristics that distinguish a given patient from other patients with similar clinical presentations,” J. Larry Jameson, MD, PhD, and Dan L. Longo, MD, from the University of Pennsylvania Perelman School of Medicine, wrote in their commentary. Precision medicine aims to improve clinical outcomes for patients and minimize side effects for those less likely to have a response to a particular treatment. The authors summarize the forces accelerating precision medicine, the challenges to its implementation, and the implications for clinical practice. Several technological advances are driving precision medicine, including genetics, informatics, and imaging, along with other technologies like cell sorting, epigenetics, proteomics, and metabolomics, wrote the authors. Algorithms to identify patients with disease risk factors using data from electronic health records may also play a role in precision medicine. While these technologies will allow physicians to make more precise diagnoses and treatment plans, challenges may exist in the need to develop more complex disease classifications, particularly with the advances in genetics and biomarkers, said the authors. They added that better biomarkers are needed to assist with disease detection and to help guide treatment. Many future opportunities exist to develop medications that target altered genetic pathways in cancer, as well as targeted immunotherapies for cancer. “The extent to which these advances are constructive or disruptive depends on our ability to harness vast amounts of new knowledge and treatment options within the framework of everyday clinical practice. Changes that occur will require reengineering

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**BRIEFLY NOTED** (continued from page 7)

and adaptations by multiple stakeholders,” concluded the authors. This commentary comes as the federal government ramps up support for precision medicine through [Precision Medicine Initiative](#) (PMI), unveiled by President Obama in January 2015 to revolutionize medicine and generate scientific evidence needed to move the concept of precision medicine into everyday clinical practice. The President launched this initiative with a \$215 million investment in the President’s 2016 Budget. The National Institutes of Health and partner organizations are hosting a series of precision medicine workshops, about which more information and links to webcasts can be found [here](#). Just this week the PMI Working Group of the Advisory Committee to the NIH Director hosted a public [workshop](#) about the PMI to develop a national cohort study of 1 million Americans to propel our understanding of health and disease. America’s Blood Centers’ members may be interested in investigating blood centers’ potential role in PMI, such as providing genetic testing to help develop this national research cohort.

**Citation:** Jameson JL, Longo DL. Precision medicine – personalized, problematic, and promising. *N Engl J Med*. 2015. 2015 May 27. [Epub ahead of print] 💧

**REGULATORY NEWS**

**The International Coalition for Commonality in Blood Bank Automation (ICCBBA) recently made a draft version of ST-001 ISBT 128 “Standard Technical Specification” v 5.3.0 available for public comment.** ISBT 128 is the international code for the identification and labeling of products of human origin. Comments must be submitted to ICCBBA via e-mail to [TScomment@iccbba.org](mailto:TScomment@iccbba.org) by **June 19**. The document can be found [here](#). (Source: ICCBBA e-mail update 5/26/15)

**The Food and Drug Administration has provided 510(k) clearance to Verax Biomedical for the expanded application of the Verax Platelet PGD test – a rapid test for the detection of bacterial contamination of platelets intended for transfusion.** The new FDA clearance allows users to test all commonly distributed platelet types in the US. The test was previously approved to test apheresis platelets in plasma and whole blood derived platelets. With this new clearance, it can now be used as a safety measure to test pre-storage pool platelets (e.g., Acrodose platelets) and apheresis platelets in PAS-C additive solution and plasma. More information is available in the FDA approval [documents](#). (Source: FDA 510(k) approval documents, 5/28/15; News Medical, 5/28/15) 💧

**THE WORD IN WASHINGTON**

**In observance of Memorial Day, both the House and Senate are out of Washington and in home states the week of May 25.** If you saw your legislators or their staff at home, let us know how your visits went and send us pictures to [bklinck@americasblood.org](mailto:bklinck@americasblood.org). To see when Congress is in Washington or at home, visit the [House schedule](#) and [Senate schedule](#).

**The House Energy and Commerce Committee unanimously approved their “21st Century Cures Act” (HR 6) on May 21 with a vote of 51-0, after legislators were given an extra day to consider offsetting revenues to pay the bill’s cost.** A vote on the House floor is likely being scheduled for June, with the Senate considering moving similar legislation early in 2016. The legislative package includes \$10 billion in mandatory funding for the National Institutes of Health and \$550 million in mandatory

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**THE WORD IN WASHINGTON** (continued from page 8)

funding for a “Cures” fund at the Food and Drug Administration. The bill is aimed at streamlining the FDA’s approval process for new drugs. To read more about the legislative package click [here](#) or view a copy of the legislation [here](#).

**A decision is expected in June on the King v. Burwell U.S. Supreme Court case on subsidized health coverage offered through federal exchanges in states.** A court ruling in favor of the plaintiff could eliminate federal subsidies in states where a federally-facilitated healthcare marketplace exists, which has the potential to substantially disrupt coverage for several million Americans. Learn more [here](#) or read a recent article on the case in [The New York Times](#).

**In Arizona, Rep. Ann Kirkpatrick (D-AZ-1) announced on May 26 that she will challenge Sen. John McCain (R-AZ) for his Senate seat in 2016.** America’s Blood Centers encourages ABC members to get involved in local races and to share any photos or experiences with us for the *ABC Newsletter* at [bklinck@americasblood.org](mailto:bklinck@americasblood.org). ♦

**GLOBAL NEWS**

**The Global Blood Fund (GBF) recently reported supporting a donor recruitment drive in Kenya that has resulted in a significant boost in donation activity – and more lives saved.** GBF, a non-profit charity that works to improve the safety and availability of blood in resource-scarce nations, helped train community-based Club 25 members as blood donor recruiters. [Club 25](#) is an international youth-oriented global social club committed to saving lives by regularly donating blood. GBF also supported the resulting blood drives hiring tents to shelter the donors, covering transportation costs, and providing promotional educational materials. These efforts led 40,000 Kenyans to become more educated about blood donation between October 2014 and March 2015, with almost 10 percent of those donating blood for the first time.



A first-time donor in Kenya gives blood.

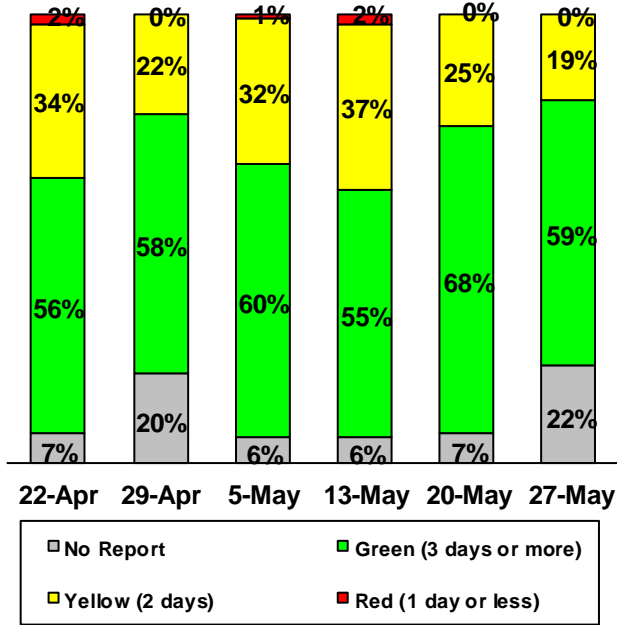
**The Netherlands College for Human Rights ruled on April 29 that banning gay or bisexual men from donating blood is discriminatory.** Sanquin Blood Supply, the blood service of the Netherlands, enforces a permanent deferral for men who have had sex with other men (MSM). The human rights group conducted an investigation to determine whether permanently deferring MSM donors is still necessary and concluded that recent research shows the ban is not necessary to maintain the safety of the blood supply. The College ruled that the Sanquin policy is no longer justified and that excluding these men is discriminatory. They feel that there is reason for Sanquin to adjust the donor deferral policy. (Source: EBA Newsletter, 5/26/15) ♦

**We Welcome Your Letters**

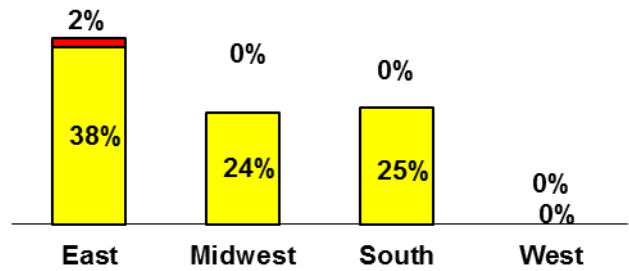
The *ABC Newsletter* welcomes letters from its readers on any blood-related topic that might be of interest to ABC members. Letters should be kept relatively short and to the point, preferably about a topic that has recently been covered in the *ABC Newsletter*. Letters are subject to editing for brevity and good taste. Please send letters to ABC Publications Editor Betty Klinck at [newsletter@americasblood.org](mailto:newsletter@americasblood.org). 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.

**STOPLIGHT®: Status of America’s Blood Centers’ Blood Supply**

**Total ABC Red Cell Inventory**



**Percent of Regional Inventory at 2 Days Supply or Less, May 27 2015**



**Percent of Total ABC Blood Supply Contributed by Each Region**  
 East: 20%; Midwest: 25%; South: 24%; West: 31%

Daily updates are available at:  
[www.AmericasBlood.org](http://www.AmericasBlood.org)

**MEMBER NEWS**

Carter BloodCare, Bedford, Texas, recently received a boost to support the summer blood supply with the annual College Gallon Challenge, a series of blood drives at colleges and universities that compete for water donations from Carter BloodCare for donation to their favorite charities. Through this promotion, blood drive coordinators select a charity that would receive gallons of water (by the case of 20-oz. bottles) based on their efforts in collecting gallons of blood at their College Gallon Challenge. Some colleges host a week-long series of drives, while others complete their blood drives within one or two days. The drives are booked within a specific time frame in late March and usually conclude by the first week in May. Recent water deliveries occurred in the north, central, and east Texas regions of the blood center’s service area. (Source: Carter Blood-Care e-mail, 5/18/15) 💧



Frisco Family Services’ Food Pantry in the northern area of Carter BloodCare’s service region receives a water delivery on behalf of Collin College in Frisco, Texas.

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# SAVE THE DATE



## FINANCIAL MANAGEMENT WORKSHOP

Rosemont, IL (Chicago area) –  
September 16-17, 2015

Hosted by



### Negotiated hotel room rate: \$175 + tax\*

(includes breakfast and complimentary shuttle from O'Hare Airport. Transportation to workshop venue at LifeSource will be provided.)

[www.westinohare.com](http://www.westinohare.com)

**\*Group rate available through August 28.**

### 2015 Workshop Fees (early bird/regular)

2-day registration: \$390/\$445

The ABC Professional Institute Scholarship Program offers scholarship opportunities to ABC members to cover the cost of registration fees and help with travel expenses. Application form and details will be made available once registration opens.

*The Institute for Transfusion Medicine (ITxM) is thrilled to host the upcoming ABC Financial Management Workshop in Chicago. We anticipate lively discussion and exchange of ideas on how best to manage financially through these uncertain times in blood banking, mainly due to the cost cutting pressures within healthcare and the decrease in blood use. This will be an excellent opportunity to network with your peers and share your expertise on good financial practices and understanding of not only knowing how your business is doing financially, but why. We look forward to seeing you at our LifeSource facility in Rosemont in September.*

– Jim Covert  
President and CEO, ITxM

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



Chicago O'Hare airport (ORD - 3 miles), a hub for United and American, is served by all major US airlines; Midway airport (MDW - 29 miles) is served by discount carrier Southwest Airlines.

## MEMBER NEWS (continued from page 10)

**Shepard Community Blood Center, Augusta, Ga., announced on May 19 that it is partnering with Augusta's minor league baseball team, the Augusta Green Jackets, for the sixth year in a row.** Over the years, this partnership has evolved from an annual one-night event at Lake Olmstead Stadium to include hosting multiple blood drives throughout the spring and summer games, spotlights of location recipients, and the newly renamed Shepard Blood Box Office that highlights the blood center's association with the Green Jackets. Shepard helps local fans get in the Green Jackets spirit each year by giving all blood donors a free ticket to Shepard Night at the Augusta Green Jackets. Every April and May, blood donors receive a free ticket to the company's game night, held in June. This fun night of fellowship and celebration begins at the gate on a game night, where the first 400 people receive a Shepard T-shirt and the first 2,500 people get a Shepard cup filled with goodies. The cup can be used at the game all night and for \$1 refills. There are also a number of prize giveaways throughout the game, special first pitches by blood center MVPs and recipients, as well as drawings for Augusta Green Jackets memorabilia. Shepard Night was created not only to celebrate Shepard's faithful donors and coordinators, but also to reward staff members who work tirelessly throughout the year. Shepard employees enjoy a special BBQ picnic hosted by the company in the exclusive Green Jackets Pavilion that runs along the first base line. "Shepard



**Shepard Community  
Blood Center**

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**MEMBER NEWS** (continued from page 11)

Community Blood Center is grateful for the outstanding support from the Augusta Green Jackets team and staff. This unique partnership has made a great impact in the community and benefits to keep Sheppard's mission of blood collection at the top of mind in the community," stated the blood center's press release. (Source: Sheppard Community Blood Center press release, 5/19/15)

**Community Blood Center of the Carolinas (CBCC) teamed up with the Carolina Panthers and Carolina Healthcare System's Levine Children's Hospital to host the annual Keep Pounding Blood Drive on May 1.** The blood drive honors former Panthers player and coach, Sam Mills, who passed away from cancer at age 45, but inspired many people before his passing. The blood drive was held at the Levine Children's Hospital, which was transformed into a Panther-themed party atmosphere, with the mission of saving lives. As donors watched Panthers game re-caps and old footage on the big screen, they helped save local lives by donating blood. Several parents with children being treated in the hospital donated blood, knowing that donating with CBCC could help save the life of their child and others. Sir Purr, the Panther's mascot, and the Top Cats cheerleaders came by to greet the children, as well as Coach Sam Mills III, the son of the late Sam Mills. Mr. Mills donated blood in his father's memory. From the special guests, to the photo booth, to the Panthers prizes, to the one-of-a-kind t-shirt, the donors had a blast; but it was the patients who really benefited from this 10-hour blood drive. The donors were able to help touch up to 336 lives with their donations in just one day. More information can be found in CBCC's [blog](#). (Source: CBCC blog, 5/4/15) ♦



A Panthers fan and CBCC donor poses for a photo in the photo booth at the recent Keep Pounding Blood Drive. (Source: CBCC Facebook page)

**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**

**Consumer Safety Officer (CSO).** The Department of Health and Human Services, Food and Drug Administration, Center for Biologics Evaluation and Research, Office of Blood Research and Review, is searching for a Consumer Safety Officer (CSO) for the Division of Blood Components and Devices, Blood and Plasma Branch. CSOs will participate in the regulatory oversight of establishments involved in blood component and Source Plasma manufacture including the review of license applications, inspections of new blood component manufacturing establishments, and Source Plasma facilities. CSOs serve as subject matter experts in interpretation of applicable federal regulations, in developing FDA guidance for industry, and also as

liaisons to professional organizations. CSOs also serve as regulatory and technical advisors and reviewers for investigational or new drug/device submissions. Prior blood and blood component manufacturing /transfusion service experience required. Full details and application requirements can be found at: <http://1.usa.gov/1FdhSZj>. The Department of Health and Human Services is an equal opportunity employer with a free smoke environment.

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**POSITIONS** (continued from page 12)

**Managing Director for IT Synergistics, LLC.** IT Synergistics, a BECS vendor owned by blood centers that currently serves ten US blood center customers is seeking a managing director. This is an executive level position that leads a staff of about a dozen professionals including some outside contractors. The successful candidate will have experience in project management (PMP certification preferred), documented prior leadership of team members in multiple locations, understanding of blood center processes, and a history of budget preparation and implementation. Superior communication skills are a must. Requirements: bachelor's degree, minimum of four years' experience in blood center operations and minimum of four years' experience in project management. Relocation will not be required. To apply, please submit resume to Joe Schifano, LIFELINE Blood Services, 183 Sterling Farms Drive, Jackson, TN 38305, or email [joe.schifano@lifelinebloodserv.org](mailto:joe.schifano@lifelinebloodserv.org).

**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.

**Laboratory Operations Manager.** Cascade Regional Blood Services, headquartered in Tacoma, Wash., has an immediate opening for a Laboratory Operations Manager. This position is responsible for all aspects of daily laboratory operations including daily supervision of lab staff, monitoring workflow and quality control requirements. Orient and train staff in department to ensure technical proficiency, quality of work, and biosafety requirements are met in accordance with all applicable policies and procedures. Essential duties include overseeing the processing of test results through a shared manufacturing agreement; components manufacturing and labeling of blood products; order taking, packing, and distribution of blood products; processing and storage of autologous Hematopoietic Progenitor

cells collected by apheresis; all associated quality control of procedures, products and equipment; introduces and oversees implementation of new procedures and equipment. Successful candidate will possess proven management skills in a health care, or regulated environment. Bachelor's degree, MT (ASCP) SBB preferred. Equivalent combination of especially pertinent education and experience may be considered. Excellent benefits including medical/dental/vision/life/LTD. Four weeks' vacation per year. Medical/dental starts the first of the month after hire. Pension plan fully paid by employer. Submit resume and salary history to: HR Manager, Cascade Regional Blood Services, 220 S. I Street, Tacoma, WA 98405. E-mail: [hr@crbs.net](mailto:hr@crbs.net) or fax to (253) 572-3698.

**Director, Education Programs & Grants.** America's Blood Centers is seeking a director to be located at the Washington, D.C., headquarters. The ABC Director, Education Programs & Grants designs, develops and manages education programs and processes to drive a learning and continued education culture that delivers member value and satisfaction via the ABC Professional Institute (API). Works closely with all functional areas of ABC (meetings, communications and member services, HR, IT, SMT, executive, etc.) to create and deliver effective education components to maintain and enhance the API. This includes the design and facilitation of modules, programs, presentation materials, software or platform vendor management, and administration of the entire learning process. Work is based on a thorough needs analysis so that content informs objectives and appropriate measures are in place to ensure objectives. Learning programs should be research-based and align with adult learning principles. To apply online visit [http://bit.ly/abc\\_api\\_position](http://bit.ly/abc_api_position) or send resume to [anunes@americasblood.org](mailto:anunes@americasblood.org).

**Director of Donor Recruitment.** The Blood & Tissue Center of Central Texas, located in Austin, is hiring a sharp and nimble director of Donor Recruitment to develop and implement strategies that will attract and retain blood donors. This position will be responsible for providing tactical direction to the recruitment team and will be focused on achieving monthly goals that will directly impact the organization and ultimately save lives in the communities we serve. Qualified candidates must have a college degree with four years of sales experience or five to seven years sales experience in lieu of college degree. Blood banking or donor recruitment experience is a plus. Must have five to seven years of management and leadership experience. Possess excellent planning, budgeting and communications skills (written and verbal). Exhibit professional conduct and demeanor at all times. Have the ability to work flexible hours, including evenings and weekends as necessary.

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**POSITIONS** (continued from page 13)

Must be at least 21 years of age, have a valid driver's license, proof of insurance and an acceptable driving record. Please visit [www.inyourhands.org](http://www.inyourhands.org) to apply.

**Mobile Operations Supervisor (DS041).** Responsible for the supervision and management of mobile blood drives. Will assist in planning, organizing, and directing the operations of mobiles. Must have at least two years mobile blood banking work experience or five years related medical experience required. Supervisory experience preferred. Computer experience preferred. 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.

**Quality Assurance Specialist (QA Dept.) QA002.** Responsible to review Standard Operating Procedures (SOPs) and forms. Will also review validation, calibration, Quality Control (QC), and maintenance records for equipment and supplies used at South Texas Blood & Tissue Center (STBTC) and its affiliates. Will assist with conducting internal audits and assist during external audits. Will provide assistance to departments for special projects. Bachelor's degree in Laboratory Science or related discipline; or associates degree with MLT Certification and five years' experience. Two years blood bank or transfusion services experience preferred. Must have working knowledge of PC software applications using Windows, Microsoft Word, Excel and other software programs as required. Certification: MLS / MLT / MT (ASCP) preferred. 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.

**Donor Group Representative.** SunCoast Blood Bank, located in Sarasota on Florida's Gulf Coast is seeking an account management professional to handle our Southern territory. This position involves working with community and business organizations to promote and organize mobile blood drives. Position requires four years account management, sales or other relevant experience with a proven track record of achieving established goals and standards. Base compensation with monthly bonus program. Excellent benefits package. Please submit resume to [jobs@scbb.org](mailto:jobs@scbb.org). Applicant drug testing required. EOE

**Lab Director (LifeShare).** Located in Elyria, Ohio and a new member of Blood Systems, LifeShare is seeking a Lab Director to serve as the technical subject matter expert who will be responsible for the technical oversight of the laboratory and technical support functions. This position ensures Current Good Manufacturing Practice (cGMP) regulations are in place for the manufacturing processes including SOPs, training and competency, and error management. Requirements: bachelor's degree, five years' laboratory experience to include three years supervisory experience, certification as medical technologist, BB or SBB preferred, state licensure required. Qualified applicants send resumes to [humanresources@lifeshare.cc](mailto:humanresources@lifeshare.cc) Attention: Lab Director. LifeShare provides equal employment opportunities to minorities, females, veterans, and disabled individuals, as well as other protected groups. ♦