

55th ABC Annual Meeting Brings Members Together

Members of America's Blood Centers gathered in Washington, D.C., for the 55th ABC Annual Meeting at the Ritz-Carlton (Pentagon City). Lively discussions and spirited presentations about blood donor iron mitigation practices, Babesia and bacterial testing, blood center performance metrics, and donor recruitment messaging were central topics of this meeting. The Foundation for America's Blood Centers' (FABC) "Blooming Blood Bankers" fundraising reception gave everyone a chance to take in the breathtaking views from on top of the Hay-Adams Hotel while networking. Larry Frederick gave a heartfelt speech at the 20th Annual *Awards of Excellence*, leaving not one dry eye in the crowd. The ABC's Got Talent Show Season II capped off the nighttime events with a blazing cowgirl and soulful melodies. On the last day of the meeting, leaders from ABC member centers had the chance to visit with their members of Congress on Capitol Hill.

International Blood Safety Forum (IBSF 2017). ABC partnered with Global Healing for the IBSF 2017, "Improving Access to Safe Blood", on Friday, March 24. The IBSF 2017 kicked off the ABC Annual Meeting and featured AABB President Zbigniew (Ziggy) Szczepiorkowski, MD, PhD, FCAP, as the keynote speaker. Dr. Szczepiorkowski discussed the political climate in America, and emphasized that despite the contentious international relations brewing and the political changes in the U.S., blood centers in America cannot forget their obligation to engage with those in less developed countries—even if, "we don't have a sustainable blood system ourselves," said Dr. Szczepiorkowski.

Other speakers discussed accomplishments of the President's Emergency Plan for AIDS Relief (PEPFAR) for HIV treatment and detection in developing nations, the value of blood in developing countries, the difficulties of performing quality management in less developed countries, and action plans to help bridge the gaps in medical knowledge and technological capacity. The audience watched and cheered to a video from Abbott about their BE THE 1 campaign. The campaign featured a mobile collections bus with soccer star Cristiano Ronaldo on the featured on the mobile blood unit and successfully drew enough non-familial donations that it is reshaping the perception of blood donations in Nigeria.

Business Forum. The following day, Saturday, March 25, was the first-ever new ABC meet-



Director of Community Relations & Development at Central California Blood Center Leslie Botos; Maybel Ekanem from University of Uyo in Kenya; and Division Chief Medical Officer, Blood Centers of the Pacific, BloodSource, & United Blood Services Christopher Gresens.

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OUR SPACE

ABC Chief Medical Officer Louis Katz, MD

Do You Get What You Pay For? Maybe Not.

You will be greatly surprised that I have issues with the new administration. Most are not directly relevant to the blood community, but one certainly is. The Tr*mp administration proposes an 18 percent decrease in the taxpayer-funded budget at the National Institutes of Health (NIH)—a decrease of \$5.8 billion. As one who has reviewed many transfusion medicine grant applications for NIH, I can promise you that the best fundamental science being done in our discipline is paid for by NIH. Adding insult to injury, the Fogarty International Center, whose sole purpose is support of international health, is specifically targeted.

One can argue the greatest short-term security threats to the U.S. are from the panoply of emerging and reemerging infections, about which we read daily and obsess over in transfusion medicine. Additional cuts, beyond the NIH budget, are requested from the Department of Health and Human Services' emergency preparedness programs—cuts that span many agencies. Lastly, lifting budget sequestration requirements on the Department of Defense (exclusively) amounts to future cuts to these critical programs of undetermined magnitude.

Without assuming there are political motivations congruent with Tr*mp's denials of settled science and best evidence, what will be the impact of pillaging these programs that have historically enjoyed bipartisan support?

1. A squandering of US world leadership in the generation of biomedical knowledge that advances individual and population health here and worldwide;
2. A throttling back of the economic engine fueled by biomedical research. Jobs will not be created when new industries that should have been spawned by the fruits of basic research are not born. Global sales of the products and services invented to enhance and extend productive lives will not materialize when basic, applied, and clinical research are underfunded;
3. Limitation of training for the next generation of biomedical scientists, both here and internationally;
4. Erosion of our preparedness for health emergencies of national and international scope—Ebola, chikungunya, Zika, and pandemic flu should resonate with the blood community and they do not respect international borders.

America First indeed. If I could put my taxes in escrow, withholding them until this plays out, I would do so. I prefer not to go to jail so.... We are lucky (maybe not) that the budget is written by Congress, not the White House. Please look beyond our transfusion medicine silo and your party lines, and call, write, e-mail, text, telegraph, or scream at your representatives and senators. Tell them that voting to cut these kinds of investments in America's and the world's future will cost them your support in two years. For me, this is a litmus test, and I hope for you as well. ♦

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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.

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New members meet-and-greet

and-greet for new Annual Meeting attendees. This year's Business Forum proceeded immediately afterward with a focus on business metrics and data. The speakers explored the definitions of current key business metrics for blood centers; ways in which to improve blood center business metrics—often using humorous and pointed analogies to drive the message home; as well as the pitfalls of “managing to the numbers.” ABC Director of IT and Business Intelligence Sameer Ughade also provided a quick overview and demonstration of the ABC Data Warehouse dashboard options and drilldown features and emphasized how the data collected in the data warehouse can benefit member centers when formulating their own business metrics.

Jim Decker, DHA, FACHE, CEO of MEDIC Regional Blood Center, set the stage by identifying the metrics blood center executives found most important in managing their blood centers and sharing the results of the ABC business performance and financial metrics surveys. Mr. Decker noted 75 percent or more of the respondents said finance and human resources were of high importance to them. Liquidity, profitability, productivity, and managing overtime costs were all areas covered on the survey and in this presentation; some of the most important aspects to members within these categories being operating margins, the collection periods, and revenue-to-labor ratios.

Next, a panel on “Sharing Key Metrics and How These Metrics Are Used to Drive Success” convened with Gregg Boothe, associate director and COO of Hoxworth Blood Center; Scott Bush, CEO of SunCoast Blood Bank; and David Green, president of Blood Centers Division at Blood Systems, Inc. Mr. Bush discussed how to improve employee efficiencies by engaging them more often and honestly. He highlighted the statistic that 70 percent of U.S. employees are not engaged and a key reason is that leadership has not communicated with them properly. Staff feels that the blood industry is shrinking, said Mr. Bush. There is less job security and money in the industry; leaving the company with lower productivity and higher error and turnover rates. Sharing more data with employees, giving them bonuses and more incentives to stay, as well as dispelling rumors before they get too out of control are all key points in keeping your staff happier and more reliable.

Mr. Green shared key metrics and how they are used to drive success, stressing that blood centers often use the wrong metrics—backward looking metrics, rather than forward-looking metrics to determine the measures of success. With a baseball analogy at play, he talked about how the length of play and situation in an inning drives the performance and franchise success, just as the hour-by-hour performance of the blood center staff can produce the long-term success of the organization. This is where huddles become so important, he said. Daily 15-minute huddles with mid-level managers and the team can help drive an organization's overall long-term success more than any other factor.

Mr. Boothe helped to shed light on the medium-sized nonprofit standpoint on business metrics—“It's not just a revenue stream, it's about the product,” he said. He instructed the audience on how defining a blood center's success used to be an easy task—it was all about revenue from red blood cells (RBC). Now success is not as easily defined with the lower demand for RBC units and mergers happening across the country. Hoxworth went from an importer of blood products to a self-sustaining blood center, and now-exporter by re-examining what products they needed to collect and how many more events they needed to conduct before becoming self-sufficient.

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55TH ABC ANNUAL MEETING (continued from page 3)

ABC Members Meeting. ABC President Susan Rossmann, MD, PhD, chief medical officer at Gulf Coast Regional Blood Center, gave a heartfelt farewell speech to ABC at the ABC Members Meeting and complimented the Board on their commitment to ABC's core values. Mr. Green presented the nominating committee's slate of the new and returning candidates for the board and officers, as discussed in [ABC Newsletter #6](#). Chris Staub, Bylaws Committee chairman discussed changes to the bylaws eliminating redundancies and allowing two blood center representatives from one blood organization to be on the ABC Board. There was a Membership Committee report and an election for Emeritus membership of Jacquelyn Fredrick, former president and CEO of the BloodCenter of Wisconsin, and Dean Eller, retiring president and CEO of the Central California Blood Center. The Treasurer's report from President and CEO of Inland Northwest Blood Center and ABC Treasurer Jeff Bryant presented a financially neutral budget and no dues increase for fiscal year 2018.

ABC members then heard from the FABC Board Chairman Pascal George, CEO of Central Jersey Blood Center. He presented the financial recap of the last year for FABC, including major funding of the ABC Professional Institute (API) that helped create two customized courses through the API Learning Portal and 60 other online courses, of which 580 students have already accessed. Twenty-one scholarships to ABC meetings and workshops were awarded this year by the FABC, totaling over \$17,000. Mr. George gave a quick overview of the future fundraising events for FABC, and laid out four major goals for the upcoming year: to align with ABC's core values, and the strategic allocation of resources to support timely and relevant industry issues; increased value proposition of FABC within ABC member centers and industry partners; and increased branding awareness for FABC.



ABC Members Meeting

ABC CEO Christine Zambricki, DNAP, CRNA, FAAN, briefed the membership about ABC's strategic thinking retreat in Nashville in January 2017, which laid the groundwork for the strategic goals going forward in Fiscal Year 2018. Ms. Zambricki talked about the advocacy and data items as they align with the ABC overall core values; how the addition of ADRP to the ABC offerings will be a key asset in the future of the organization; alternative organization models to help with the sustainability of ABC services and funding; as well as how ABC can help the industry be more proactive and agile going into the future.

She discussed in detail the advocacy achievements of ABC, including, but not limited to, such wins as developing a 30-day grassroots advocacy plan, having the RAND study funded by a government agency and getting blood at the forefront of government agency discussions; as well as blood industry expert appointments to government agencies, e.g. ABC CMO Louis Katz, MD, to the Advisory Committee on Blood and Tissue Safety and Availability, a part of the Department of Health and Human Services (HHS).

Going into the new fiscal year, ABC will continue to build brand recognition and foster relationships with government officials to bring the advocacy issues most important to our members to the forefront of policy changes. We will also continue to shape our relationships with agencies like the Biomedical Advanced Research and Development Authority, Health Resources and Service Administration, and HHS, as well as work with AdvaMed, the American Red Cross, and AABB.

Dr. Katz gave a brief "Hot Topics" update on scientific, medical, and technical (SMT) issues, including Zika, donor iron stores, the effects of the "final rule" on deferrals due to the decreased hemoglobin threshold

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55TH ABC ANNUAL MEETING (continued from page 4)

for male blood donors, as well as the possible impacts of pathogen reduction guidance from the Food and Drug Administration (FDA).

The last presentation at the Members Meeting was a more in-depth look at the Data Warehouse from Mr. Ughade. Looking at heat maps and diving further into the data sources, Mr. Ughade emphasized the differences in the Blood Establishment Computer Systems (BECS) for each center, and key possible determinations from the data if more blood centers start sharing their data. Currently, the DW has 75 percent of the BECS data uploaded, but 100 percent is needed to provide the kind of granular level data that CEOs in our industry and government agencies need to for future improvements and determinations for the industry as a whole.

SMT Forum. The SMT Forum began with a talk from Dr. Szczepiorowski about the “Bacterial Contamination of Platelets in the Context of Risk Based Decision Making.” He described how humans make decisions based on perceived risk, not actual risk, using platelet sepsis as an example. He noted that further developments are needed for more sensitive detection methods in bacterial testing. He presented the options currently available for bacterial mitigation, their benefits and limitations, and how guidance from the FDA and AABB can help drive behavior.

“The issue is primary and secondary is the testing. If we don’t address the problem, the supply risk is fairly high,” he said.

Jessica Herzstein, MD, MPH, former member of the U.S. Preventive Services Task Force, provided a public health perspective on population screening. She discussed the benefits and harms of broad testing in healthy, low prevalence populations, including the risk from unneeded follow-up testing and treatment. The costs of false alarms and over-diagnosis amount to increased morbidity and expenditures for the subject (or donor) and the system and cause undue stress upon both as well. It is critical that when blood centers use medical screening as a donor incentive, they consider benefits, risks, and linkages to care to assure positive outcomes.



The Babesia panel during the SMT Forum.

A lively panel on ABC center experiences with investigational new drug (IND) Babesia testing included Beth Shaz, MD, chief medical and scientific officer at New York Blood Center; Jed Gorlin, MD, vice president of Medical and Quality at Innovative Blood Resources; ABC CMO Louis Katz, MD presented on behalf of Jerome Gottschall, MD, senior medical director at Verisiti; and Carolyn Young, MD, vice president and chief medical officer of Rhode Island Blood Center. All presented on their blood centers’ experiences with Babesia testing.

The Celso Bianco Lecture was delivered, with Dr. Bianco in attendance, by honoree Jim AuBuchon, MD, FCAP, president and CEO of BloodWorks Northwest. His title was “Hijacked by Headlines: Is rational decision making possible?” The lecture circled back to Dr. Szczepiorowski’s discussion on risk-based decision making, how the public has a zero-risk policy when looking at their own health, while blood bankers, transfusion medicine professionals, and public health advocates take on a more global view of risk and risk mitigation. He finished his presentation talking about how vital ABC’s Data Warehouse is to collecting data and presenting it to the FDA and other government agencies so the industry can become more proactive in its approach to risk-based decision making.

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55TH ABC ANNUAL MEETING (continued from page 5)

Blood Center Leadership Forum. The first session was a very spirited conversation from Eamonn Ferguson, PhD, professor of health psychology from the University of Nottingham in the UK. Dr. Ferguson shocked and awed the audience with how donors display much more than altruism with their life-saving gifts of blood. Again, the critical piece of donor recruitment was messaging. Using messaging that brings forth guilt in a potential donor has a negative impact, noted Dr. Ferguson, but tapping into the notion that blood donations will one day be given back the potential donor can help frame the messaging into a more incentivizing call for action. Another incentive is attracting a mate.



President and CEO of Houchin Community Blood Bank Greg Gallion and CEO Dean Eller of Central California Blood Center

“If you donate, that means you’re fit, healthy, and strong. You’re also free of STDs, and, genetically, a good bet. Also means you’re compassionate, caring, brave and loving. So, if you’re going for someone equal, go for the blood donors.”

Next on the stage was Department of Homeland Security’s Kyle Wolfe, protective security advisor for the National Capital Region, an expert in active shooter training. Run, Hide, Fight was the mantra Mr. Wolfe drove home as the key steps to take in the event you find yourself in an active shooter situation—at work or out in public. He further emphasized the important role of being situationally aware everywhere you go. He provided lifesaving tips and tactics for blood center leaders and staff emphasizing protective measures like “see something, say something,” to ensure employees stay safe at work.

After lunch, sessions reconvened with Rita Reik, MD, chief medical officer at OneBlood, discussing “Disaster Plan Design and Implementation in the Real World.” Dr. Reik brought to the audience’s attention the number of disasters OneBlood had to contend with in the last year: the Orlando shooting including the death of one of their own staff members in the incident; the Haemonetics bag recall—which happened during the aftermath of the Pulse nightclub shooting; then Zika; and two hurricanes. Their carefully laid-out standard operation procedures (SOPs) and lines of communication between their centers and the state Department of Health allowed OneBlood to weather them all. Dr. Reik noted their communications team did an “amazing job” during this tough year, keeping abreast of the situations and providing real-time updates to the press and public, as well as generating content in new and dynamic ways.

The sessions ended with two informational presentations on the ABC Professional Institute (API) and ADRP. Rachelle Fondaw, director of education at ABC, dispelled common myths about the API and how it serves ABC members. She emphasized that the ABC Professional Institute is not just the learning portal or online courses, but much more—including meetings, workshops as well as all the online training offerings and listservs available to members. New training programs are being added almost monthly to the API Learning Portal, so she invited members and non-members to check in often to see the new offerings. Next Christine Hayes, president of ADRP and VP of operations at LifeServe Blood Center introduced ADRP, how it is organized, and shared educational opportunities for ABC members through a subscription with ADRP as well as their popular annual conference.

Networking and Fundraising Events. Attendees were treated to spectacular views of the White House during the FABC fundraising reception at the “Top of the Hay,” in the Hay-Adams Hotel on Sunday, March 26. The cherry blossom themed-event provided guests with breathtaking views of the pink flowering trees, along with refreshments, a rolling dinner, and traditional Japanese Koto music.

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55TH ABC ANNUAL MEETING (continued from page 6)

On Monday evening, meeting attendees and their guests headed to the 20th Annual *Awards of Excellence* and Talent Show. There was hardly one dry eye in the crowd after Larry Frederick told his story of being a former police officer who was near-fatally injured during a routine traffic stop and given over a hundred units of blood to survive. Presenting his namesake award to Steven DeLorenzo, Mr. Frederick talked about how blood donations save not just lives, but families as well. Another heart-wrenching moment occurred when Dr. Rossmann presented Donald Doddridge, retiring CEO of OneBlood, with the Bill Coenen President's Award and said goodbye to her mentor and colleague. Merlyn Sayers, MBBCh, PhD, the president and CEO of Carter BloodCare, received the Thomas F. Zuck Lifetime Achievement. For a full list of award winners, see ABC Newsletter #9.

After the awards had been given and the standing ovations ceased, the second ever ABC's Got Talent show began. The fundraising event for the FABC brought in over \$17,000 to help fund the ABC DW and advocacy items at the forefront of ABC's strategic goals for this year. All the contestants provided enchanting and stunning performances. Dr. Young took home the trophy for her beautiful rendition of Chopin's "Etude Opus 10, Number 3," her mother's favorite song.

The ABC Annual Meeting came to a close the following day on Advocacy Day (which will be discussed in more detail in next week's newsletter), Tuesday, March 28. The Advocacy Forum began with ABC CAO Kate Fry giving a talk about key advocacy issues, followed by Peter Marks, MD, PhD, director for the FDA's Center of Biologics Evaluation and Research. Representative John Shimkus (R-Ill.), unfortunately, was not able to attend at the last minute. Attendees visited Capitol Hill, meeting face-to-face with their representatives to educate them on blood industry issues, ABC as an association, and the unique needs and operations of their individual blood centers.

ABC and the FABC thank all of the attendees, speakers, and sponsors (below) who made the Annual Meeting a success. We look forward to seeing you at the ABC Summer Meeting this year in Providence, R.I. ♦





Dear Colleagues,

ABC is seeking to fill the part-time position of Chief Medical Officer this summer. So that an optimal transition will occur, I would like to enlist your efforts to identify candidates to fill this important position. If you personally are interested in learning more about this opportunity, or know of other highly qualified colleagues that you believe should be considered, please communicate this interest to me at czambricki@americasblood.org. All communication will be held in strictest confidence.

The ABC Chief Medical Officer is responsible for implementing strategies and tactics, consistent with the best scientific and medical evidence and regulatory requirements, that support ABC's mission, maintain our values, and realize our vision. The CMO works as part of the ABC Senior Executive Team (SET) to communicate ABC's issues to members, regulators, legislators, and external groups and mobilizes ABC members and professional staff to achieve the strategic goals of the organization. The CMO serves as a public advocate for ABC, maximizing the organization's public presence as a national leader in shaping the future of blood banking, transfusion medicine, and cell therapies.

Sincerely,

Christine Zambricki, CEO

AMERICA'S BLOOD CENTERS

TECHNICAL & QUALITY WORKSHOP

OMAHA, NEBRASKA
JUNE 6-8, 2017






Featured Topics

- HLA Testing & TRALI Mitigation
- Whole Blood – What's Old is New Again
- Cybersecurity for Quality & Technical Professionals
- Making the Leap to Process Improvement

For registration information, visit www.bit.ly/abc_meetings.

Scholarship opportunities are available to ABC members.

Sponsorship opportunities available. Contact Jodi Zand at jzand@americasblood.org for details.

Hotel Information

DoubleTree by Hilton Omaha Downtown
Hotel room rate: \$144 + tax

ABC is proud to sponsor this meeting in historic Omaha, Nebraska. We are bringing quality and technical professionals together and will provide both educational updates and an opportunity for networking. The value of different perspectives enriches this event and provides a platform for the discussion of issues that cross common boundaries.

—Louis M. Katz, MD, CMO, America's Blood Centers



America's Blood Centers[®]
Professional Institute



A Near Perfect Record

Many ABC member blood centers consider their blood donors to be heroes. When the phlebotomy staff performs quality work, they help to keep those donors coming back. Texas-based Carter BloodCare is celebrating an unprecedented level of quality work with phlebotomist Phyllis Wachira.

“It is a joy to me to serve others,” said Ms. Wachira. “I enjoy lifting others up and helping them to become better at what they do. We all learn from each other.”

Ms. Wachira joined Carter BloodCare as a phlebotomist almost 15 years ago after relocating to the US from Kenya. In 2016, Ms. Wachira had perfect attendance at work and demonstrated 100 percent accuracy in her screening procedures. The same is true for Ms. Wachira’s phlebotomy documentation record—100 percent accuracy!. There were no errors on Ms. Wachira’s part during the collection process that compromised the quality of a unit, requiring it to be discarded. And, the most important statistic —Ms. Wachira’s venipuncture (VP) loss rate was a mere 1.9 percent. She performed 988 phlebotomy sticks last year and only 19 of them were ‘not quite right.’ This last statistic earned Ms. Wachira the “hero” honor at a recent meeting of mobile supervisors.



Phlebotomist Phyllis Wachira, of Carter BloodCare, holds the certificate and a box containing a personalized pen, presented to her for a near-perfect performance record in 2016.

“We call them a ‘phlebotomy hero’ when their VP loss rate is less than two percent,” said Brandi Wright, manager of Mobile Collections for Carter BloodCare. “We expect them to achieve 3.5 percent. For Phyllis to achieve 1.9 percent, on top of all her other performance records, I would say 2016 was a very good year for her. I am exceedingly proud.”

In honor of her accomplishments, the Mobile Collections management presented Ms. Wachira with a certificate and a pen with her name engraved on it. Her picture and a description of her unprecedented record also appeared on digital monitors in the halls of the blood center offices—a space reserved for only the most essential news items.

Congratulations to Ms. Wachira on a job done exceptionally well! 💧



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 Lisa Spinelli at 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.



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.

Photos from the Hay-Adams Hotel FABC Reception



ABC CMO Louis Katz and FABC President Pascal George



Larry Frederick and ABC CEO Christine Zambricki



Japanese Koto Player



View of the White House view from the Hay-Adams



Photos from Around the ABC Meeting



ABC CEO Christine Zambricki and outgoing ABC President Susan Rossmann



Attendees working together for an exercise during the Business Forum



The Blood Connection CEO Delisa English, Margie Boraz with Macopharma, and Marge Pierce, VP at Blood Centers of America



Gulf Coast Regional Blood Center CMO Susan Rossmann and SunCoast Blood Bank CEO Scott Bush



ABC CAO Kate Fry, FABC President Pascal George, and Scott Greenwell, Executive Director of Community Blood Bank of NW Pennsylvania & Western NY



ABC's Got Talent Season II



Eva Quinley "performing Amazing Grace"



The Fabulous FAB-Cs: (From left to right) Eva Quinley, Dr. Carolyn Young, Chris Staub,, Pascal George (and not pictured Dr. Mary Townsend).



Dr. Mary Townsend rope-tricking



More photos from the 55th ABC Annual Meeting in next week's Newsletter




RESEARCH IN BRIEF

Five-year survival rate for hematopoietic cell transplantation for sickle cell disease (SCD) patients is promising. In a retrospective analysis of data from 1986 to 2013 in 23 countries from Europe, the US, and beyond, 1,000 patients received an HLA-identical sibling transplant for SCD, as reported to the European Society for Blood and Marrow Transplantation, Eurocord, and the Center for International Blood and Marrow Transplant Research. While less than 18 percent of SCD patients have a matched sibling donor, this study reports excellent results for those with such a match. The median age of the patients was nine years old and the hazard ratio of death was linear to their age, before 2006. Most patients, 87 percent (n=873), received a myeloablative conditioning regimen, and 13 percent received reduced-intensity conditioning regimen (n=125), with event-free survival (EFS) at 91.4 (95 percent CI, 89.6 percent to 93.3 percent) and 92.9 percent (95 percent confidence interval [CI], 91.1 percent to 94.6 percent), respectively. Twenty-three patients experienced graft failure and 70 patients (7 percent) died, the most common cause of death was infection. Having better supportive care immediately after transplantation and in the subsequent years improves overall survivability, noted the authors. Beyond the five-year follow-ups another 10 percent of deaths were reported.

Citation: Gluckman E., Cappelli B., Bernaudin F., *et al.* Sickle cell disease: an international survey of results of HLA-identical sibling hematopoietic stem cell transplantation. *Blood*. March 16, 2017. DOI: <https://doi.org/10.1182/blood-2016-10-745711>.

A four-fold increase of transfusion-transmitted bacterial infections (TTBI) was found in nested case-control study of platelet (PLT) concentrates stored in PLT additive solutions (PAS) versus plasma. In this study from the Netherlands between 2003 and 2014, 631,347 pooled buffy coat PLT concentrates, 22.3 percent in PAS and the remainder in plasma, were used with an incidence of TTBI of 22.2 per million PLT concentrates. PLT concentrates were prepared from buffy coats of five donors, leukoreduced, and resuspended in plasma, or PAS with 25 mL of residual plasma. PAS-B (T-sol, Baxter) was used until 2013, after which PAS-C (Intersol, Fenwal, Inc.) was used. Fourteen cases of TTBI were identified, 57.1 percent (n=8) in PAS and 42.9 percent (n=6) in plasma. The relative risk of PAS compared to plasma was 4.63 (95 percent confidence interval 1.4 to 16.2). Some researchers have hypothesized, the authors noted, that storing PLT concentrates in plasma could help eliminate bacteria related to autosterilization by innate and acquired immune factors.

Citation: Kreuger A.L., Middelburg R.A., Kerkhoffs J.L.H., *et al.* Storage medium of platelet transfusions and the risk of transfusion-transmitted bacterial infections. *Transfusion*. March 2017. DOI:10.1111/trf.13969. 

BRIEFLY NOTED

AABB Association Bulletin 17-02 was published on March 16 advising collection facilitates of the need to implement evidence-based strategies to mitigate donor iron depletion. Three interventions were listed: 1) development of programs to provide replacement iron in the absence of ferritin measurements, 2) evidence-based lengthening of the interdonation interval and/or restriction of the number of donations per year, or 3) measurement of serum or plasma ferritin leading to recommended actions (including iron supplementation) for donors with low ferritin levels. This bulletin supersedes Association Bulletin #12-03 “Strategies to Monitor, Limit, or Prevent Iron Deficiency in Blood Donors”. The aforementioned actions can be taken with all donors, or with selected groups of more at-risk donors. Read the full bulletin [here](#).

The National Academies of Sciences, Engineering, and Medicine recently published *Information Technology and the U.S. Workforce: Where Are We and Where Do We Go from Here?* The book

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BRIEFLY NOTED (continued from page 13)

discusses how significant advances in computing and communication technologies have impacted society, organizations and the workforce. It “explores the interactions between technological, economic, and societal trends and identifies possible near-term developments for work.” Click [here](#) to download the book at no charge, or to order a hard copy.

The PLASMIC score, derived from immediately available clinical data, is a consistent assessment tool for patients with thrombotic microangiopathy to predict which have thrombotic thrombocytopenic purpura (TTP) with severe ADAMTS13 deficiency. The standard approach to diagnose TTP patients to select optimal therapy includes clinical assessment and measuring the enzyme’s activity. The latter testing can be time consuming. The PLASMIC score system, first reported in [Blood in 2014](#), estimated the pretest probability for severe ADAMTS13 deficiency using a seven-component prediction tool in a derivation cohort of 200 patients with thrombotic microangiopathy, 150 patients in internal and 146 in external validation cohorts assembled from multiple centers between 2004 and 2015. Elements in the score include platelet count, serum creatinine, international normalized ratio, mean corpuscular volume, a derived hemolysis variable and the absence of active cancer or any history of organ or stem cell transplantation. Receiver-operating characteristic analysis (ROC) demonstrated areas under the ROC curve of 0.91 and 0.95 for external and internal validation cohorts.

Citations: Bendapudi P.K., Hurwitz S., Fry A., *et al.* Derivation and external validation of the PLASMIC score for rapid assessment of adults with thrombotic microangiopathies: a cohort study. *Lancet Haematology*, March 1, 2017. DOI: 10.1016/S2352-3026(17)30026-1.

Bendapudi P.K., Li A., Hamdan A., *et al.* Derivation and Prospective Validation of a Predictive Score for the Rapid Diagnosis of Thrombotic Thrombocytopenic Purpura: The Plasmic Score. *Blood*. December 6, 2014.

Senate staff members donate blood. The first-ever Senate Armed Services Blood Program took place on Monday, March 20, with more than 70 Senate staff members donating blood. The four-hour long blood drive was held by staff members from the Armed Services Blood Bank Center at the Walter Reed National Military Medical Center in Bethesda, Md. (Source: *Roll Call*, [Word on the Hill: Staffers Give Back](#). March 23, 2017) 

RECENT REVIEWS

Review of Goodnough Article

By Christopher Gresens, MD, Division Chief Medical Officer, Blood Centers of the Pacific, BloodSource, & United Blood Services

The journal, *Medical Clinics of North America*, recently published “Blood Transfusion Therapy,” a 17-page review relevant to practically any healthcare provider who supports the management of patients who may require red blood cell (RBC) transfusions. Stanford University’s L.T. Goodnough and A.K. Panagrahi wrote this piece, the content of which is both reasonably accessible and relatively detail-rich: two characteristics that don’t often intermingle.

The authors focus on three major areas:

- Transfusion risks,
- RBC transfusion indications (for pediatric and adult patients), and
- Blood utilization optimization.

(continued on page 15)

RECENT REVIEWS (continued from page 14)

Perhaps most satisfying is that they are clear and succinct in their discussion, focusing on the most meaningful and practical points and providing the reader with a series of useful “take-home messages.” In particular, their review of many seminal studies exploring the role of RBC transfusions is followed immediately by a concise summary of the more useful clinical practice guidelines as applied to RBC transfusions.

This is a fine reference to share with our clinical colleagues, whether in association with transfusion committee meetings or during other professional and consultative interactions. It also is one well worth reading by those of us who wish to keep these issues top of mind.

Citation: Goodnough L.T. and Panigrahi A.K. Blood Transfusion Therapy. *Medical Clinics of North America*. 2017; 101: 431-47.

The first line of clinical management for mothers who experienced fetal or neonatal alloimmune thrombocytopenia (FNAIT) in previous pregnancies should be weekly IV immunoglobulin infusions (IVIG), with or without corticosteroids. Overall, noninvasive management of FNAIT was just as effective as invasive management methods and associated with fewer complications. The review of four randomized controlled trials and 22 non-randomized studies was performed using Medline, EMBASE, and Cochrane Library databases from 1946 to December 2015. Comparable outcomes for intracranial bleeding were found with across studies using fetal blood sampling, intrauterine platelet transfusion, and intravenous immunoglobulin. Fetal blood sampling and intrauterine transfusion were associated with preterm emergency surgical deliveries. Adjunctive steroids were not clearly beneficial.

Citation: Winkelhorst D., Murphy M.F., Greinacher A., *et al.* Antenatal management in fetal and neonatal alloimmune thrombocytopenia: a systematic review. *Blood*. March 2017. DOI: <https://doi.org/10.1182/blood-2016-10-739656>.

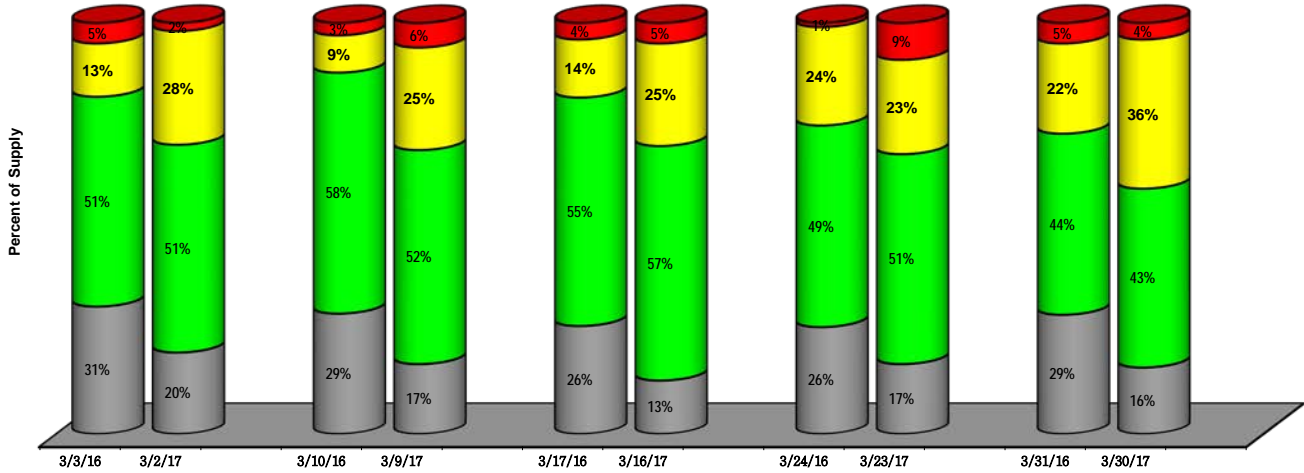
INFECTIOUS DISEASES

Parasite genetic lineage may be associated with the risk of transfusion transmission of *Trypanosoma cruzi*, according to a study from the American Red Cross. The study ran from January 2007 to August 2011, and involved more than 21 million blood donations from the ARC and its contract partners that were tested for *T. cruzi* antibodies. Of those, 2,933 blood donors were repeat reactive and tested using a research-based radioimmuno-precipitation (RIPA) confirmatory assay. Two hundred and sixty-three confirmed positive donors were re-tested using hemoculture and given a risk factor questionnaire. Positive hemocultures were expanded to allow determination of the molecular lineage of the parasites. Eighteen of the donors were hemoculture positive, 17 of which could be expanded for lineage characterization, and 13 of those had *T. cruzi* lineages TcII, TcV, or TcVI, characteristic of southern South America. As expected, infected donors were Hispanic or of Hispanic descent (n=16). Among implicated donors from the U.S., Canadian, and Spanish transfusion cases, donors and lineages from Southern South America are significantly more likely to have parasitemia and transmit infection to blood recipients, concluded the authors.

Citation: Leiby D.A., Nguyen M.L., Proctor M.C., *et al.* Frequency of *Trypanosoma cruzi* parasitemia among infected blood donors with a potential association between parasite lineage and transfusion transmission. *Transfusion*. March 14, 2017. DOI: 10.1111/trf.14082. ♦



STOPLIGHT®: Status of the ABC Blood Supply, 2016 vs. 2017



No Response
 Green: 3 or More Days
 Yellow: 2 Days
 Red: 1 Day or Less

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



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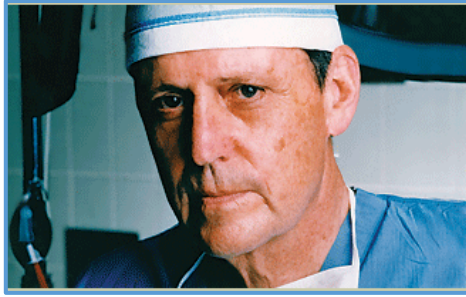
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IN MEMORIAM



Renowned organ transplant surgeon Thomas Earl Starzl passed away on March 4, 2017. Referred to as the “father of modern transplantation,” Dr. Starzl died in his sleep at the age of 90. Dr. Starzl is acclaimed for performing the first ever liver transplant in Denver in 1963 and the first liver transplant in which the patient survived after one year in 1967. Dr. Starzl was also a pioneer in the development of immunosuppression medicines, organ preservation, and procurement. He performed the first simultaneous heart and liver transplant, and proposed microchimerism in organ transplant tolerance.

He received his bachelor’s degree from Westminster College in Missouri; his medical degree and doctorate degree from Northwestern University Medical School in Chicago, and went on for his post-doctorate at John Hopkins Hospital in Baltimore.

Dr. Starzl performed about 175 liver transplants as the chairman of surgery at the University of Colorado School of Medicine, before heading to the University of Pittsburgh (Pitt). He also served as chief of transplantation services at Presbyterian University Hospital (now UPMC Presbyterian), Children’s Hospital of Pittsburgh, and the Veterans Administration Hospital in Pittsburgh. He was director of the University of Pittsburgh Transplantation Institute, which was renamed the Thomas E. Starzl Transplantation Institute in 1996. He won more than 200 awards and honors, including the Lasker-DeBakey Clinical Medical Research Award, Distinguished Service Award from the American Liver Foundation; Bigelow Medal from Boston Surgical Society, National Medal of Science from President George W. Bush, and King Faisal International Prize for Medicine. He was also one of only five Americans inducted into the National French Academy of Medicine.

Dr. Starzl held honorary degrees from 26 universities and served as president of the Transplantation Society, founding president of the American Society of Transplant Surgeons, and founding president of the Transplant Recipients International Organization.

Retiring from surgical and clinical practice in 1991, Dr. Starzl took on research roles at Pitt. After “retirement,” he served on the editorial boards of 40 professional publications and authored or co-authored more than 2,200 scientific articles, four books, and 300 book chapters.

Dr. Starzl is survived by his wife of 36 years, Joy Starzl, of Pittsburgh; a son, Timothy Starzl of Boulder, Colo., and a grandchild. He was preceded in death by a daughter, Rebecca Starzl, and a son, Thomas F. Starzl.

PEOPLE



John Bardis appointed to Department of Health and Human Services (HHS). Former MedAssets CEO and Founder John Bardis was named the new assistant secretary for HHS. Mr. Bardis founded MedAssets, a large healthcare financial performance improvement company in 1999. He stepped down as CEO in 2015. He is a supporter of U.S. military veterans, founding the veteran-focused non-profit Hire Heroes U.S.A, which has helped over 6,000 veterans gain employment since 2006. Mr. Bardis was recognized by a number of publications and companies as a leading technology entrepreneur and has served on the board of healthcare companies, such as Scripps Health Strategic Planning Committee of the board and the Board of Advisors of Jackson Healthcare

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PEOPLE (continued from page 17)

in Alpharetta, Ga. He was appointed to the board of the United States Anti-Doping Agency (USADA) in 2011 and is a frequent speaker on healthcare issues. (Source: *HealthcareITNews*, [MedAssets founder John Bardis takes leadership role at HHS](#). March 27, 2017; [HHS website](#))



Former Rep. John Fleming, MD, (R-La.) appointed as deputy assistant secretary for health technology at the Department of Health and Human Services (HHS). A member of the Freedom Caucus, Dr. Fleming is a staunch conservative and has served with HHS Sec. Tom Price in Congress before. Dr. Fleming described his job as a “linchpin in finding ways to improve how physicians use technology to practice medicine,” reported the Dr. Fleming home-state media outlet. (Source: NOLA.com, [Former Louisiana Rep. John Fleming to join HHS under Trump](#). March 20, 2017) ♦

COMPANY NEWS

HemaTerra Technologies announced a new relationship with IT Synergistics to reduce the cost of operations and redundant data entry for their mutual clients. Organizations using HemaTerra’s integrated products – HemaConnect donor recruitment, HemaControl order entry and inventory management, and HemaComply product QC and equipment management – who also use IT Synergistics’ LifeTec Elite / DoVac Elite systems will now have even greater efficiencies in their operations.

“Partnering with HemaTerra to create a communication platform between our LifeTec Elite / DoVac Elite systems and HemaTerra’s HemaConnect, HemaControl and HemaComply applications gives our customers a time-saving advantage,” said Tim Bryant, managing director of IT Synergistics.

“Any time we can automate processes, limit workarounds, and eliminate lags in data we help our partner clients lower costs in recruitment, order entry, inventory management and lab services,” said Todd Collins, president and CEO of HemaTerra Technologies. “Our collaborations help maximize resources using systems already in place – it’s a win for our clients and the industry.” ♦

We Welcome Your Articles

We at the *ABC Newsletter* welcome freelance articles on any subject relevant to the blood banking community. Writers are encouraged to submit short proposals or unsolicited manuscripts of no more than 1,100 words. While ABC cannot pay for freelance pieces, the writer’s name and title will be included at the end of the story, brief news item, or commentary. If proposing a story, please write a few paragraphs describing the idea and sources of information you will use, your present job and background, and your qualifications for writing on the topic. ABC staff cannot guarantee all stories will be published, and all outside writing will be subject to editing for style, clarity, brevity, and good taste. Please submit ideas and manuscripts to ABC Publications Editor Lisa Spinelli at newsletter@americasblood.org. You will be sent a writer’s guide that provides information on style conventions, story structure, deadlines, etc.



CALENDAR

2017

April 4-5: **CBER Blood Products Advisory Committee, Silver Spring, Md.** For the agenda and more information, click [here](#).

April 6. **FDA Public Workshop: Emerging Tick-Borne Diseases and Blood Safety, Bethesda, Md.** This workshop has been planned in partnership with AABB, ABC, NIH and more. For more information, click [here](#).

Apr. 18-19. **Heart of America Association of Blood Banks (HAABB) 50th Annual Spring Meeting, Kansas City, Mo.** For more information and to register, go to <http://www.haabb.org>.

Apr. 18-19. **Transfusion Safety Officer & Patient Blood Management Seminars (Basic & Advanced Programs), St. Petersburg, Fla.** If you are interested in taking part in one of these new and engaging programs, please contact: [Cathy Shea](#), Executive Assistant or call (727) 568-1151.

May 1-3. **ADRP 2017 Annual Conference, Chicago, Ill.** More information is available on the [website](#).

May 16-17. **IPFA/PEI 24th International Workshop on “Surveillance and Screening of Blood-borne Pathogens”, Zagreb, Croatia.** To register, click [here](#).

May 17-19. **Cellular Therapies and Transfusion Medicine in Trauma and Critical Care-Looking Towards the Future, San Francisco, Calif.** Presented by Blood Systems, Blood Systems Research Institute and the University of California San Francisco. For more information, or to register, click [here](#).

June 6-8. **Technical & Quality Workshop, America’s Blood Centers, Omaha, Neb.** Contact: ABC Meetings Dept. Phone: (202) 654-2901; e-mail: meetings@americasblood.org.

June 17-21. **27th Regional Congress of the ISBT, Copenhagen, Denmark.** Click [here](#) to register for the event.

July 26. **Transfusion Safety Officer & Patient Blood Management Seminars (Advanced Program), Ft. Lauderdale, Fla.** If you are interested in taking part in one of these new and engaging programs, please contact: [Cathy Shea](#), Executive Assistant or call (727) 568-1151.

Aug. 1-4. **Summer Meeting, MD Workshop & Golf Tournament, America’s Blood Centers, Providence, R.I.** Contact: ABC Meetings Dept. Phone: (202) 654-2901; e-mail: meetings@americasblood.org.

Aug. 4. **Board Meeting, America’s Blood Centers, Providence, R.I.** Contact: ABC Meetings Dept. Phone: (202) 654-2901; e-mail: meetings@americasblood.org.

Sept. 11-12. **IPFA/BCA 3rd Global Symposium on The Future for Blood and Plasma Donations, Atlanta, Ga.** [Click here to register.](#)

Sept. 27-28. **Financial Management & IT Workshops, America’s Blood Centers, Houston, Texas.** Contact: ABC Meetings Dept. Phone: (202) 654-2901; e-mail: meetings@americasblood.org.

Nov. 7-8. **Transfusion Safety Officer & Patient Blood Management Seminars (Basic & Advanced Programs), Jacksonville, FL.** If you are interested in taking part in one of these new and engaging programs, please contact: [Cathy Shea](#), Executive Assistant or call (727) 568-1151.

Nov. 8-10. **10th World Federation of Hemophilia Global Forum, Montreal, Canada.** For more information and to register, click [here](#). ♦

Nov. 7-8. **Transfusion Safety Officer & Patient Blood Management Seminars (Basic & Advanced Programs), Jacksonville, Fla.** If you are interested in taking part in one of these new and engaging programs, please contact: [Cathy Shea](#), Executive Assistant or call (727) 568-1151.

Nov. 8-10. **10th World Federation of Hemophilia Global Forum, Montreal, Canada,** For more information and to register, click [here](#). ♦

CLASSIFIED ADVERTISING

Classified advertisements, including notices of positions available and wanted, are published free of charge for a maximum of three weeks per position per calendar year for ABC institutional members. There are charges for non-members: \$139 per placement for ABC Newsletter subscribers and \$279 for non-subscribers. A six (6) percent processing fee will be applied to all credit card payments. Notices ordinarily are limited to 150 words. To place an ad, contact Leslie Maundy at the ABC office. Phone: (202) 654-2917; fax: (202) 393-1282; e-mail: lmaundy@americasblood.org.

POSITIONS

Also available on our [website](#)

Clinical Education Consultants. Fresenius Kabi is a global health care company that specializes in lifesaving medicines and medical technologies for infusion, transfusion and clinical nutrition. We have opportunities for Clinical Ed Consultants based out of Philadelphia (NE region) or Seattle/Sacramento/Portland (West region) who will work collaboratively with the sales team in providing customers with clinical expertise. The focus will be in educational and systems development consulting, product line utilization management, and clinical sales support to the team. Med Tech degree preferred and three to five years' experience in a clinical/lab environment with experience in training medical staff and ability to drive sales. Ability to travel 75% in the region by air and personal car and must be located near a major airport. For more information about these positions and to apply, please visit: www.fresenius-kabi.us/career.html and search positions by req. # listed: Seattle/Sacramento/Portland: LZR00037. Philadelphia: LZR00035.

Medical Technologist. Blood Bank of Hawaii is seeking a Medical Technologist (MT) to join our Laboratory team! The candidate is responsible for: Conducting general laboratory tests and procedures in the donor blood testing section of the laboratory. Product testing in the components section. Patient testing in the Immunohematology Reference Lab, including but not limited to ABO grouping, Rh testing, antibody screening, and antibody identification to include complex work-ups. The ideal candidate will: Encompass a high standard for accuracy, follow-up and follow-through; thrive in an environment where problem solving is a necessity; work with team members ensuring compliance at all times, and will also be responsible for the administrative/supervisory functions offering support and guidance to personnel; and serve as a technical resource to hospitals and other departments outside their primary responsibility. Minimum qualifications include baccalaureate degree in Medical Technology or in a related science from an accredited college or university; Certified Medical Technologist by the ASCP; eligible for Clinical Laboratory Technologist license by the Department of Health of the State of Hawaii. Previous work experience as an MT in hematology and immunohematology is preferred; certification as a Specialist in Blood Banking (SBB) highly desirable. Visit our website at www.BBH.org to complete an online application.

Blood Center Professionals Needed. The Blood Connection is seeking to fill multiple positions for a new division located in the Raleigh/Durham, North Carolina area. The Blood Connection is headquartered in Greenville, SC, but has expanded operations and has an immediate need for the following: Departmental managers for Collections, Recruitment, and hospital services. Also hiring for Phlebotomists, Business Development Representatives, Donor Resources/Recruitment Territory Managers, On-Site Recruiters, Hospital Services personnel, and couriers. We are seeking to build a team of professionals who are looking to join a growing and expanding organization. The Blood Connection (TBC) is an Equal Opportunity Employer. EEO/Minority/Female/Disability/Vets. To apply please go to <http://thebloodconnection.org/verify/>.

Sr. Business Officer-COO. Hoxworth Blood Center seeks proven leader to oversee operations. Sr. Business Officer-COO responsible for developing strategic initiatives, improve organization performance, maintains financial health. Collaborates with managers to assure patient's needs are met; introduce innovation, services customers, assures positive relationships. Manages aspects of the Community Advisory Board; quarterly Management Report, Nominating Committee, Strategic Planning, By-Laws. COO expected to exert high degree of independence in decision making, functions within the policies, and guidelines of the center. Candidate must possess education/experience to manage highly regulated organization. Progressive, significant, successful experience desired; outstanding communication abilities, relationship development skills. Experience in management in the pharmaceutical industry, clinical good manufacturing process (cGMP) settings will be considered. Master's in Healthcare or Business; eight years in blood center; five years in positive management with multiple direct reports. The University of Cincinnati is an Affirmative Action/Equal Opportunity Employer /M/F/Veteran/Disabled. Apply to <https://jobs.uc.edu/>.

Manager, Therapeutic Pheresis (Hoxworth Blood Center, Cincinnati OH). This position leads a team of RNs to ensure proper patient care and workflow in 24/7 apheresis service. Supervisory responsibilities include: planning and implementation of apheresis unit goals and objectives; maintaining all associated policies, SOPs in compliance with regulatory agencies; interaction with Research Associates to coordinate research projects

(continued page 21)

POSITIONS (continued from page 20)

involving blood donors; compile, analyze, present therapeutic quality data and develop/maintain budgets. Serve as a therapeutic RN. Teaching responsibilities include training and education for the apheresis RNs, medical students, residents, and fellows as it relates to therapeutic procedures. Requirements: Graduate of accredited professional nursing school. Experience required in nursing including three (3) years in intensive care, hemodialysis, emergency room, or apheresis. Experience must include one (1) year as supervisor. Current unrestricted RN license; must acquire Ohio license within 90 days of hire. The University of Cincinnati is an Affirmative Action/Equal Opportunity Employer/M/F/Veteran/Disabled. Apply online to <https://jobs.uc.edu> (#14181). 📌