



# ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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2014 #17

May 9, 2014

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**Research: Blood from Young Mice May Impact Aging Process in Older Mice**

Over the last week, three studies have gained significant media attention – suggesting that some component in the blood of young mice reversed the effects of aging in older mice. In response to questions received by its member blood centers, America’s Blood Centers issued talking points on the studies, cautioning that research conducted in animals is preliminary and these conclusions regarding young blood impacting the effects of aging have not been confirmed in human clinical trials.

One study, published by Saul A. Villeda, PhD, and colleagues of the University of California, San Francisco, (UCSF) and Stanford University, in *Nature Medicine*, found that injecting old mice with blood from younger mice improved their cognitive abilities and promoted new neuron growth in their spinal cords. Two other studies by a different research group published online in *Science* suggest that the factor that may be responsible for a regenerative effect could be growth differentiation factor 11 (GDF11), which was previously shown to affect cardiac function in older mice with heart failure.

These results build on earlier research – some by the same group at UCSF and Stanford that conducted the *Nature Medicine* study – involving “heterochronic parabiosis,” a process by which the vascular system of young and old mice are connected so that the young animals’ blood can circulate through the older animals. That research demonstrated a systemic rejuvenation effect, but it is still not clear whether GDF11 is the factor underlying these findings.

**Young Blood and Neurocognitive Function.** In the *Nature Medicine* study, Villeda and colleagues expanded on the parabiosis research, using gene expression profiling of mice to show that pathways related to plasticity of the hippocampus were differentially activated in the older mice when they were infused with blood from young mice vs. from the old mice. The researchers focused on the hippocampus because it is the part of the brain responsible for memory formation and is especially prone to atrophy with aging.

They also injected older mice (18-months-old) with 0.1 mL of plasma from three-month old mice eight times over a three-week span, and then performed several cognitive tests. The animals showed significant improvements in performance when compared with the untreated mice of the same age. When older mice were injected with heat-denatured plasma from young mice, however, it appeared that there were no beneficial effects of the young plasma. The authors concluded that

(continued on page 3)



## OUR SPACE

ABC CEO Christine S. Zambricki, DNAP, CRNA, FAAN

### Collective Responsibility is Red, White, and Blue

Collective responsibility is an elementary principle of organizational life. ABC members have the opportunity to vote on two bylaw changes *via webinar on May 14 at 2 p.m. EDT* or by submitting a *proxy ballot by COB May 12* (webinar details: <http://bit.ly/1u6028q>).

Ballot issue #1 amends the bylaws to allow board members to complete their term of office if a job change results in more than one board member being from the same blood center. Issue #2 revises the bylaws to allow a board member to continue serving on the board if they move to another blood center. Both are prohibited in the current bylaws.

ABC's Bylaws Committee and board of directors unanimously support these revisions, believing they promote the strong and stable board leadership necessary for steady progress on ABC's strategic objectives. That is important, and there are more nuanced reasons that I give my full support to their recommendation.

There is a domino effect in maintaining the status quo. If the president steps down, the president-elect immediately becomes president, a change that can significantly affect the work-life balance for the president-elect, whose volunteer commitment becomes three years as president with an additional year as immediate past-president. The workload on remaining board members increases since the president-elect position will not be filled until the next member meeting. The exiled president is prohibited from sitting on the board as immediate past-president, eliminating a board member for a full year. If three board members change jobs during their three-year terms, they must vacate their positions, which must remain open until the next member meeting. We need to have all hands on deck to continue to move forward in serving our members ably and efficiently.

This change was born out of the Bylaws Committee's comprehensive review of the bylaws, recommendations from which will be presented at our Summer Meeting.

Back to collective responsibility. This past presidential election saw – by historical standards – a large voter turnout. Almost 60 percent of eligible voters went to the polls – the highest rate since 1968. Whether you vote red or blue in national elections, ABC members must do better than that. Changes to ABC bylaws are a serious matter and require that two-thirds of ABC members vote and three-fourths vote affirmatively. The obligation to make your voice heard is as red, white, and blue as America, and the results will impact our association. ***Please vote at the special member meeting on May 14 at 2 p.m. EDT or submit your proxy ballot by May 12.***

*Christine S. Zambricki*

[czambricki@americasblood.org](mailto:czambricki@americasblood.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: Dave Green

CEO: Christine S. Zambricki

ABC Publications Editor: Betty Klinck

Business Manager: Leslie Norwood

**Annual Subscription Rate: \$390**

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).

Young Blood Studies (continued from page 1)

certain heat-labile factors were responsible for rejuvenating cognitive function in the older mice.

**The Role of GDF11.** The *Science* studies, led by Richard Lee, MD, Lee Rubin, PhD, and Amy Wagers, PhD, at the Harvard Stem Cell Institute, found that injecting recombinant GDF11 increased skeletal muscle growth and neurogenesis, but did not test for effects on cognition. They also investigated olfactory function (smell) and skeletal muscle strength and endurance.

Wagers and colleagues suggest that GDF11 reversed the cardiac hypertrophy seen in older mice with heart failure and that GDF11 levels decline with age. In the current study, they used their own heterochronic parabiosis model and injection of recombinant GDF11 to identify its effects on nervous system tissue and the vascular system.

They found a remodeling on the aged cerebral vasculature in response to the young blood, producing noticeably greater blood flow. They also observed neural stem cell proliferation in the neuron growth in areas of the brain. The same effects were seen when the researchers injected recombinant GDF11 protein into the older mice. In a functional analysis of the animals' sense of smell, the researchers found that the treated older animals appeared to be more sensitive to odors in comparison with the older untreated mice.

Despite these findings, the authors write that they are uncertain as to whether the increased neurogenesis was a direct result of GDF11 action, or whether it was secondary to the improved blood flow. A 2005 study had shown that heterochronic parabiosis in mice reversed the decreases in skeletal muscle strength and endurance typically seen with aging. The current studies with recombinant GDF11 were conducted to confirm the hypothesis that this protein is responsible for the effect.

Young mice injected with the protein showed no differences from controls, but older mice had increased numbers of satellite cells with intact DNA, as well as a 75 percent reduction in the number of satellite cells with severely damaged DNA (another common finding in older mice). The GDF11-treated older mice recovered faster from injury and had improved grip strength and endurance when compared with the control group.

“These data indicate that GDF11 systematically regulates muscle aging and may be therapeutically useful for reversing age-related skeletal muscle and stem cell dysfunction,” conclude the authors.

While these findings could eventually play a role in developing treatments for conditions like Alzheimer's and heart disease, ABC cautions in talking points issued May 7 that “there is no direct evidence to suggest that younger blood does in-fact reverse aging,” emphasizing that clinical trials in humans are necessary to investigate these findings. “These preliminary findings, even if interesting and promising, are clearly insufficient to justify considering any changes in medical or transfusion practices,” states ABC in the talking points. ABC members can access these talking points in MCN 14-051 at <http://bit.ly/1ggVP95>, and can view these and other talking points on the member's website at <http://bit.ly/1oqFK5H>.

**Citations:** Villeda S, *et al.* Young blood reverses age-related impairments in cognitive function and synaptic plasticity in mice.” *Nature Med.* 2014 May 5. [Epub ahead of print]

Katsimpardi L, *et al.* Vascular and neurogenic rejuvenation of the aging mouse brain by young systemic factors. *Science.* 2014 May 5. [Epub ahead of print]

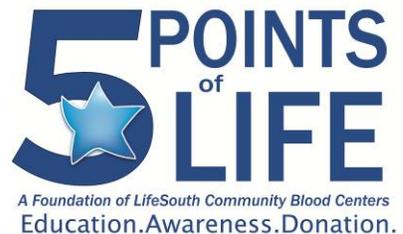
Sinha M, *et al.* Restoring systemic GDF11 levels reverses age-related dysfunction in mouse skeletal muscle. *Science* 2014 May 5. [Epub ahead of print] ◆

## The FABC Working For You: Central Jersey Blood Center Sees Donations Increase After Adopting Five Points of Life Program

*The Foundation for America's Blood Centers (FABC) funds initiatives that improve the availability, quality, and safety of blood to save, extend, or enhance the lives of patients. The FABC works through funding projects spearheaded by America's Blood Centers' members, as well as ABC initiatives that benefit its member blood centers.*

Central Jersey Blood Center (CJBC) has recently partnered with the Five Points of Life Foundation by beginning its educational program, Five Points of Life in the Classroom: "I am the Donation Generation." The Five Points of Life Foundation was founded by LifeSouth Community Blood Centers with the goal of raising awareness of the five ways to share life with others through donation of blood, apheresis, marrow, organ and tissue, and cord blood. In 2010, a classroom component was established with funding from the Foundation for America's Blood Centers (FABC).

Through the Five Points of Life in the Classroom, the participating blood center teaches primary and secondary school children, ages 5 through 18, about the science of blood donation through interactive methods, with specific curriculum for the various grade levels. The curriculum, created with the help of the FABC grant, is straightforward, easy to teach, and helps students learn about the social responsibility of blood donation.



In August, CJBC began its journey to adopt this particular grant program by sending Jessica Law, an account manager, for hands-on training at LifeSouth and to observe the program in action. Over the past several months, CJBC's Donor Relations team has spent time learning the educational content of the program and recently began teaching it at elementary schools in the center's service area.

Thus far, blood center staff has educated 944 students at three different elementary schools before their annual blood drives. Since beginning the program, the center has collected an additional 232 blood donations in comparison with the previous year's drives – a 19 percent increase, said CJBC CEO Pascal George. He adds that the response from teachers and administrators has been "fantastic, with rave reviews on their feedback surveys and praise for the hands-on components of the lesson."

"Central Jersey Blood Center is committed to education and is thrilled to be able to offer this fun and interactive program to our schools, while focusing on the core 'Science Practices' and 'Life Science' curriculum of the New Jersey Core Curriculum Content Standards," said Mr. George. LifeSouth designed the program with the intent that the facilitating blood center would work with school systems to ensure that the blood donation lesson fits with the state's required curriculum. "We look forward to growing the program over the next year and helping to fulfill the Five Points of Life Foundation's mission," added Mr. George.

The benefits of the Five Points of Life in the Classroom program are twofold, explained Mr. George. Presenting the educational curriculum prior to a blood drive typically leads to an increase in donors per blood drive. Furthermore, it helps to better connect the blood center to the community, promote donation, and ensure a donor base for the future. To date, the Five Points of Life program has reached more than 250,000 children in Alabama, Georgia, and Florida.

More information about the Five Points of Life Foundation can be found at [www.fivepointsoflife.com](http://www.fivepointsoflife.com), and ABC members can find more details about FABC-funded grant projects at <http://bit.ly/1fZzBOK>. ♦



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## INSIDE ABC

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

### ABC Holds Human Resources & Employee/Training Development Workshop

America's Blood Centers and Gulf Coast Regional Blood Center hosted more than 60 attendees at the joint ABC Human Resources and Employee Training & Development (HR/TD) Workshop at the Hotel Derek in Houston, Texas last week. The workshop got attendees involved and actively participating with engaging speakers who presented on topics like recruitment and talent acquisition, identifying high potential employees, developing emerging leaders, and strategies to improve trainer performance.

ABC's Human Resources and Employee Training & Development Committees worked together to again provide a workshop that appealed to both sets of staff. This year's theme, "Change, change, and more change," highlighted not only changes occurring in the ever-evolving healthcare and blood banking environments, but also challenges caused by turnover of blood center staff.

During each of the three days, the presentations and events allowed HR/TD professionals in the blood community to share best practices and network with one another. The first day's presentations focused on human resources topics, the second day was a mixture of both, and the third day focused on employee training & development.



Attendees at the ABC HR/TD Workshop visit Gulf Coast Regional Blood Center's Mobile Operations Complex.



(From left to right) Laurie McGraw, MT(ASCP) SBB, CPLP, Gulf Coast Regional Blood Center; Rae Lynn Spears, SPHR, HCS, vice chair, ABC Human Resources Committee, Blood Systems; Laura Sample, chair, ABC Employee Training/Development Committee, Michigan Blood; Jennifer Feeny, SPHR, chair, ABC Human Resources Committee, Mississippi Valley Regional Blood Center; and Rodney Green, Gulf Coast Regional Blood Center

"What a wonderful gathering of industry HR and TD professionals! It was great to re-connect with peers and to welcome the new attendees joining us this year," said Jennifer Feeny, SPHR, chair of ABC's Human Resources Committee, and chief people officer of Human Resources at Mississippi Valley Regional Blood Center. "The roundtable discussions and sessions, focused on the sharing of best practices, were popular and very engaging. ABC President Dave Green's high-energy update on the industry and ABC helped set the stage for the entire workshop. Above all, the opportunity to network, 'talk shop,' and share resources was invaluable."

Monday evening kicked off with a welcome reception at the Hotel Derek, and sessions got underway on Tuesday morning, beginning with a talk by Mr. Green,

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

who provided an insightful update on the transfusion medicine industry and key drivers impacting ABC member blood centers. Stacey Carroll, president and principal consultant of HR Experts On-Call, gave a well-received talk about strategic ways to communicate with senior leaders, identifying and eliminating activities that waste time and detract from strategic initiatives, and selling ideas to leaders and employees. Other topics included executive compensation and governance and discharging employees on medical leave. The day wrapped up with a roundtable discussion of best practices.



Attendees at the HR/TD Workshop share ideas and best practices during the roundtable sessions.

On Tuesday evening, workshop participants toured Gulf Coast Regional Blood Center's Mobile Operations Complex, which includes realistic blood center simulation training equipment, and enjoyed a reception hosted at the facility.

Wednesday morning began the joint HR/TD sessions, beginning with another engaging talk from Ms. Carroll about teaching managers to have difficult conversations. She discussed how to make such conversations more effective and presented a basic script for five of the most challenging conversations about performance and pay, as well as how to teach others to have these conversations. Other presentations covered talent acquisition, motivating employees, and identifying high-potential employees. Jeffery Geloneck and Patty Kelly from The Blood Alliance returned to update attendees on the center's emerging leaders development program, which they presented during the 2012 HR/TD Workshop.

The employee training and development sessions began on Thursday morning with a talk from James Randle, manager of Donor Collections Training at Gulf Coast Regional Blood Center, about methods for evaluating and improving trainer performance. Other speakers discussed training team leads to supervise mobile drives, donor services training, and training to meet performance expectations. The workshop wrapped up with mini breakout sessions, during which participants discussed supervisor skills training, leadership development, customer service, and safety training.

"I was pleased to see all the hard work of so many people come together for this event," said Laura Sample, director of Organizational Development at Michigan Blood and chair of ABC's Employee Training/Development Committee. "It was a great opportunity to learn from one another and to finally put faces to the names of people with whom I talk so frequently through ABC."

Ms. Feeney added, "Thank you to Gulf Coast Regional Blood Center for an excellent tour and networking event Tuesday night, and thank you to all of the HR and TD committee members, our knowledgeable speakers, and ABC for their hard work and coordination. I'm looking forward to our next workshop in 2016!" 💧

ABC would like to thank host, Gulf Coast Regional Blood Center, and sponsor, Muno, Summers & Associates, for supporting the Human Resources and Employee Training & Development Workshop.



## RESEARCH IN BRIEF

**An analysis of clinical studies that use adult stem cells to treat heart disease has raised concerns about the value of this therapy, suggesting that many of these studies are plagued by errors.** A number of early-phase clinical trials have reported that adult stem cells are effective in treating heart attack and heart failure. However, an analysis published in the journal *BMJ* examining discrepancies in trials of autologous bone marrow stem cell transplants for heart patients found that only trials containing flaws, such as design or reporting errors, showed positive outcomes. Error-free trials showed no benefit at all. The study, led by Darrel Francis, a professor of cardiology at Imperial College London, examined 133 reports of 49 randomized clinical trials published through April 2013, involving the treatment of patients who had a heart attack or heart failure. The researchers included all accessible randomized studies and analyzed discrepancies in design, methodology, and reporting of results. They reported more than 600 discrepancies, including contradictory claims for how patients were randomized, conflicting data in figures and tables, and statistically impossible results. “Readers need to know whether a trial is randomized or not, but the reports were sometimes vague or even contradictory. Some trials were initially reported as non-randomized and then later as randomized,” wrote the authors. They also found studies listing the same patients as male and female and patients reported as having died, yet going on to undergo tests and report symptoms. Nick Freemantle and Greta Rait, of UCL Medical School in London, point out in an accompanying editorial that the “total absence of any coordination or strategic thinking is a further problem,” highlighting that most of the studies had a small number of participants. “Surely these resources could have been used more efficiently to generate fewer larger appropriately designed confirmatory phase III trials,” they write. They add that research on this emerging treatment could have progressed further had resources been better allocated. “This lost opportunity also lets down potential patients, the doctors who care for them and suggest treatment options, and of course, tax payers and charitable givers whose scarce resources have been wasted,” they conclude. A recently published Cochrane review offers somewhat contradictory findings to those published in *BMJ*, suggesting that bone marrow derived stem cells may benefit patients with ischemic heart disease or congestive heart failure. Results from 23 randomized controlled trials, including more than 1,200 participants, suggest that this treatment leads to a reduction in deaths and readmissions to hospital and improvements over standard treatment in patients with chronic ischemic heart disease and heart failure, as measured by tests for heart function, according to the Cochrane review. “However, the quality of the evidence is relatively low because there were few deaths and hospital readmissions in the studies, and individual study results varied,” write the authors.

**Citations:** Nowbar AN, *et al.* Discrepancies in autologous bone marrow stem cell trials and enhancement of ejection fraction (DAMASCENE): weighted regression and meta-analysis. *BMJ*. 2014 Apr 28;348:g2688.

Freemantle N, Rait G. Trials of autologous bone marrow stem cells for heart disease. *BMJ*. 2014 Apr 29;348: g2750.

Fisher SA, *et al.* Stem cell therapy for chronic ischemic heart disease and congestive heart failure. *Cochrane Database Syst Rev*. 2014 Apr 29;4:CD007888. ♦

### We Welcome Your Letters

The *ABC Newsletter* welcomes letters from its readers on any blood-related topic that might be of interest to ABC members. Letters should be kept relatively short and to the point, preferably about a topic that has recently been covered in the *ABC Newsletter*. Letters are subject to editing for brevity and good taste. Please send letters to ABC Publications Editor Betty Klinck at [newsletter@americasblood.org](mailto:newsletter@americasblood.org) or fax them to (202) 393-1282. Please include your correct title and organization as well as your phone number. The deadline for letters is Wednesday to make it into the next newsletter.

## BRIEFLY NOTED

**A preliminary Moody's report on the recent financial health of non-profit hospitals shows that revenue and expense trends for non-profit hospitals were generally poor, although there were some positives, reported healthcare news website, Hospitals & Health Networks.** The report showed that expenses are rising faster than revenue, however the data also hinted that some progress is being made among hospitals in becoming more efficient, with expense growth moderating both last year and over the long term. The report on median non-profit hospital financial data from Moody's Investors Service indicates that expenses grew 4.6 percent in fiscal year 2013 as revenue grew 4.1 percent. The Moody's authors point to low rate increases from commercial payers, rate cuts from Medicare and Medicaid programs, and increased use of high-deductible health plans as among the reasons why hospital financial performance is suffering. On the other hand, the rate of growth in expenses fell to its 4.6 percent growth in fiscal year 2013 from the 5.5 percent growth rate in fiscal year 2012. Experts note that this drop could be driven by such things as increased provision of care in lower-cost ambulatory settings and cost-cutting. In the long-term, revenue and expense growth rates are both down from levels that were more than 9 percent in 2002. Moody's predicts similarly poor outcomes when the final median fiscal year 2013 financial results are released this summer. More information about this report can be found at <http://bit.ly/1rqet53>. (Source: Health & Hospitals Networks, 4/23/14) 💧



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# REGISTRATION NOW OPEN

## America's Blood Centers' Fund Development, Communications & Donor Management Workshop

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### 2014 WORKSHOP SCHEDULE

Fund Development topics: June 17

Fund Development & Communications topics: June 18

Communications & Donor Management topics: June 19

Donor Management topics: June 20

### 2014 WORKSHOP FEES (early bird/regular)

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

3-day registration: \$460/\$515

4-day registration: \$515/\$565

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

*“BloodSource looks forward to hosting the annual FDCDM workshop in Sacramento. We anticipate dynamic speakers, informative workshops, and invaluable networking opportunities. We hope to see you in June!”*

– Mitzy P. Edgecomb  
Senior Vice President  
BloodSource

*There are seven (7) \$1,200 scholarships available to ABC members to cover the cost of registration fees and help with travel expenses. Application link and additional details included in registration.*

For additional registration details, contact Lori Beaston at [lbeaston@americasblood.org](mailto:lbeaston@americasblood.org).



Sacramento International Airport (SMF) is served by most major US airlines, including discount carriers Southwest Airlines and JetBlue. Please visit [www.sacramento.aero](http://www.sacramento.aero) for further information.

## REGULATORY NEWS

**The Centers for Medicare and Medicaid Services (CMS) notified AABB of its decision regarding human leukocyte antigen (HLA) testing performed for the mitigation of transfusion-related acute lung injury (TRALI).** During recent Clinical Laboratory Improvement Amendments (CLIA) inspections of blood establishments, certain labs were cited when testing for HLA antibodies because they are not CLIA-certified in the specialty of histocompatibility (see “Our Space” in *ABC Newsletter*, 3/14/14). CMS has determined that HLA antibody screening for the purpose of TRALI risk mitigation performed to qualify blood donors can be classified either as histocompatibility or general immunology, according to a Wednesday *AABB Weekly Report News Flash*. Classifying HLA antibody screening used for TRALI risk mitigation under the specialty of general immunology allows AABB to be the accrediting organization for facilities performing this testing. AABB is not required to develop additional standards or apply for deemed status from CMS for histocompatibility accreditation. Facilities performing HLA testing for any other activity – including transfusion reaction investigation, compatibility testing, or HLA typing for HLA-matched platelet apheresis collections – must be accredited by an organization holding “deemed status” for histocompatibility. Organizations holding deemed status for histocompatibility include the American Society for Histocompatibility and Immunogenetics (ASHI) and the College of American Pathologists (CAP). (Source: AABB Weekly Report News Flash, 5/7/14)

**Due to the ongoing shortage of normal saline in the US, the Food and Drug Administration announced that it will temporarily exercise enforcement discretion for the distribution of normal saline from the Baxter Healthcare Corp. manufacturing facility in Spain.** This manufacturer is the second to receive such permission, as FDA announced in March that normal saline manufactured in Norway by Fresenius Kabi USA LLC could be distributed in the US, according to the April 30 *AABB Weekly Report*. FDA inspected the Spanish and Norwegian facilities to ensure that they meet agency standards. In addition to these sources, three manufacturers – Baxter Healthcare Corp., B. Braun Medical Inc., and Hospira Inc. – are producing and releasing normal saline from their US facilities. The agency considers resolving the shortage a top priority and stated in an April 15 letter to the American Hospital Association that it is doing everything in its power to correct the situation (see *ABC Newsletter*, 4/25/14). (Source: AABB Weekly Report, 4/30/14)

**The Food and Drug Administration recently announced recalls of three types of infusion pumps used to deliver medicine, blood, and other fluids to patients.** FDA posted a notice on its Medical Device Recalls page that Baxter Healthcare Corporation recalled Sigma Spectrum Infusion Pumps with Master Drug Library No. 35700BAX and 35700ABB. Baxter received over 3,500 reports of malfunctioning, including nine severe adverse events, but no deaths. Users have reported that the pumps improperly detect that the device’s door was open, leading to an interruption or delay in therapy. The affected products were manufactured between July 1, 2005 and Jan. 15, 2014 and were distributed between Feb. 20, 2013 and Jan. 15, 2014. More information about this recall can be found at <http://1.usa.gov/1j1N42j>. FDA also reported on May 2 through its FDA Safety Information and Adverse Event Reporting Program, that Abbott Acclaim and Hospira Acclaim Encore Infusion Pumps have been recalled by Hospira due to broken door assemblies. Hospira received customer reports of broken door assemblies on the Abbott Acclaim infusion pumps and the Hospira Acclaim Encore Infusion pumps. The notice states that a broken door assembly can cause over-infusion or delay of therapy. “Use of these affected products may cause serious adverse health consequences, including death,” states FDA. The affected products include Abbott Acclaim Infusion Pumps, list Number 12032, manufactured from February 1998 to November 1998 and distributed from September 1998 through February 2004. The affected Hospira Acclaim Encore infusion pumps are list Number 12237, manufactured from February 1997 to February 2010 and distributed from July 1999 through November 2013. More information about this recall can be found at <http://1.usa.gov/1qjAUf0>.

**REGULATORY NEWS** (continued from page 9)

**The Department of Homeland Security's Computer Emergency Readiness Team last week issued guidance on security vulnerability discovered when using Microsoft Internet Explorer.** This vulnerability can allow a remote, unauthenticated attacker to execute arbitrary code on a computer system. The problem is not specific to the healthcare sector. The guidance recommends that users and administrators review the Microsoft Security Advisory (available at <http://bit.ly/QK4oCT>) for mitigation actions and workarounds, or consider using an alternate internet browser. The guidance can be accessed at <http://1.usa.gov/QVf0P4>. (Source: AHA News Now, 4/30/14) ♦

**THE WORD IN WASHINGTON**

**The House and Senate are in Washington this week, predominantly working on budget legislation.** Also in Washington this week, members of the American Hospital Association gathered for their annual member "fly-in." America's Blood Centers' members can begin planning their trip to Washington by planning to attend the 2015 Annual Meeting and taking the opportunity to have their voices heard on the Hill.

**CMS recently released proposed rules on inpatient hospital payment.** The Centers for Medicare & Medicaid Services (CMS) issued its 2015 Hospital Payment Proposed Rules on April 30. The proposal for 2015 hospital payments recommends continuing to tie Medicare hospital payment incentives to achieving certain quality measures. It also recommends adjustments to some of those measures. The following proposals from the CMS may be of interest to America's Blood Centers members. CMS is removing some of the Surgical Care Improvement Project (SCIP) measures from the hospital value-based purchasing program because they have become meaningless due to very high performance levels. Partly due to the removal of these SCIP process-of-care measures, CMS is proposing to decrease the weight of the clinical process of care under the hospital value-based purchasing program. CMS is scheduled to transition to the International Classification of Disease tenth revision, clinical modification and procedure coding system, (ICD-10-CM/PCS) on Oct. 1, 2015 instead of October 2014 due to passage of the Protecting Access to Medicare Act of 2014, Pub. L. 113-93, enacted on April 1. ICD-10 is a diagnostic coding system implemented by the World Health Organization used in nearly every other country around the world except for the US. After Oct. 1, 2015, CMS will only accept hospital quality measure data coded in ICD-10-CM/PCS. This change has created much anticipatory angst in the hospital industry despite the fact that ICD-10 has been in place in many other countries for years. CMS is proposing that Critical Access Hospitals (CAHs) affected by recent Office of Management and Budget re-designation from rural to urban be given two years from the date the re-designation becomes effective to reclassify as rural and thereby retain their CAH status. The Medicare agency's Hospital Inpatient Prospective Payment System Proposed Rule is under review by America's Blood Centers, and subject to comment by June 30. A preview of the rule is available at: <http://1.usa.gov/1j1C9f5> (note: this link will expire on May 15 when the proposed rule is officially published in the Federal Register).

**Two hearings of interest to America's Blood Centers members took place on the Hill this week.** Over this past week, hearings were held on healthcare programs and on the nomination of Sylvia Mathews Burwell as secretary of the Department of Health and Human Services. The Obama Administration's 2015 Health and Human Services budget proposal was discussed in the Senate Labor-HHS-Education Appropriations Subcommittee on Wednesday, and Ms. Burwell's hearing took place in the Senate Health, Education, Labor, and Pensions (HELP) Committee on Thursday. In a letter to the Senate last month, ABC urged the Senate to confirm Ms. Burwell as HHS secretary. ABC's letter, along with other advocacy letters, can be accessed at <http://bit.ly/1hhAhZY> (requires ABC member login and password).

(continued on page 11)

**THE WORD IN WASHINGTON** (continued from page 10)

**Primary elections continue across the US.** The Buckeye State, Indiana, and North Carolina held primary elections for Republican and Democratic Party nominations for the US House this week. A competitive North Carolina US Senate primary pits state House Speaker Thom Tillis (R-NC) in a four-way contest to earn the right to challenge incumbent Sen. Kay Hagan (D-NC) this November. America's Blood Centers would like to hear from any member blood centers that are active in US House or Senate campaigns. ABC invites members to share their experiences by contacting Mack Benton at [mbenton@americasblood.org](mailto:mbenton@americasblood.org). ♦

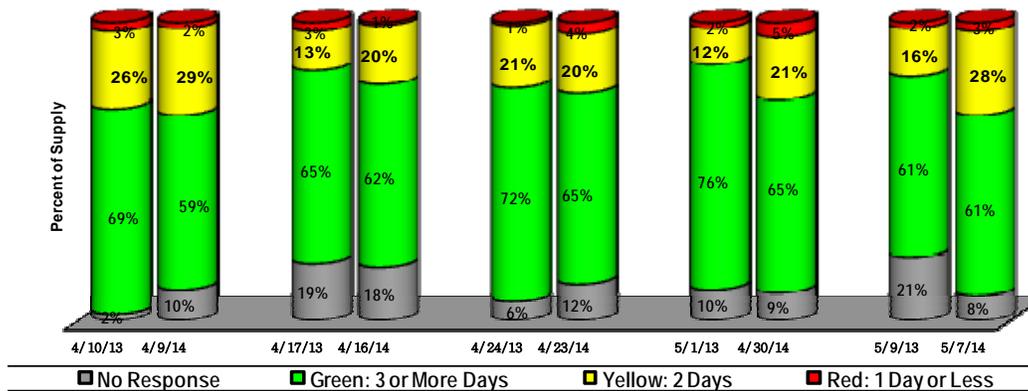
**INFECTIOUS DISEASE UPDATES****MIDDLE EAST RESPIRATORY SYNDROME CORONAVIRUS**

The first case of Middle East Respiratory Coronavirus (MERS-CoV) in the US was confirmed on May 2 in a traveler from the Middle East to the US, announced the Centers for Disease Control and Prevention. MERS-CoV was first reported in Saudi Arabia in 2012. "We've anticipated MERS reaching the US, and we've prepared for and are taking swift action," CDC Director Tom Frieden, MD, said in a press release. "We're doing everything possible with hospital, local, and state health officials to find people who may have had contact with this person so they can be evaluated as appropriate. This case reminds us that we are all connected by the air we breathe, the food we eat, and the water we drink." On April 24, the patient traveled by plane from Riyadh, Saudi Arabia to London, England, then from London to Chicago. The patient then took a bus from Chicago to Indiana. On April 27, the patient began experiencing respiratory symptoms, including shortness of breath, coughing, and fever. The patient went to an emergency department in an Indiana hospital on April 28 and was admitted on the same day. Due to the patient's symptoms and travel history, public health officials tested for MERS-CoV and confirmed infection. There is no evidence suggesting it can spread in community settings, but spread in health care settings has occurred in the Middle East. CDC and Indiana health officials are not yet sure how the patient became infected, but exposure likely occurred in Saudi Arabia, where outbreaks of MERS-CoV infection are occurring. To date, there have been 401 confirmed cases of MERS-CoV in 12 countries, all originating in six countries in the Arabian Peninsula. There is no evidence to suggest that this virus can be spread through transfusion. The Emerging Infectious Disease group of AABB's Transfusion-Transmitted Disease Committee is monitoring MERS-CoV and has made a fact-sheet available at <http://bit.ly/1j8qfKq>. The CDC press release can be accessed at <http://1.usa.gov/1iSz0x9>. (Source: CDC press release, 5/2/14) ♦

**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 Betty Klinck at [newsletter@americasblood.org](mailto:newsletter@americasblood.org). You will be sent a writer's guide that provides information on style conventions, story structure, deadlines, etc.

**STOPLIGHT®: Status of the ABC Blood Supply, 2013 vs. 2014**



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

**MEMBER NEWS**

More than 5,000 members of “Team BloodSource” came out on April 26 for a donor and volunteer recognition event featuring a BBQ, baseball game, and fireworks show at Raley Field in West Sacramento, Calif. This event continued BloodSource’s partnership with the Sacramento River Cats Triple-A baseball team. The all-inclusive event style provided a broader, more family-focused feel, while also offering an opportunity to share the BloodSource mission with other attendees, said BloodSource in an article submitted to the *ABC Newsletter*. At capacity, Raley Field seats nearly 14,000 people, all of whom were able to see BloodSource patient thank-you videos, a message from CEO Mike Fuller, an array of vintage BloodSource donor t-shirts worn by donors, and branded rally towels, which dotted the sold out stadium throughout the game. In addition, a young heart patient and blood recipient inspired the crowd by throwing out the first pitch. Post-event feedback reinforced that this new type of thank-you event was appreciated – anecdotes, emails, and social media reactions show that the evening was a success in the eyes of the donors, chair-people, and volunteers who support the mission of collecting a safe and plentiful blood supply. BloodSource also plans to conduct a formal survey and will monitor donation metrics to glean whether the event produced an increase in donations. Since the early 1970s, BloodSource has recognized donors who have given 10 gallons or more, blood drive chair-people, and volunteers through special appreciation events. Following donor surveys conducted in 2013, BloodSource decided to break away from the usual appreciation luncheon and experiment with different types of recognition events and to combine the events for donors, chair-people, and volunteers. The center has since hosted a well-attended comedy show and dessert reception for its northern California region supporters and donors. Later this month, BloodSource will conclude its 2014 appreciation events through its partnership with the Stockton Ports Triple-A baseball team to host an event for blood center donors, blood drive chairs, and volunteers in the Central Valley area. (Source: BloodSource submission, 5/1/14)



BloodSource guests enjoy an annual appreciation event at Raley Field in West Sacramento, Calif.

MEMBER NEWS (continued on page 13)

## MEMBER NEWS (continued from page 12)

**The Blood Center of Central Texas, headquartered in Austin Texas, recently honored an elite group of five blood donors for their exceptional selfless acts of volunteerism that have helped to save or enhance the lives of hundreds of Texas patients, announced the center on April 2.** Each of the five men has contributed over 80 gallons of blood and platelets throughout their years of donation. When asked why they donate blood, the men had similar responses, noting that they did not begin making blood donations for notoriety or to set records. Rather, they simply wanted to do something that was meaningful and would help others. Leon Wegele leads the group with more than 85 gallons of blood and platelet donations followed by fellow “club” members, Robert Schluter, Gary Carter, Bruce Latour, and David Anthony. Each began their long journey of donation in the late 1970s or early 1980s by donating whole blood and transitioned to apheresis platelet donations as the technology became available. “I began my journey of donation in 1974 after a church member had surgery and the congregation was asked to help replace the units of blood that had been used. Donating is a simple thing I can do that benefits a lot of people,” said Mr. Wegele. “The Blood Center is indebted to this elite group of donors and to the thousands of Central Texans who donate at least once a quarter,” said Marshall Cothran, The Blood Center’s CEO. “It is their steadfast commitment to helping others that keeps our community’s blood and platelet supply at a safe level.” (Source: The Blood Center of Central Texas press release, 4/2/14)



The Blood Center of Central Texas recently honored five donors who have given more than 80 gallons of blood in their lifetimes.

**Rock River Valley Blood Center, headquartered in Rockford, Ill., hosted the 11<sup>th</sup> Annual Red Shoe Run – For Donor Awareness on April 12 at Northern Illinois University, the center announced in a press release.** This 5K run/fitness walk began in 2004 to raise awareness about the important need for organ, tissue, eye, blood, and marrow donors. Over 1,000 runners and walkers participated on a crisp April morning to pay tribute to donors who give life and treatment to thousands of patients every day. The money raised through this event helps to pay for tissue typing those wishing to join Rock River Valley Blood Center’s Be The Match Marrow Registry. Prizes were awarded in 17 different age divisions and the first 800 registered participants received a special event T-shirt. (Source: Rock River Valley Blood Center press release, 3/25/14) ♦



Runners from the MS2/Meridian-Direct Team. Meridian at the Red Shoe Run, represented by, (from left to right) Lisa Williamson, Marc Scordato, Andy Pipitone, Mike Broski (Entre Computer Solutions), Jennifer Winberg (MELD), Lindsey Oswald, Bruce Vorel, and Ken Kruger.

## IN MEMORIAM – WILLIAM “BILL” PORTMAN, 65

**William “Bill” Portman, a leader in the blood banking community for more than 20 years, passed away at the age of 65 on the evening of April 28.** Mr. Portman started in the Accounting Department at the Central Blood Bank of Pittsburgh and transformed it into what is now The Institute for Transfusion Medicine (ITxM). He had 30 years of service, with 20 of those years serving as the president and CEO

(continued on page 14)

**IN MEMORIAM** (continued from page 13)

until his retirement in 2007. Mr. Portman was a graduate of Westminster College, he held an MBA from Bowling Green University. “Bill was a real visionary in our industry,” said Jim Covert, ITxM president and CEO. “His role in advancing transfusion medicine, especially centralized transfusion services, is recognized as the ideal model that all community blood centers strive for. Bill provided steady leadership and recognized early on the value of mergers in the blood industry.” Mr. Portman is survived by his wife, Mary Ann Portman, MD, and his son, Benjamin, and his fiancé Whitney of Atlanta, Ga. The service for Mr. Portman will be on Saturday, May 24 from 10 a.m. to 11 a.m. at the Weddell-Ajak Funeral Home in Aspinwall, Pa. ([www.weddellajak.com](http://www.weddellajak.com)). The family is respectfully suggesting that in lieu of flowers, contributions be made to the Alzheimer’s Caregivers Network, 660 Tamiami Trail N., Suite 21, Naples, FL, 34102, (239) 262-8388 (<http://alzsupport.org>). ITxM sends its condolences to Mr. Portman’s family and the many associates and employees who remember him fondly. “Mr. Portman was both an innovator and entrepreneur and instilled in the ITxM organization a vibrant combination of business excellence and service passion. His legacy of centralized transfusion support continues to benefit patients,” said ABC President Dave Green. (Source: submission from ITxM, 5/5/14) ♦

**PEOPLE**

**AABB has announced its slate of candidates for open officer and at-large director positions on AABB’s 2014-2015 board of directors, announced the *AABB Weekly Report* on May 2.** According to AABB’s bylaws, members may submit additional nominees – due by Aug. 29 through the petition process. Candidates nominated by petition will also be announced and included on the ballot. Candidate biographies will be published in the *AABB News* and will be available for review online; the *ABC Newsletter* will publish an update once the biographies are released. The slate of nominees includes:

- President-elect: Donna Regan, MT(ASCP)SBB;
- Vice president: Zbigniew Szczepiorkowski, MD, PhD, FCAP;
- Secretary: Michael Murphy, MD;
- At-large director (pos. 2): Susan Roseff, MD;
- At-large director (pos. 4): Susan Johnson, MSTM(ASCP)SBB, and Marianne Silva, MS, MT(ASCP)SBB;
- At-large director (pos. 6): Jeannie Callum, MD, FRCPC;
- At-large director (pos. 8) Pascal George, and Mary O’Neill, MD; and
- At-large director (pos. 10): Steven Frank, MD, and Paula Santrach, MD.

More information is available to AABB members at <http://bit.ly/Qm5RyC>. (Source: *AABB Weekly Report*, 5/2/14) ♦

## 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

**Associate Medical Directors (AD002- San Antonio, TX or AD003 – Norcross, GA).** BioBridge Global (BBG) and its subsidiaries (South Texas Blood & Tissue Center, GenCure and QualTex) are seeking two Associate Medical Directors for locations in San Antonio, Texas (FT) or Norcross, Georgia (PT or FT). Reporting to the Medical Director, the associate medical director will establish medical procedures to ensure optimal care and regulatory compliance. This includes oversight of research, clinical consultation, client support, autologous/directed donations, cord blood collections and counseling. Will provide medical support to blood/components, laboratory testing, product management, clinical diagnostics and QA. Medical Doctor (MD) or Doctor of Osteopathic Medicine (DO) required. Must be licensed to practice medicine in the State of Texas, Georgia, and New York. Board certified in clinical pathology or hematology required. Blood banking, transfusion medicine, board certification or board eligible. Visit our website at [www.biobridgeglobal.org](http://www.biobridgeglobal.org). E-mail résumé to [hr\\_dept@bloodntissue.org](mailto:hr_dept@bloodntissue.org) or fax to (210) 731-5581. Call Human Resources at (800) 292-5534, Ext.1559 for more information. 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.

**VP, Quality & Regulatory Affairs.** We are seeking a member of the San Diego Blood Bank Senior Operational team to ensure business objectives are aligned, quality is the foundation of operations and the company is performing to operational objectives. Responsible for company's quality to ensure compliance to regulatory requirements. Ensure cGMP, CLIA, and quality systems compliance, as well as other applicable regulatory requirements in the US and from international bodies. BA/BS degree in a life science and 15 plus years demonstrated expertise and success in regulatory and quality in a blood donor center or life sciences/clinical technology-driven company. Apply online at

[www.sandiegobloodbank.org](http://www.sandiegobloodbank.org).

EOE/Minority/Female/Disability/Vets

**Hospital Services Laboratory Manager.** LifeServe Blood Center is seeking candidates with senior-level experience to oversee daily operations of our Hospital Services Department. This position will be responsible for the oversight, development, and implementation of laboratory functions, such as donor testing, reference testing, components, and product management, in addition to direct management of a team focused on operational efficiencies, customer service, product testing, and distribution. Primary responsibilities for this position include monitor collections and inventory to ensure capacity and utilization of resources; manage daily workflow and organizational processes; create, manage, and meet department budget; drive performance to ensure department metrics, efficiencies, and quality metrics are met; foster an environment that allows team members to work together to further the mission and vision of the organization; and ensure all team members comply with proper training and accreditation requirements. Education and/or experience: Bachelor's degree in Business Administration, Biology or related field, MT, MLS or MLT preferred, two to three years of management experience required and management experience in blood banking industry or laboratory setting preferred. Offers of employment are contingent on the successful completion of pre-employment, post offer drug testing and background checks. EOE. Interested in joining our team? Submit resumes to

to [betsy.lambertsen@lifeservebloodcenter.org](mailto:betsy.lambertsen@lifeservebloodcenter.org) ♦