



ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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2013 #10

March 15, 2013

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Please Note: This is an abbreviated edition of the Newsletter due to the ABC Annual Meeting in Washington, D.C. The *ABC Newsletter* will not be published on March 22, so that staff can attend the Annual Meeting. The next issue will be published on March 29. We hope to see you in our Nation's capital!

ABC CEO Jim MacPherson Resigns, Bill Coenen Becomes Interim CEO

Outgoing ABC President Dan Waxman, MD, announced yesterday that Jim MacPherson has resigned as CEO of America's Blood Centers. Bill Coenen will serve as ABC's interim CEO, effective immediately. Mr. Coenen can be reached at wmcoenen@americasblood.org. The ABC board of directors wishes Jim well in his future endeavors.

Fear of Donation Question Helps Predict Vasovagal Reactions

Blood banking professionals are well aware that high school-aged blood donors are at a higher risk for fainting during blood donation, and those who experience a reaction are less likely to give blood again, making prevention of this reaction a priority. A recent study shows that simply asking donors if they are afraid of having blood drawn from their arms can help to predict the donors who are most likely to experience vasovagal reactions, offering opportunities to intervene and prevent them.

The study, published in the February issue of *Transfusion*, was conducted by researchers from Ohio University and Community Blood Center of Greater Kansas City (CBCKC). In a previous study, the researchers found that fear of having blood drawn was a significant predictor of vasovagal reactions, however this study was conducted among mostly experienced donors and relied on self-reports of donation reactions. The current study addressed these limitations by assessing donor fear in high school students and phlebotomist ratings of subsequent donor reactions.

The study was carried out at 123 high school blood drives conducted by CBCKC between August and December 2011. The schools were randomized to either have students answer a question about fear of donation after completing the donor

(continued on page 2)

Fear of Donation Question (continued from page 1)

screening, or not being asked the fear question. Students responded to a written question asking “How afraid are you of having blood drawn from your arm?” with the response options: 1 = “not at all afraid,” 2 = “somewhat afraid,” 3 = “moderately afraid,” 4 = “very afraid,” and 5 = “extremely afraid.”

Comparing the students who did or did not answer the pre-donation fear question showed that there was no significant difference in the proportion of observed reactions between these groups (17.2 and 17.7 percent, respectively). Also, the proportion of reactions observed for those who did and did not answer the fear question was not significantly different for first-time donors or experienced donors. These results confirm previous findings that simply answering a question about fear of blood draws before donating does not in itself increase the risk of vasovagal reactions.

The risk of a reaction increased with increasing levels of self-reported fear, for both first-time and experienced donors. The reaction rate doubled from 11 to 22 percent for those who indicated that they were “somewhat afraid,” compared to “not afraid at all.” Furthermore, fear was found to be one of the strongest predictors of reactions and remained a significant predictor when controlling for other significant independent predictors.

The authors conclude that these “findings provide reassurance that it is feasible to assess pre-donation fear without increasing the risk of reactions, even among the most vulnerable donors. This opens the door to a new form of donor screening that can easily be administered and quickly scored to identify those at elevated risk.”

Unlike physical or demographic indicators of vasovagal reaction, it may be possible to design interventions before or during donation that address the fear risk-factor without deferring the donor. For example, the donor’s anxiety could be reduced through written or audio-visual materials addressing common blood donor concerns or by focusing on something other than the blood donation, such as an electronic device. It also may be helpful to target prevention strategies like applied muscle tension to such donors.

While assessing donor fear of blood draws to prevent vasovagal reactions would take more time and effort, “the effort may be well worth the cost if it leads to greater donor comfort and satisfaction, fewer donor reactions, less risk of injury, and increased rates of retention,” conclude the authors.

“The results of this study and the previous one in which we asked donors about being afraid of donating blood, surprised us,” said Jay Menitove, MD, executive director and medical director of CBCKC, and one of the study authors. “We thought asking the question might trigger a reaction. Now, we can ask about donor fear, develop mitigation strategies, reduce reaction rates, and enhance retention.”

Citation: France CR, *et al.* How afraid are you of having blood drawn from your arm? A simple fear question predicts vasovagal reactions without causing them among high school blood donors. *Transfusion*. 2013 Feb;53(2):315-21. 

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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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BGA Announces Dissolution Finalized

The dissolution of Blood Group Alliance (BGA) was made final in a vote by Group Services for America's Blood Centers (GSABC) and Blood Centers of America (BCA) in late January, the organizations announced this week.

BGA was officially formed in March 2010 as a cooperative partnership between GSABC and BCA to provide opportunities for collaboration between the two group purchasing organizations (GPOs). However, in early 2012, BCA filed its desire to dissolve BGA.

As outlined by the BGA bylaws, a 4/5th vote by members was required to dissolve the organization, and on Dec. 3, 2012, the members of BGA voted unanimously on a resolution to dissolve BGA. The dissolution also required a final vote by both GSABC and BCA, which occurred in late January, reported Jenny Ficenec, chief operating officer of GSABC.

One outcome of the dissolution was the formation of Plasma, LLC, a new jointly-owned corporation by GSABC and BCA. The new organization will manage recovered agreements for the members of BCA and GSABC. "Although I am disappointed by the dissolution of BGA, I am glad the members of both organizations will continue to receive benefit from our joint efforts in Plasma, LLC," said Jerry Haarmann, president of GSABC. 💧



SAVE THE DATE

America's Blood Centers' Fund Development, Communications and Donor Recruitment Workshop

San Antonio, TX - June 18-21, 2013

Hosted by



**South Texas
Blood & Tissue Center**

Negotiated hotel room rate: \$159 + tax (incl. free internet and fitness center access)
www.hotelvalencia-riverwalk.com

2013 Workshop Schedule

Fund Development topics: June 18-19

Communications topics: June 19-20

Donor Recruitment topics: June 20-21

2013 Workshop Fees (early bird/regular)

2-day registration: \$375/\$425

3-day registration: \$440/\$490

4-day registration: \$490/\$540

Sponsorship opportunities available. Contact Abbey Nunes at anunes@americasblood.org for details.

“South Texas Blood & Tissue Center is proud to support this year's Fund Development, Communications and Donor Recruitment Workshop and is looking forward to welcoming ABC members from across the country to our vibrant city for a week of learning, sharing and networking. We hope to see you there!”

- Carmen Davila
Vice President of Corporate
Communications
South Texas Blood and Tissue Center



San Antonio International Airport (SAT) is served by all major US airlines, including discount carriers Southwest and AirTran. It offers non-stop service to/from 27 major and secondary US airports; check www.sanantonio.gov/aviation for more information.

Q&A with The FABC

The Foundation for America's Blood Centers Answers Your Questions

America's Blood Centers recently conducted its SEQualS assessment, a customer service survey that solicits feedback from member blood centers on ABC's activities. Through this assessment, members were able to pose questions to the ABC and FABC staff. The FABC and each ABC department will respond to these questions through this weekly Q&A column in the Newsletter.

Q: How does the FABC plan on raising funds this year?

A: The FABC has two “anchor” fundraisers that take place annually: the annual gala and *Links for Life* Golf Tournament.

These two events account for a substantial portion of revenue for the FABC. Because blood donation often plays a supporting role in conditions that cause transfusion dependence, we feel that the FABC would likely not be as successful if we hosted a gala alone. Therefore, we partner with a different affinity organization each year to double our chances of success and bring more attention to the role blood plays in a variety of conditions. Our first gala was hosted with the Preeclampsia Foundation in 2011, and last year, we partnered with the Sickle Cell Disease Association of America. Combined, these two event have raised more than \$218,000 for the FABC! This year, we are thrilled to be working with the World Foundation for Hemophilia-USA as our gala partner. The gala will take place in November in Phoenix, Ariz. Stay tuned for more information on how you can get involved.

Our other anchor fundraiser is the *Links for Life Golf Tournament*. We have hosted three golf tournaments to date, and each has been a success, raising a total of nearly \$200,000 for the FABC combined! The golf tournament is hosted by a different blood center each year, which offers the time of its staff and resources in planning the event. The next golf tournament will be hosted by LifeStream and Blood Systems, Inc. in March 2014 in Palm Springs, Calif., in conjunction with the ABC Annual Meeting. The golf tournament offers numerous sponsorship and donation packages for our supporters, but mostly offers an opportunity for our industry supporters and our blood center executives to spend quality time together on the links, while supporting the FABC.

Additionally, we are always brainstorming various ways to raise funds. We do have an annual campaign that takes place online every year, encouraging our past donors to make a year-end donation. This year, we also created an endowment fund to create the Celso Bianco lecture series. And of course, we are always honored when ordinary people who have been affected by blood donation act as ambassadors for the FABC, raising money to show their gratitude for how blood donation changed their lives. One of the goals of the FABC going forward is to increase our outreach to blood donation ambassadors as a significant source of our fundraising income, as these ambassadors already have the most important quality for successful fundraising – a passion for the cause. ♦

Letter to the Editor – A Blood Center Executive’s Trip Down Memory Lane

Dear ABC friends,

It is with mixed emotions that I am writing to you to let you know of my upcoming retirement from LifeServe Blood Center, effective April 11. While I am excited and energized with thoughts of moving into my next phase of life, enjoying my family and friends and indulging in traveling, I am also filled with emotions of leaving my fulfilling career – a career that I have been passionate about and one that has given me immense gratification.

Over the course of my 43 years at the blood center, I have seen a phenomenal amount of change in our industry. I have seen red cell outdates change over the decades, watching them move from 21 days, to 35 days, to 42 days, stretching to 49 days, and back to 42 days! I have seen platelet outdates move from six hours, to 24 hours, to 3 days, to 5 days, to 7 days, and back to 5 days. I remember when whole blood transfusions were the standard of care and watched the movement to component therapy of red cells, frozen plasma, and platelets. I recall the days of using single blood bags to now seeing the variety of options we have to include leukocyte filtration, automation, and collection of double red cells. I remember the AIDS scare and being a part of the evolution of donor testing to impact blood safety, and recall being a part of the implementation of our current standard of testing – nucleic acid testing. Interestingly enough, syphilis testing has remained unchanged over 43 years!

While I take a step back down memory lane, I am reminded why I have remained in this industry for 43 years and why blood banking has been my passion: knowing the impact of what we do everyday helps save lives. I have had the ability to know that I made a difference in the lives of people in my own community and around the country. And most importantly, I have had the ability to meet committed supporters like you throughout my career.

I will miss each of you as I leave an industry that has enriched my life. I will miss seeing you at the Annual Meeting but you will have the opportunity to meet Cheryl Ritter, our chief financial officer.

Thank you for being a part of my journey.

Warm Regards,

Jan Twait
Executive Vice President
LifeServe Blood Center

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 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. ♦

ABC Partners with Nexcare Again for Annual World Blood Donor Day *give* Campaign

Now in its 5th year, Nexcare Bandages from 3M is partnering with America's Blood Centers on "give," an annual initiative focused on World Blood Donor Day to thank recurring blood donors and encourage others to join the cause. This year's program will take place the week of World Blood Donor Day (June 14), beginning on Monday, June 10 and extending through Sunday, June 16.

Through this alliance, Nexcare bandages provides resources to participating ABC donation centers, including a supply of limited-edition Nexcare *give* Bandages for donors and an extensive media relations campaign. Resulting from these efforts, the Nexcare *give* program is featured in national and local magazines, newspapers, and broadcast TV outlets, as well as online and blogs. This media coverage in the weeks leading up to World Blood Donor Day details the program and overall partnership and shares information about the local community blood centers where donors can get involved.



LaForce + Stevens (L+S), Nexcare Brand's agency of record, will work with ABC members to launch a nationwide media campaign publicizing donation awareness and the Nexcare/ABC partnership in print, online, and broadcast outlets. In addition to national outlets, L+S will be working with regional newspapers and broadcast networks to garner publicity on the "give" initiative in cities where there are participating donor centers.

Nexcare Brand has created a new collection for 2013 of limited-edition Nexcare *give* bandages. This year's theme will help remind donors that giving blood is always in season. Inspired by the four seasons (spring, summer, fall, and winter), the collection will encourage donors to display their commitment to blood donation. ABC invites all blood center collections to use the Nexcare *give* bandages on all donors who give blood June 10-June 16, during the week of World Blood Donor Day.

ABC members may direct questions to Abbey Nunes at anunes@americasblood.org. More information is available in MCN 13-042: <http://members.americasblood.org/go.cfm?do=FileCenter.View&fid=4202>. ♦

BRIEFLY NOTED

Results from the Reduction of Events by Darbepoetin Alfa in Heart Failure trial, published in the *New England Journal of Medicine* on March 10, showed that darbepoetin increased hemoglobin levels without improving clinical outcomes in anemic patients with systolic heart failure. This randomized, double-blind trial assigned 2,778 patients with systolic heart failure and mild-to-moderate anemia (hemoglobin level of 9.0 to 12.0 g/dL) to receive darbepoetin alfa, an erythropoiesis-stimulating

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BRIEFLY NOTED (continued from page 6)

agent, or a placebo. The goal was a hemoglobin of 13 g/dL. The primary outcome was a composite of death from any cause or hospitalization for worsening heart failure. No significant improvements in either the primary or outcomes were associated with darbepoetin alfa. The primary endpoint occurred in 50.7 percent of darbepoetin alfa group and 49.5 percent of the placebo group. Strokes occurred in 3.7 percent of the darbepoetin alfa group and 2.7 percent of the placebo group, which was consistent with elevated risk for stroke associated with darbepoetin alfa found in a previous trial of patients with diabetes, chronic kidney disease, and anemia. A similar number of adverse events took place in each group, but a significant excess of embolic and thrombotic events occurred in the darbepoetin alfa group. “Our findings do not support the use of darbepoetin alfa in” patients with systolic heart failure and mild-to-moderate anemia, conclude the authors.

Citation: Swedberg K, *et al.* Treatment of Anemia with Darbepoetin Alfa in Systolic Heart Failure. *N Engl J Med.* 2013 March 10 [Epub ahead of print].

An editorial published in *BMJ* (previously the British Medical Journal) highlights that some media reports last week exaggerated the significance of the recent case of a functional cure of a baby with HIV (see *ABC Newsletter*, 3/8/13). Last week, several media outlets reported how a baby in the US had been treated with antiretrovirals 30 hours after birth, and by 18 months of age, the baby had no detectable virus load. *The New York Times*, among the first to report this case, was careful to explain that the case demonstrates proof of principle if it can be replicated and that many experts are uncertain as to whether the baby had been truly infected, as this may have been a case of prevention of transmission rather than a cure. “Although the article acknowledged potential for excitement, it was also clear that deep uncertainty existed,” writes Margaret McCartney, MD, in the *BMJ* editorial. She noted that many of the UK media did not take this approach, often exaggerating the impact of this case and calling it a “cure.” This case has not been published in a peer-reviewed journal, but rather was presented at the 20th Conference on Retroviruses and Opportunistic Infections. “Publicizing conference presentations can have problems,” writes Dr. McCartney. “The abstract had not been peer-reviewed and was presented after the press release. The press release did not spell out the inherent uncertainties in the meaning of this case report. It was left to doctors not involved in the case, including many interviewed by *The New York Times*, and journalists to unpick the details and ask harder questions .” She explains that the risk of hype is even greater in cases like this when unchecked enthusiasm seeks coverage before publication.

Citation: McCartney M. Hype and the HIV cure. *BMJ.* 2013 March 11;346:f1599.

An article published in the February issue of *Transfusion* provides some insight into current US cord blood banking practices in terms of recruitment, donation, and the timing of consent. Cord blood has moved rapidly from an experimental stem cell source to an accepted and important source of hematopoietic stem cells over the last several years. This report, published by Sherri Broder, PhD, and colleagues, provides a comprehensive assessment of US public cord blood banking practices, which has not been conducted since a 2005 Institute of Medicine study. Of 34 public cord blood banks identified, 16 participated in the researchers’ qualitative survey of public cord blood banking practices. Respondents participated in telephone interviews in which they were asked structured and open-ended questions regarding the recruitment, donation, and the informed consent process at these banks. Thirteen of 16 participants reported a variably high percentage of women who consented to public cord blood donation. Fifteen banks offered donor registration at the time of hospital admission for labor and delivery. Seven obtained full informed consent and medical history during early labor and eight conducted some form of phased consent and/or phased medical screening and history. Nine participants identified initial selection

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BRIEFLY NOTED (continued from page 7)

of the collection site location as the chief mode by which they recruited minority donors. Since 2005, more public banks offer cord blood donor registration at the time of admission for labor and delivery, reported the authors. Currently, the ability to collect and process donations, rather than donor willingness, is the major barrier to public cord blood banking, the authors conclude.

Citation: Broder SM, *et al.* US public cord blood banking practices: recruitment, donation, and the timing of consent. *Transfusion*. 2013 March;53(3):679-87. ♦

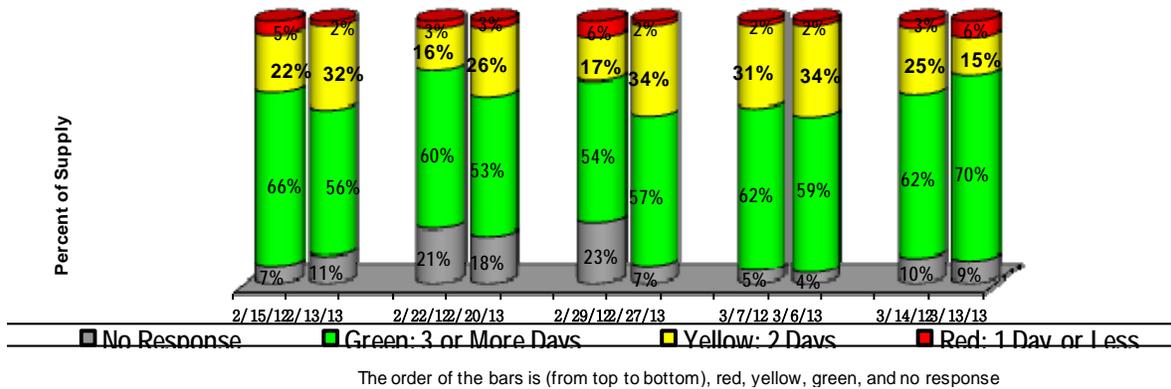
GLOBAL NEWS

Ontario health officials are raising concerns about new clinics that would pay people to provide plasma, saying Health Canada should delay any approvals until it has consulted the provinces and other groups, reported The Canadian Press on March 11. “The prospect of three paid-donor blood plasma clinics being set up in the province is a cause for concern,” Ontario Health Minister Deb Matthews said Monday in a letter to Canadian Health Minister Leona Aglukkaq. It “would be irresponsible to allow a shift towards a paid-donor system without first determining how it could impact the supply of blood and blood products. I think we owe it to Ontarians and Canadians to have that discussion before any approvals are granted,” wrote Ms. Matthews. Ms. Aglukkaq said that Health Canada will consult the provinces before granting any approvals. She noted in a statement that Canada has one of the safest blood systems in the world and that she has instructed Health Canada to seek the views of individuals and organizations who are interested in this issue. Winnipeg, Canada-based drug maker Cangene, which has been operating for decades, is authorized to pay donors for blood plasma, which is used in its products. Canadian Plasma Resources, which lists three plasma-donor clinics in Toronto and Hamilton on its website, requires Health Canada approval before it can open its doors. “While the possible introduction of paid plasma donation for fractionation is an important discussion for Canadians to have, it is the view of Canadian Blood Services (CBS) that payment of plasma donors in parallel with current fractionation industry safety practices does not present a safety risk to the fractionated plasma products available to Canadian patients,” said Dana Devine, CBS’s vice president of Medical, Scientific, & Research Affairs. “Importantly, CBS remains committed to operating a voluntary non-remunerated blood system for cellular products and transfusion plasma, as well as the plasma that we collect for fractionation.” (Source: The Canadian Press, 3/11/13) ♦

INFECTIOUS DISEASE UPDATE**NOVEL CORONAVIRUS**

In the March 7 *Morbidity and Mortality Weekly Report* (MMWR), the Centers for Disease Control and Prevention provided an update on severe respiratory illness associated with a novel coronavirus. In light of apparent human-to-human transmission of the novel coronavirus, CDC has defined patients for whom consideration should be given for testing and will make testing available, according to the MMWR. As of March 7, a total of 14 confirmed cases of novel coronavirus infection had been reported to the World Health Organization, with eight deaths. To date, no cases have been reported in the US. There remains no suggestion of transfusion transmission. The MMWR is available at <http://1.usa.gov/XVBsH6>. (Source: CDC MMWR, 3/7/13) ♦

STOPLIGHT®: Status of the ABC Blood Supply, 2012 vs. 2013



MEMBER NEWS

In conjunction with National Cancer Prevention Month, the Illinois Coalition of Community Blood Centers (ICCBC) joined forces with the American Cancer Society to raise awareness of the impact volunteers can make on cancer treatments and prevention. The ICCBC includes several Illinois-based

blood centers, all of whom are America’s Blood Centers members. During a press conference held about a week ago at the Capitol, Illinois blood centers and the American Cancer Society explained the important role that platelet donors play in a cancer patient’s recovery, as many patients require platelet transfusions during chemotherapy treatments. “When a patient undergoes chemotherapy or radiotherapy to treat cancer such as leukemia, that treatment can suppress the patient’s bone marrow where blood cells are produced. Until the bone marrow recovers, the patient will be at risk of severe bleeding due to a lack of platelets, which are responsible for blood clotting in the bloodstream. The recovery period may take several weeks,” explained Meghna Desai, MD, who practices as a hematologist/oncologist with the Simmons Cancer Institute and Southern Illinois University School of Medicine.



Representatives of the Illinois Coalition of Community Blood Centers, Illinois legislators, and the American Cancer Society join together at a press conference to raise awareness of the importance of volunteer platelet donors for cancer patients undergoing treatment.

Ann McKanna, president of the ICCBC, explained the apheresis process by which platelets are collected. Illinois State Representative Marcus Evans (D-Chicago) spoke about the personal importance of raising awareness about the need for platelet donors as he is a cancer survivor. “I thank the American Cancer Society and the Illinois Coalition of Community Blood Centers for teaming up to help improve the lives of our friends, family, and neighbors,” he said. (Source: ICCBC press release, 3/11/13)

Community Blood Center of the Carolinas (CBCC) recently hosted its 10th Anniversary Celebration and Awards Banquet, where it honored its top blood drive donors and sponsors from 2012. More than 200 people joined in the event that was emceed by Larry Sprinkle of WCNC Charlotte and took place at Roof With A View in Charlotte, N.C. The event



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MEMBER NEWS (continued from page 9)

recognized various sponsors that have supported CBCC and local patients. “In celebration of our 10th anniversary, we commemorate our blood donors and sponsors whose vision, dedication, and hard work laid the foundation in providing stewardship of our community’s blood supply to serve the patients whose lives depend on it,” said CBCC President and CEO Martin Grable, who received a Visionary Award during the event for his dedication and leadership. “We appreciate the efforts of everyone joining together to save more than 300,000 local lives over the past decade. We look forward to partnering with the communities we serve, saving even more lives over the next 10 years.” (CBCC press release, 3/11/13) ♦

PEOPLE

Jan Twait, past CEO of Siouxland Community Blood Bank (SCBB) and current executive vice president of Business Development with LifeServe Blood Center will retire from her position on April 11, after serving more than 43 years at the blood center. Ms. Twait has overseen decades of growth and expansion in providing blood and blood products to local hospitals in the Siouxland area, said the LifeServe press release. Under her leadership, the former SCBB grew from supporting 12 area hospitals to 37 hospitals throughout the region. In 2010, Ms. Twait led efforts to merge SCBB with The Blood Center of Iowa (headquartered in Des Moines) to form LifeServe Blood Center. Over the course of her career, Ms. Twait has served on several national blood banking committees and boards. She has also been active in local community committees and/or boards and is currently serving as secretary for the Mercy Medical Center Foundation board in Sioux City, Iowa. Ms. Twait said she is stepping down to pursue other interests and spend time with her family and grandchildren. “I have loved my time with SCBB and now LifeServe Blood Center. I am very proud of the thriving organization I am leaving, particularly the impressive improvements we’ve made in our operations to allow us to provide live-saving blood and blood products to millions of patients across Iowa, South Dakota, and Nebraska. As I look into my 43-year career in this field, I am extremely proud of the difference I have been able to make in the community.” LifeServe Blood Center has engaged a consultant to assist in its search for a candidate to assume Ms. Twait’s position. (Source: LifeServe Blood Center press release, 3/12/13)



Ed Lawson was recently named The Blood Alliance’s new chief operating officer, the center announced in a March 11 press release. Mr. Lawson succeeds Valerie Collins who was promoted to president and CEO in September 2012. Mr. Lawson began his blood banking career in 1974 as the telerecruitment manager for Richmond Metropolitan Blood Services, which would eventually become Virginia Blood Services (VBS). Within two years, he became the center’s director of Donor Services. Mr. Lawson has a history with The Blood Alliance, having worked as its director of Donor Resources in 2005. He then moved on to work with the Central Pennsylvania Blood Bank in 2006, and most recently returned to VBS as its operations director in 2012. “Ed has a real appreciation for data, meeting goals, and consistently exceeding budgeted collection goals with minimal staff turnover,” said Ms. Collins. “He also has the ability to generate significant increases in bloodmobile collections.” Mr. Lawson’s more than 35-year career has given him experience in field sales, the call center, donor recruitment, marketing, collections, administrative services, and facilities management. He has served on the board of the Association of Donor Recruitment Professionals. (Source: The Blood Alliance press release, 3/11/13) ♦



MEETINGS

April 17 **FDA Cellular, Tissue, and Gene Therapies Advisory Committee Meeting, Rockville, Md.**

The Food and Drug Administration has announced a meeting of the Cellular, Tissue, and Gene Therapies Advisory Committee on April 17 from 1:30 p.m. to 5 p.m. The meeting will be held in Rockville, Md., by teleconference. The committee will meet to hear updates of research programs in the Laboratory of Chemistry, Division of Therapeutic Proteins, office of Biotechnology Products, Center for Drug Evaluation and Research, FDA. Background materials will be made available at www.fda.gov/AdvisoryCommittees/default.htm. The Federal Register meeting announcement is available at <http://1.usa.gov/14XQr4e>.

June 27-29 **Immune Deficiency Foundation 2013 National Conference, Baltimore, Md.**

The Immune Deficiency Foundation will hold its 2013 National Convention in Baltimore, Md., from June 27-29. This convention brings together the primary immunodeficiency community for three days of learning, discussion, and sharing. Attendees will learn about advancements in the diagnosis and treatments of immune deficiencies and gain skills needed to manage their healthcare. Patients and families will have the opportunity to meet other families and talk with sponsors in the interactive exhibit hall. More information and online registration can be accessed at <http://idfnationalconference.org/>. ♦

Corrections

Last week, the *ABC Newsletter* published an article on page 4 titled “Philippe Vandekerckhove, MD, PhD, Elected Next EBA President,” which contained two errors. We misspelled “Philippe Vandekerckhove” in the headline. Also, we incorrectly stated that the Global Advisory Panel (GAP) on Corporate Governance and Risk Management of Blood Services in Red Cross and Red Crescent Societies is part of the World Health Organization. GAP is actually a committee of the Red Cross Blood Establishments. We apologize for these errors and thank our readers who bring such issues to our attention.

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. 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: mnorwood@americasblood.org.

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EQUIPMENT AVAILABLE:

For Sale. TANGO@optimo Automated Blood Bank Analyzer – purchased from Bio-Rad in August 2011. Only used for antibody screen testing from Jan. 3, 2012 – Nov. 25, 2012. Less than 100,000 tests performed. To make an offer, please contact Bobby Merrill at (859) 519-3763 or bmerrill@kybloodcenter.org.

For Sale. Abbott Prism. Purchased new from Abbott and used two to three days per week by a small blood center. In excellent condition. Contact Janet Howard with Western Kentucky Regional Blood Center at (270) 684-9296 or janet@wkrbc.org.

POSITIONS AVAILABLE:

Chief Medical Officer/Vice President Medical Affairs. The medical director shall actively participate in the operations of The Blood Connection (TBC) and be available at such times and to such extent as is necessary to assure that the medical, technical, and scientific activities of TBC comply with regulations and standards that are applicable to such activities of TBC. Education: Graduation from a school of medicine accredited by the Association of American Medical Colleges or the American Association of Colleges of Osteopathic Medicine or the foreign equivalent of same. Satisfactory completion of AOA or AMA approved residency program. Licensure: Have passed the United States Medical Licensing Examination (USMLE) or the Comprehensive Osteopathic Medical Licensing Examination (COMLEX). The MD shall at all times maintain a South Carolina, North Carolina and Georgia Doctor of Medicine or Doctor of Osteopathic Medicine license. Although board certification or eligibility in transfusion medicine is preferred, other acceptable certifications include but are not limited to clinical pathology, infectious diseases, emergency medicine, oncology, hematology, and immunology. Experience in a blood center or transfusion service desirable. Send your resume to: pgarrett@thebloodconnection.org or The Blood Connection, 1099 Bracken Road Piedmont, SC 29673. **Closing Date: 3/30/2013.** Employee Drug Testing Required. EOE M/F/D/V. Fax: (864) 271-4437

Director, Scientific Affairs. Fenwal, Inc., a Fresenius Kabi company, is a medical technology company focused on improving transfusion medicine through unique expertise in blood separation, collection, filtration, storage, and transfusion. Fenwal employs approximately 5,000 people worldwide, and operates five manufacturing centers. We have an opportunity for a director, Scientific Affairs who will be responsible for building strong relationships between Fenwal and the transfusion medicine, therapeutic apheresis and cell therapy communities, and developing and leading various scientific advisory boards. Will act as the scientific liaison between customers, regulatory agencies and Fenwal, and assist the Fenwal commercial team in understanding and discussing clinical concepts with customers. Requires: PhD and an established and recognized track record in the transfusion medicine industry/health sciences; in-depth scientific and therapeutic

knowledge within transfusion medicine and cellular therapy areas. Please visit: www.fenwalinc.com for more information and to apply to job #547. Fenwal is an Equal Opportunity Employer.

Assistant Medical Director. LifeStream, a \$53M healthcare organization providing blood services to more than 80 hospitals in Southern California, is searching for an assistant medical director. This position provides leadership and direction for the medical programs needed to support all laboratories, product management, hospital relations, donor collections, donor counseling, national marrow donor activities, and quality departments. Requirements: medical degree and board certification by a board registry recognized by the American Board of Medical Specialties. Meet eligibility requirements to obtain appointments to the medical staff of hospitals served by the center. Completion of primary medical internship and residency with minimum one year medical practice (transfusion medicine) or fellowship preferred. Valid license (or eligibility) to practice medicine in the state of California. Must be available to work on-call two weeks per month. Must pass pre-employment background check, drug screen, and physical exam. Apply online: www.LStream.org. LifeStream is an Equal Opportunity Employer, M/F/D/V.

Cord Blood Laboratory Manager. The Puget Sound Blood Center is seeking an experienced leader to manage our laboratory operations and oversee the development and coordination of protocols and procedures. The manager is responsible for quality control, technical audits, and developing strategies for implementing new methodology, products, and services. This opportunity involves interaction with other medical organizations and supervision of laboratory personnel. The requirements for this position include: baccalaureate degree in medical technology or equivalent certification, two years' experience in cellular therapy, or related, two years' experience at the manager level; outstanding communication skills, knowledge cellular therapy standards, including cGMP and cGTP; familiarity with QA, cryopreservation, microbiology, sterile technique, and safe handling of potentially infectious

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POSITIONS (continued from page 12)

human blood/tissues. To apply, send application materials via email HumanResources@psbc.org or fax (866) 286-8495 with reference number 6917. Should you have a disability that requires assistance and/or reasonable accommodation with the application process, contact the HR department at humanresources@psbc.org, or at (206) 292-6500, or at 921 Terry Avenue, Seattle, WA 98104. Puget Sound Blood Center is an Affirmative Action / Equal Opportunity Employer.

Quality Assurance Regulatory Affairs Manager (Lifeblood, Memphis, Tenn.). The QA regulatory affairs manager works under the supervision of the director of QA and the vice president, QA. Responsibilities include: review of procedures, processes, and validation documentation to assure that current practices meet or exceed regulatory guidelines and industry standards, hosting external auditors/inspectors to include

preparation of audit reports and response to audit findings as needed, performing internal audits, as assigned, assisting with management of licenses and certificates, reviewing/completing error reports and corrective/preventative actions, as assigned, managing staff. Minimum qualifications include: Bachelor of Science in related field or associate degree with commensurate experience, at least five years of management experience required, at least five years blood banking experience and/or operations in regulated industry, regulatory experience required, working knowledge of regulatory and accreditation standards including FDA, OSHA, and CLIA, and previous auditing and/or technical writing experience preferred. For more information or to apply, please visit <http://lifeblood.iapplicants.com/>. ♦