



# ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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May 3, 2013

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**M&A BOOTS Workshop Equips Participants for Consolidation**

About 15 mergers or other alliances have been formed among America's Blood Centers' members since 2010, and a recent blood center workshop suggested that consolidation activity in the blood community is far from over.

“Given the dramatic transformation underway in several sectors of the American healthcare industry and the consolidation occurring among providers, it’s only natural that this activity will spread to all vendors,” said Patrick Hogle, senior partner at ProGuide Management Resources. “Our opinion, based on confidential queries of blood community leaders, is that this activity will intensify substantially over the next few years as the market bottoms out. There will be considerably fewer independent operations 5-10 years from now as the marketplace naturally seeks to optimize. That’s why we need to have this conversation now – openly and seriously – addressing the elephant in the room.”

The Blood Operations Optimization Training Session (BOOTS) about mergers and acquisitions (M&A), held April 23 to 24 in Orlando, Fla., suggested that as the blood centers’ hospital customers continue undergoing consolidation, constantly demanding higher quality service at a lower cost, blood centers will likely see more M&A of their own.

The M&A BOOTS workshop had the highest attendance of the eight BOOTS workshops held this year, with nearly 40 blood center leaders participating. The BOOTS course featured numerous presentations to help blood center leaders better understand and prepare for continued M&A activity, while also showing that mergers of equals, acquisitions, alliances, and affiliations are normal developments in any industry as it matures.

In addition, the BOOTS workshop offered a unique opportunity for all types of leaders from the blood community and blood-related device manufacturers to partake in an interactive and open discussion about how the healthcare market is changing and what impact this will have on blood centers. Executives from ABC’s member blood centers were able to share their predictions for the future, as well as their successes achieved and obstacles faced throughout the formation

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## OUR SPACE

ABC President Dave Green

### On Being Obsessively Data Driven

When I wrote my first “Our Space” column several weeks ago, I shared a draft with my confidant and former medical director, Dr. Louis Katz. His feedback was predictably direct: “I dislike passive voice and it seems quite fluffy.” Although I agreed with his feedback, I approved the draft, believing my first piece should be a bit ...well, fluffy. I hope he appreciates the more direct approach this week.

Susan Rossmann, MD, vice president of the ABC board of directors, recently shared a great book with me titled *7 Measures of Success: What Remarkable Associations Do That Others Don't*. Inspired by noted leadership author, Jim Collins, the book identifies seven critical characteristics that differentiate the best associations, grouping them into three main areas: (1) commitment to purpose; (2) commitment to analysis and feedback; and (3) commitment to action. Inherent in all of these traits is the need to be “obsessively data-driven.” In his last column, ABC Interim CEO Bill Coenen referenced ABC’s refocusing on its strengths and, in particular, our need for data-driven decision making. I couldn’t agree more and am heartened by the ABC staff’s recent efforts to achieve this goal through the Data Warehouse; it is a long time coming and I look forward to the system being fully operational by the Interim Meeting in August.

ABC’s legislative agenda relies heavily upon readily available and reliable data. Similarly, our influence in national blood-related policy discussions requires us to reinforce position statements with supporting data. Our ability to examine blended operations data can also inform the membership on how we should work together to enhance our blood centers’ ability to thrive. Even in the case of delivering valuable services and programs to the membership, robust data are important for objectively measuring program effectiveness and communicating that value.

In order to deliver on these capabilities with a fully operational Data Warehouse, we need the following: (1) a system assuring the integrity and protection of data; (2) a defined process for how data will be accessed to inform decision making; and (3) agreement from members to report their data. ABC must incorporate the first two requirements into the Data Warehouse rollout, but it is obviously up to you, the members, to commit to the last element.

I am eager to see the insights we will gain from our data-driven focus and the resulting value we can deliver on behalf of the membership.

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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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### M&A in Blood Banking (continued from page 1)

of different types of partnerships, including alliances, mergers, and acquisitions. few years. Our opinion, based on confidential queries of blood community leaders, is that this activity will intensify substantially over the next few years as the market bottoms out. There will be considerably fewer independent operations 5-10 years from now as the marketplace naturally seeks to optimize. That's why we need to have this conversation now – openly and seriously – addressing the elephant in the room.”

**M&A: A Valuable Option in a Changing Environment.** With this theme in mind, participants heard presentations on and discussed the M&A process, what triggers make M&A activity attractive, and what qualities to look for when seeking a partner. Many triggers leading to blood center mergers are caused by changes in the healthcare environment. With hospitals undergoing consolidation, they are seeking blood centers that can meet the needs of large regional or national healthcare systems, rather blood centers that can serve just a few local hospitals.

Furthermore, the erosion of reimbursements to hospitals and billions of dollars of Medicare funding have resulted in cuts to hospital revenue, causing hospitals to look for cost savings – including blood product costs. These shifts have caused proximity and long-term relationships to the hospitals to become less important, and many hospitals are now seeking extended transfusion services to help with blood management in order to cut blood use. Blood centers have thus seen a decline in blood usage over the past couple of years.

All of these changes within healthcare have led blood centers to seek partnerships due to their desire to increase services offered to hospitals to overcome challenges related to the safety, availability, and cost of blood, as well as continuing to improve processes, increase productivity, and raise quality, while continuing to maintain or build a strong financial foundation, according to a presentation at the recent BOOTS workshop by Dan Connor, president and CEO of Blood Systems.

While M&A is an important option for blood bankers to consider, BOOTS attendees did not learn just about acquisitions, but also considered the possibility of forming alliances and affiliations as potential steps to improve performance and survive in the ever-changing healthcare environment. Other collaborative efforts were discussed aside from mergers and acquisitions, such as joint testing laboratories like Creative Testing Solutions, and blood center alliances like the Alliance for Community Transfusion Services (ACTS), which includes nine blood centers serving Arkansas, Kansas, Louisiana, Missouri, Oklahoma, and Texas.

**Getting Started and Choosing a Partner.** Mr. Connor and other speakers also elaborated on finding the “perfect” partner to form an alliance or merger. Some noted important qualities in a partner are:

- A similar culture and values, and a commitment to “make it work;”
- Experienced, competent leadership team that is open to change;
- Strong quality emphasis, process improvement orientation, belief in “doing the right thing,” and positive reputation;
- Experienced/core competency in areas currently lacking by the center seeking a partner;
- Sufficient size to make a difference;
- Ample financial resources;
- Community support; and
- Logical geography.

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M&A in Blood Banking (continued from page 3)

The speakers also discussed how to conduct due diligence exercises when engaging in M&A activity, highlighting the importance of focusing on the essentials and avoiding getting bogged down in minute details, as well as how vital planning is at all stages of the process. More than 90 percent of hoped-for acquisitions never make it out of the due diligence phase, generally resulting from poor communication, inadequate planning, or unrealistic expectations.

**Insight from Experts.** One way for blood center leaders to prepare for future consolidation is to learn from their peers who have gone through the M&A experience, an opportunity that BOOTS offered its attendees. Jim Covert, president and CEO of the Institute for Transfusion Medicine (ITxM) talked about why his organization has chosen an acquisition strategy, and specifically focused on the recent acquisition of Virginia Blood Services (VBS). He walked the audience through the initial contact, due diligence process, obstacles and pitfalls that were overcome, and the successful acquisition. He also shared experiences in previous deals he made in an M&A role held before joining ITxM.

Robert Carden, MBA, PhD, CEO of the Virginia Blood Foundation and former CEO of VBS, provided his viewpoint on the merger with ITxM, discussing why VBS pursued this strategy and how the process played out. “I couldn’t be happier with the way this turned out,” said Mr. Carden. “It was the right time, right partner, and right deal.”

Dennis Mestrich, president and CEO of Heartland Blood Centers, and Maureen Kwiecinski, vice president of corporate counsel for the BloodCenter of Wisconsin, discussed their alliance that led to the creation of the Centers for Transfusion & Transplant Medicine (CTTM). By forming and becoming affiliates of CTTM, these two blood centers have expanded their size and scale to leverage services and reach new healthcare markets, and created substantial economic efficiencies through full integration and cost reduction. The speakers touched on how such an entity can be created from governance, legal, and organizational standpoints.

Bobby Grigsby, executive vice president of Strategic Alliances at Carter BloodCare, talked about the 1998 merger of Carter Blood Center with Blood Care, as well as the formation of ACTS. He discussed some roadblocks, such as getting the board of directors on the same page and fear of a costly merger, and how these were overcome. He also discussed the formation and benefits of ACTS, which was founded in 2010 by Carter BloodCare, The Blood and Tissue Center of Central Texas, Coastal Bend Blood Center, and South Texas Blood & Tissue Center. ACTS members enjoy the economic benefits typically associated with large centralized operations, but without sacrificing the qualitative benefits of independent community blood banking. Mr. Grigsby discussed the synergy the organization expects to achieve and how he sees it developing over time with its current nine members.

David Perez, president and CEO of Terumo BCT, provided the for-profit experience on acquisitions, detailing two takeovers since 2007 – once by Swedish private equity and now by a Japanese publically traded company. Mr. Perez shared valuable insights about his methodology that has enabled the successful integration of CaridianBCT and Terumo, organizations with vastly different cultures.

Offering ample M&A experience, Dan Connor presented his organization’s active acquisition strategy over the past two decades, discussing the nearly two dozen deals they have made as buyers, sellers, and partners. Beginning his talk titled “The Urge to Merge,” Mr. Connor highlighted the need for change in the blood industry, driven by decreasing demand for blood, increasing competition, hospital expectations to lower operating costs, and need to maintain reasonable financial position. Hospitals are also placing

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M&A in Blood Banking (continued from page 4)

higher value on blood centers that can help lower acquisition costs and assist in blood management. He explained that merger activity can help blood centers by achieving economies of scale, increasing expertise in different operational and support areas, increasing financial resources, providing ability to compare performance and adopt best practices, offering the ability to pilot new products/ideas, and most importantly, surviving in a competitive environment.

“The operating environment for community blood centers is undergoing fundamental changes unlike anything I’ve seen in my 40 years in blood banking. The forces that have brought about these changes will continue to impact all of us for the foreseeable future and certainly at least over the next five years,” said Mr. Connor. “While the pace of consolidation has been slow, it will pick up considerably, just as it has for our suppliers and our hospital customers. As it accelerates, the informed leaders will realize the benefits of negotiating from a position of strength, rather than waiting and acting out of desperation. It is a fundamental duty of CEOs to ensure that their governing boards have a thorough understanding of the current environment, challenges, and opportunities and to provide the leadership with a sense of importance and urgency to take responsible actions.”

**Are You a Buyer or a Seller?** Many blood center leaders likely realize the value of M&A activities, but it is not always clear whether the center should approach these deals as a “buyer” or a “seller.” Participants at the BOOTS workshop provided their insights into what factors make both buying and selling attractive. Some responses to the question “Why sell?” included:

- Good timing;
- Beat others to the mark – better opportunities as a “fast adaptor;”
- Erosion in marketplace (loss of key customer, general economics, poor demographics);
- Increased cost pressures eroding margins;
- Unsustainable business model;
- Improved community service;
- Financial rewards for blood center/management team; and
- Catastrophic event (loss of contract, regulator concern, weather event).

Responses to the question “Why buy?” included:

- Meet strategic goals more expeditiously;
- Expand footprint and gain new markets;
- Achieve greater mass and healthier economies of scale;
- Complement existing product/services portfolio with new business streams;
- Dilute fixed costs across greater collected volume;
- Acquire additional talent for succession planning;
- Reduce unnecessary capacity in the overall marketplace;
- Beat others to the punch;
- Reduce imports and meet demand needs; and
- Increase the “top line” to enhance cash flow.

“This conference helped us with defining the (merger/acquisition) process and what’s needed to assess opportunities for partnering as both a ‘buyer’ and a ‘seller’ in the process,” said Bryan Krueger, president and CEO of Bonfils Blood Center. “[The main message of the workshop was] the consolidation that’s

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### M&A in Blood Banking (continued from page 5)

been occurring over the last few years is likely to pick up as the ‘perfect storm’ of environmental factors comes into play: declining utilization, declining pricing, and excess capacity.”

Although participants did not take back BOOTS-related assignments to their respective blood centers as with previous BOOTS workshops, attendees were asked to begin a “pitch book” upon returning to their blood centers. This resource would include key components of the blood center’s history, mission, vision, financials, performance, and strategy, and would be readily available to swap with interested parties seeking partnerships.

“The workshop provided further insights to the trends within blood banking and the likelihood that consolidation has and will continue to occur,” said Mr. Krueger. “It further prepared me to take on the challenges ahead.”

Joseph A. Yelo, MBA, MT(ASCP) SBB, vice president of administration and risk manager at Miller-Keystone Blood center added, “The [BOOTS] program was well organized and the M&A topic was well defined by ProGuide. Blood banking leaders gave presentations defining the distinction between mergers, acquisitions, affiliations, and alliances. The speakers also described how these partnerships evolved through various pathways for their organizations and their partner blood centers. Throughout these discussions, it became very clear that M&A will continue to occur in blood banking over the next several years.”

BOOTS is hosted by America’s Blood Centers, ProGuide Management Resources, and Blood Centers of America (BCA); it is sponsored by Terumo BCT. The agenda for other BOOTS workshops is available at [http://bit.ly/BOOTS\\_Agenda](http://bit.ly/BOOTS_Agenda). Registration can be accessed online at <http://www.event.com/d/1cqxb5/1Q>.



### **ABC Seeks New CEO**

America’s Blood Centers, the largest network of non-profit community blood programs in North America, seeks a Chief Executive Officer to ensure the execution of the organization’s mission and vision. Under the general direction of the President and Board of Directors, the CEO takes active and personal charge of the conduct of all America’s Blood Centers’ business, finances, and its employees. Working with the volunteer leadership, the CEO is responsible for the development of achievable organizational goals and objectives. Working with staff and volunteer committees, the CEO is responsible for turning those goals and objectives into effective programs and projects. He/she assures the prompt and effective implementation of policies, programs, and plans approved by the Board of Directors. Applicants must have 3 years experience in the not-for-profit environment and 10-plus years experience in senior management, with a preference of at least 5 in blood banking. Experience in national organizations is also highly desirable as well as an advanced degree in science, business, or the healthcare field. Excellent skills required in: business and financial management and decision making; written and oral communications; project and strategic planning, development and implementation; team leadership; issues management; and legislative advocacy and public policy analysis. Working knowledge of Microsoft Office Suite (i.e., Outlook, Word, Excel, Access) and Internet essential. Must be willing and able to travel, sometimes at short notice. Must live in the Washington, D.C. metropolitan area or willing to relocate. Excellent benefits package. To view full list of description of duties and responsibilities, visit <http://members.americasblood.org/go.cfm?do=FileCenter.Get&fid=4248>. To apply, send cover letter, résumé and salary history and expectations to America’s Blood Centers, reference: CEO Search, to [hr@americasblood.org](mailto:hr@americasblood.org) by May 31, 2013.

## The FABC to Hold Joint Gala with World Federation of Hemophilia-USA

This week, the Foundation for America's Blood Centers (FABC) announced a partnership with the World Federation of Hemophilia-USA (WFH-USA) for a joint fundraising gala on Nov. 14 at the Arizona Biltmore Hotel in Phoenix, Ariz. The gala will raise money and awareness to support the life-saving work that FABC and the WFH-USA do on behalf of those with bleeding disorders who rely on blood transfusions.



This is the third joint annual fundraising gala that the FABC has hosted with another organization that also works on blood- and transfusion-related initiatives. The previous two galas have raised more than \$200,000 to benefit the programs funded by the FABC. Last year's gala was held on Sept. 27 with the Sickle Cell Disease Association of America in Baltimore, Md. (see *ABC Newsletter*, 10/5/12).



The WFH improves and sustains care for people with inherited bleeding disorders around the world, making the organization a good fit to partner with the FABC, which aims to fund initiatives that improve the availability, quality, and safety of blood and related products to save, extend, or enhance the lives of patients.

“Patients with coagulation problems need blood and blood products to improve and sustain their quality of life. Thus, blood centers are a cornerstone in the treatment of hemophilia,” said FABC Board Chair Francine Décarý, MD, PhD. “The FABC is looking forward to holding a gala with the WFH, an organization with a mission that complements our own.”



A view of the lawn at the Arizona Biltmore Hotel

WFH President Mark Skinner notes that blood centers are necessary to provide the blood and plasma essential for the treatment of those living with bleeding disorders around the world, and that more than 60 percent of the plasma used globally comes from the US.

“This event is an opportunity for the US bleeding disorders and blood center communities to reconnect, recognize our common history, and reengage together to ensure the continued safety and supply of blood and blood products,” said Mr. Skinner. “Recently WFH and ABC have celebrated 50<sup>th</sup> anniversaries. Blood collectors and patients with bleeding disorders have a shared history and a common future.”

The gala promises to be a night to remember in the elegant setting of the Biltmore Hotel. Guests will enjoy music, food, a silent auction, and a chance to network with leaders from the blood and hemophilia community. They will also hear from inspiring and entertaining speakers and have a chance to soar up 100 feet in a tethered hot air balloon for a bird's eye view of the area. The Arizona Biltmore is a luxury resort that includes 39 acres of gardens, swimming pools, iconic architecture, a golf course, a 22,000 square-foot spa and fitness center, multiple restaurants, and a variety of amenities.

The FABC and the WFH will offer guests of the gala a limited number of reduced-rate rooms for \$229 per night, which will be available three days before and after the event. The FABC and WFH-USA will

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FABC and WFH Joint Gala (continued from page 7)

also be hosting a raffle for a chance to win an all expenses-paid trip to the event, including airfare, one night of lodging, and a VIP ticket to the gala.

More details about the gala and registration information will be coming shortly. Anyone interested in assisting in planning the gala or donating an item for the silent auction can contact the FABC's director of development, Jodi Zand, at [jzand@americasblood.org](mailto:jzand@americasblood.org) ♡

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## **Q&A with ABC's *Meetings Department*** **America's Blood Centers' Staff Answers your Questions**

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*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 staff. Each ABC department will respond to these questions through this weekly Q&A column in the Newsletter.*

**Q:** In addition to supporting blood center leadership, what educational resources does ABC have available to help blood center staff?

**A:** America's Blood Centers' mission is to help member blood centers serve their communities. In striving to achieve this mission, we provide a variety of resources, tools, and educational and networking opportunities to help blood center staff do their jobs. Let's take a brief look into some of the offerings provided:

- **Workshops and Meetings** – One of the valuable resources ABC offers its membership is the opportunity to learn and network with peers and leaders through ABC meetings and specialty workshops. Specialty Workshops that occur on an annual or biannual basis include: Fund Development, Communications, and Donor Management; Financial Management; Human Resources & Training/Development; Medical Directors; Technical/Lab Directors and Quality; IT; and Supply Chain.
- **Listservs** – In addition to receiving information from ABC, members have the opportunity to communicate with each other by signing up on the Listserv related to their discipline. A listserv is a fast and easy way to begin a discussion thread, ask questions to the group, and find out the latest on issues that affect your daily work directly from your peers.
- **Webinars** – With budgets tight, we understand that it is not always feasible to attend industry workshops and meetings. We also understand that our membership highly values educational and networking opportunities. Therefore each ABC department holds free educational webinars throughout the year (monthly, bimonthly, and quarterly depending on department). These webinars are a great opportunity to brush up on current issues, while never leaving the comfort of your blood center!
- **Members' Website** – The members' only website is a "one-stop shop" for resources, documents, files, and information frequently requested and utilized by ABC members. Organized by ABC departments, projects or blood center disciplines, the site also contains a collection of tools to assist ABC members in their daily activities.

For more information about educational opportunities, please contact Abbey Nunes at [anunes@americasblood.org](mailto:anunes@americasblood.org). ♡



# SAVE THE DATE

## America's Blood Centers' Interim Meeting and Medical Directors Workshop

August 3-5, 2013 – Milwaukee, WI

Hosted by



**Negotiated hotel room rate: \$160 + tax**  
[www.intercontinentalmilwaukee.com](http://www.intercontinentalmilwaukee.com)

### 2013 Interim Meeting Schedule and Fees

Medical Directors Workshop and Interim Meeting: Aug 3-5 (\$695)

Interim Meeting: Aug 4-5 (\$595)

Medical Directors Workshop and SMT Forum: Aug 3-4 (\$425)

Medical Directors Workshop: Aug 3 (\$395)

Plasma LLC Summit: Aug 6 (TBD; this event and additional events hosted by BCA and BCx are by invitation only)

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

There are four (4) \$800 scholarships available to ABC members to cover the cost of registration fees and help with travel expenses for the Medical Directors Workshop. The application form and details will be made available once registration opens in May.

“We hope your summer plans will include a visit to Milwaukee to participate with your colleagues across the country in the ABC Interim Meeting and enjoy our remarkable city. Join us in August to experience our beautiful Lake Michigan shoreline from the expansive beaches or a sunset cruise. Enjoy the celebrated Santiago Calatrava-designed Milwaukee Art Museum, Harley Davidson Museum, summer festivals, many new restaurants or our award winning golf courses. You'll discover why we're proud to call Milwaukee home.”

– Jackie Fredrick  
 President and CEO  
 BloodCenter of Wisconsin

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



General Mitchell International Airport (MKE) is served by all major airlines.  
 Visit [www.mitchellairport.com](http://www.mitchellairport.com) for more information.

## RESEARCH IN BRIEF

**Researchers from the European Centre for Disease Prevention and Control (ECDC) recommend in a commentary published on May 3 in *Nature Climate Change* that Europe take action to prevent contamination of blood products by emerging infectious diseases as the climate warms.** The authors, Jan C. Semenza and Dragoslav Domanović, explain that climate change and globalization have created favorable conditions for the spread of emerging infectious diseases (EIDs) in Europe. “The spread of vectors through international travel and trade combined with permissive climatic conditions have set the stage for transmission of exotic diseases, which threatens blood safety,” they write. The authors describe two assessments by the ECDC of EID risk for the blood supply that is related to climate change; the first ranked EID threats from climate change and the second prioritizes pressing infectious disease threats to substances of human origin (e.g., blood, cells, tissues, or organs). The authors combined these assessments to shed light on the potential threat level to the blood supply from climate change for Europe as a whole. Topping the ranking is West Nile virus (WNV), followed by dengue fever, Leishmaniasis, chikungunya fever, malaria, tick-borne encephalitis, Lyme disease, Crimean-Congo hemorrhagic fever, Usutu virus fever, babesiosis, and Chaga’s disease. Although donor deferral has been an effective method for known infectious agents, such as HIV, the authors note that expanding deferral to catch more EIDs is difficult because temporary deferrals are based on time-consuming and labor-intensive risk assessments with uncertain effectiveness. In terms of screening for EIDs, the authors reference studies of blood donation in the US that showed screening for WNV and *Trypanosoma cruzi* to be effective only if applied selectively or in areas of high prevalence. They also note that new pathogens can easily evade detection

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**RESEARCH IN BRIEF** (continued from page 9)

until sensitive tests have been developed, and that the time between infection and seroconversion poses another period of susceptibility in antibody screening. The authors discuss several alternative strategies that they suggest could be used in Europe to protect the blood supply from EIDs, including nucleic acid microarray or “microchip” technology, which can be applied to screening of blood donations for infectious disease. “Using microchip technology as a single platform for viruses, bacteria, and parasites may be unexpectedly more cost-effective than current multiple-platform testing systems,” they write. The Food and Drug Administration recently held a workshop exploring this and other advances that may be used to protect the blood supply from EIDs, as well as known infectious agents (see *ABC Newsletter*, 4/19/13). They also suggest use of alternatives to human blood components such as coagulation factors, artificial red blood cells, and artificial platelets. Pathogen reduction technologies, already in use for platelets/plasma in several countries in the EU, are also recommended as holding “promise for tackling some of the risks not addressed by other strategies.” The authors conclude that the “EU Blood Directive recommends taking due account of scientific advances in the field to reduce the risk from pathogen transmitted through transfusion.”

**Citation:** Domanović D., Semenza JC. Blood supply under threat. *Nature Climate Change*. 2013 May 3; (3):432-435. ♦

**BRIEFLY NOTED**

**AABB recently send a reminder that the deadline to submit abstracts for the 2013 AABB Annual Meeting & CTTXPO in Denver is May 8.** This year’s categories are available at: <http://bit.ly/GIO9SE>. Authors of abstracts selected for presentation will be notified by June 24. AABB also sent a notification that the proposed 29<sup>th</sup> edition of *Standards for Blood Banks and Transfusion Services* is available for public comment until June 29. This draft edition includes new recommended standards focused on reducing the risk of transfusion-related acute lung injury (TRALI). The proposed standards are available at <http://bit.ly/18fJPMf>. (Source: *AABB Weekly Report*, 4/26/13)

**The journal *Critical Care* recently highlighted the STOP the Bleeding Campaign, which aims to increase awareness of post-traumatic coagulopathy and its appropriate management.** According to the World Health Organization, traumatic injuries are responsible for more than 5 million deaths annually. Post-traumatic bleeding associated with traumatic coagulopathy is the leading cause of potentially preventable death among trauma patients. However, awareness of this problem is insufficient and treatment options are often unclear. This leads to late recognition and delayed treatment of coagulopathy, which results in a several-fold increase in morbidity and mortality. A multidisciplinary, pan-European group of experts with specialties in surgery, anesthesia, emergency medicine, intensive care medicine, and hematology are now in the process of launching the STOP the Bleeding Campaign to reduce preventable deaths from uncontrolled bleeding following traumatic injury. This task force published a review article and developed guidelines for managing bleeding trauma patients, which have been updated at three-year intervals. The group believes that an active campaign to improve awareness of traumatic coagulopathy will help to ensure that the guideline recommendations are universally implemented. The STOP the Bleeding Campaign aims to reduce morbidity and mortality from bleeding following traumatic injury by implementing a program to support hemostatic resuscitation that includes clinical practice guidelines, patient management bundles, educational tools, and adherence control measures to ensure the early recognition and treatment of bleeding and traumatic coagulopathy. The goal of the campaign is to reduce the number of patients who die within 24 hours after arrival in the hospital due to exsanguination by a

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**BRIEFLY NOTED** (continued from page 10)

minimum of 20 percent within five years. STOP stands for: Search for patients at risk of coagulopathic bleeding; Treat bleeding and coagulopathy as soon as they develop; Observe the response to interventions; and Prevent secondary bleeding and coagulopathy.

**Citation:** Rossaint R, *et al.* The STOP the Bleeding Campaign. *Critical Care*. 2013;(17):136. ♦

**REGULATORY NEWS**

**The Food and Drug Administration announced the approval of CSL Behring's Kcentra, a 4-factor prothrombin complex concentrate (PCC), for the urgent reversal of vitamin K antagonist (warfarin) anticoagulation in adults with major bleeding.** Kcentra is the first non-activated 4-factor PCC approved for warfarin reversal in the US. Each year about 3-4 million people in the US are treated with the warfarin anticoagulants to prevent blood clots, and this treatment can cause severe bleeding. Currently, plasma and vitamin K are used to reverse anticoagulation caused by warfarin. Kcentra, used in conjunction with vitamin K, offers a new treatment option. "The FDA's approval of this new product gives physicians a choice when deciding how to treat patients requiring urgent reversal of VKA anticoagulation," said Karen Midthun, MD, director of FDA's Center for Biologics Evaluation and Research, in the release. "Kcentra is administered in a significantly lower volume than plasma at recommended doses, providing an alternative for those patients who may not tolerate the volume of plasma required to reverse vitamin K antagonist anticoagulation." In a clinical trial, Kcentra met all efficacy and safety endpoints, including endpoints of hemostatic efficacy and International Normalized Ratio (INR) reduction, compared with plasma. "FDA approval of Kcentra is an important advancement in warfarin reversal, as it provides medical professionals with a new tool that can efficiently stop major bleeding in patients for whom plasma may not be optimal," Lynne Powell, senior vice president of North America Commercial Operations at CSL Behring, said in the CSL Behring's press release. "The long awaited availability of a 4-factor PCC can measurably improve the prevention and treatment of hemorrhage associated with the use of warfarin and other vitamin K antagonists. In clinical evaluations, it more consistently and rapidly lowers the INR, and it will not be associated with well-known side effects of plasma, including fluid overload and transfusion related acute lung injury (TRALI). If its availability reduces the demand for plasma transfusion at a cost hospitals are willing to accept, US blood centers and hospitals should find it easier to implement effective TRALI mitigation strategies," said Louis Katz MD, executive vice president of America's Blood Centers. The FDA press release is available at <http://1.usa.gov/14K2cAt>, and the FDA approval letter can be accessed at <http://1.usa.gov/ZYaMYd>. (Sources: FDA press release, 4/29/13; CSL Behring press release, 4/30/13)

**The Food and Drug Administration's Center for Biologics Evaluation and Research recently approved Hemerus Medical's LEUKOSEP HWB-600-XL Leukocyte Reduction Filtration System for Whole Blood with CPD Anticoagulant and SOLX Additive Solution.** The Hemerus LEUKOSEP HWB-600-XL Leukocyte Reduction Filtration System for Whole Blood with CPD Anticoagulant and SOLX Additive Solution is intended for the collection and leukoreduction of 500 mL CPD whole blood and subsequent processing into AS-7 RBC and frozen plasma. The FDA approval documents can be found at <http://1.usa.gov/12sDWw6>. (Source: FDA approval letter, 4/25/13)

**The Food and Drug Administration has posted an Urgent Biological Product Notification regarding Seralone Anti-S.** This notice applies to Seralone Anti-S, catalog number: 808052100. It affects lot number 8136070-01, with an expiration date of Aug. 29, 2013, as well as lot number 8203120-01,

(continued on page 12)

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

with an expiration date of Jan. 9, 2014. Bio-Rad Laboratories is notifying customers that ongoing stability testing of Seraclone Anti-S product has shown decreased reactivity in lot numbers 8136070-01 and 8203120-01. The decreased reactivity has the potential to result in weaker than expected reactions. Customers are requested to discontinue use of these lots of Seraclone Anti-S. The FDA announcement is available at <http://1.usa.gov/15cnKGt> (Source: FDA Urgent Biological Product Notification, 4/9/13)

**The Food and Drug Administration issued an Urgent Product Recall for Fenwal's Anticoagulant Citrate Phosphate Dextrose Solution, USP (CPD) BLOOD-PACK Unit.** The product code is 4R1584 and the affected lot number is FM13A15027. Fenwal has initiated a voluntary urgent product recall of one lot of this product due to a labeling issue with this batch of product code 4R1584 in which a platelet container is incorrectly labeled as "AS-1 Red Blood Cell Adenine-Saline added." To date, there is only one reported occurrence of this incident. No safety concerns have been raised, however Fenwal recommends that customers immediately check their inventory, discontinue the use of this product, and return the impacted product to Fenwal. The FDA notice is available at <http://1.usa.gov/15coADk>. (Source: FDA Urgent Product Recall, 4/24/13)

**The Food and Drug Administration has issued an Urgent Medical Device Recall of Terumo BCT's Trima Accel automated blood collection system.** The catalog number for this product is 81000, and all serial numbers are included. Terumo BCT is voluntarily recalling the Trima Accel system for the addition of a safety enhancement called Air Reduction Mitigation. This safety enhancement is being implemented to address the potential risk for an air embolism should a donor be prematurely connected to the Trima Accel system. There is the potential risk for an air embolism if air is delivered to a donor due to the failure mode of operator error in which the donor is connected prior to completion of loading the tubing set when using the Trima Accel system. Terumo BCT is aware of nine reported events related to this failure mode. Given this potential risk, Terumo BCT is voluntarily implementing a safety enhancement in the Trima Accel system software version 5.1.9 and version 6.0.6 that modifies the current product bag air removal and tubing set test sequence. This new functionality will redirect the air from the product bags and cassette into the vent bag, instead of out the needle line. A larger vent bag was implemented on tubing sets in December 2011 which accommodates this new functionality. All customers are required to upgrade to either software version 5.1.9 or version 6.0.6 and are asked to complete the Acknowledgement form sent to them and fax or email it to Terumo BCT by May 31, 2013. More information is available at <http://1.usa.gov/10Zqeql> (Source: FDA Urgent Medical Device Recall, 4/26/13) 💧

**GLOBAL NEWS**

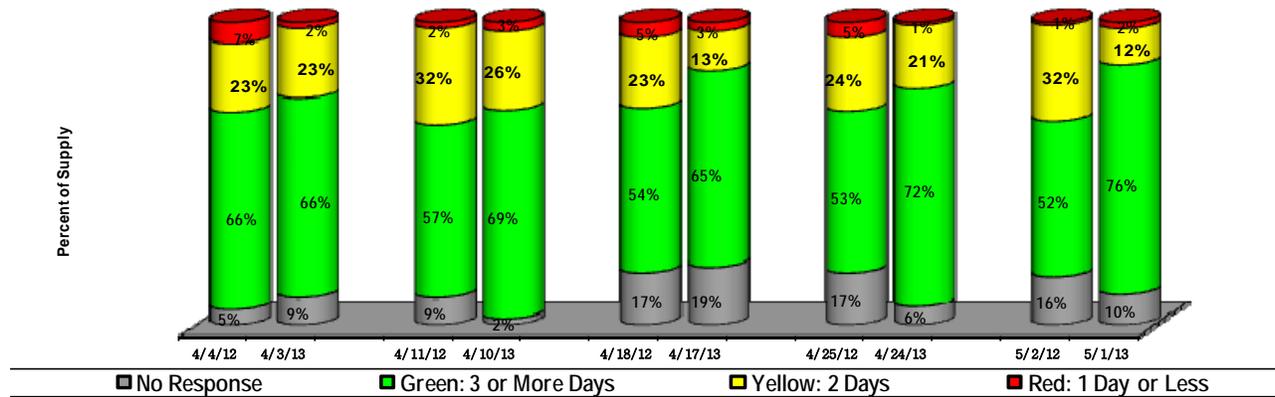
**The Australian Minister for Health and the Parliamentary Secretary for Health and Aging announced in a joint press release on April 7 that the Australian government will pay employees who wish to become living organ donors up to six weeks of their salary.** The Australian government will commit \$1.3 million over two years for a trial of the initiative, which seeks to support living organ donation. The government will then review and consider the outcomes of the trial in 2015. "Living donors make an incredibly generous gift, and the Gillard government believes this act of kindness should be recognized and supported," Health Minister Tanya Plibersek said in the release. "Because the procedure to transplant an organ is not without risk to the donor, we want to ensure that they are assisted during the recovery period after surgery." The salary will be based on the national minimum wage and be paid to employers who will pass the money onto donor employees. "As the salary will be based on the national

(continued on page 13)

**GLOBAL NEWS** (continued from page 12)

minimum wage, we encourage employers to adopt leave policies for living organ donors and consider topping-up donor wages while donors are recovering,” said Ms. Plibersek. Australia has shown its commitment to organ donation in the past; in July 2008, the Council of Australian Governments endorsed the government’s \$151 million national reform package to substantially lift organ and tissue donation rates, said the release. The press release is available at <http://bit.ly/15cDF7K>. (Source: Australian Minister for Health and Parliamentary Secretary for Health and Aging joint press release, 4/7/13) ♦

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



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



**REGISTRATION NOW OPEN**

America’s Blood Centers’  
Fund Development, Communications  
and Donor Management 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](http://www.hotelvalencia-riverwalk.com)

**2013 Workshop Schedule**  
Fund Development topics: June 18-19  
Communications topics: June 19-20  
Donor Management topics: June 20-21

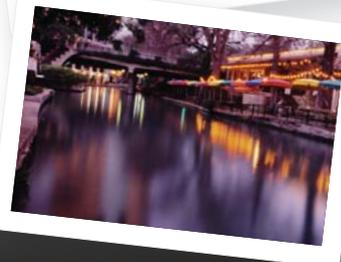
**2013 Workshop Fees (early bird/regular)**  
2-day registration: \$375/\$425  
3-day registration: \$440/\$490  
4-day registration: \$490/\$540

Contact Lori Beaston at [lbeaston@americasblood.org](mailto:lbeaston@americasblood.org) for registration information.

“South Texas Blood & Tissue Center is proud to support this year’s Fund Development, Communications and Donor Management 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

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



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](http://www.sanantonio.gov/aviation) for more information.

## MEMBER NEWS

**LifeStream recently facilitated a meeting between Grant Vietor of Sioux Center, Iowa, and his bone marrow donor, Alex Fishburn, 22, of Upland, Calif.** Mr. Fishburn, then 18, registered with the national Be The Match bone marrow registry at a LifeStream blood drive, and more than three years later, he was called in to donate marrow for a patient in need. Mr. Vietor, a leukemia patient, received Mr. Fishburn's life-saving gift on Feb. 14, 2012. As a result of this meeting, Diane Eklund, MD, LifeStream's vice president of Medical Affairs, was interviewed by numerous broadcast and print outlets about the donation process. Along with helping Mr. Vietor meet his "match," LifeStream also just recognized the 200<sup>th</sup> marrow donation from a LifeStream donor. (Source: LifeStream press release, 5/1/13)



Diane Eklund, MD, LifeStream's vice president of Medical Affairs, talks with marrow donor Alex Fishburn (center) and marrow recipient Grant Vietor (right).

**Rock River Valley Blood Center, Illinois Secretary of State Jesse White, and the Rock River Valley Life Goes On Committee held a ceremony on April 25 to dedicate a tree and plaque in memory of Vikki Tulcus and others who have died waiting for an organ donation match.** Ms. Tulcus worked for the Illinois Secretary of State's Organ Donor Procurement Program, but sadly, lost her own life waiting for a kidney. She was featured in several TV and radio campaigns before passing away in January at the age of 43. Her colleagues and former boss, Mr. White, honored her at the Ethnic Heritage Museum in Rockford, Ill. (Source: Rock River Valley Blood Center announcement, 4/30/13) ♦

## PEOPLE

**Yanyun Wu, MD, PhD,** was recently appointed chief medical officer of Puget Sound Blood Center (PSBC). "PSBC has a long history of leadership in transfusion medicine, and Yanyun is recognized both nationally and internationally for her understanding and knowledge of transfusion practices, apheresis therapies, physician collaboration, and regulatory processes," said James P. AuBuchon, MD, president and chief executive officer of PSBC. "Her wide-ranging experience at a large tertiary-care center serving a major metropolitan area and surrounding region provides an outstanding foundation for the scope and complexity of her new role at PSBC." Prior to joining PSBC, Dr. Wu held faculty positions as an associate professor of Laboratory Medicine at Yale University School of Medicine, and associate director of the Apheresis/Transfusion Service and Cellular Therapy Laboratory at Yale-New Haven Hospital. Dr. Wu is an active researcher with more than 40 articles published in medical journals and books, and is a frequently invited-lecturer at medical conferences. She has achieved recognition as a mentor to new medical professionals and honored as an educator of the next generation of specialists in transfusion, apheresis, and laboratory medicine. Dr. Wu will also become a professor in the School of Medicine at the University of Washington. She will assume her new role as PSBC's chief medical officer in August. (Source: PSBC press release, 5/1/13) ♦



## MEETINGS

### May 7-8 **AdvaMed Medical Device Complaints, MDRs, and Reports**

AdvaMed will hold a workshop titled “Medical Device Complaints, MDRs, and Reports” in Arlington, Va., from May 7-8. The workshop will explore how to implement and measure the effectiveness of a complaint handling system covering a diverse set of possible products and problems. It will also discuss how complaint files are managed across multiple domestic and international facilities. More information and registration can be found at <http://bit.ly/11hpZDc>.

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

## POSITIONS AVAILABLE:

### **Lab Technologist II – Consultation & Reference Lab (full-time) (Gulf Coast Regional Blood Center).**

Scope of Responsibility: Under moderate supervision of Consultation Management, prepares special blood components and performs patient and donor tests. Essential duties and responsibilities: perform, interpret, and document compatibility testing, simple antibody identification, and donor serological testing; evaluate and process requests and patient samples per established guidelines; record, place and fill orders for antigen-negative red blood cells; monitor inventory of components; prepare washed and deglycerolized RBCs; perform quality control and preventative maintenance as assigned; prepare reagents; enter rare cell and serum samples into database; management retains the discretion to add to or change the duties of the position at any time. Education and Experience: MLT degree from an accredited college or university with certification (ASCP or equivalent) or; MLS new graduate eligible to take certification exam with certification obtained within six months of employment. Certificates, Licenses, Registrations: American Society of Clinical Pathologists (ASCP or equivalent certification); if new graduate, certification must be obtained within six months of employment. Please contact: Lori Pireu, Recruiter, [lpireu@giveblood.org](mailto:lpireu@giveblood.org). Or apply online at: <http://giveblood.org/career>.

**Assistant, Associate, or Co-Medical Director of Clinical Services at Stanford Medical School Blood Center.** The Department of Pathology at Stanford University School of Medicine seeks a full-time physician clinician educator to serve as the assistant, associate or co-medical director of Clinical Services and Operations at the Stanford Blood Center (SBC). This position is in the Clinician Educator line, with the rank based on years

of relevant experience. The ad in its entirety is available at: <http://stanford.io/112Sfx2>.

**Director of Volunteer Services.** The Blood & Tissue Center of Central Texas, located in Austin, is seeking an enthusiastic, self-starter to oversee our volunteer program. This position will develop, manage, and coordinate the volunteer activities to meet the needs of the organization, as well as maintain strong working relationships with the volunteer staff in order to retain their services. The director manages all volunteer recruitment efforts, works closely with management to identify volunteer opportunities, and selects volunteers for placement within the organization. Qualified candidates must have a high school diploma or equivalent; college degree preferred. Requires five to seven years of experience working in a volunteer program. Prefer at least one year experience recruiting, scheduling, and supervising volunteers or high level administrative experience or the equivalent combination of education and experience. Must have excellent communication, presentation, and interpersonal skills. Ability to prioritize under changing conditions, manage multiple projects, and handle stressful situations is needed. Must be at least 21 years of age, have a valid Texas driver's license, proof of insurance, and an acceptable driving record. Please visit [www.inyourhands.org](http://www.inyourhands.org) to apply.

**POSITIONS** (continued on page 16)

**POSITIONS** (continued from page 15)

**Director, Transfusion Services Laboratories.** Recognized as a leader in transfusion medicine, Puget Sound Blood Center is seeking a transfusion services laboratory director to organize and direct laboratory activities at multiple sites, evaluate and implement tailored customer solutions, while balancing financial viability and commitment to the blood center's mission. Requirements include: MT(ASCP) SBB or equivalent experience with a minimum of six years of managerial experience in a Transfusion Service; experience managing an effective and comprehensive quality assurance program and laboratory information systems management; knowledge to create, review, and interpret financial and business documents; and experience in developing and meeting budgets. A successful candidate will manage projects and workforce through collaboration, communication with stakeholders, and ensure proper allocation of resources. Interested candidates should send their resume and cover letter to [HumanResources@psbc.org](mailto:HumanResources@psbc.org). More information at [www.psbcc.org](http://www.psbcc.org). Please indicate job number 6953 on all correspondence. EEO/AA

**Manager – IRL (Community Blood Center of Greater Kansas City).** Oversight in the Immunohematology IRL, including Platelet laboratory operations and personnel. Provide consultation to staff and clients. Duties: assess personnel competency/proficiency/adherence to guidelines/policies/procedures; conduct staff performance evaluations/assessments/oversee training; participate in recruitment/selection of employees; assure adequate continuing education opportunities for staff; preparation of annual department budgets/monthly budget variances; review and revision of applicable agreements/contracts with customer and suppliers; assure review of test results/worksheets/reports/bills/quality control/quality assurance records; assure review/approval patient records; provide continuing education presentations in-house and/or at profession meetings; review/maintain appropriate procedure/policy manuals; develop/validate/implement new procedure/policy manuals; develop/validate/implement new procedures; assure adequate staff coverage; assure maintenance of laboratory records/supplies/equipment/reagent inventory; assure fulfillment of CBC/IRL financial/quality goals; and participate in regional/national professional blood bank associations or be an active AABB or CAP assessor. Requirements: MT(ASCP) or equivalent, SBB preferred, antibody identification experience; ASQ Certification as CQA and/or CMQ/QE preferred; minimum five years IRL and/or transfusion service laboratory experience or equivalent and management experience. Skills and Knowledge: Advanced problem-solving skills, good verbal/written communication skills, customer service and time management. Please apply via our website: [www.savealifenow.org](http://www.savealifenow.org). EEO/AA/M/F/D/V

**Medical Technologist II (ASCP) – 3rd Shift.** United Blood Services, a non-profit organization in sunny Scottsdale, Ariz. seeks a medical technologist (ASCP) to work in the QC Laboratory on 3rd Shift. Responsibilities include: quality control testing and high complexity testing on components produced from whole blood, platelet apheresis, and apheresis red cell products; participates in technical investigative studies; evaluates and participates in selection of new equipment and develops validation protocols in accordance with internal and external policies/regulations. Hours: 3rd Shift: (4-10 hour shifts) with varied days/rotating weekends. Requirements: bachelor's degree in a chemical, physical, biological, medical technology or clinical laboratory science (CLS) required. Certification as a medical technologist (MT) by a recognized certifying agency required or CLIA equivalent for high complexity testing required. SBB preferred. State licensure. Three years experience in a clinical laboratory setting required. Must be able to stand for long periods of time, bend, and lift up to 50lbs. Competitive benefits package! Position Closes: **May 10, 2013** (Ref: 210-1001-2013-027) – Please send resume & salary history to United Blood Services, c/o: C. Maksinski, 6220 E. Oak St., Scottsdale, AZ 85257 or email: [cmaksinski@bloodsystems.org](mailto:cmaksinski@bloodsystems.org) or fax: (480) 675-5448. Drug testing & background checks required. EOE/M/F/D/V.

**Director of Donor Recruitment.** Blood Bank of Hawaii is looking for a dynamic person to join our management team and lead our statewide recruitment efforts to realize annual red blood cell distribution of 55,000. This position oversees a department of 18 telerecruiters and field representatives. Responsibilities include staff and performance management, training, budgeting, and strategic planning. The ideal candidate will demonstrate strong leadership and communications skills with five to ten years of blood bank and customer service experience. Hemaspere and eDonor expertise preferred. We offer a competitive salary and excellent benefits. Please apply via our website: [www.BBH.org](http://www.BBH.org). EOE

**Donor Recruitment Director II.** United Blood Services in Scottsdale, Ariz has a great opportunity for a seasoned sales and marketing leader with a proven track record of achieving results. This senior level position is responsible for developing and directing the regional blood center's strategic donor recruitment and marketing plan to achieve monthly and annual collection goals. Responsibilities include: hires, trains, and evaluates work performance of department personnel; administers the department budget; directs marketing and public relation initiatives; represents the organization in the community, including public speaking engagements; develops recruitment forecasts and department performance reports; and develops and

**POSITIONS** (continued on page 17)

**POSITIONS** (continued from page 16)

maintains effective communications and relations with key customers. Requirements: bachelor's degree in related field required (e.g., marketing, communication), five years related experience with three years supervisory experience required. Previous blood center management experience serving in a manager or higher level position preferred, excellent leadership skills to effectively motivate and develop personnel, effective public speaking and written communication skills and sales/territory management skills. Excellent benefits package! Position Closes: **May 24, 2013** (Ref: 210-1001-2013-025) – Please send resume and salary history to United Blood Services, c/o: C. Maksinski, 6220 E. Oak St., Scottsdale, AZ 85257 or email: [cmaksinski@bloodsystems.org](mailto:cmaksinski@bloodsystems.org) or fax: (480) 675-5448. EOE M/F/D/V Pre-employment & Background checks required.

**CLS Technical Specialist – Training (GL011).** QualTex Laboratories, an affiliate of the South Texas Blood & Tissue Center, seeks an individual to develop and implement specialized training programs for QualTex Laboratories in Norcross, Ga.. You will deliver hands-on training for employees utilizing highly complex equipment and processes. Recognize unusual results/outcomes and resolve discrepancies. Maintain training documentation to meet all regulatory requirements. The incumbent must have a working knowledge of clinical laboratory techniques. Qualifications required include bachelor's degree in Medical Laboratory Science/Medical Technology. Two years of experience in the area of specialization preferred. Must be at least 21 years old with three years good driving record. Certification: Certified MT, CLS, or MLS required. Georgia Operators Driver's License. Offering competitive salary and benefits. E-mail résumé to [hr\\_dept2@bloodntissue.org](mailto:hr_dept2@bloodntissue.org) or fax to (210) 731-5581. For information, call Human Resources at (800) 292-5534, Ext. 1559. For further information, visit our website <http://bit.ly/ZpLpir>.

**Laboratory Services Director – IRL & Specialty (GL005).** QualTex Laboratories an affiliate of the South Texas Blood & Tissue Center (STBTC), seeks an individual to manage, supervise, and coordinate all activities for Immunohematology Reference and Specialty Laboratories (includes IRL, Confirmatory, Microbiology, and Research & Development) for QualTex Laboratories in Norcross, Ga. and San Antonio, Texas. The position will be based at the Norcross, Ga. facility. QualTex Laboratories at present screens millions of whole blood and plasma donations for infectious agents each year for biotechnology companies locally and across the globe. Qualifications required include a bachelor's degree in Science, Medical Technology, Microbiology or related discipline, six years laboratory experience and extensive management experience in laboratory operations. MT(ASCP), SBB certification is also required along with a working knowledge of clinical laboratory tech-

niques and current knowledge of regulatory/quality requirements (national and international, e.g. FDA, EU, GHA, ISO, OSHA & cGMP). For information, call Human Resources at (800) 292-5534, Ext. 1559. To apply, e-mail resume to [hr\\_dept2@bloodntissue.org](mailto:hr_dept2@bloodntissue.org) or fax to (210) 731-5581. <http://bit.ly/ZpLpir>.

**Lab Manager.** The Blood & Tissue Center of Central Texas, located in Austin, is seeking a lab manager to supervise staff, day-to-day testing, and overall lab operations. This position will ensure compliance with applicable protocols, policies, and regulations; serve as subject matter expert for the lab; perform supervisory review of all testing records to include donor testing/reference bench, QC, and maintenance documentation; optimize workflow based on daily collection projections and patient testing needs; troubleshoot and solve problems arising from equipment, processes, or workflow as needed. Qualified candidates must have a four-year college degree and certification in a Laboratory Science field, as well as have an ASCP certification or be eligible to acquire within six months of hire. At least three years work experience in a blood bank laboratory required. At least three years work experience in production and process control in a biologic and/or GMP environment required. At least three years supervisory experience in a medical setting is required, preferably in a blood center. Knowledgeable in cGMP, FDA, and AABB regulations. Please visit [www.inyourhands.org](http://www.inyourhands.org) to apply.

**Laboratory Manager (Blood Bank of Alaska).** The laboratory services manager is responsible for oversight of daily laboratory operations ensuring that laboratory product QC and donor test results meet CLIA, AABB, and FDA compliance standards/regulations for the manufacture of blood. Maintain competency to perform laboratory processes and procedures to include lot release. Performs investigation and review of occurrences and BPDs related to laboratory issues. Develops and makes revisions to laboratory SOPs as needed. Oversees receipt of TAD, TRALI, and BD reports and initial notification of in date product recall/quarantine/discard. Plans, writes, and validates new or revised QC/equipment/maintenance procedures and processes. Works with laboratory services director and appropriate management/project team to coordinate activities. Oversight of laboratory equipment QC and maintenance schedule. Reviews applicable QC and maintenance records. Ensures that proficiency testing for laboratory is ordered, assigned to staff on rotating schedule, performed and submitted on time and records reviewed. Responsible for oversight of blood product quality control assuring that QC activities are performed in a timely manner and meets regulatory requirements.

**POSITIONS** (continued on page 18)

**POSITIONS** (continued from page 17)

Reviews end of month results and initiates appropriate investigations of nonconforming products. Interfaces with vendors, contracted service providers, and hospital customers as required. Send application to Tom Petersen – [tpetersen@bbak.org](mailto:tpetersen@bbak.org).

**Chief Financial Officer.** Central Jersey Blood Center has an immediate opening for a chief financial officer. The candidate will be responsible for all financial matters of the center. He/She will partner with senior management and the Board of Trustees to develop and implement strategies across the organization. The candidate will oversee the Finance Department including the supply chain management and facilities, development of accounting policies, procedures and methods including cash flow planning, investments, asset management; coordinate, develop, and monitor operational and capital

budgets. The candidate must ensure proper maintenance of appropriate internal control and ensure timeliness, accuracy, and usefulness of financial and management reporting. This is a hands-on position and it is essential that the candidate have experience with strategic planning and due diligence. Qualifications: Must have a master's degree in Finance or equivalent, CPA is preferred, previous CFO experience necessary. Healthcare/non-profit experience is required and an understanding of the blood industry strongly preferred. Exceptional organizational, analytical, and team management skills are essential. Experience managing in a dynamic, changing environment a must. Excellent verbal, written and interpersonal communication skills are necessary. Email resume to [dglassen@cjbcblood.org](mailto:dglassen@cjbcblood.org) or fax to (732) 933-7624. EOE. ♦