

2011 #11

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The *ABC Newsletter* will not publish next week to give staff time to attend ABC's Annual Meeting. The next issue will appear on April 1.

Héma-Québec Names Jean De Serres, MD, as Its New President







Héma-Québec announced on Wednesday that Jean De Serres, MD, will take over as its president and CEO as of April 1. Dr. De Serres will replace Francine Décary, MD, PhD, who is moving on to other professional challenges after serving as Héma-Québec's president and CEO since its founding in 1998 (see *ABC Newsletter*, 3/11/11).

Jean-Pierre Allaire, chair of the board of directors for Héma-Québec, announced the appointment. Dr. De Serres, Mr. Allaire said, "has had a prominent career in the field of life sciences, and we are convinced that he will contribute to the central mission that Héma-Québec has assumed for all of Québec society." He praised Dr. Décary's contribution as "exceptional" and said the blood service owes her a debt for establishing a culture of excellence at Héma-Québec.

Dr. De Serres said that he was proud to become part of Héma-Québec. "Since its founding, Héma-Québec has been able to develop practices that place it at the forefront of the management of blood, human tissues, and stem cells," he said. "I am very enthusiastic about taking up the challenge of my new position and contributing to the development of Héma-Québec as it fulfills its mission."

ABC Annual Meeting Forecast

Fri	Sat	Sun	Mon	Tues
mar 18	mar 19	mar 20	mar 21	mar 22
				
P Cloudy	Showers	P Cloudy	Showers	M Cloudy
74° 52°	54° 41°	54° 44°	57° 52°	64° 43°

Dr. De Serres has training and experience in medicine and management. He earned a medical degree and a master's degree in community health from the Université de Montréal, as well as a master's of business administration in bio-industry management from the Université du Québec à Montréal.

He started his career in 1985 as a general practitioner and worked and taught in family medicine for 11 years. From 1995 to 1997, he served as president of the Québec section of the Canadian College of Family Physicians. He also served as director of Public Health for the Outaouais region of Québec, from 1995 to 1999.

(continued on page 3)



OUR SPACE

ABC CEO Jim MacPherson

Someone to Watch Over Me

“It was very comforting to know that you were monitoring our situation and ready to help if needed,” Robyn Yim, MD, president of the Blood Bank of Hawaii, told me the day after a horrifying earthquake and tsunami moved the island of Japan 13 feet closer to the US and the earth’s axis by 6.5 inches. As we know, thousands in Japan, arguably the most sophisticated country on earth, were swept away. Hawaii was spared, but a harbor as far away as Crescent City, Calif., was destroyed.

I’ve noted before the disaster response systems for assuring local and a global blood supply (at least between North America, Europe, and Australia) put in place after lessons learned from 9/11, Katrina, bird flu threats, and other less formidable events. (See “When Disaster Strikes, Let us Know” on page 7.) There surely will be more lessons to learn from Japan’s current ongoing experience.

Planning is the responsible thing to do. However, the best we can do is plan for the things we expect to occur, and there is no way to plan for a worst-case scenario. As Japan is learning, it also doesn’t take a worst-case earthquake to screw up your entire infrastructure and send much of your country into chaos. The mechanisms were in place to send whatever blood might be needed to California, Hawaii, and even to Japan, should they ask. ABC members and the American Red Cross are still sending blood to Haiti over a year after its devastating earthquake.

In human terms, Dr. Yim’s message reflects what we all wish for when facing major uncertainty; that is, hope. Hope that all will be OK, and even if it isn’t, that others are prepared to help us do our job in saving lives should we be impaired. ABC President Tom Schallert called me from Eureka, Calif., sometime after 4 a.m. his time, shortly after a local tsunami warning went off. His indirect message was “don’t forget about us.” Sometimes we all need someone to watch over us.

Our thoughts and prayers are with the Japanese people.

A handwritten signature in black ink, appearing to be 'J. MacPherson'.

Jmacpherson@americasblood.org 

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ABC is an association of not-for-profit, independent community blood centers that helps its members provide excellence in transfusion medicine and related health services. ABC provides leadership in donor advocacy, education, national policy, quality, and safety; and in finding efficiencies for the benefit of donors, patients, and healthcare facilities by encouraging collaboration among blood organizations and by acting as a forum for sharing information and best practices.

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Blood Centers of the Pacific in Merger Talks with Blood Bank of the Redwoods

Blood Bank of the Redwoods (BBR) and Blood Centers of the Pacific (BCP) announced Thursday that the boards of directors of the two nonprofit blood centers have agreed to discuss merging into a single organization. The announcement was made by Nora Hirschler, MD, president and CEO of San Francisco-based Blood Centers of the Pacific, and by Cathy Bryan, CEO and president of Blood Bank of the Redwoods, based in Santa Rosa, Calif.

“Today’s economic and healthcare climate dictates that we look at all possible options to ensure that we deliver on our mission today and for years to come,” said Ms. Bryan. “I’ve guided this organization for more than 20 years, and we have excelled as an independent blood center in serving our local hospitals and the community. Our approach and expertise fit well with BCP’s commitment to patients, donors, physicians, and hospitals.”



Blood Centers of the Pacific

If the merger proceeds, it would extend the Blood Centers of the Pacific service area to include nine additional hospitals in Sonoma, Lake, and Mendocino counties. It is expected that the BBR blood center in Santa Rosa would continue to be a hub of operations for those counties and could expand service east and south to hospitals and donors. BCP is an affiliate of Blood Systems, the nation’s second largest blood collection organization.



BLOOD BANK OF
THE REDWOODS

“Both our organizations have a long history of extraordinary service to the communities we serve, and we look forward to combining forces to ensure lifesaving blood is always there for patients who depend on it,” said Dr. Hirschler. “Twelve years ago, BCP affiliated with one of the nation’s oldest and largest non-profit blood service organizations – Blood Systems. This relationship enabled us to better serve our customers while gaining economies of scale that a larger organization provides. We look forward to providing a similar opportunity to BBR.”

During the due diligence period, which is expected to last several months, the blood centers will continue operations without any changes.

BCP provides volunteer blood donations to more than 40 hospitals throughout Northern California. BBR serves Sonoma, Lake, Mendocino, Napa, and Marin counties. 💧

New CEO at Héma-Québec (continued from page 1)

Dr. De Serres then went to work with CSL Behring, as medical director and director of the company’s Canadian division from 1999 to 2005. He helped the company implement and develop its Canadian activities in immunology and hematology.

His most recent positions have been as vice president of research, regulatory affairs, and in-licensing for Jubilant Draximage, a multinational company specializing in the development, production, and sale of radiopharmaceuticals for nuclear medicine; and as vice president of research for Jubilant HollisterStier, an allergy/immunology firm.

Dr. De Serres also has contributed to the founding of various biotechnology companies, including Med-Discovery SA (2006), a Swiss firm developing new medications against uro-genital cancers, and Biomilestones Inc. (2008), a biopharmaceutical consulting firm. (Source: Héma-Québec press release, 3/16/11) 💧

New vCJD Case in Canada Prompts CBS to Plan Saudi Arabia Residency Deferral

A Saudi Arabian man in Canada has been identified as a probable case of variant Creutzfeldt-Jakob disease (vCJD). In response, Canadian Blood Services (CBS) plans to follow Héma-Québec by instituting a deferral for blood donors who spent more than six months in Saudi Arabia between 1980 and 1996.

Health Canada, the country's regulatory body, already requires deferrals based on travel to the UK, France, and Western Europe. ABC member center Héma-Québec has an additional deferral for donors who spent more than six months in Saudi Arabia between 1980 and 1996.

The case was announced in the March 11 issue of the *Canada Communicable Disease Report (CCDR Weekly)*, a publication of the Public Health Agency of Canada. The case was identified by the agency's Creutzfeldt-Jakob Disease Surveillance System (CJDSS), which was working closely with Canadian clinical specialists.

CBS CEO Graham Sher, MD, PhD, told staff of America's Blood Centers that CBS will add residency in Saudi Arabia to its list of deferrals, but that CBS is still "working through the details and timing of implementation." Health Canada is in discussions with CBS about the deferral. (*Editor's note:* The US defines the terms residency and travel slightly different than Canada's definitions.)

The patient's diagnosis was made based on "several lines of clinical, paraclinical, and laboratory evidence," according to the *CCDR Weekly* report. Michael B. Coulthart, PhD, director of the CJDSS and of Public Health Agency of Canada's Prion Disease Program, told ABC staff that he could not release any information about the patient, including whether the man had died.

The report said that the patient became symptomatic shortly before he immigrated to Canada in early 2010, so authorities ruled out the possibility that he had been exposed to bovine spongiform encephalopathy (BSE), also known as mad cow disease, in Canada.

The History of vCJD and BSE. vCJD was first reported in 1996. Since then, more than 200 patients in 11 countries have been diagnosed with the disease. Health experts believe that most people who develop vCJD contracted it through consumption of cattle products contaminated with BSE. In at least three cases, patients in the UK contracted vCJD through transfusions of blood from asymptomatic, infected donors.

There is no treatment for vCJD, a degenerative brain disorder that is always fatal. The disease can be confirmed only through an examination of brain tissue, either collected by a biopsy or during an autopsy. Probable cases of vCJD can be diagnosed on the basis of clinical criteria.

The disease is of particular concern because its incubation period apparently can last for years or even decades. After BSE spread through cattle in the UK, millions of cattle were slaughtered. That and greater precautions about their food seem to have brought BSE under control, although isolated cases of cattle with the disease have been reported as recently as March 4 in Canada (see *ABC Newsletter*, 3/11/11). The fact that the incubation period for vCJD in humans can be so long has led experts to believe more waves of human deaths from vCJD may occur.

Implications for Public Health. This recent case of vCJD is the second reported in Canada; the previous one occurred in 2002. The *CCDR Weekly* report emphasizes that, as in the first case, the risk exposure for this case happened outside of Canada; that the case does not imply that the Canadian food supply is at risk; and that the case poses no health risks for Canadians.

(continued on page 5)

New vCJD Case (continued from page 4)

The report says that there is no evidence that this man ever donated blood, received a transfusion, or had a surgical procedure that was not managed according to Canada's CJD infection control guidelines.

Three cases of vCJD have been reported in the US. Two of the affected patients had lived in the UK, and the third had lived in Saudi Arabia. The Food and Drug Administration, since 2001, has recommended deferrals for people who lived in the UK for more than three months between 1980 and 1996 and expanded an earlier recommendation to include a number of European countries. In a 2007 guidance, it recommended that the same geographic deferral criteria apply to tissue donors as to blood donors.

The FDA's Transmissible Spongiform Encephalopathy Advisory Committee, at a meeting this October, heard presentations on geographic blood and tissue deferral policies, but it took no action on the matter. (Sources: *CCDR Weekly*, 3/11/11; *ABC Newsletter*, 5/28/10 and 11/5/10; www.cdc.gov, accessed 3/2/11)◆

Japanese Blood Supply Adequate Now, But Nuclear Fallout Health Threats Loom

Representatives from a number of Japanese blood establishments have said that, so far, they have been able to cope with the aftereffects of last week's earthquake and tsunami. But if conditions at a nuclear power plant on the coast continue to deteriorate, a host of additional health needs may arise. Meanwhile, blood centers in affected areas in the US have largely escaped damage.

As of Wednesday, America's Blood Centers had been informed by the Asia Pacific Blood Network (APBN) that it had not received any requests from Japan for assistance with blood or blood products. Indeed, Kenji Tadokoro, MD, PhD, executive officer of Blood Service Headquarters and director of the Central Blood Institute for the Japanese Red Cross Society (JRCS), said in an e-mail that the JRCS staff, by working around the clock, has been able to "maintain a stable supply of safe blood, and so far we are working well by the coordinated efforts." He added, though, that the breakdown of the country's nuclear energy plants was a major concern.

He said that "warm thoughts" and offers of help from ABC and APBN's partners "are surely encouraging me and all of our staff who are working hard to face and conquer this devastating situation."

Hitoshi Ohto, MD, PhD, one of Japan's leading hematologists and vice president of the Japan Society of Transfusion Medicine and Cell Therapy (formerly the Japan Society of Blood Transfusion), reported from Fukushima Medical University, where he is dean of the School of Medicine and a professor in the hospital's Division of Blood Transfusion and Transplantation Immunology. In an email on Sunday, he said that buildings at the university "shook long and hard" during the earthquake, and that aftershocks were continuing. Luckily, the city of Fukushima is 50 miles from the nuclear plant, and it is inland from the hard-hit city of Sendai.

Dr. Ohto said that electricity in the city was working, but that there was no running water as of Sunday, and hospital employees were starting a water rationing protocol. He cautioned that cellular phones and message services were unreliable or inoperable. Still, the hospital is receiving patients from outside the prefecture, or district.

"On a bright note," he concluded, "people continue to exercise the good manners and cooperation that make living and working here worthwhile."

(continued on page 6)

Japanese Blood Supply (continued from page 5)

Radiation Exposure May Drive Up Blood Needs. As of Wednesday, major US media were reporting worsening conditions at the Fukushima Daiichi Power Plant, a nuclear power plant on the country's northeast coast near the earthquake's epicenter. Four explosions had occurred, and there was concern that partial meltdowns were happening.

Exposure to radiation can result in a number of medical conditions that can require treatment with blood and blood products. For example, one of the effects of radiation sickness is dropping blood counts, particularly of white blood cells. That can leave patients "highly vulnerable to infections," according to *The New York Times*. Long-term effects can include an increased number of deaths from leukemia and other blood cancers.

Thyroid cancer is also a danger, according to the *Times*, as radioactive iodine is often a part of the fallout from nuclear reactors. The thyroid gland, which always needs iodine, "readily takes in the radioactive form" if a person ingests it. Thousands of people in the Soviet Union drank milk produced by cows that had eaten contaminated grass in the aftermath of the Chernobyl disaster, the paper said, and more than 6,000 cases of thyroid cancer have been the result.

However, the Japanese government is taking a number of steps to limit the danger of health problems caused by radiation exposure. People who live close to the plant have been evacuated, and the government is distributing potassium iodide, a drug that protects the thyroid by flooding it with healthy iodine.

People who have been exposed to high levels of radiation also may experience damage to their bone marrow. They may receive transfusions of red blood cells or platelets. Some may be given drugs that

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85944: A Plea to Help Blood Services Impacted by Japan Tragedy

The Foundation for America's Blood Center is extremely saddened by the recent events in Japan. It is our belief that no person should die for lack of access to a safe and adequate blood supply. Given that blood is such a critical component of first respondents in any man-made or natural disaster, FABC has decided to donate all the proceeds from its text messaging program (text BLOOD to 85944 to donate \$5*) until April 30 to help the Japanese blood services rebuild their infrastructure and ramp up their inventories.. Funds raised will be awarded to members of America's Blood Centers assisting directly with these efforts. You may also contribute other amounts at <http://bit.ly/fabcjpn>.

The Foundation, America's Blood Centers and its members have a solid history of aiding blood services in times of major disasters. After Hurricane Katrina hit in 2005, FABC and major players in blood banking raised over \$200,000 to help rebuild The Blood Center of New Orleans. Following last year's earthquake that devastated the island-nation of Haiti, several ABC members helped by shipping blood directly to those in need. Once again, we are ready to step up and help the blood banking community in Japan to ensure that their needs are met.

*A one-time donation of \$5 will be billed to your mobile phone bill. Messaging and data rates may apply. Donations are collected for the Foundation for America's Blood Centers by mobilecause.com.
Reply STOP to 85944 to stop. Reply HELP to 85944 for help. For terms, see www.igfn.org/t. ♦

Japanese Blood Supply (continued from page 6)

stimulate their bone marrow to make more blood cells, such as a protein called granulocyte colony-stimulating factor (GCSF), which promotes the growth of white blood cells. Synthetic versions of this natural hormone include filgrastim and pegfilgrastim. Bone marrow transplants, often paired with treatment by GCSF, are a last resort.

The greatest danger is probably to emergency workers who are still at the plant, attempting to contain the release of radioactive materials as much as possible. If they or others are exposed to very high doses of radiation, they may experience the destruction of many cell types, which is often fatal, according to Celso Bianco, MD, executive vice president of America's Blood Centers.

Blood Centers in Hawaii and California. Robyn Yim, MD, president of the Blood Center of Hawaii, said, "The island of Oahu, where the blood center is located, is back to normal. We are operating at full capacity. The other islands sustained structural damage, the worst being the Big Island. A few hotels and shops along the shoreline in Kona remained closed, but many are operational."

Her blood center canceled its mobile drives on Friday, but she said that collections the day after the tsunami were "slightly lower" than normal. "Thankfully," she said, "the impact to our blood supply was minimal."

Tom Schallert, chief executive at Northern California Community Blood Bank, told ABC staff that damage in his area was "mostly limited to the harbor in Crescent City" – but he reported that "at least \$20 million in damage was done [there], with many boats sunk or severely damaged." In addition, a 25-year-old man died when he was caught in a wave and pulled out to sea.

Mr. Schallert said his center's mobile blood drives were canceled as a precaution on Friday, but they resumed the next day. "Our blood inventory was a bit low before the cancellations, and we have not quite restored the blood inventory to normal levels," he said. "We hope to be back to normal, however, by next week."

Mr. Schallert added, "We truly appreciate the e-mails and calls that came from across the country offering support. It is gratifying to have a network of blood center colleagues who will do what they can to help patients wherever a need exists. Many thanks to all on behalf of our community." (Sources: *The New York Times*, 3/15/11 and 3/16/11) ♦

When Disaster Strikes, Let Us Know

You are not alone. Whether your center is coping with a local explosion, a regional hurricane, or a widespread flu epidemic, please contact us for help. Indeed, if you don't contact us, we will be contacting you. Blood Centers of America (BCA), with assistance from ABC and Group Services for ABC, coordinates responses to/from ABC centers. The primary contacts are BCA's Wendy Trivisonno (wtrivisonno@bca.coop; +1 (401) 439-6030) and ABC's Ruth Sylvester (rsylvester@americasblood.org; +1 (402) 210-1738).. Let us know if you are OK, if you may have needs, or definitely need help. We'll let other ABC members know, so while you are busy, you won't be pursued by those wishing to help. ABC and BCA also are part of the AABB Interorganizational Task Force on Domestic Disasters and Acts of Terrorism, which includes not only other blood organizations (like the American Red Cross), but government agencies such as the Food and Drug Administration and the US military, and organizations like the American Hospital Association and AdvaMed. Also, make sure your center responds daily to the "ABC Stoplight," a simple and highly reliable gauge of regional blood reserves for the 50-plus percent of the US blood supply that is collected by ABC members. ♦

LifeShare Names Reference and Scientific Support Lab for John Moulds

“It is time for us to stand and cheer for the doer, the achiever, the one who recognizes the challenge and does something about it.” With this Vince Lombardi quote, LifeShare Blood Centers Board of Trustees member J.R. Martin, MD, officially dedicated the John J. Moulds Reference and Scientific Support Laboratories, bringing an audience to its feet.

The dedication was made last month in Shreveport, La., where a gathering of the world’s leading immunohematologists, physicians, medical-technical professionals, family, friends, and supporters paid tribute to John J. Moulds, MT(ASCP)SBB, director of Scientific Support Services at LifeShare.

Mr. Moulds is known internationally as a leader in the field of immunohematology for his research into blood groups and reagents and his decades of service in helping physicians to identify blood donor matches for patients with difficult compatibility issues. The lab facility, which was expanded two years ago, is located in the same complex that houses LifeShare’s headquarters and its Shreveport donor center.



From left, Marilyn Moulds, MT(ASCP)SBB; Tony Casina, MT(ASCP)SBB; John Moulds, MT(ASCP)SBB; and Joann Moulds, PhD, MT(ASCP)SBB.

The event began with a symposium highlighting Mr. Mould’s career and the impact he has had on immunohematology. Speakers included Marilyn Moulds, MT(ASCP)SBB, whose talk was titled “John Moulds’ Adventures in Blood Banking from the 1960s to 2011.” Ms. Moulds discussed Mr. Moulds’ career and achievements in medical technology up through his present-day work at LifeShare.

Long-time colleague and friend Tony Casina, MT(ASCP)SBB, marketing manager at Ortho Clinical Diagnostics, said, “If a reagent can be made, John J. Moulds can make it.” Mr. Casina summarized by saying, “John has had a dramatic impact on blood bank technologists worldwide, making their lives easier when performing pre-transfusion testing and problem solving.”

Joann Moulds, PhD, MT(ASCP)SBB, director of Clinical Immunogenetics at LifeShare, and John’s wife, gave a presentation titled of “Antibodies that nobody wanted to work on.” Her talk highlighted his work on high-titer, low-avidity (HTLA) antibodies and his collaboration worldwide with other scientists which has led to major advances in areas unrelated to blood group serology.

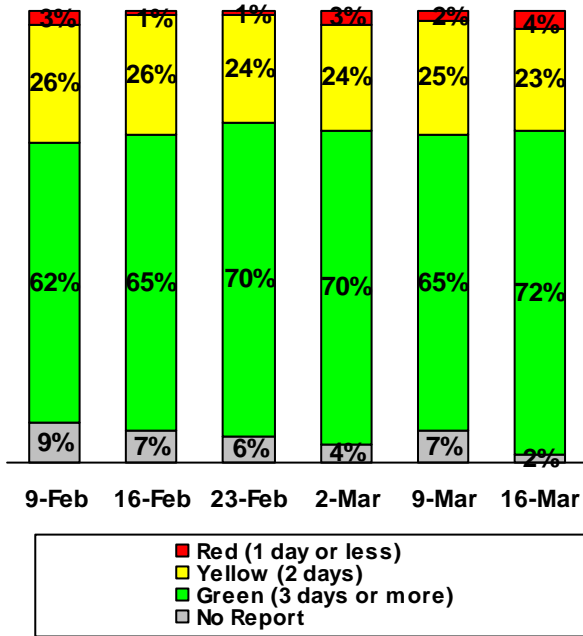
Dr. Moulds presented her husband with a framed publication from the journal *Science*, “Mutation in aquaporin-1 in phenotypically normal humans without functional CHIP water channels,” by Peter Agre, MD, *et al.*, who acknowledged Mr. Moulds’ contributions that led to Dr. Agre’s work, for which he was awarded the Nobel prize in chemistry in 2003. Dr. Agre is also a recipient of AABB’s highest honor, the Karl Landsteiner Award and Lectureship, and he acknowledged Mr. Moulds in that lecture. (*Editor’s note: Mr. Moulds will receive an award from the Foundation for America’s Blood Centers during ABC’s Annual Meeting next week.*)

In another presentation, Cindy Flickinger, MT(ASCP)SBB, managing editor of the journal *Immunohematology*, presented Mr. Moulds with a memento representing his presence on the editorial board of the publication since 1997.

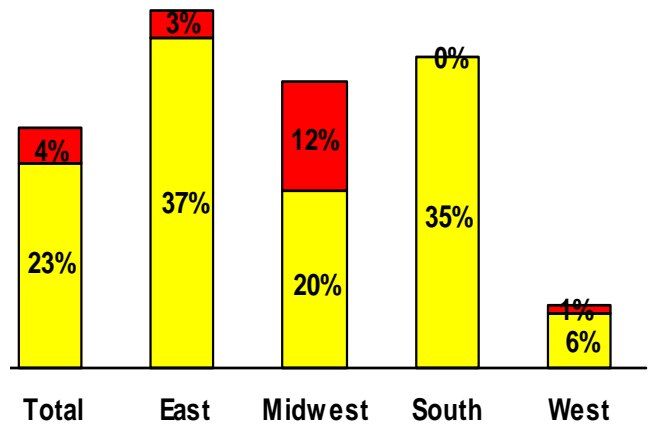
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STOPLIGHT: Status of America's Blood Centers' Blood Supply

Total ABC Red Cell Inventory



Percent of Regional Inventory at 2 Days Supply or Less, March 16, 2011



Daily Updates are available at:
www.AmericasBlood.org

LifeShare Honors Moulds (continued from page 8)

At a dedication ceremony, LifeShare Executive Vice President and CFO Linda Allsup; Medical Director Gary Levy, MD; and President/CEO Margaret Wallace shared heartwarming and humorous personal thoughts about working with Mr. Moulds and the influence he has had on their lives. In addition, Nancy Haubert, MBA, BSMT(ASCP)SBB, representing Blood Systems Inc., presented Ms. Wallace with a very generous contribution honoring Mr. Moulds.

In his dedication, Dr. Martin said, “Of all John’s amazing gifts, one I find most admirable is his generosity. Whether layperson or technical expert, John eagerly shares his wealth of knowledge with all who wish to learn. He has offered his expertise numerous times, giving lectures and case presentations in our periodic Technical Section presentations to area hospital blood bank technologists, much to the benefit of those in attendance. If the saying is true that ‘he profits most who serves best’, then John is a rich man indeed. I know we are all much the richer for having him in our lives here and helping others through his enormous body of work.”



Ms. Wallace, MT(ASCP)SBB, perhaps summed up everyone’s feelings best. “We are fortunate indeed that John Moulds, an acknowledged giant among giants, has shared his expertise, knowledge – and yes, that wicked sense of humor – with us. Thank you, John, for your life-saving work, and for sharing your life – and your name – with LifeShare.” *This article was submitted by Libby Murphy, director of Development and Public Relations at LifeShare.* ♦

Case for a Cause' Benefits Wine Lovers and Program to Help in Nigeria

The Foundation for America's Blood Centers has partnered with Expression Wines to offer a great way to pair a love of wine with efforts to improve blood safety and availability in Nigeria: the "Case for a Cause" program, through which the California winery will donate \$50 to FABC for each case of chardonnay or pinot noir it sells until June 30.

Expression Wines' donations will be earmarked for ABC member centers working in cooperation with the Safe Blood Africa Project (SBA). The winery learned about the program at the San Francisco launch party of *Zuzu's Petals*, FABC President and Chief Ambassador Lauren Larsen's memoir.

The vintners offered free tastings at the launch – and when they learned that Ms. Larsen and her publisher are donating a portion of the book's proceeds to support improving blood services in Nigeria, they offered to make a donation to FABC for each case ordered at the event.

Now they've extended that offer through June. Ms. Larsen said the program is an example of "companies with heart getting involved in a way that is beneficial for them as well as for FABC and the cause of blood safety and availability around the world."

She added that she and her husband, Jeff, think the pinot noir is "fabulous!" And, she said, "The donation to help Nigerians get the blood they so need makes the taste that much more satisfying." The chardonnay also received rave reviews from attendees at the book signing – and it earned 90 points from *Wine Enthusiast*, a magazine that rates wines on a scale of 1 to 100.



Lauren Larsen speaks at the San Francisco event.

SBA provides equipment and training to blood facilities and personnel in Nigeria (see *ABC Newsletter*, 10/29/10). It's being supported by four California blood centers: Northern California Community Blood Bank, in Eureka; BloodSource, in the greater Sacramento area; Blood Bank of the Redwoods, headquartered in Santa Rosa; and Stanford Blood Center, part of the Stanford University School of Medicine, in Palo Alto.

SBA was started by Rotary Club of Carmel Valley in California. It works to help improve the safety and availability of blood in hospitals throughout Nigeria by providing equipment and encouraging volunteer blood donations. Its website is www.safebloodafrica.org/.

SBA's efforts complement those of the Safe Blood for Africa Foundation, a nonprofit with similar goals that works in "as many African countries as possible to achieve a safe and adequate blood supply." More details about Safe Blood for Africa are available at www.safebloodforafrica.org.

Expression Wines has used its "Case for a Cause" program to support a number of nonprofit organizations "that are near to our hearts and to those of our customers," the company says on its website. Details on the program are available at www.expressionwine.com/Wines/A-Case-For-A-Cause. Customers can also order by calling the winery at (707) 226-8569, extension 115. ♦



Attendees at the San Francisco launch of Lauren Larsen's memoir, *Zuzu's Petals*, included Nora Hirschler, MD, CEO of Blood Centers of the Pacific (seated, facing camera), and Dean Eller, president and CEO of Central California Blood Center (far right).

BRIEFLY NOTED

Proposals are afoot that would dramatically limit charitable tax deductions, and hospitals are worried. Three blue-ribbon panels – and Robert B. Reich, the former Labor secretary – have proposed changing the deduction. One panel, the National Commission on Fiscal Responsibility and Reform, would give taxpayers a tax credit worth 12 percent of their donations – but only if they contributed 2 percent or more of their adjusted gross income to charity. If that were put into effect by Congress, hospitals could lose more than \$1 billion in donations, hospital fund-raisers estimated in a new survey by the Association for Healthcare Philanthropy. A poll conducted in February of 317 fund-raisers who belong to the association asked about the 12-percent tax credit for donations. Nine out of 10 fund-raisers said the proposal would cause “significant” decreases in total contributions. Meanwhile, the White House has also proposed limiting write-offs, including those for charity, to 28 percent for taxpayers in the highest brackets. Sixty-one percent of fund-raisers said if tax breaks for giving are limited, they expect donations to drop by 10 to 19 percent. “What our members are saying is that ‘We’re nervous about this,’” said Bill McGinly, president of the Falls Church, Va., association, which represents 2,000 nonprofit hospitals and medical centers. “If the tax deduction is reduced, the dollar amount is going to follow suit from donors.” Especially with large gifts, “donors want to know [about their tax liability],” Mr. McGinly said. “They are very intelligent about taking advantage of the tax deduction. We know full well that they don’t make their gifts based on the charitable deduction, but the size of their gifts is influenced.” Mr. McGinly said the association plans to meet soon with lawmakers to discuss the survey’s findings. (Sources: *The Chronicle of Philanthropy*, 3/16/11; *The New York Times*, 12/2/10)

The Centers for Medicare and Medicaid Services (CMS) estimates that Medicare physician reimbursement will be cut by 29.5 percent in 2012, based on a formula that does not account for legislative fixes in previous years. When President Obama signed a bill in 2010 to postpone the scheduled 25 percent cut in Medicare reimbursement through 2011, physicians were aware that the pay cut would be greater than 25 percent come 2012. In a letter to the chairman of the Medicare Payment Advisory Commission, or MedPAC, Jonathan Blum, deputy administrator of CMS’ Center for Medicare, said that the “conversion factor” – a dollar multiplier used to calculate physician payments under the current reimbursement system – will be cut from \$33.98 to \$23.94. The cut is mandated by the sustainable growth rate (SGR), a formula that ties physician reimbursement to the gross domestic product; the SGR has called for cuts in pay every year since 2002. Every year since 2003, Congress has voted at the last minute to push those cuts down the road. Mr. Blum said the most recent bill passed by Congress to keep payment rates steady for a year is “critical,” but not enough. “We will continue to work with Congress to fix this untenable situation so doctors no longer have to worry about the stability and adequacy of their payments from Medicare,” he said. (Source: *MedPage Today*, 3/10/11) ♦

LEGISLATIVE NEWS

The Iowa House of Representatives on Monday passed a bill that would require an impartial medical expert to review the facts of a malpractice case before a lawsuit can proceed. The bill, HF 490, or the IMS Certificate of Merit (COM) Act, now moves to the Iowa Senate. The bill passed by a vote of 61-31. Iowa Medical Society (IMS) told its members this week that “strong physician grassroots will be needed to achieve passage in the Senate...” Kevin Cunningham, MD, chair of the IMS Legislative Committee, said a certificate of merit is good public policy that is already in place in 24 states. “The beauty of this is that it weeds out lawsuits that have no merit, so it protects patients from committing resources and placing false hope in a lawsuit that has no chance of succeeding,” he said. “We’ve always believed patients with a legitimate case should have their day in court, and this procedural change will save time and

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LEGISLATIVE NEWS (continued from page 11)

money and lead to a quicker resolution and settlement for the patient.” Iowa's largest medical liability insurer, MMIC, notes that on average, 72 percent of claims against their insured physicians over the past six years resulted in no payout to a plaintiff. MMIC officials also report that 93 percent of the medical liability lawsuits they defended in court over the past six years were decided in favor of physicians. A COM law would reduce the number of these lawsuits with no merit and keep them from taking up valuable resources in court. Dr. Cunningham also said a certificate of merit will ensure physicians are not pulled away from patients and forced to spend time defending meritless cases in legal proceedings. “With the physician shortages we have in Iowa right now, it’s important that we do everything we can to make sure our physicians are with their patients.” (Source: Iowa Medical Society Advocacy Alert, 3/15/11) ♦

REGULATORY NEWS

The Food and Drug Administration announced last Friday (3/11/11) that it has received post-marketing reports of serious thrombotic adverse events associated with use of Vivaglobin, which is manufactured by CSL Behring. This intravenous immune globulin (IGIV) product is used to treat primary humoral immunodeficiency, and it is meant to be administered subcutaneously. However, post-marketing reports suggest that there is a degree of risk associated with subcutaneous administration of Vivaglobin. FDA says it was informed by the manufacturer that in-house research testing revealed procoagulant activity in the product. However, the agency said the significance of these findings is uncertain. Risk factors that increase the likelihood of thrombotic event associated with Vivaglobin have included pre-existing cardiovascular disorders, prior thrombotic event, obesity, oral estrogen use, hyperlipoproteinemia, in-dwelling catheter, and immobility. Hyperviscosity, hypercoagulable disorders, and multiple cardiac risk factors may also confer thrombosis risk in the setting of immune globulin product administration. It is well known that arterial and venous thrombosis can occur following the administration of intravenous IGIV products, and Vivaglobin is not approved for intravenous use. Inadvertent intravenous use of Vivaglobin may carry a higher risk. FDA recommends that Vivaglobin not be infused intravenously, that it is infused at the minimum rate practicable, and that package insert instructions are followed. Patients should be made aware of the signs and symptoms of thrombotic events, including shortness of breath, pain and swelling of a limb, focal neurological deficits, chest pain, and other manifestations of thrombotic and embolic events. FDA continues to monitor reports of thrombotic adverse events associated with intravenous and subcutaneous immune globulin products, and it is working with manufacturers to identify strategies that lower their risk of such events. The full announcement is available at www.fda.gov/BiologicsBloodVaccines/SafetyAvailability/ucm246863.htm. ♦

GLOBAL NEWS

The Court of Justice of the European Communities issued an opinion last week questioning the ethics of the work of stem cell researchers and threatening to ban the patenting of procedures that involve human embryonic stem cell lines. Some scientists fear that the opinion could also prompt European countries to tighten their legislation on such research, or ban it altogether. “It’s the worst possible outcome,” said Oliver Brüstle, MD, director of the Institute of Reconstructive Neurobiology at the University of Bonn in Germany. The lengthy legal debate was sparked by Dr. Brüstle’s 1991 patent of a technique to generate nerve cells from established human embryonic-stem cell lines. The environmental group Greenpeace, based in Amsterdam, challenged the patent in 2004, arguing that the destruction of human embryos involved in deriving the cell lines was “contrary to public order” and breached guide

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On the Never-Ending Story: XMRV and CFS

“A new finding presented at a conference ... last week throws cold water on the impassioned debate about the link between a novel mouse retrovirus and prostate cancer and chronic fatigue syndrome (CFS) in humans. Yet few believe it will end the controversy, which began in 2006.

“In an extensive sleuthing expedition that looked back nearly 20 years, two collaborating research teams contend that they have evidence that xenotropic murine leukemia virus–related virus (XMRV) resulted from the chance recombination of pieces of two mouse viruses in lab experiments and that the connections to human disease are spurious. ‘That nails it,’ said retrovirologist Nathaniel Landau of New York University. ‘Everyone working on this thing has this virus contaminating their stuff. It’s been a tremendous waste of time and money.’

“But even if XMRV is not a threat to human health, the fact that a retrovirus that can readily infect human cells was apparently generated by chance in the lab raises some interesting and potentially troubling issues. ...

“‘The evidence coming out at this meeting is incredibly impressive, and the weight of evidence is indicating that this is not a major human virus in terms of pathogenesis,’ says Michael Busch, who heads the Blood Systems Research Institute in San Francisco, California, and is part of a working group convened by the Department of Health and Human Services to examine whether XMRV poses a threat to the country’s blood supply. But Busch said that before he concludes XMRV is simply a contaminant, he wants to see the results of studies they are coordinating between several labs with samples from agreed-upon patient and negative controls, as well as blood donors. If most of these fail to find the virus, Busch says, ‘it’s going to eliminate concerns’ that XMRV has caused these diseases.

“Even if XMRV has not harmed humans, Busch says we got lucky. This is the first accidental generation of a retrovirus that can infect human cells. ‘It’s a warning shot,’ Busch says. ‘We’ve created a highly infectious virus that may transmit to humans.’”

– Excerpted from *Science*, 3/11/2011

GLOBAL NEWS (continued from page 12)

lines set out in the European Patent Convention. In 2006, Germany’s federal patent court in Munich ruled in Greenpeace’s favor, so Dr. Brüstle appealed to the Federal Court of Justice in Karlsruhe. That court in turn referred the case to the European court. Judge Yves Bot, the case’s adjudicator, concluded on March 10 that even if they do not involve the direct destruction of embryos, techniques involving human embryonic stem cell lines are not patentable because they are tantamount to making industrial use of human embryos, which “would be contrary to ethics and public policy.” Judge Bot’s opinion will now be considered by the 13 judges in the European court’s Grand Chamber. A final decision is expected in about two months, but a spokesperson for the European court said that few preliminary opinions are reversed. Germany allows research only on imported human embryonic stem cell lines created before May 2007. Such cultured cell lines are merely pluripotent – capable of developing only into defined tissue types. And some countries, including Ireland, have yet to legislate on the issue. Although Judge Bot noted that pluripotent stem cells cannot be defined as embryos because “they are no longer capable of developing into a complete human being,” he did say that the embryonic source of pluripotent cells “cannot be ignored.” Some think that the ruling is likely to encourage vacillating countries to introduce restrictive laws or complete bans on the research. (Source: *NatureNews*, 3/16/11) ♦

MEMBER NEWS

NYBC Submits License Application for Cord Blood to FDA

New York Blood Center's (NYBC) National Cord Blood Program (NCBP) has submitted a biologics license application (BLA) for cord blood to the Food and Drug Administration. Since 1996, NCBP has provided cord blood for transplantation under an FDA investigational new drug (IND) exemption.

The FDA has directed that all public cord blood banks become licensed or qualify for an IND exemption by October 2011, in order to continue providing cord blood units for use in the US. To obtain a biologics license, all collection and manufacturing conditions of the cord blood units must meet FDA standards for product potency, purity and efficacy, and patient safety.

NCBP's BLA for "Hematopoietic Progenitor Cells, Cord" includes "extensive documentation of the systems and controls used, and the validations performed to ensure compliance with FDA standards in all steps of manufacturing (collections, processing, testing, typing, cryopreservation, storage, distribution, and shipping) cord blood units for clinical use," the NCBP said in an announcement this week.

The BLA includes safety data from the transplantation of more than 4,000 cord blood grafts. NCBP analyzed information from the transplant centers on clinical outcomes of individuals who received transplants, including adverse events or other unexpected outcomes that may have been due to problems with product manufacture, and whether corrective actions were needed. In advance of the BLA submission, NCBP moved its entire manufacturing and storage resources to a state-of-the-art facility at Long Island City, N.Y.



"The application process has been a rigorous and educational one for all of us at the National Cord Blood Program," said Pablo Rubinstein, MD,

NCBP vice president and program director. "We have always understood that providing high-quality cord blood units for clinical use requires thorough scientific and technical definitions of methods, detailed analysis of results, and hard work. Achieving systematic compliance with FDA good manufacturing practices should offer further assurance of the consistently predictable potency, purity, safety, and efficacy of NCBP cord blood units."

Launched in 1992, the NCBP at NYBC's Howard P. Milstein National Cord Blood Center was the first established umbilical cord blood bank to collect, process, test, and store cord blood units for hematopoietic stem cell transplantation.

NCBP has collected and stored more than 55,000 clinical cord blood units and has provided more than 4,100 cord blood grafts for transplantation. Cord blood contains all the normal elements of blood – red blood cells, white blood cells, platelets, and plasma – and is also rich in hematopoietic (blood-forming) stem cells, similar to those found in bone marrow. This is why cord blood can be used for transplantation as an alternative to bone marrow.

Most cord blood transplants have been performed in patients with blood and immune system diseases. Cord blood transplants have also been performed for patients with genetic or metabolic diseases. More than 80 different diseases have been treated to date with unrelated cord blood transplants.

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MEMBER NEWS (continued from page 14)

New York City Mayor Michael Bloomberg donated blood recently in a Mayor's Office Blood Drive to help the New York Blood Center (NYBC) bolster its supply and to encourage other New Yorkers to give the gift of life. In a public service announcement video recorded at the blood drive, Mayor



Mayor Michael R. Bloomberg donates blood during NYBC's Mayor's Office blood drive. Donor Specialist Rashgene White is on hand to assist.

Bloomberg urged healthy people of all blood types and ethnicities to donate blood, to ensure that the region is prepared for predictable blood needs and any unexpected contingencies. He also asked that more minorities, particularly African-Americans, become blood donors. The mayor filled out the paperwork, took off his left cufflink, rolled up his sleeve, and relaxed on a lounge chair before donating a pint of blood. Mayor Bloomberg, an O-positive, regular NYBC donor, has recorded multiple public service announcements seeking blood donations, urging young adults to become blood donors, and urging existing blood donors to return whenever they can. People can donate one pint of whole blood every 56 days. Mayor Bloomberg told WCBS 880's Rich Lamb, "It saves lives, and it is literally, totally painless. And you get a chance to sit and relax and talk one on one with esteemed members of the fourth estate," Mr. Bloomberg said. "You never know: someday you may need an operation or an

emergency and if they don't have blood, you can't have the operation and you could die." After donating, Mr. Bloomberg received a pack of Lorna Doones, some Oreos, and a couple bottles of water. Roughly 20 million people depend on blood center donations in New York City, Long Island, the Hudson Valley, and New Jersey. (Sources: NYBC website; WCBS 880.com, 3/9/11)

Patient Tries Provenge Treatment for Prostate Cancer at FBC

When doctors diagnosed Michael Mead with prostate cancer seven years ago, he vowed to do everything he could to fight it. Now, with a new cutting-edge cell therapy, he has a fighting chance.

Florida's Blood Centers (FBC), based in Orlando, extracts the white blood cells from Mr. Mead's body. Then they are processed with Provenge, the first prostate cancer therapy that uses the patient's own immune cells. Provenge, developed by Dendreon Corp., transforms white cells into cancer-fighting cells that aggressively target prostate cancer.

According to Dendreon's web site, "The process of making Provenge involves the introduction of a patient's immune cells to a protein that functions as a prostate cancer-associated antigen. An antigen is a substance that causes the body to react with an immune response. This process activates the patient's immune cells against prostate cancer cells to help the immune system better fight the disease."

"This revolutionary treatment opens up the area of personalized medicine where you can get the right drug to the right individual to treat the right condition," said Richard R. Gammon, MD, medical director at FBC.

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For Mr. Mead, it's another chance at beating a life-threatening disease. He's already tried radiation, chemotherapy, and hormone blocking therapy with little success. "The cancer is armoring up, and there are not a lot of effective treatments for me at this point," he said in a video on FBC's website.

The medical community is watching Mr. Mead's progress closely. Because Mr. Mead is running out of options, doctors say he is a good candidate for the innovative Provenge treatment. (Source: Florida's Blood Centers press release, 3/3/11) ♦

COMPANY NEWS

Terumo Medical Corp. sent a letter to its customers on Wednesday, reassuring them that it should be able to continue to fill their orders, despite the challenges posed to its facilities in Japan by last week's earthquake and tsunami. The company is a division of Terumo Corp., which is headquartered in Tokyo. It supplies blood bags to several America's Blood Centers members. The letter, signed by Adrian V. Gilmore, senior vice president and general manager of Terumo Medical, said the company's facilities "escaped significant damage" and that its associates are safe. However, he said that problems with Japan's transportation and electricity supply systems are creating "challenging circumstances," and he pointed out that the company does not know when conditions will return to normal. Luckily, Terumo has several months of inventory in its supply chain, Mr. Gilmore said, so it should be able to produce and supply sufficient products to its US customers. If that changes, he added, the company will "utilize any and all available internal and external resources to take care of" its customers' needs. He told customers, "Our single highest priority at this time is to make sure those needs are met so you can continue to provide your life saving services and products to patients without interruption." (Source: Terumo letter, 3/16/11) ♦

PEOPLE

Dale Walvort has been named manager of Donor Relations in southwest Michigan for Michigan Blood, which supplies blood to 30 Michigan hospitals in four large regions statewide. Mr. Walvort will be responsible for planning and leading Donor Relations functions for two Michigan Blood locations and mobile blood drives in a multi-county region that includes the greater Kalamazoo and Benton Harbor-St. Joseph areas. His goal will be to recruit 8,600 blood donors each year in southwest Michigan. Mr. Walvort holds a bachelor's degree in business administration from Dordt College in Sioux Center, Iowa. His professional background includes business promotion, development, fundraising, and financial management experience in education and business fields. Most recently he served as director of Advancement for the Kalamazoo Christian Schools. Headquartered in Grand Rapids, Michigan Blood serves Michigan hospitals from fixed donor sites in Grand Rapids, Saginaw, Midland, Bay City, Traverse City, St. Joseph, and Portage; at regular community blood drives in 60 locations; and at more than 2,000 mobile blood drives each year.

Nancy C. Andrews, MD, PhD, will be honored by the New York Blood Center (NYBC) as the keynote speaker at the 33rd Annual Alexander S. Wiener Lecture on Monday. Dr. Andrews, who NYBC called a "distinguished physician and scientist," will discuss her research in a presentation titled "Forging an Understanding of Iron Disorders." Dr. Andrews is vice chancellor for Academic Affairs and dean of the

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School of Medicine at Duke University in Durham, N.C. She also maintains an active research laboratory at Duke, funded by the National Institutes of Health. Her laboratory focuses on mouse models of human diseases. NYBC said her work with these models has contributed to the understanding of the pathogenesis of hemochromatosis and the roles of hepcidin in the pathogenesis of chronic anemias and hemochromatosis. Dr. Andrews earned a bachelor's of science and a master's in molecular biophysics and biochemistry from Yale University, a PhD in biology from Massachusetts Institute of Technology, and a medical degree from Harvard Medical School. She completed both clinical and research fellowships in pediatrics at Harvard Medical School and a fellowship in hematology/oncology at Children's Hospital, Dana Farber Cancer Institute in Boston. She has published extensively and has received many awards and honors for her research. The lecture is open to medical professionals, research professionals, and the general public at no charge, and a reception will follow. (Source: NYBC press release, 3/8/11) ♦

MEETINGS

May 17-18 **Public Workshop, "Risk Mitigation Strategies to Address Potential Procoagulant Activity in Immune Globulin Intravenous Products," Rockville, Md.**

Sponsored by the Food and Drug Administration; the National Heart, Lung, and Blood Institute; and the Plasma Protein Therapeutics Association. Discussions at this free public workshop will focus on risk mitigation strategies to address procoagulant activity that may be present in some immune globulin intravenous (IGIV) products; identifying the most likely causes of IGIV-associated thrombotic events; determining which procoagulant proteins may be causative; and identifying relevant, feasible tests that could be used to assess levels and/or activity of these proteins in IGIV products. Presentations will be made by national and international experts from government, academic institutions, and industry. Registration deadline is April 26. More information, including a list of topics to be discussed on each day, is available in the March 16 *Federal Register* announcement, at <http://edocket.access.gpo.gov/2011/2011-6084.htm>. Transcripts will be available online after the workshop.

Contact: Rhonda Dawson, Center for Biologics Evaluation and Research, FDA. Phone: (301) 827-6129; fax: (301) 827-2843; e-mail: rhonda.dawson@fda.hhs.gov. ♦

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 Newsletter* Editor Robert Kapler at rkapler@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.

POSITIONS AVAILABLE:

Classified advertisements, including notices of positions available and wanted, are published free of charge for a maximum of three weeks for ABC institutional members. There are charges for non-members: \$114 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.

The New York Blood Center (NYBC) has a number of positions open:

- **Blood Banking/Transfusion Medicine Physician.** NYBC seeks a full-time blood banking/transfusion medicine physician for an open position as transfusion service medical director at Westchester Medical Center. NYBC is one of the nation's largest non-profit, community-based blood centers supplying 400,000 red cell units to New York, New Jersey, and Pennsylvania. In addition to its core function as a premier collector, processor, and distributor of blood and blood products, NYBC is also home to the Lindsley F. Kimball Research Institute and the National Cord Blood Program at the Howard P. Milstein National Cord Blood Center, which is the world's single largest public cord blood bank. Westchester Medical Center is a large tertiary care hospital with specialty services in trauma, burn, pediatrics, stem cell transplantation, solid organ transplantation, cardiac surgery, and hematology/oncology. This individual would be an integral member of Medical Programs and Services Division of NYBC, which encompasses hemophilia services, transfusion services, therapeutic apheresis, National Marrow Donor Program, transfusion medicine fellowship, cellular therapy, and perioperative autologous transfusion, as well as medical oversight of the entire organization. Under the leadership of Beth H. Shaz, MD, vice president of Medical Programs and Services and chief medical officer, with the support of Christopher D. Hillyer, MD, president and CEO, this division is undergoing transformation to provide innovative, high-quality service and products. Candidates should have an MD and/or PhD, eligibility for medical licensure in New York, eligibility for board certification in blood banking/transfusion medicine, and strong management, communication, and leadership skills. Ample time for scholarly activities as well as a faculty appointment will be provided. Please send letter of interest, current CV, and contact information for three references to bshaz@nybloodcenter.org. NYBC is committed to equal opportunity and diversity. Women, veterans, members of underrepresented minority groups, and individuals with disabilities are encouraged to apply.
- **Director, Cord Blood Quality, Long Island City location.** Provide oversight, support, and guidance in quality and regulatory issues to the National Cord Blood Program. Oversee quality requirements in all National Cord Blood Program areas. Manage National Cord Blood Program processes to meet FDA cGMP

and FACT standards. Function as the liaison with the corporate internal auditor program. Responsible for making recommendations and monitoring current and future standards and implementing training procedures and practices. Requirements: bachelor's degree (minimum) with master's degree desirable. Experience with Six Sigma or equivalent preferred. Ten years' experience in quality in a regulated environment, with five years of management experience in quality. Experience with cell manufacturing required. Experience in the preparation and filing of biological license applications helpful. Detail oriented. Excellent communication skills required. Working knowledge of prevailing laws and regulatory requirements, cGMPs, and international standards. To apply, please e-mail your resume to EACareers@nybloodcenter.org.

- **Data Analyst, NYC.** Assists Quality and Regulatory Affairs and Operations in collection and analysis of quality data to determine opportunities for improvement and to generate actionable reports. Provides guidance and data management support to quality and operations in the appropriate collection and analysis of data. Requirements: bachelor's degree required in analytical background. One to two years' experience in processing data preferred. Advanced knowledge and significant experience with Microsoft Excel, Microsoft Access, and PowerPoint required. Strong analytical skills; ability to create presentations that accurately depict data; excellent verbal and written communication skills. Experience with statistical process control experience very desirable. To apply, please e-mail your resume to EACareers@nybloodcenter.org.
- **Quality Assurance Specialist, Long Island, New Jersey, Westchester, Manhattan locations.** Provide guidance, support, and oversight to operations and other functional groups within NYBC. Support and assist management in the Quality and Regulatory Affairs division in all activities related to compliance monitoring, Standard operating procedure (SOP) review, and continuous improvement. Under the guidance of direct supervisor, work to ensure that specific assigned region of NYBC is compliant. Cooperate with auditors as needed. Requirements: bachelor's degree required, preferably in biological sciences, or comparable education/experience combination. Working knowledge of regulations and standards applicable to blood and tissue

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- establishments. Minimum one year of experience in blood banking, transfusion services, biologics, etc. Minimum two years' experience in quality-related activities. Experience in conducting audits desirable. Excellent written and oral communication skills. Attention to detail. Able to conduct limited travel when necessary. Ability to think critically and make decisions related to compliance within the blood establishment. Ability to perform root cause analysis. To apply, please e-mail your resume to EA-Careers@nybloodcenter.org.
- **Regulatory Affairs Associate, NYC location.** Assist Director of Regulatory Affairs in the following areas: preparation/submission of electronic biological product deviation reports. Preparation/submission of biologic license application submissions and state applications and renewals. Tracking status and submission of responses to FDA/state/AABB/other deficiencies and citations. Review of regulatory information to update DRA on developing issues and regulatory requirements. Requirements: bachelor's degree, advanced degree preferred. Three to five years' experience in regulatory affairs, including preparation of required regulatory submissions, is preferred. Thorough demonstrated knowledge of federal, state, and AABB regulations and standards as they apply to blood center and HCT/P activities. Three to five years' experience in blood establishment quality is desirable. Detail oriented. Attention to accuracy. Excellent communication skills, both verbal and written. Ability to interact with others in a calm, professional manner. Thorough working knowledge of basic computer programs. Word/Excel/PowerPoint essential. To apply, please e-mail your resume to EACareers@nybloodcenter.org.
- **Document Management Specialist, NYC, Long Island City.** Assures that regulatory, compliance, and organizational goals are met by managing the official NYBC corporate documents consisting of, but not limited to, standard operating procedures (SOPs), policies and directives, training manuals. Manages electronic posting of documents and ensures documents meet corporate document and graphics standards and are current, accurate, and accessible. Requirements: two-year associate's degree from an accredited institution or equivalent is required. A minimum of two years of experience in an FDA-regulated environment is required. Training and/or experience in a laboratory is preferred. Quality assurance experience or keen interest (demonstrated by self-acquired knowledge or courses) is required. Demonstrated interpersonal skills and customer service focus is required. Must be detail oriented. Must have sound decision-making skills and be able to recognize and resolve most common problems. Must have the ability to handle multiple tasks at one time. Must be proficient in Microsoft software applications, including Word, Excel, and Access;

Trackwise and Pulse. Must have a basic understanding of FDA regulations, quality systems, and cGMPs. To apply, please e-mail your resume to EACareers@nybloodcenter.org.

- **Manager, Customer Relations.** NYBC has an opening in our Customer Service Department for a Customer Relations Manager based out of our New Jersey location with various territories. In this vital role you will be responsible for ensuring NYBC customers (hospitals) receive and view NYBC as giving the highest level of customer service. Strategically positioning NYBC with current and future customers through an added-value partnership while providing a variety of customer service functions including educational tools, seminars, and functioning as a liaison on day-to-day needs. Bridging current and future customers current needs with blood products and services of NYBC. This position is also responsible for the sales of all medical service products to new and existing customers while continuing to provide exceptional customer service within geographic boundaries of assigned territory. Bachelor's degree required. SBB or MT a plus. Three to five years' in healthcare, customer service, pharmaceuticals, and/or sales in any variety. Medical technology background a plus. Strong knowledge of hospital operations and transfusion medicine. Display proven success in customer service and/or sales. Must have outstanding communication skill (both written and verbal), customer service and relationship development skills. Must have experience in developing new business and networking. Ability to communicate with confidence and using relevant medical terminology a must. To apply please send your resume to: EACareers@nybloodcenter.org.

As an employer of choice, New York Blood Center offers an environment that supports and sustains the needs of employees. We understand the demands of your career, your need for autonomous decision-making, and your desire to keep learning. Below are just a few of the benefits we offer to our employees. Health benefits: comprehensive medical, prescription drug, and vision plans. Employer contribution of 7 percent of base salary to a 403(b) retirement account; tuition; reimbursement program; medical and dependent care flexible spending accounts; commuter administration services (pre-tax commuter savings account) (CAS). For more information about our company and its benefits, please visit us at www.nybloodcenter.org. The New York Blood Center has provided our community with the highest quality transfusion products and services, as well as leading-edge research, technological and medical care innovation, and education in the field of transfusion medicine for over 40 years. As the nation's largest community-based, non-profit, independent blood center, our employees play a vital role in making the New York Blood Center a center of excellence where all activities, people, products, processes and service surpass expectations and are aimed at earning and keeping the trust and confidence of all stake

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holders. NYBC is committed to equal opportunity and diversity. Women, veterans, members of underrepresented minority groups, and individuals with disabilities are encouraged to apply.

Assistant Manager/Medical Technologist, Donor Testing Lab. Memorial Blood Centers, located in St. Paul, MN is seeking a full-time Assistant Manager for the Donor Testing Lab to manage testing laboratory staff, coordinate operations associated with testing blood donors for infectious disease and immunohematology (ABO/Rh and antibody screen). Ensures quality systems are implemented, maintained, and monitored to remain compliant with regulatory and accrediting agencies. Assures technical accuracy and compliance of staff, computer systems, equipment and all processes involved in infectious disease testing of donor samples, through compliance with SOPs, cGMPs and regulatory standards. Documents deviations, events, investigations, and develops and implements corrective action as needed to resolve issues of non-compliance. Maintains a technically superior department through ongoing training and development of department employees, proper recruitment/hiring of new employees and employee termination when appropriate. Performs employee performance reviews and ongoing coaching. Maintains competency in testing to be able to function in a backup capacity in a minimum of one technology platform (e.g., OSP, NAT, PK7200). Tracks reagent/supply inventory and/or equipment maintenance as assigned. Education and experience: Medical Technologist with six years (MT) of previous leadership or supervisory experience preferred. Ability to work independently, organize and prioritize duties and occasionally work irregular hours. Understanding of fundamental laboratory techniques, cGMPs, blood typing, serologic testing, and PCR. Excellent oral and written communication skills. Hours: 2:00 p.m. – 10:30 p.m. with weekend availability. Visit www.mbc.org to submit resume/application and learn more about Memorial Blood Centers mission and organization goals. EEO/AA

Executive Account Representative. Blood Bank Computer Systems, Inc. seeks a dynamic team player to join the Customer Support department as an Executive Account Representative to influence quality Client Management. BBCS, Inc. is located in Auburn, WA and is a leading provider of software solutions positively impacting the blood and tissue industry and the communities they serve. This position will be responsible for managing client accounts, reviewing design change requests, consulting, training as well as supporting internal and external customers as related to distributed software applications and products in development. The ideal candidate will support and promote the company's vision, mission and objectives and possess excellent communication and problem solving skills. Experience in a regulated, medical or software environment is preferred. This position is offered as a remote position with approximately 20 percent travel. Interested applicants should visit www.bbcinc.com/index.php/eng/ABOUT-

[BBCS/Opportunities/Executive-Account-Representative-EAR](#) for additional information on the position and job application process. If you have any questions please do not hesitate to contact us at hr@bbcinc.com.

Lab Specialist-Consultation and Reference Lab, Gulf Coast Regional Blood Center. Responsibilities: perform, document, and interpret tests necessary to resolve complex serological problems; perform antigen screening to locate antigen-negative blood; prepare wet samples for educational purposes; participate in QC and QA improvements within the department; perform, interpret, and document in SafeTrace routine donor serological testing; record, place and fill orders for antigen-negative red blood cells in SafeTrace; prepare washed and deglycerolized rbc's; enter rare cell and serum samples into Access database. Education and experience: MT/MLS, BB or SBB and minimum of one year experience in blood banking and immunohematology; or certificates, licenses, registrations MT/MLS – ASCP or equivalent certification required MT/MLS BB/SBB (ASCP or equivalent) strongly preferred. Apply at www.giveblood.org.

Lab Tech II – Processing, Gulf Coast Regional Blood Center. Responsibilities: Performs testing, prepares reagents, performs/documents quality control and preventive maintenance according to standard operating procedures, and completes results in a timely manner. Updates results from workstation computer to mainframe system; enters and verifies manual results and quarantines units as required. Fills out all required forms and pulls samples for repeat reactive and confirmatory testing and performs computer searches, matches, and printouts. Initiates troubleshooting of equipment. Reviews quality control documents and validation of SOPs; participates in quality control and quality assurance activities within the department. Supports the integration of new staff into department by providing training and support in adhering to workflow; obtains current information in the field through utilization of in-services, workshops, and seminars. Education and experience: associate's degree from an accredited college or university (or 60 semester hours of lab course work) and completion of accredited MLT program, or associate's degree (or 60 semester hours of lab coursework) and completion of 50 week US military medical technology laboratory course. Candidates must also be eligible to sit for ASCP (or equivalent) certification exam. Apply at www.giveblood.org.

Director of Donor Services. Houchin Community Blood Bank, located in Bakersfield, Calif., is currently recruiting for a Director of Donor Services. Houchin is a non-profit community blood bank, centrally located in California, serving all of Kern County. Our Director of Donor Services is a key employee of the blood bank and an integral member of the management team. This individual is responsible for the management of the entire Donor Services Department, including donor suitability and collections. He or she will be responsible for all donor

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collection activities and compliance with blood bank and regulatory requirements. This challenging opportunity requires a valid California Registered Nurse License or bachelor's degree. Other requirements include: excellent oral and written communication skills, the ability to creatively problem-solve and multitask, and must be extremely organized. We offer a competitive salary, great work environment, excellent benefits, including two retirement plans, and more. For more information about our company, please visit us at www.hcbb.com. Don't miss this opportunity to join the Houchin team and help save lives in Kern County! Resumes may be emailed to Pati Del Papa – pdelpapa@hcbb.com or you may contact her at (661)323-4222, extension 207.

Medical Director of Blood Bank/Blood and Marrow Transplant Laboratory. The Department of Pathology at Wake Forest University School of Medicine is accepting applications for the position of Medical Director, Blood Bank and Blood and Marrow Transplant (BMT) Laboratory. The position includes a tenure track appointment in the Department of Pathology at the Wake Forest School of Medicine at the assistant/associate professor level. The candidate should have an MD degree with board certification in pathology, hematology or internal medicine, subspecialty board certification in blood banking/transfusion medicine. The blood bank service provides all transfusion-related support to the Wake Forest University Baptist Medical Center, which is a University tertiary-care facility with active programs in stem cell and organ transplantation, cardiothoracic surgery, hematology and oncology, pediatric and adult level I trauma and other critical care areas. The BMT service provides all cellular processing support for the Medical Center's clinical BMT program. Responsibilities of the position include providing medical, technical and administrative leadership to the blood bank and BMT laboratories; serving as the liaison between the blood bank/BMT and all clinical services that utilize the laboratories; ensuring compliance with all applicable regulatory and reimbursement requirements; and oversee educational activities of the blood bank and BMT laboratories. Interested persons should send their CV, including three references, to: Gregory J. Pomper, MD, Director of Clinical Laboratories, Department of Pathology, Wake Forest University School of Medicine, Medical Center Boulevard, Winston-Salem, NC 27157. Wake Forest University is an equal opportunity/affirmative action employer.

District Director. LifeSouth Community Blood Centers is seeking a confident and independent professional for the District Director position in Hernando, Fla.. This position is responsible for supervising all issues relating to the operation of the regions and mobile collection units within a district. Some other responsibilities would include directly overseeing regional managers and personnel, assessing and monitoring the financial operations and acting as the community and media spokesperson for LifeSouth within the district. Bachelor's degree required. A minimum of five years management experience is strongly

preferred as well as industry and/or FDA regulatory experience. Competitive compensation/benefits package. Background check and credit check required. EOE/DFWP. Please click on the link to apply: <https://home.eease.adp.com/recruit/?id=563389>

Donor Center Manager. Kentucky Blood Center, located in Lexington, Ky., seeks enthusiastic healthcare professional to hire, train, motivate, encourage, develop, evaluate, and supervise on-site and mobile collection staff to ensure our valued volunteer blood donors receive the best care possible; ensure quality control and compliance with industry regulations; utilize resources to maximize cost effectiveness; and assure beneficial business relationships in the community. Medical background (RN, MT, MLT, or related field) and five years' management experience required. Applicants must have working knowledge of Word and Excel; demonstrated skills in staff management/development, budget preparation/monitoring, and organizational skills; ability to think independently and solve problems; and possess excellent communication skills. This challenging opportunity requires a team-player attitude, high energy level, and a dedication to excellence. Applications must contain a cover letter to be considered. Benefits: medical insurance, life insurance, dental insurance, paid vacation, paid sick days, paid holidays, long term disability, 401K/403b plan, and pension/retirement. Screening requirements: drug screen and criminal background check. For more information or to apply online please visit: www.kybloodcenter.org/. Drug-free and EOE/AAP

Director of Hospital Services. Kentucky Blood Center, located in Lexington, Ky., is seeking a resourceful, self-motivated individual to oversee all administrative and technical aspects of our Hospital Services department. The successful candidate will ensure excellent customer service is provided to all KBC blood component customers; complete the department operational budget; monitor expenses and provide variance reports to CTO; review staff performances annually according to policy; ensure all audits and reviews are completed in a timely manner, and will ensure acceptable validation and implementation of new or revised processes, equipment, computer programs, and SOPs. Certification requirements: MT (ASCP). Candidates must have a college degree (business, management, or administration preferred), be MT (ASCP) certified, and have at least five years' management experience. Applications must contain a cover letter to be considered. Benefits: medical insurance, life insurance, dental insurance, paid vacation, paid sick days, paid holidays, long term disability, 401K/403b plan, and pension/retirement. Screening requirements: drug screen and criminal background check. For more information or to apply online, please visit www.kybloodcenter.org/. Drug-free and EOE/AAP

Quality Control Technologist (CLS). Performs quality control testing of apheresis and whole blood products and reviews testing records. Performs quality control, mainte

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nance, and calibration on the BacT/Alert, Sysmex, FC 500 Flow cytometer, and other equipment used in component quality control. Collates, enters, and prepares quality control reports on apheresis and whole blood components. Maintains reagent inventories, files reports, and enters test results into SafeTrace, as well as other duties as assigned. Education and Experience: California Clinical Laboratory Scientist License. **MUST PASS PRE-EMPLOYMENT DRUG SCREEN AND PHYSICAL EXAM.** Our compensation package is unique to each employee and the range of benefits include 100 percent paid medical/dental benefits (for employees), paid life insurance, a long term care program, critical illness program, generous Paid Time Off, paid holidays, and a wellness program are just the beginning. **TO APPLY:** Please visit our careers website at www.Lstream.org and apply directly to the Quality Control Technologist position. You may also contact Brianna at (909) 885-6503, ext 319.

Immunohematology Reference Laboratory Technologist (CLS). Performs and reports test results for all Reference Laboratory procedures in an accurate and timely manner in compliance with Federal and State Regulations, AABB Standards, Manufacturer's instruction, and internal operating procedures. In addition, successful candidate will resolve compatibility problems, perform molecular typing and provide consultation services to hospitals. Position will require individual to be able to work independently with sound judgment while following SOP's. Our range of benefits include 100 percent paid medical/dental benefits (for employees), paid life insurance, a long term care program, critical illness program, generous Paid Time Off, paid holidays, and a wellness program are just the beginning. Education and Experience: Requires current California CLS license and at least two years of relevant experience with emphasis on antibody identification & SBB preferred. Previous experience in immunohematology reference lab is highly desired. **MUST PASS PRE-EMPLOYMENT DRUG SCREEN AND PHYSICAL EXAM.** **TO APPLY:** Please visit our careers website at www.Lstream.org and apply directly to the Reference Laboratory Technologist position. You may also contact Brianna at (909) 885-6503, ext. 319.

Manager of Blood Drive Recruitment. The Donor Resources department of the Rhode Island Blood Center is seeking a qualified candidate for the position of manager of Blood Drive Recruitment. The Manager of Blood Drive Recruitment is responsible for developing effective recruitment and operational strategies for all mobile blood drives and leading account managers to achievement of recruitment and operation goals. Key responsibilities: Analyze opportunities to grow blood collections in assigned territory and to make improvements to internal sales structure. Manage and coach account managers in assigned territory to ensure achievement of blood collection goals, accurate projection rates, and efficient donor scheduling in compliance with all department guidelines. Identify training needs and coach the account managers in effective

sales, marketing, and supervision approaches. Educational requirements: bachelor's degree. Experience/qualifications: minimum five years of work experience in sales and/or public awareness. Demonstrated ability to effectively lead and manage others is required. We have earned an excellent reputation as an employer of choice, and our culture enables our staff members to perform at their best. We have one of the most competitive benefits and compensation programs available. Our training programs, investment in technology, and commitment to innovation have enabled us to steadily grow over more than 30 years. As a blood center employee, you'll truly make a difference in the lives of Rhode Island residents. **PLEASE APPLY ON LINE AT WWW.RIBC.ORG.** Follow the links to "About Us" and "Careers" for an online application. Only applicants who are selected for interviews will be contacted directly. EOE

Donor Recruitment Representative. The Donor Recruitment Representative is responsible for developing and building long-term collaborative relationships with new organizations while maintaining ongoing involvement with existing sponsor organizations to foster ongoing blood drives. This position requires the ability to achieve goals through effective donor recruitment, territory account, and calendar management. Minimum qualifications and requirements include bachelor's degree and/or three to five years sales experience with territory management skills where established goals were attained and surpassed, effective presentation, oral and written skills, self-motivated and self starter with excellent organizational skills, flexible to work weekends and evenings as necessary, dependable transportation with Nevada driver's license and clean driving record. We offer a competitive compensation package that includes health, dental, vision, pension, 401(k) plan and much more. If your education and experience meet these qualifications, please email application/resume to tsearcy@bloodsystems.org or fax to (702) 869-8973. EOE/M/F/D/V

Laboratory Technician #498 and Laboratory Technologist #499. Inland Northwest Blood Center, located in the beautiful Pacific Northwest, is seeking a full-time Laboratory Technician or Laboratory Technologist to test, evaluate, and submit results on specimens received for laboratory analysis to ensure safe blood and components for transfusion and distribution. Position is scheduled night shift (11 p.m. – 7:30 a.m.). Experience in laboratory work/blood banking desirable; ability to lift up to 25 pounds frequently and up to 50 pounds occasionally. In addition laboratory technician: MLT(ASCP) or equivalent training and licensure. Laboratory technologist: bachelor of science degree and certification as MT (ASCP) or equivalent. Current students of an accredited program who will obtain licensure within six months may also apply. Complete position description available upon request (800) 423-0151 x 4247. Competitive compensation/benefits package; applicants

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must send/fax a completed INBC Application to Attn: Human Resources, INBC, 210 W. Cataldo Ave., Spokane WA 99201; fax (509) 232-4530; position open until filled. Applications are available on our website at www.inbcaves.org. EEO/AA

Therapeutic Apheresis RN (Gulf Coast Regional Blood Center). Performs apheresis procedures on the COBE Spectra instrument and other instruments as assigned; oversees, evaluates, performs and documents apheresis procedures for collection of mononuclear cells, granulocytes and/or peripheral blood stem cells, and performs therapeutic apheresis procedures as required; performs general nursing duties; responsible for remaining current on national standards and trends; is proficient in performing apheresis procedures via peripheral vein and central venous access; maintains all records required by AABB, FDA, and other accrediting agency or vendor standards. Education/Experience: Graduate of accredited School of Professional Nursing with current RN license in good standing. Minimum of three years of recent direct patient nursing experience, preferably in an acute-care hospital

environment. Prior RN experience in apheresis or acute/chronic dialysis highly desirable. Apply at www.giveblood.org.

Transfusion Medicine Fellowship. Open July 2012, presented by the University of California Davis in partnership with BloodSource. Intensive program includes transfusion and apheresis services, donor center operations, immunohematology reference laboratory, coagulation, and HLA laboratories. Elective stem cell research is available. Pathology applicants should have completed either a combined AP/CP residency or a CP residency. Applicants may also have internal medicine, anesthesiology, surgery, or other residencies by the American Board of Pathology. Please send letter of interest, CV, and three letters of recommendation addressed to Carol Marshall, MD, Director BB/TM Fellowship, to Penny Young, Fellowship and Residency Training Program Coordinator, Department of Pathology/Laboratory Medicine, University of California, Davis Medical Center, 4400 V St., PATH Building, Sacramento, CA 95817, or e-mail: penny.young@ucdmc.ucdavis.edu. For more information see our websites: <http://ucdmc.ucdavis.edu/pathology> and www.bloodsource.org/ ♦

CALENDAR:

Note to subscribers: Submissions for a free listing in this calendar (published in the last issue of each month) are welcome. Send information to Leslie Norwood by e-mail (mnorwood@americasblood.org) or by fax to (202) 393-1282. (For a more detailed announcement in the weekly "Meetings" section of the newsletter, please include program information.)

2011

Mar. 19-22. **Annual Meeting, America's Blood Centers, Arlington, Va.** Attendance restricted to ABC members and invited guests. Contact: ABC Meetings Dept. Phone: (202) 393-5725; fax: (202) 393-1282; e-mail: meetings@americasblood.org.

Mar. 21-22. **Workshops on Pluripotent Stem Cells in Translation: Early Decisions, Bethesda, Md.** Contact: Susan W. Marino, PhD. E-mail: marinosw@ninds.nih.gov; phone: (301) 594-4470; fax: (301) 496-0296.

April 10-13. **American Hospital Association Annual Meeting, Washington, D.C.** Contact: www.aha.org/aha/member-center/contact-us.html.

April 26-29. **California Blood Bank Society and South Central Association of Blood Banks Joint Meeting, Las Vegas, Nev.** For information on CBBS: www.cbbsweb.org. For information on the meeting: www.regonline.com/builder/site/Default.aspx?eventid=87052.

May 10-11. **Technical/Lab Directors Workshop, America's Blood Centers, Bloomington, Minn.** Joint Session on May 11 with Quality directors; see below. Attendance restricted to ABC members and invited guests. Contact: Leslie Norwood. Phone: (202) 654-2917; fax: (202) 393-5725; e-mail: mnorwood@americasblood.org.

May 11-12. **Quality Directors Workshop, America's Blood Centers, Bloomington, Minn.** Joint Session on May 11 with Technical/Lab directors; see above. Attendance restricted to ABC members and invited guests. Contact: Leslie Norwood. Phone: (202) 654-2917; fax: (202) 393-5725; e-mail: mnorwood@americasblood.org.

May 17-18. **Risk Mitigation Strategies to Address Potential Procoagulant Activity in Immune Globulin Intravenous Products; Public Workshop, Rockville, MD.** Contact: Rhonda Dawson. Phone: (301) 827-6129; fax: (301) 827-2843; e-mail: rhonda.dawson@fda.hhs.gov.

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May 24-25. **International Plasma Fractionation Association (IPFA)/Paul-Ehrlich Institute 18th Workshop on Surveillance and Screening of Blood Borne Pathogens, Dublin, Ireland.** Information is available through the events page on the IPFA's website, www.ipfa.nl. Contact: IPFA Secretariat. Phone: +31 20 512 3561; e-mail: ipfa@sanquin.nl.

June 14-15. **Plasma Protein Forum, Reston, Va.** For more information, visit www.pptaglobal.org/pptaregistration/home.aspx.

June 18-22. **XXIst Regional Congress of the ISBT, Europe, Lisbon, Portugal.** For more information: lisbon@isbtweb.org.

June 20-23. **Fund Development, Communications and Donor Recruitment Workshop, America's Blood Centers, San Francisco, Calif.** Attendance restricted to ABC members and invited guests. Contact: Abbey Spittle. Phone: (202) 654-2980; fax: (202) 393-1282; e-mail: aspittle@americasblood.org.

July 15-17. **7th International Alliance for Biological Standardization (IABS) Symposium on Advances in Transfusion Safety, Singapore.** For more information, call (65) 6336-2328; e-mail ellen@cma.sg; or visit www.iabs-singapore.org.

Aug 6. **Medical Directors Workshop, America's Blood Centers, Kansas City, Mo.** Attendance restricted to ABC members and invited guests. Contact: ABC Meetings Dept. Phone: (202) 393-5725; fax: (202) 393-1282; e-mail: meetings@americasblood.org.

Aug 7-8. **Interim Meeting, America's Blood Centers, Kansas City, Mo.** Attendance restricted to ABC members and invited guests. Contact: ABC Meetings Dept.

Phone: (202) 393-5725; fax: (202) 393-1282; e-mail: meetings@americasblood.org.

Sept. 1-3. **Educational Symposium and the 12th International Congress of the Latin American Cooperative Group of Hemostasis and Thrombosis, Montevideo, Uruguay.** Contact: Phone: + 598 2 900 5828; fax: + 598 2 902 4264; e-mail: claht2011@personas.com.uy.

Sept. 22-23. **Financial Management Workshop, America's Blood Centers, Dallas, Texas.** Contact: Leslie Norwood. Phone: (202) 654-2917; fax: (202) 393-5725; e-mail: mnorwood@americasblood.org.

Sept. 23-25. **Society for the Advancement of Blood Management (SABM) Annual Meeting, Philadelphia, Pa.** For more information, please visit the SABM website, www.sabm.org/meetings/am2011/.

Oct. 22-25. **AABB Annual Meeting and CTTXPO, San Diego, Calif.** For more information: www.aabb.org/events/annualmeeting/Pages/default.aspx

2012

Mar. 24-27. **Annual Meeting, America's Blood Centers, Scottsdale, Ariz.** Celebrating ABC's 50th Anniversary! Attendance restricted to ABC members and invited guests. Contact: ABC Meetings Dept. Phone: (202) 393-5725; fax: (202) 393-1282; e-mail: meetings@americasblood.org.

Oct. 6-9. **AABB Annual Meeting and CTTXPO, Boston, Mass.** For more information: www.aabb.org/events/annualmeeting/attendees/Pages/future.aspx. ♦