

DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC HEALTH SERVICE FOOD AND DRUG ADMINISTRATION BLOOD ESTABLISHMENT REGISTRATION AND PRODUCT LISTING FOR MANUFACTURERS OF BLOOD PRODUCTS AND LICENSED DEVICES	FEI: 2573135 DUNS: 833100303 U.S. License Number: 454	REASON FOR SUBMISSION Annual Registration	DISTRICT OFFICE: Philadelphia VALIDATED BY FDA: 12/10/2018
LEGAL NAME AND LOCATION: HCSC-Blood Center 1465 Valley Center Parkway Bethlehem, PA 18017 USA 610-691-5850	REPORTING OFFICIAL: Kelly Hartman, Director of Quality Assurance HCSC-Blood Center 1465 Valley Center Parkway Bethlehem, PA 18017 USA 610-691-5850 x1286 khartman@giveapint.org	U.S. AGENT:	
OTHER NAMES USED IN THIS LOCATION: HCSC- Blood Center; HCSC- Blood Center T/A Miller-Keystone Blood Center; Miller Memorial Blood Center; Miller Memorial Blood Center; Miller-Keystone Blood Center	TYPE OF OWNERSHIP: CORPORATION DONOR/RECIPIENT RELATIONSHIP: ALLOGENIC, AUTOLOGOUS, DIRECTED	ESTABLISHMENT TYPE: COMMUNITY (NON-HOSPITAL) BLOOD BANK	

PRODUCT	COLLECT	MANUAL APHERESIS	AUTOMATED APHERESIS	PREPARE	LEUKOCYTES REDUCED	IRRADIATED	DONOR RETESTED	TEST	STORE AND DISTRIBUTE TO OTHERS	BACTERIAL TESTING	PATHOGEN REDUCED	POOLED
WHOLE BLOOD	X					X		X	X			
RED BLOOD CELLS (RBC)			X	X	X	X		X	X			
RBC FROZEN				X		X		X	X			
RBC DEGLYCEROLIZED				X		X		X	X			
RBC WASHED				X		X						
CRYOPRECIPITATED AHF				X				X	X			X
PLATELETS			X	X	X	X		X	X	X		
PLATELETS WASHED				X		X						
PLASMA				X				X	X			
PF24 PLASMA				X								

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PRODUCT	COLLECT	MANUAL APHERESIS	AUTOMATED APHERESIS	PREPARE	LEUKOCYTES REDUCED	IRRADIATED	DONOR RETESTED	TEST	STORE AND DISTRIBUTE TO OTHERS	BACTERIAL TESTING	PATHOGEN REDUCED	POOLED
FRESH FROZEN PLASMA			X	X				X	X			
PLASMA CRYOPRECIPITATED REDUCED				X				X	X			
LIQUID PLASMA				X				X	X			
RECOVERED PLASMA				X				X	X			

***** End Of Report *****