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| 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: 3004750136 DUNS: 964276450 U.S. License Number: 454 | REASON FOR SUBMISSION Annual Registration | DISTRICT OFFICE: Philadelphia VALIDATED BY FDA: 12/03/2021 |
| LEGAL NAME AND LOCATION: HCSC-Blood Center 2925 William Penn Highway Suite 105 Easton, PA 18045 USA 610-559-7100 | 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: | TYPE OF OWNERSHIP: CORPORATION DONOR/RECIPIENT RELATIONSHIP: ALLOGENIC | ESTABLISHMENT TYPE: COLLECTION FACILITY | |

| 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 | | | | | | | | | | | |
| RED BLOOD CELLS (RBC) | | | X | | | | | | | | | |
| PLATELETS | | | X | | | | | | | | | |
| FRESH FROZEN PLASMA | | | X | | | | | | | | | |

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