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: 2577647   DUNS: 790957781   U.S. License Number: 454	REASON FOR SUBMISSION Annual Registration	DISTRICT OFFICE: Philadelphia VALIDATED BY FDA: 12/12/2023
LEGAL NAME AND LOCATION: HCSC-Blood Center 1255 S. Cedar Crest Blvd, Suite 1300 Allentown, PA 18103 USA	REPORTING OFFICIAL: Kelly Hartman, Director of Qualit HCSC-Blood Center 1465 Valley Center Parkway	y Assurance	U.S. AGENT:
610-820-0962	Bethlehem, PA 18017 USA 610-691-5850 x1286 khartman@giveapint.org		
OTHER NAMES USED IN THIS LOCATION: HCSC-Blood Center T/A Miller Memorial Blood Center; HCSC- Blood Center T/A Miller-Keystone Blood Center; Miller Memorial Blood Center; Miller-Keystone Blood Center	TYPE OF OWNERSHIP: CORPORATION DONOR/RECIPIENT RELATIO ALLOGENIC	NSHIP:	ESTABLISHMENT TYPE: COLLECTION FACILITY

PRODUCT	COLLECT	MANUAL APHERESIS	AUTOMATED APHERESIS	LEUKOCYTES REDUCED	IRRADIATED	DONOR RETESTED	TEST	STORE AND DISTRIBUTE TO OTHERS	PATHOGEN REDUCED	POOLED
WHOLE BLOOD	х									
RED BLOOD CELLS (RBC)			х							
PLATELETS			Х							
FRESH FROZEN PLASMA			х							

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