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: 1174694 DUNS: 614683696 U.S. License Number: 1731	REASON FOR SUBMISSION Annual Registration	DISTRICT OFFICE:Baltimore VALIDATED BY FDA: 11/22/2024
LEGAL NAME AND LOCATION: NIH Clinical Center 10 Center Drive Room 3N223 (MSC 1184) Bethesda, MD 20892-1184 USA 301-4964506	REPORTING OFFICIAL: James W. Atkins NIH Clinical Center Dept of Transfusion Medicine 10 Center Dr, Bldg 10 MSC 118- Rm 3N223 Bethesda, MD 20892-1184 USA 301-768-7819 jatkins@cc.nih.gov		U.S. AGENT:
OTHER NAMES USED IN THIS LOCATION: NIH Clinical Center	TYPE OF OWNERSHIP: FEDERAL DONOR/RECIPIENT RELATIO ALLOGENIC, DIRECTED	NSHIP:	ESTABLISHMENT TYPE: HOSPITAL BLOOD BANK

PRODUCT	COLLECT	MANUAL APHERESIS	AUTOMATED APHERESIS	PREPARE	LEUKOCYTES REDUCED	IRRADIATED	DONOR RETESTED	TEST	STORE AND DISTRIBUTE TO OTHERS		PATHOGEN REDUCED	POOLED
WHOLE BLOOD	х							Х		,	Í	
RED BLOOD CELLS (RBC)			х	Х	х	Х		Х				
RBC FROZEN				Х	х							
RBC DEGLYCEROLIZED				Х	х	Х		Х				
RBC WASHED				Х		Х		Х				
CRYOPRECIPITATED AHF				Х								х
PLATELETS PAS (PLATELETS ADDITIVE SOLUTION)				Х	Х						Х	
PLATELETS WASHED				Х	х	Х						
GRANULOCYTES			х	Х		Х		Х				
PLASMA			х	Х								

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: 1174694 DUNS: 614683696 U.S. License Number: 1731	REASON FOR SUBMISSION Annual Registration	DISTRICT OFFICE:Baltimore VALIDATED BY FDA: 11/22/2024
LEGAL NAME AND LOCATION: NIH Clinical Center 10 Center Drive Room 3N223 (MSC 1184) Bethesda, MD 20892-1184 USA 301-4964506	REPORTING OFFICIAL: James W. Atkins NIH Clinical Center Dept of Transfusion Medicine 10 Center Dr, Bldg 10 MSC 118- Rm 3N223 Bethesda, MD 20892-1184 USA 301-768-7819 jatkins@cc.nih.gov		U.S. AGENT:
OTHER NAMES USED IN THIS LOCATION: NIH Clinical Center	TYPE OF OWNERSHIP: FEDERAL DONOR/RECIPIENT RELATIO ALLOGENIC, DIRECTED	NSHIP:	ESTABLISHMENT TYPE: HOSPITAL BLOOD BANK

PRODUCT	COLLECT	MANUAL APHERESIS	AUTOMATED APHERESIS	PREPARE	LEUKOCYTES REDUCED	IRRADIATED	DONOR RETESTED	TEST	STORE AND DISTRIBUTE TO OTHERS	-	PATHOGEN REDUCED	POOLED
FRESH FROZEN PLASMA			х	Х								
BLOOD COMPONENTS FOR RESEARCH	x			Х	x	Х			X			

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