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: 2571105 DUNS: 071212153 U.S. License Number:	REASON FOR SUBMISSION Annual Registration	DISTRICT OFFICE: Philadelphia VALIDATED BY FDA: 12/02/2019			
LEGAL NAME AND LOCATION: WellSpan York Hospital Blood Bank 1001 South George Street York, PA 17405 USA	REPORTING OFFICIAL: Christy J. Gotwols WellSpan York Hospital Blood E 1001 South George Street	Bank	U.S. AGENT:			
717-851-2510	York, PA 17405 USA 717-851-2510 cgotwols@wellspan.org					
OTHER NAMES USED IN THIS LOCATION:	TYPE OF OWNERSHIP: CORPORATION		ESTABLISHMENT TYPE: HOSPITAL BLOOD BANK			
	DONOR/RECIPIENT RELATION ALLOGENIC	ONSHIP:				

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	Х									, i		
RED BLOOD CELLS (RBC)						Х		Х	Х			
RBC RECONSTITUTED				Х					Х			
RBC WASHED				Х		Х			Х			
CRYOPRECIPITATED AHF									Х			
PLATELETS						Х			Х			
PLATELETS EXTENDED DATING						Х			Х	Х		
PLATELETS WASHED				Х					Х			
PLASMA									Х			
FRESH FROZEN PLASMA									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: 2571105 DUNS: 071212153 U.S. License Number:	REASON FOR SUBMISSION Annual Registration	DISTRICT OFFICE: Philadelphia VALIDATED BY FDA: 12/02/2019			
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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
PLASMA CRYOPRECIPITATED REDUCED									Х			

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

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