

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: 1044860
 DUNS: 081196214
 U.S. License Number:
 747

REASON FOR SUBMISSION
 Annual Registration

DISTRICT OFFICE: New Orleans
 VALIDATED BY FDA: 10/31/2023

LEGAL NAME AND LOCATION:

Blood Assurance, Inc.
 705 E 4th Street
 Chattanooga, TN 37403-1299 USA

REPORTING OFFICIAL:

Jill M. Rogers
 Blood Assurance
 705 E 4th Street

U.S. AGENT:

Chattanooga, TN 37403-1299 USA
 4236432654
 423-756-0966
 jmr@bloodassurance.org

OTHER NAMES USED IN THIS LOCATION:

Chattanooga Donor Center

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	X			
RED BLOOD CELLS (RBC)			X	X	X	X		X	X			
RBC FROZEN				X	X	X		X	X			
RBC DEGLYCEROLIZED				X	X	X		X	X			
RBC WASHED				X		X		X	X			
CRYOPRECIPITATED AHF				X				X	X			X
PLATELETS			X	X	X	X		X	X			
PLATELETS PAS (PLATELETS ADDITIVE SOLUTION)			X	X	X	X		X	X			
PLATELETS EXTENDED DATING			X	X	X	X		X	X		X	
PLATELETS WASHED				X	X	X		X	X			

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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
GRANULOCYTES			X	X		X		X	X			
PLASMA			X	X				X	X			
PF24 PLASMA			X	X				X	X			
PF24RT24 PLASMA			X	X				X	X			
FRESH FROZEN PLASMA			X	X				X	X			
PLASMA CRYOPRECIPITATED REDUCED				X				X	X			
LIQUID PLASMA				X				X	X			
RECOVERED PLASMA				X				X	X			
BLOOD PRODUCTS FOR DIAGNOSTIC USE	X			X				X	X			

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