

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: 3017066305
 DUNS: 117516247
 U.S. License Number:

REASON FOR SUBMISSION
 Annual Registration

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

LEGAL NAME AND LOCATION:

Blood Assurance Inc.
 60 Parris Ave.
 Nashville, TN 37210 USA

REPORTING OFFICIAL:

Jill M. Rogers
 Blood Assurance Inc.
 705 E 4th Street

U.S. AGENT:

Chatanooga, TN 37403 USA
 4236432654
 jmr@bloodassurance.org

OTHER NAMES USED IN THIS LOCATION:

Nashville Depot

TYPE OF OWNERSHIP:

CORPORATION

ESTABLISHMENT TYPE:

DISTRIBUTION CENTER

DONOR/RECIPIENT RELATIONSHIP:

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			
RBC WASHED				X					X			
CRYOPRECIPITATED AHF									X			
PLATELETS									X			
PLATELETS EXTENDED DATING									X			
PLATELETS WASHED				X					X			
PLASMA									X			
PF24 PLASMA									X			
PF24RT24 PLASMA									X			

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FRESH FROZEN PLASMA									X			
PLASMA CRYOPRECIPITATED REDUCED									X			
LIQUID PLASMA									X			

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