

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: 2473015 DUNS: 026299340 U.S. License Number: 465			REASON FOR SUBMISSION Change in Information			DISTRICT OFFICE:New York VALIDATED BY FDA: 06/02/2025		
LEGAL NAME AND LOCATION: New York Blood Center, Inc. 601 Midland Avenue Rye, NY 10580 USA 718-752-4601			REPORTING OFFICIAL: Peter Ingrassia, Director, Regulatory Affairs New York Blood Center, Inc. 1200 Prospect Avenue Westbury, NY 11590 USA 516-478-5070 pingrassia@nybc.org						U.S. AGENT:		
OTHER NAMES USED IN THIS LOCATION:			TYPE OF OWNERSHIP: CORPORATION						ESTABLISHMENT TYPE: COLLECTION FACILITY; COMPONENT PREPARATION FACILITY; DISTRIBUTION CENTER		
			DONOR/RECIPIENT RELATIONSHIP: ALLOGENIC, AUTOLOGOUS, DIRECTED								

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			
RBC FROZEN				X					X			
RBC DEGLYCEROLIZED				X					X			
RBC REJUVENATED				X					X			
RBC REJUVENATED FROZEN				X					X			
RBC REJUVENATED DEGLYCEROLIZED				X					X			
CRYOPRECIPITATED AHF				X					X			X
PLATELETS			X	X	X	X			X	X	X	X
GRANULOCYTES				X					X			

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: 2473015 DUNS: 026299340 U.S. License Number: 465	REASON FOR SUBMISSION Change in Information	DISTRICT OFFICE:New York VALIDATED BY FDA: 06/02/2025
LEGAL NAME AND LOCATION: New York Blood Center, Inc. 601 Midland Avenue Rye, NY 10580 USA 718-752-4601	REPORTING OFFICIAL: Peter Ingrassia, Director, Regulatory Affairs New York Blood Center, Inc. 1200 Prospect Avenue Westbury, NY 11590 USA 516-478-5070 pingrassia@nybc.org	U.S. AGENT:	
OTHER NAMES USED IN THIS LOCATION:	TYPE OF OWNERSHIP: CORPORATION	ESTABLISHMENT TYPE: COLLECTION FACILITY; COMPONENT PREPARATION FACILITY; DISTRIBUTION CENTER	
	DONOR/RECIPIENT RELATIONSHIP: ALLOGENIC, AUTOLOGOUS, DIRECTED		

PRODUCT	COLLECT	MANUAL APHERESIS	AUTOMATED APHERESIS	PREPARE	LEUKOCYTES REDUCED	IRRADIATED	DONOR RETESTED	TEST	STORE AND DISTRIBUTE TO OTHERS	BACTERIAL TESTING	PATHOGEN REDUCED	POOLED
PLASMA			X	X		X			X			
PF24 PLASMA			X	X					X			
FRESH FROZEN PLASMA			X	X		X			X			
PLASMA CRYOPRECIPITATED REDUCED				X					X			
LIQUID PLASMA				X					X			
SOURCE PLASMA			X						X			
RECOVERED PLASMA				X					X			
BLOOD PRODUCTS FOR DIAGNOSTIC USE				X					X			
BLOOD BANK REAGENTS									X			

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