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| DEPARTMENT OF HEALTH AND HUMAN SERVICES<br>PUBLIC HEALTH SERVICE<br>FOOD AND DRUG ADMINISTRATION<br>BLOOD ESTABLISHMENT REGISTRATION AND PRODUCT LISTING FOR<br>MANUFACTURERS OF BLOOD PRODUCTS AND LICENSED DEVICES | FEI: 1172512<br>DUNS: 030548106<br>U.S. License Number:  | REASON FOR SUBMISSION<br>Annual Registration | DISTRICT OFFICE: Baltimore<br><br>VALIDATED BY FDA: 12/09/2022 |
| LEGAL NAME AND LOCATION:<br><br>University of Virginia Health System, Box 800286<br>1215 Lee Street<br>Attn: Thomas Brady/Blood Bank<br>Charlottesville, VA 22908 USA<br><br>434-924-5953                            | REPORTING OFFICIAL:<br>James Gorham<br>University of Virginia Health<br>Blood Bank Box 800286<br>1215 Lee Street<br><br>Charlottesville, VA 22908 USA<br><br>434-924-5163<br>jdg8z@uvahealth.org | U.S. AGENT:                                  |  |
| OTHER NAMES USED IN THIS LOCATION:   | TYPE OF OWNERSHIP:<br>STATE  | ESTABLISHMENT TYPE:<br>HOSPITAL BLOOD BANK   |  |
|  | DONOR/RECIPIENT RELATIONSHIP:  |  |  |

| PRODUCT  | COLLECT | MANUAL<br>APHERESIS | AUTOMATED<br>APHERESIS | PREPARE | LEUKOCYTES<br>REDUCED | IRRADIATED | DONOR<br>RETESTED | TEST | STORE AND<br>DISTRIBUTE<br>TO OTHERS | BACTERIAL<br>TESTING | PATHOGEN<br>REDUCED | POOLED |
|--|---------|---------------------|------------------------|---------|-----------------------|------------|-------------------|------|--------------------------------------|----------------------|---------------------|--------|
| RED BLOOD CELLS (RBC)                          |         |                     |                        |         |                       | X          |                   | X    |                                      |                      |                     |        |
| RBC DEGLYCEROLIZED                             |         |                     |                        |         |                       | X          |                   | X    |                                      |                      |                     |        |
| RBC WASHED                                     |         |                     |                        |         |                       | X          |                   | X    |                                      |                      |                     |        |
| PLATELETS                                      |         |                     |                        |         |                       | X          |                   |      |                                      |                      | X                   |        |
| PLATELETS PAS (PLATELETS ADDITIVE<br>SOLUTION) |         |                     |                        |         |                       | X          |                   |      |                                      |                      | X                   |        |
| PLATELETS WASHED                               |         |                     |                        |         |                       | X          |                   |      |                                      |                      |                     |        |
| GRANULOCYTES                                   |         |                     |                        |         |                       | X          |                   | X    |                                      |                      |                     |        |
| LIQUID PLASMA                                  |         |                     |                        |         |                       | X          |                   |      |                                      |                      |                     |        |

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