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: 1372065 DUNS: 041294109 U.S. License Number:	<b>REASON FOR SUBMISSION</b> Annual Registration	DISTRICT OFFICE:New York VALIDATED BY FDA: 10/03/2019		
LEGAL NAME AND LOCATION: University of Rochester-Strong Memorial Hospital Blood Bank 601 Elmwood Avenue Box 608 Rochester, NY 14642-0001 USA	REPORTING OFFICIAL: Neil Blumberg, M.D. University of Rochester - Strong 601 Elmwood Avenue Box 608		U.S. AGENT:		
585-275-2251	Rochester, NY 14642-0001 USA 585-275-3189 Neil_Blumberg@URMC.rocheste				
OTHER NAMES USED IN THIS LOCATION:	TYPE OF OWNERSHIP: CORPORATION DONOR/RECIPIENT RELATIO AUTOLOGOUS	NSHIP:	ESTABLISHMENT TYPE: 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	х					Х		Х				
RED BLOOD CELLS (RBC)				Х		х		Х				
RBC FROZEN				Х				Х				
RBC DEGLYCEROLIZED				Х		х		Х				
RBC WASHED				Х		х		Х				
RBC REJUVENATED				Х		х						
RBC REJUVENATED FROZEN				Х								
RBC REJUVENATED DEGLYCEROLIZED				Х		х		Х				
CRYOPRECIPITATED AHF						х						
PLATELETS						Х						

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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
PLATELETS PAS (PLATELETS ADDITIVE SOLUTION)						Х						
PLATELETS WASHED				х		х						
GRANULOCYTES						х		Х				
PF24 PLASMA						х						
PLASMA CRYOPRECIPITATED REDUCED						Х						

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