

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: 3002660779
 DUNS: 076103873
 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.
 1920 Northpoint Blvd.
 Hixson, TN 37343 USA

REPORTING OFFICIAL:

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

U.S. AGENT:

Chattanooga, TN 37403-1299 USA
 4236432654
 jimr@bloodassurance.org
 423-876-5289

OTHER NAMES USED IN THIS LOCATION:

North River Donor Center

TYPE OF OWNERSHIP:

CORPORATION

DONOR/RECIPIENT RELATIONSHIP:

ALLOGENIC, AUTOLOGOUS, DIRECTED

ESTABLISHMENT TYPE:

COLLECTION FACILITY

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									
PLATELETS			X									
PLATELETS EXTENDED DATING			X									
PLASMA			X									
PF24 PLASMA			X									
PF24RT24 PLASMA			X									
FRESH FROZEN PLASMA			X									
BLOOD PRODUCTS FOR DIAGNOSTIC USE	X											

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