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: 3012052149 DUNS: 043232371 U.S. License Number: 747	REASON FOR SUBMISSION Annual Registration	DISTRICT OFFICE: New Orleans VALIDATED BY FDA: 11/15/2022			
LEGAL NAME AND LOCATION: Blood Assurance, Inc. Blood Assurance, Inc. Columbia Donor Center 1412 Trotwood Avenue Suite 69 Columbia, TN 38401 USA	REPORTING OFFICIAL: Jill M. Rogers Blood Assurance, Inc. 705 E 4th St Chattanooga, TN 37403 USA		U.S. AGENT:			
931-548-8801	4236432654 jillrogers@se.bloodassurance.o	rg				
OTHER NAMES USED IN THIS LOCATION:	TYPE OF OWNERSHIP: CORPORATION		ESTABLISHMENT TYPE: COLLECTION FACILITY			
	DONOR/RECIPIENT RELATION ALLOGENIC, AUTOLOGOUS	_				

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											
RED BLOOD CELLS (RBC)			Х									
PLATELETS			Х									
PLATELETS PAS (PLATELETS ADDITIVE SOLUTION)			Х									
PLATELETS EXTENDED DATING			Х									
PLASMA			Х									
PF24 PLASMA			Х									
PF24RT24 PLASMA			Х									
FRESH FROZEN PLASMA			Х									
BLOOD PRODUCTS FOR DIAGNOSTIC USE	Х											

DEPARTMENT OF HEALTH AND HUMAN SERVICE PUBLIC HEALTH SERVICE FOOD AND DRUG ADMINISTRATION BLOOD ESTABLISHMENT REGISTRATION AND PR MANUFACTURERS OF BLOOD PRODUCTS AND LI	RODUCT LISTIN		FEI: 301: DUNS: 043: U.S. License 747	Number:		SON FOR SUB	MISSION		T OFFICE:Nev			
LEGAL NAME AND LOCATION: Blood Assurance, Inc. Blood Assurance, Inc. Columbia Donor Center 1412 Trotwood Avenue Suite 69 Columbia, TN 38401 USA	REPORTING OFFICIAL: Jill M. Rogers Blood Assurance, Inc. 705 E 4th St						ENT:					
931-548-8801	Chattanooga, TN 37403 USA 4236432654 jillrogers@se.bloodassurance.org											
OTHER NAMES USED IN THIS LOCATION:	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

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

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