

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:** 2572105  
**DUNS:** 043551308  
**U.S. License Number:** 983

**REASON FOR SUBMISSION**  
 Annual Registration

**DISTRICT OFFICE:** Philadelphia  
**VALIDATED BY FDA:** 10/09/2020

**LEGAL NAME AND LOCATION:**  
 Community Blood Bank of Erie County  
 2646 Peach Street  
 Erie, PA 16508 USA  
 814-456-4206

**REPORTING OFFICIAL:**  
 Kristin Kramer, Quality Assurance Director  
 Community Blood Bank of Erie County  
 2646 Peach Street  
 Erie, PA 16508 USA  
 814-456-4206 x135  
 kristin.kramer@fourheartarts.org

*Kristin Kramer*  
 12-9-2020

**U.S. AGENT:**

**OTHER NAMES USED IN THIS LOCATION:**  
 Community Blood Bank of Northwest Pennsylvania; Community  
 Blood Bank of Western New York

**TYPE OF OWNERSHIP:**  
 CORPORATION

**DONOR/RECIPIENT RELATIONSHIP:**  
 ALLOGENIC, AUTOLOGOUS, DIRECTED

**ESTABLISHMENT TYPE:**  
 COMMUNITY (NON-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	X								X			
RED BLOOD CELLS (RBC)			X	X	X				X			
RBC WASHED				X								
CRYOPRECIPITATED AHF				X					X			X
PLATELETS			X	X	X				X		X	
PLATELETS WASHED				X								
PLASMA			X	X					X			
PF24 PLASMA			X	X					X			
PF24RT24 PLASMA			X	X					X			
FRESH FROZEN PLASMA			X	X					X			

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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
PLASMA CRYOPRECIPITATED REDUCED				X					X			
RECOVERED PLASMA				X					X			

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