

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

LEGAL NAME AND LOCATION:
 Community Blood Bank of Erie County
 2646 Peach Street
 Erie, PA 16508 USA

814-456-4206

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

REASON FOR SUBMISSION
 Annual Registration

DISTRICT OFFICE: Philadelphia
VALIDATED BY FDA: 10/06/2021

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@fourheartfs.org

U.S. AGENT:

ESTABLISHMENT TYPE:
 COMMUNITY (NON-HOSPITAL) BLOOD BANK

TYPE OF OWNERSHIP:
 CORPORATION

DONOR/RECIPIENT RELATIONSHIP:
 ALLOGENIC, AUTOLOGOUS, DIRECTED

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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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	MANUAL APHERESIS	COLLECT	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 *****