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: 3008110521 DUNS: 960066686 U.S. License Number: 2106	REASON FOR SUBMISSION Annual Registration	DISTRICT OFFICE:Los Angeles VALIDATED BY FDA: 12/12/2018
LEGAL NAME AND LOCATION: Vitalant Clinical Services 2424 West Erie Drive Tempe, AZ 85282 USA 602-343-7000	REPORTING OFFICIAL: Gina Ramirez, Regulatory Mana Vitalant 6210 East Oak Street P.O. Box 1867 Scottsdale, AZ 85252-1867 USA 303-363-2221 gramirez@vitalant.org		U.S. AGENT:
OTHER NAMES USED IN THIS LOCATION:	TYPE OF OWNERSHIP: CORPORATION DONOR/RECIPIENT RELATIONSHIP:		ESTABLISHMENT TYPE: NON-HOSPITAL TRANSFUSION SERVICE

PRODUCT	COLLECT	MANUAL APHERESIS	AUTOMATED APHERESIS	PREPARE	LEUKOCYTES REDUCED	IRRADIATED	DONOR RETESTED	TEST	STORE AND DISTRIBUTE TO OTHERS	BACTERIAL TESTING	PATHOGEN REDUCED	POOLED
RED BLOOD CELLS (RBC)								Х	Х	, ·		
CRYOPRECIPITATED AHF									Х			
PLATELETS									Х			
PLASMA									Х			
FRESH FROZEN PLASMA									Х			
POOLED CRYOPRECIPITATED AHF									Х			

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