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: 3012302397 DUNS: 116929536 U.S. License Number:	REASON FOR SUBMISSION Annual Registration	VALIDATED BY FDA: 12/07/2023
LEGAL NAME AND LOCATION: Bloodworks 12040 NE 128th Street Room: Purple 1-382 Kirkland, WA 98034 USA 206-689-6287	REPORTING OFFICIAL: Jessica D. Hernandez, Quality A 921 Terry Avenue Seattle, WA 98104 USA 206-689-6287 Regulatory@BloodworksNW.org	Ç ,	U.S. AGENT:
OTHER NAMES USED IN THIS LOCATION: Bloodworks Evergreen Transfusion Service	TYPE OF OWNERSHIP: CORPORATION DONOR/RECIPIENT RELATIO	NSHIP:	ESTABLISHMENT TYPE: 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
RED BLOOD CELLS (RBC)						Х		Х	Х	, ·		
RBC RECONSTITUTED				Х		Х		Х	Х			
CRYOPRECIPITATED AHF									Х			
PLATELETS									Х			
PLATELETS PAS (PLATELETS ADDITIVE SOLUTION)									Х			
PF24 PLASMA									Х			
FRESH FROZEN PLASMA									Х			

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