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: 2171378   DUNS: 057163172   U.S. License Number: 2133	REASON FOR SUBMISSION Annual Registration	DISTRICT OFFICE: Minneapolis VALIDATED BY FDA: 12/18/2023			
LEGAL NAME AND LOCATION: Versiti Wisconsin, Inc. 638 N. 18th Street Milwaukee, WI 53233-2121 USA	REPORTING OFFICIAL: Dana Knight, Director of Quality Versiti Wisconsin, Inc. 638 N. 18th Street P.O. Box 2178	Assurance	U.S. AGENT:			
708-359-2058	Milwaukee, WI 53233-2121 USA 708-359-2058 versitiregulatoryaffairs@versiti.o					
OTHER NAMES USED IN THIS LOCATION: Blood Center of Southeastern Wisconsin, Inc. (The); BloodCenter of	TYPE OF OWNERSHIP: CORPORATION		ESTABLISHMENT TYPE: COMMUNITY (NON-HOSPITAL) BLOOD BANK			
Wisconsin, Inc; Milwaukee Blood Center, Inc.; The Blood Center	DONOR/RECIPIENT RELATIO ALLOGENIC, AUTOLOGOUS,					

PRODUCT	COLLECT	MANUAL APHERESIS	AUTOMATED APHERESIS	PREPARE	LEUKOCYTES REDUCED	IRRADIATED	DONOR RETESTED	TEST	STORE AND DISTRIBUTE TO OTHERS		PATHOGEN REDUCED	POOLED
WHOLE BLOOD	х				х	х			x			
RED BLOOD CELLS (RBC)			Х	Х	х	Х			х			
RBC FROZEN				Х					х			
RBC DEGLYCEROLIZED				Х		Х			х			
RBC WASHED				Х		Х			х			
CRYOPRECIPITATED AHF				Х					х			х
PLATELETS			Х	Х	х	Х			х	х	х	
PLATELETS EXTENDED DATING			Х	Х	х	Х			х	х		
PLATELETS WASHED				Х		х			х			
GRANULOCYTES									x			

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: 2171378   DUNS: 057163172   U.S. License Number: 2133	REASON FOR SUBMISSION Annual Registration	DISTRICT OFFICE: Minneapolis VALIDATED BY FDA: 12/18/2023			
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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				х					х			
PF24 PLASMA			Х	х					х			
FRESH FROZEN PLASMA			Х	Х					х			
PLASMA CRYOPRECIPITATED REDUCED				Х					х			
RECOVERED PLASMA				х					х			
BLOOD PRODUCTS FOR DIAGNOSTIC USE	Х			Х					Х			

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