

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: 3002633012
DUNS: 073903077
U.S. License Number:
2133

REASON FOR SUBMISSION
Annual Registration

DISTRICT OFFICE: Minneapolis
VALIDATED BY FDA: 11/13/2025

LEGAL NAME AND LOCATION: Versiti Blood Health, Inc. 9000 W. Wisconsin Avenue Wauwatosa, WI 53226-3518 USA 414-937-3888		REPORTING OFFICIAL: Megan M. McShea, Regulatory Manager Versiti Blood Health, Inc. 3450 North Meridian Street Indianapolis, IN 46208 USA 317-916-5070 versitiregulatoryaffairs@versiti.org		U.S. AGENT:	
OTHER NAMES USED IN THIS LOCATION: BloodCenter of Wisconsin, Inc - Transfusion Service; Located in Children's Hospital of Wisconsin; Versiti Wisconsin Inc. - Transfusion Service		TYPE OF OWNERSHIP: CORPORATION		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
WHOLE BLOOD						X		X				
RED BLOOD CELLS (RBC)				X		X		X				
RBC DEGLYCEROLIZED						X		X				
CRYOPRECIPITATED AHF						X						
PLATELETS						X						
PLATELETS EXTENDED DATING						X						
PLATELETS WASHED						X						
GRANULOCYTES						X		X				
PLASMA						X						
PF24 PLASMA						X						

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OTHER NAMES USED IN THIS LOCATION: BloodCenter of Wisconsin, Inc - Transfusion Service; Located in Children's Hospital of Wisconsin; Versiti Wisconsin Inc. - Transfusion Service		TYPE OF OWNERSHIP: CORPORATION DONOR/RECIPIENT RELATIONSHIP:	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
FRESH FROZEN PLASMA						X						
PLASMA CRYOPRECIPITATED REDUCED						X						
RECONSTITUTE WHOLE BLOOD FROM RBC AND FFP				X		X						
RED BLOOD CELLS WASHED						X		X				

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