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: 1038768 DUNS: 139301956 U.S. License Number:	REASON FOR SUBMISSION Annual Registration	DISTRICT OFFICE: Florida  VALIDATED BY FDA: 10/04/2022
LEGAL NAME AND LOCATION:  H. Lee Moffitt Cancer Center & Research Institute 12902 USF Magnolia Drive Tampa, FL 33612 USA	REPORTING OFFICIAL: Kaaron Benson, M.D. H. Lee Moffitt Cancer Center & 12902 USF Magnolia Drive	Research Institute	U.S. AGENT:
813-745-8488	Tampa, FL 33612 USA 813-745-2228 Kaaron.Benson@moffitt.org		
OTHER NAMES USED IN THIS LOCATION:  Moffitt Cancer Center	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
WHOLE BLOOD						Х		Х				
RED BLOOD CELLS (RBC)						Х		Х				
RBC DEGLYCEROLIZED						Х		Х				
RBC RECONSTITUTED						Х		Х				
RBC WASHED						Х		Х				
RBC REJUVENATED						Х		Х				
RBC REJUVENATED DEGLYCEROLIZED						Х		Х				
CRYOPRECIPITATED AHF												Х
PLATELETS						Х						
PLATELETS PAS (PLATELETS ADDITIVE SOLUTION)						Х						

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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
PLATELETS EXTENDED DATING						Х						
PLATELETS WASHED						Х						
GRANULOCYTES						Х		Х				
LIQUID PLASMA						Х						

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