



**New Jersey State Department of Health  
Division of Public Health and Environmental Laboratories  
BLOOD BANK LICENSE**

**NEW YORK BLOOD CENTER, INC.  
4068 ROUTE 9 SOUTH  
HOWELL NJ 07731**

**License No: 10576  
Blood Bank Code: 1628  
Effective: 01/01/2021  
To: 12/31/2021**

**The above, pursuant to Chapter 33, P.L. of 1963, is hereby authorized to perform the below indicated services:**

Authorized Services		
<input type="checkbox"/> <b>Transfusion Services</b> <input type="checkbox"/> On-Site <input type="checkbox"/> Home  <input type="checkbox"/> <b>Transfusion Only</b> <input type="checkbox"/> On-Site <input type="checkbox"/> Home <input type="checkbox"/> Emergency	<input checked="" type="checkbox"/> <b>Collection Services</b>  <input checked="" type="checkbox"/> <b>On Site</b> <input type="checkbox"/> Mobile Site <input checked="" type="checkbox"/> <b>Allogeneic</b> <input checked="" type="checkbox"/> <b>Autologous</b> <input checked="" type="checkbox"/> <b>Directed</b> <input checked="" type="checkbox"/> <b>Therapeutic Phlebotomy</b> <input type="checkbox"/> Cord Blood <input type="checkbox"/> Hematopoietic Progenitor Cells (HPC) <input checked="" type="checkbox"/> <b>Double Red Cell</b> <input type="checkbox"/> Perioperative Autologous Collection/Administration	<input checked="" type="checkbox"/> <b>Hemapheresis</b> <input checked="" type="checkbox"/> <b>Plasmapheresis</b> <input type="checkbox"/> Leukapheresis <input checked="" type="checkbox"/> <b>Plateletpheresis</b> <input type="checkbox"/> Cytapheresis <input type="checkbox"/> Therapeutic  <input type="checkbox"/> <b>Processing (Routine)</b> <input type="checkbox"/> <b>Processing (Special)</b> <input type="checkbox"/> <b>Processing (HPC)</b> <input type="checkbox"/> <b>Storage (HPC)</b> <input type="checkbox"/> <b>Component Preparation</b> <input type="checkbox"/> <b>Manufacturer</b> <input type="checkbox"/> <b>Broker</b>

**Commissioner of Health**