



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

XYTEX LABORATORIES  
1100 EMMETT STREET  
AUGUSTA GA 30904

License No: 8879  
Blood Bank Code: 1547  
Effective: 01/15/2017  
To: 12/31/2017

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

Authorized Services

Transfusion Services

- On-Site
- Home

Transfusion Only

- On-Site
- Home
- Emergency

Collection Services

- On Site
- Mobile Site
- Allogeneic
- Autologous
- Directed
- Therapeutic Phlebotomy
- Cord Blood
- Hematopoietic Progenitor Cells (HPC)
- Double Red Cell
- Perioperative Autologous Collection/Administration
- Hemapheresis
- Plasmapheresis
- Leukapheresis
- Plateletpheresis
- Cytapheresis
- Therapeutic

Processing (Routine)

Processing (Special)

Processing (HPC)\*

Storage (HPC)

Component Preparation

Manufacturer

Broker

\* Including UCB processing,  
testing, labeling & packaging

Commissioner of Health



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

**XYTEX TISSUE SERVICES**  
**1100 EMMETT STREET**  
**AUGUSTA GA 30904**

License No: 8880  
Blood Bank Code: 1314  
Effective: 01/15/2017  
To: 12/31/2017

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

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

Commissioner of Health