**LEGAL NAME AND LOCATION:**
Wellsman Good Samaritan Hospital Blood Donor Center  
750 Norman Drive  
Lebanon, PA 17042 USA

**REPORTING OFFICIAL:**
Peter P. Phillips  
Wellsman Good Samaritan Hospital  
4th and Walnut Streets  
Lebanon, PA 17042 USA  
717-270-7551  
pphillips@wellsman.org

**OTHER NAMES USED IN THIS LOCATION:**

**TYPE OF OWNERSHIP:**
CORPORATION

**DONOR/RECIPIENT RELATIONSHIP:**
ALLOGENIC

**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 | | | | | | | | | |
FRESH FROZEN PLASMA | | X | | | | | | | | | |
RECOVERED PLASMA | | X | | | | | | | | | |

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