



# U.S. FDA Establishment Registration: International Centers

## Description and Instructions

# About FDA Establishment Registration

International centers that export cord blood, PBSC, or lymphocytes to the United States register with FDA

Bone marrow is not included in this requirement

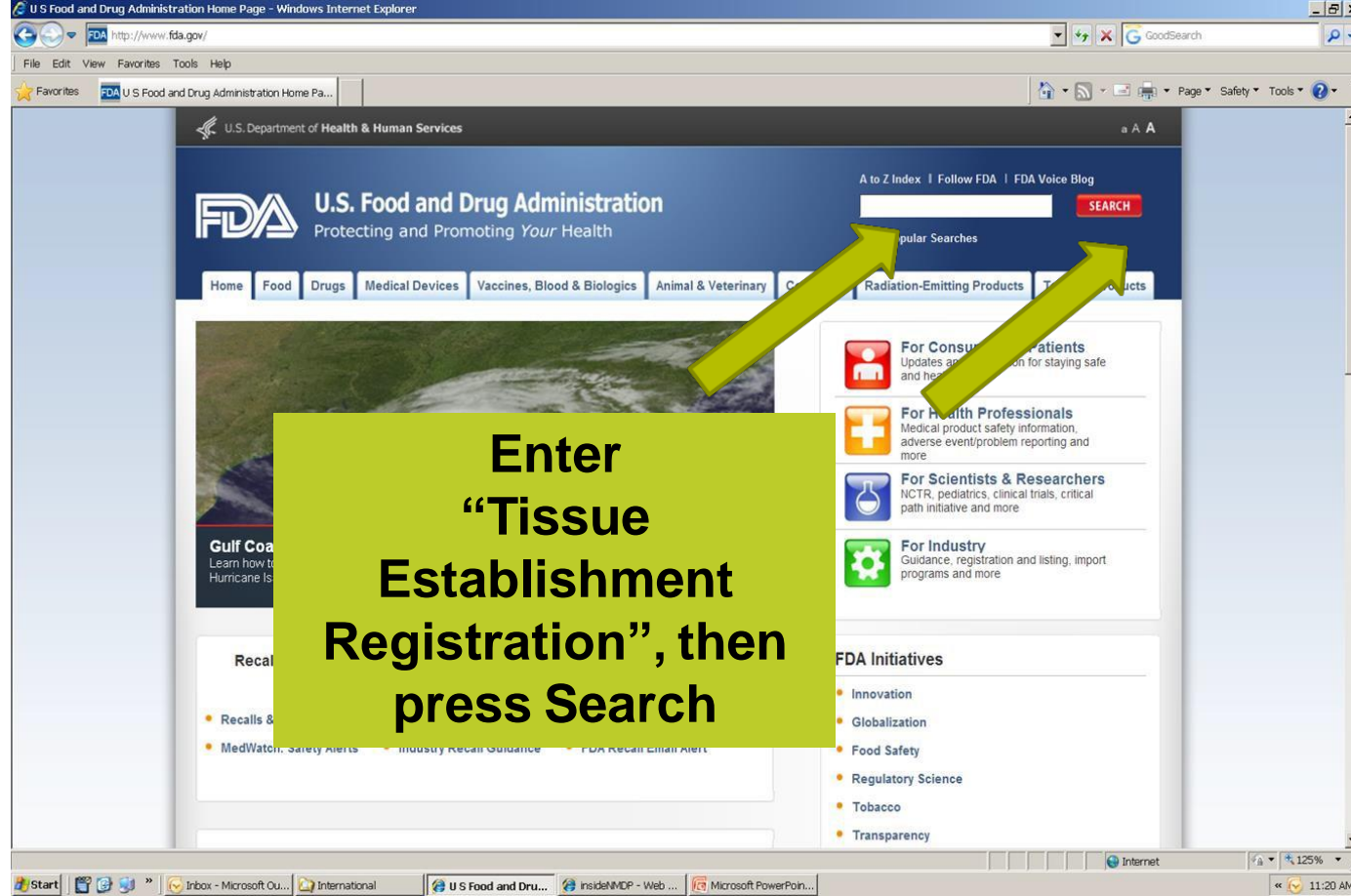
- ***Registration must be renewed every December***

# How do I register?

- Electronic form: <http://www.fda.gov/>
  - Search: Tissue Establishment Registration
  - CBER On-Line - Login Screen
    - eHCTERS

## What happens if I don't register?

- Product denied or delayed entry into the U.S.
- Potential fines
- You can no longer do business with the U.S.



**Enter  
"Tissue  
Establishment  
Registration", then  
press Search**

Tissue Establishment Registration - Windows Internet Explorer

http://www.fda.gov/BiologicsBloodVaccines/GuidanceComplianceRegulatoryInformation/EstablishmentRegistration/TissueEstablishmentRegistration/default.htm

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FDA Tissue Establishment Registration

U.S. Department of Health & Human Services

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**Vaccines, Blood & Biologics**

Home Vaccines, Blood & Biologics Guidance, Compliance & Regulatory Information (Biologics) Biologics Establishment Registration

**Guidance, Compliance & Regulatory Information (Biologics)**

- Biologics Establishment Registration
- Tissue Establishment Registration
- Find a Tissue Establishment

**Tissue Establishment Registration**

On January 19, 2001, the Food and Drug Administration published a registration and listing final rule that requires human cells, tissue, and cellular and tissue-based product establishments to register with the agency and list their human cells, tissues, and cellular and tissue-based products (HCT/Ps). The final rule, 21 CFR Part 1271, became effective on April 4, 2001 for human tissues intended for transplantation that are regulated under section 361 of the PHS Act and 21 CFR Part 1270. The final rule became effective on March 29, 2004 for all other HCT/Ps except that registration and listing requirements related to human dura mater and heart valves became effective when the remaining parts of 21 CFR Part 1271 were implemented on May 25, 2005.

As explained in 1271.21, establishments covered by the final rule must register within 5 days after beginning operations. An annual update is required in December and changes in HCT/P listing within 6 months of the change. If the ownership or location of the establishment changes, an amendment to the establishment registration must be submitted within 5 days of the change.

To facilitate establishment registration and listing, FDA has developed Form FDA 3356 Establishment Registration and Listing for Human Cells, Tissues, and Cellular and Tissue-Based Products (HCT/Ps) and instructions for completion that may be used to submit electronically or in paper form by mail or FAX. **Form FDA-3356 is now accepted by electronic submission through a secure web server.**

**Recalls & Alerts**

- Recalls (Biologics)
- Biologic Product Shortages
- Report a Problem to the Center for Biologics Evaluation & Research

**Approvals & Clearances**

- Biologics Products & Establishments

**Resources for You**

- About the Center for Biologics Evaluation and Research

**Click on link**

**CBER On-Line - Login Screen**

- [CBER On-Line: Establishment Registration and Biological Product Deviation Reporting](#)

https://www.accessdata.fda.gov/scripts/cber/CFApps/Login/Index.cfm?CFID=143712738.CFTOKEN=3b68105249a5530-A85D000F-1372-5AE1-67

Start International 2012 Intl registratio... Tissue Establishm... Internet 125% 10:29 AM


CBER On-Line - Login Screen - Windows Internet Explorer

https://www.accessdata.fda.gov/scripts/cber/CFApps/Login/Index.cfm?CFID=18281348;CFTOKEN=c7d8a915e89cfae4-48732822-C8D6-7435-73718F1D824CA135

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CBER On-Line - Login Screen

Create a new account.  
**Record the User Name and Password.**  
 It will be necessary to have that information for annual registration every December.



## U.S. Food and Drug Administration

Department of Health and Human Services

**CENTER FOR BIOLOGICS EVALUATION AND RESEARCH**

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### CBER On-Line - Login Screen

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Use the CBER On-line system to make these electronic submissions online:  
 Blood Establishment Registration (Form FDA 2830)  
 Tissue Establishment Registration (Form FDA 3356)  
 Biological Product Deviation Reporting (Form FDA 3486)

New CBER On-Line Users  
 New users must first create an account. [Create a New Account](#)

If you need further assistance e-mail us with your account information: [Contact CBER On-Line Technical Support](#)

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Existing account holders may login by entering your user name and password below.

\*User Name:

\*Password:  [Forgot your User Name or Password?](#)

\*Application:

**REMINDER:** User Names and Passwords are CASE SENSITIVE

[Help](#)

CBER On-Line Version 1.8.0  
Page Updated 01/26/2007

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\*Required

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Internet 125% 10:32 AM

# Registration Tips

- **Record the User Name and Password** in a safe place. This information will be required to access registration information for any updates and for annual renewal *every December*
- **Reporting Official:** Person identified to complete registration and communicate with FDA
- **U.S. Agent:** Contact person in U.S. to facilitate communication with FDA
  - Contacted if there is a U.S. Customs question regarding a product arriving at a U.S. Port of Entry
  - Facilitates communication if FDA plans to inspect facility



https://www.accessdata.fda.gov/scripts/cber/CFApps/eHCTERS/index.cfm?fuseAction=fuse\_SelectEstablishment&CFID=18281348&CFTOKEN=c7d8a915e69cfae4-A8732b22-C8D6-7435-73718F1E

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eHCTERS Activity Selection

Page Safety Tools

**FDA** U.S. Food and Drug Administration Department of Health and Human Services

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**eHCTERS - Activity Selection**

Welcome **"Your name"**

Completion of FORM FDA - 3356 is required under 21 CFR Part 1271, 202.20 and 807.20 for all establishments engaged in the recovery, processing, storage, labeling, packaging, or distribution of any HCT/P, or the screening or testing of a cell or tissue donor. After we receive your form, we will update our records and send a validated form to the reporting official.

[Electronic Form Instructions](#)

Select the activity you wish to complete from the list below. If this is your establishment's first time submitting FORM FDA - 3356, please select Initial Registration. If you would like to edit your submitted and validated FORM FDA - 3356, please select Edit Validated Form. If you are returning to work on a previously saved but not submitted application, select Complete Unfinished Form and enter the corresponding Pre-Confirmation number. When you have made your selection and entered the requested information, press the Continue button to proceed.

**Initial Registration:** Select this if your establishment is submitting FORM FDA - 3356 for the first time.

**Edit Validated Form:** Select this if you have previously submitted and had validated a FORM FDA - 3356.

Reason for Submission:  Annual Registration/Listing  Change in Information  In-Activate Registration

Select from your existing user establishments:

If your establishment does not appear in the above drop down list, press the User Establishments button below to add your establishment to the list

**Complete Unfinished FORM FDA - 3356:** Pre-Confirmation Number must be provided.

DEPARTMENT OF HEALTH AND HUMAN SERVICES, FOOD AND DRUG ADMINISTRATION

Start International 2012 Intl registrato... Tissue Establishmen... eHCTERS Activity ... Internet 125% 10:41 AM



Every December, registration must be renewed

**FDA U.S. Food and Drug Administration**  
 Department of Health and Human Services  
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FEI: 3005043090 **Pre-Confirmation Number:** 20487  
**Legal Name:** National Marrow Donor Program **Todays Date:** 07/31/2012

Registration | Address | Reporting Official | U.S. Agent | HCT/P Listing | Function | Donor | Additional Info | Report | Save

**eHCTERS - Edit Establishment Registration Information**

**\* Reason for Submission**

Annual Registration/Listing  
 Change in Information

**\* Tissue FDA 3356 FEI#** 3005043090  
 Other FDA Registrations for the entered FEI Number

Blood FDA 2830  
 Devices FDA 2891  
 Drug FDA 2656

**\* Required**

[Next](#) | [Select New Establishment](#) | [CBER On-Line Main Menu](#)

DEPARTMENT OF HEALTH AND HUMAN SERVICES, FOOD AND DRUG ADMINISTRATION  
 ESTABLISHMENT REGISTRATION AND LISTING FOR HUMAN CELLS,  
 TISSUES AND CELLULAR AND TISSUE-BASED PRODUCTS (eHCTERS)

Electronic Form version 2.2.1  
 Updated 5/18/2005

FORM FDA - 3356 (1/11) Form Approved OMB No 0910-0543  
 Expiration Date: 1/31/2014

[Contact eHCTERS Technical Support](#) | [Help with filling out this form](#) | [Release Notes](#) | [Log Out](#)

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FDA / Center for Biologics Evaluation and Research

Establishment Address Information - Windows Internet Explorer

https://www.accessdata.fda.gov/scripts/cber/CFApps/eHCTERS/Index.cfm?fuseaction=fuse\_editEstablishmentAddressInfo&CFID=18281348&CFTOKEN=c7d8a915e69cfae4a8732b22c8d67435

File Edit View Favorites Tools Help

Favorites Free Hotmail Web Slice Gallery

Establishment Address Information

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FEI: 3005043090 Pre-Confirmation Number: 20487  
Legal Name: National Marrow Donor Program Todays Date: 07/31/2012

Registration Address Reporting Official U.S. Agent HCT/P Listing Function Donor Additional Info Report Save

### eHCTERS - Establishment Address Information

**Physical Location**

\* Legal Name

\* Street Address

\* City

\* U.S. State  Postal Code

\* Country

\* Phone(xxx-xxx-xxxx)  ext.

Foreign Phone(Country Code-City Code-Telephone Number)

Satellite Recovery Establishment  If checked, please enter Manufacturing Establishment FEI

Manufacturing Establishment FEI Number

Testing For Micro-Organisms Only

\* Required

DEPARTMENT OF HEALTH AND HUMAN SERVICES, FOOD AND DRUG ADMINISTRATION  
ESTABLISHMENT REGISTRATION AND LISTING FOR HUMAN CELLS,  
TISSUES AND CELLULAR AND TISSUE-BASED PRODUCTS (eHCTERS)

Done

Start International 2012 Intl registratio... Tissue Establishmen... Establishment Ad... Internet 125% 10:54 AM

Complete the Information for your Facility. Update as Needed.

Facility name and address information

# Reporting Official

- The Reporting Official does not need to be the medical director
- FDA communicates with your facility via email with your Reporting Official
- FDA sends a reminder to the Reporting Official in November to complete the annual renewal in December
- If this person changes, update your registration or the FDA communications will be lost

Establishment Reporting Official Information - Windows Internet Explorer

https://www.accessdata.fda.gov/scripts/cber/CFApps/HCTERS/index.cfm?fuseaction=fuse\_editReportingOfficialInfo&CFID=18296618&CFTOKEN=82b840990-AA10C2A4-F953-7922-CAC2

File Edit View Favorites Tools Help

Establishment Reporting Official Information

### eHCTERS - Establishment Reporting Official Information

**Reporting Official Information**

\*First Name John M I P

\*Last Name

Credentials

\*Title

\*E-Mail Address

\*Phone(xxx-xxx-xxxx)

**Mailing Address**

\*Institution Name

\*Street Address

\*City

\*State Minnesota \*Postal Code 55413

\*Country United States

\* Required

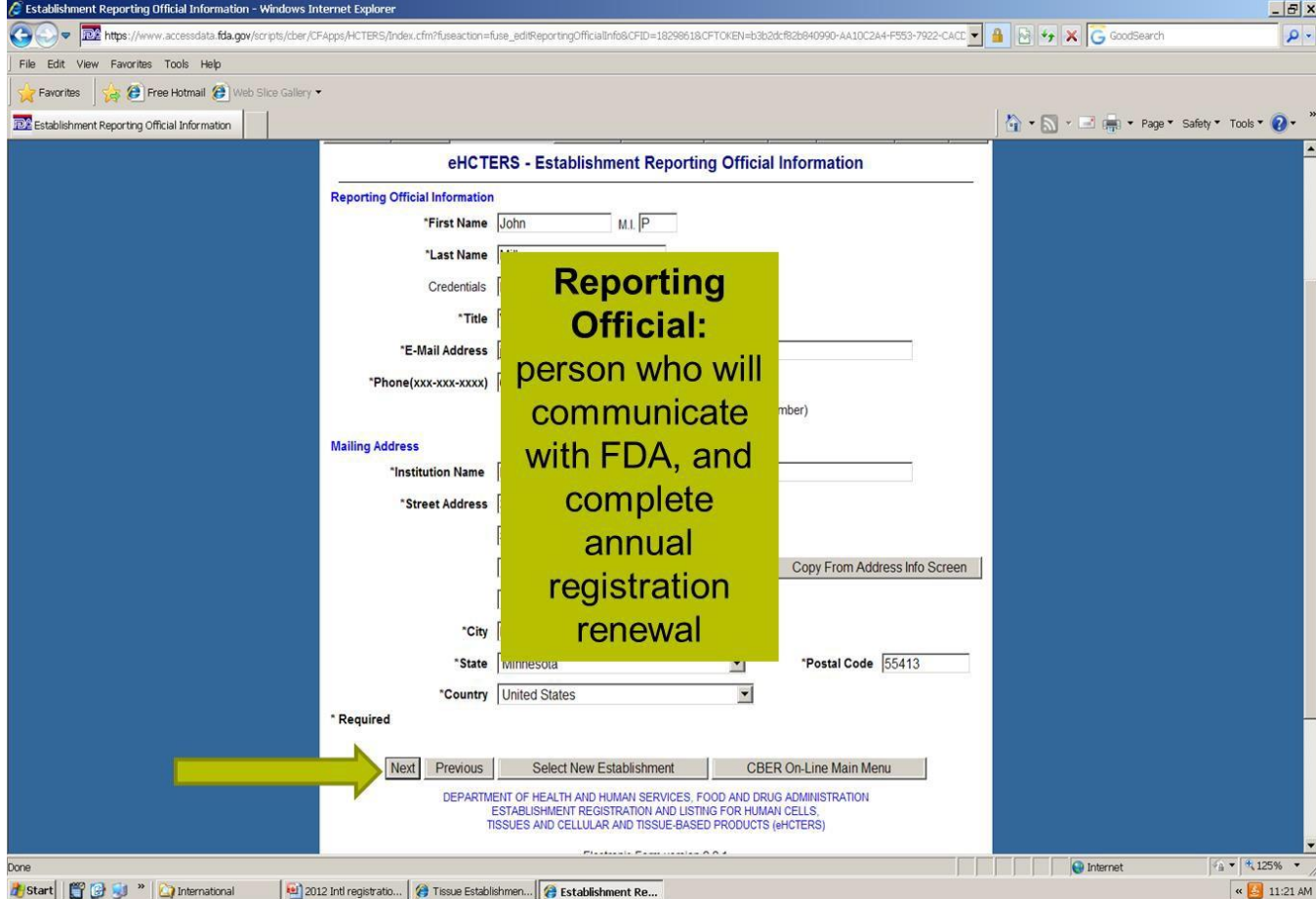
Next Previous Select New Establishment CBER On-Line Main Menu

DEPARTMENT OF HEALTH AND HUMAN SERVICES, FOOD AND DRUG ADMINISTRATION  
ESTABLISHMENT REGISTRATION AND LISTING FOR HUMAN CELLS,  
TISSUES AND CELLULAR AND TISSUE-BASED PRODUCTS (eHCTERS)

Done

Start International 2012 Intl registrati... Tissue Establishmen... Establishment Re... Internet 125% 11:21 AM

**Reporting Official:**  
person who will communicate with FDA, and complete annual registration renewal



# U.S. Agent

- Non-U.S. facilities must name a U.S. Agent
- This person serves as a U.S. contact for your facility
  - if U.S. Customs has a question about a product coming into the U.S., or
  - if the FDA would need to inspect a facility

# U.S. Agent

- If you export to the U.S. for products **only** through NMDP, you may identify Dr. John Miller as your U.S. Agent:  
John Miller, M.D., Ph.D.  
National Marrow Donor Program  
500 North 5<sup>th</sup> Street  
Minneapolis, MN 55401 USA  
[jmiller5@nmdp.org](mailto:jmiller5@nmdp.org)  
1-763-406-5800
- If your products are also sent via direct arrangements with a transplant center, you may **NOT** use Dr. Miller as your U.S. Agent.

HCT/P Listing Information - Windows Internet Explorer

https://www.accessdata.fda.gov/scripts/cber/CFApps/HCTERS/index.cfm?fuseaction=fuse\_editProductInfoDetail&CFID=18298618&CFTOKEN=b3c2d3c82b640990-AA10C2A4-F553-7922-CACD38

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HCT/P Listing Information

**eHCTERS - HCT/P Listing Information**

Types of HCT/P's	HCT/P's Described in 21 CFR 1271.10	HCT/P's Regulated as Medical Devices	HCT/P's Regulated as Drugs or Biological Drugs	Proprietary Names
a. Bone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Cartilage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Cornea	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Dura Mater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Embryo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. Fascia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
g. Heart Valve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
h. Ligament	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
i. Oocyte	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
j. Pericardium	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
k. Peripheral Blood Stem Cells	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
l. Sclera	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
m. Semen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
n. Skin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
o. Somatic Cell Therapy Products	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
p. Tendon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
q. Umbilical Cord Blood Stem Cells	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
r. Vascular Graft	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
s. Therapeutic Cells	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

If your HCT/P is not listed on the screen, click the 'Add Other HCT/P's' button.

Next Previous Add Other HCT/P's

Done

Start International 2012 Int registratio... Tissue Establishment... HCT/P Listing Info... Internet 125% 11:24 AM

**Mark products "manufactured" at your facility sent to the U.S. through NMDP**

**Mark this column for NMDP products**

**Only list products sent to the U.S.**



# What is “Manufacturing?”

- Any of the following steps:
  - Recover: collection by apheresis or the collection of a cord blood unit
  - Screen: deciding if an adult donor or cord blood donor is acceptable
  - Package: placing a product in a bag and/or shipping container
  - Process: perform bacterial or fungal cultures, cryopreservation, other
  - Store: keep a product overnight or longer
  - Label: completing a product label or additional materials about the product or contents
  - Distribute: making a product available for transplant (does not include actual transport or carrying the product)

HCT/P Listing - Function Information - Windows Internet Explorer

https://www.accessdata.fda.gov/scripts/cber/CFApps/HCTERS/Index.cfm?fuseaction=fuse\_EditProductInfo&CFID=18299618&CFTOKEN=b362dc82b840990-AA10C2A4-F553-7922-CA0D394A0C0

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HCT/P Listing - Function Information

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FEI: 3005043090 Pre-Confirmation Number: 2012  
 Legal Name: National Marrow Donor Program Todays Date: 11/20/2012

Registration Address Reporting Official U.S. Agent HCT/P Listing Function Donor Additional Information Save

**eHCTERS - HCT/P Listing - Function Information**

	Types of HCT/P's	Recover	Screen	Test	Package	Process	Store	Label	Distribute
a.	Bone								
b.	Cartilage								
c.	Cornea								
d.	Dura Mater								
e.	Embryo								
f.	Fascia								
g.	Heart Valve								
h.	Ligament								
i.	Oocyte								
j.	Pericardium								
k.	Peripheral Blood Stem Cells	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
l.	Sclera								
m.	Semen								
n.	Skin								
o.	Somatic Cell Therapy Products								
p.	Tendon								
q.	Umbilical Cord Blood Stem Cells								
r.	Vascular Graft								
s.	Therapeutic Cells	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Next Previous Select New Establishment CBERS On-Line Main Menu

DEPARTMENT OF HEALTH AND HUMAN SERVICES, FOOD AND DRUG ADMINISTRATION  
 ESTABLISHMENT REGISTRATION AND LISTING FOR HUMAN CELLS,  
 TISSUES AND CELLULAR AND TISSUE-BASED PRODUCTS (eHCTERS)

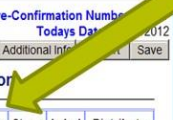
Electronic Form version 2.2.1

Done Internet 125% 11:29 AM

Start International 2012 Intl registrato... Tissue Establishmen... HCT/P Listing - Fu...

Only mark functions performed at your facility

"Manufacturing" functions



HCT/P Listing - Donor Information - Windows Internet Explorer

https://www.accessdata.fda.gov/scripts/cber/CFApps/HCTERS/Index.cfm?fuseaction=fuse\_EditDonorInfo&CFID=18298618&CFTOKEN=0362dcf2b940990-AA10C2A4-F553-7922-CACD384A00CC



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HCT/P Listing - Donor Information

Page Safety Tools

NMDP only facilitates allogeneic donors


**U.S. Food and Drug Administration**


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FEI: 3005043090 Pre-Confirmation Number: 20487

Legal Name: National Marrow Donor Program Today's Date: 11/15/2012

[Registration](#) | [Address](#) | [Reporting Official](#) | [U.S. Agent](#) | [HCT/P Listing](#) | [Function](#) | [Donor](#) | [Additional Info](#) | [Report](#) | [Save](#)

**eHCTERS - HCT/P Listing - Donor Information**

	Types of HCT/P's	SIP	Directed	Anonymous	Autologous	Family Related	Allogeneic
e.	Embryo						
i.	Oocyte						
k.	Peripheral Blood Stem Cells				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
m.	Semen						
o.	Somatic Cell Therapy Products						
q.	Umbilical Cord Blood Stem Cells						

[Next](#) | [Previous](#) | [Select New Establishment](#) | [CBER On-Line Main Menu](#)

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Electronic Form version 2.2.1  
 Updated 11/15/2007

FORM FDA - 3356 (1/11) Form Approved OMB No.0910-0543  
 Expiration Date: 1/31/2014

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FDA / Center for Biologics Evaluation and Research

Additional Information to Complete HCT/P Listing - Windows Internet Explorer



https://www.accessdata.fda.gov/scripts/cber/CFApps/HCTERS/index.cfm?fuseaction=fuse\_EditComments&CFID=18296618&CFTOKEN=b3b2dcf82b640990-AA10C2A4-F553-7922-CACD384A00C

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Additional Information to Complete HCT/P L...

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FEI: 3005043090 Pre-Confirmation Number: 20487  
Legal Name: National Marrow Donor Program Todays Date: 07/31/2012

Registration | Address | Reporting Official | U.S. Agent | HCT/P Listing | Function | Donor | Additional Info | Report | Save

### eHCTERS - Additional Information to Complete HCT/P Listing

DEPARTMENT OF HEALTH AND HUMAN SERVICES, FOOD AND DRUG ADMINISTRATION  
ESTABLISHMENT REGISTRATION AND LISTING FOR HUMAN CELLS,  
TISSUES AND CELLULAR AND TISSUE-BASED PRODUCTS (eHCTERS)

Electronic Form version 2.2.1  
Updated 11/15/2007

FORM FDA - 3356 (1/11) Form Approved OMB No 0910-0543  
Expiration Date: 1/31/2014

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Start International 2012 Intl registrati... Tissue Establishmen... Additional Inform... Internet 125% 11:34 AM

Additional information may be added as needed

Preview your Registration Information - Windows Internet Explorer  
https://www.accessdata.fda.gov/scripts/cber/CFApps/HCTERS/index.cfm?fuseaction=fuse\_ViewReport&CFID=1829861&CFTOKEN=b3b2dcf82b840990-AA10C2A4-F553-7922-CACD384A0CCB

File Edit View Favorites Tools Help

Preview your Registration Information

### Preview your Registration Information

**THIS INFORMATION HAS NOT BEEN SUBMITTED TO THE FDA  
PLEASE REVIEW YOUR REGISTRATION INFORMATION  
PRESS THE "SUBMIT TO FDA" button at the bottom of the page TO CONTINUE**

**Note:** The FORM FDA - 3356 data has been saved but not submitted to the FDA. Unfinished forms are accessible for 30 days. If the registration is not submitted in that period, data will be erased and will not be recoverable.

Your Pre-Confirmation Number is 20487  
Enter this number on the main screen to access your unfinished submission.  
FEI: 3005043090

**Other FDA Registrations**

- Blood FDA 2830
- Devices FDA 2891
- Drug FDA 2656

**Reason for Submission**

- Initial Registration/Listing
- Annual Registration/Listing
- Change in Information

**Physical Location**

Legal Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
City: \_\_\_\_\_  
Phone: 612-884-8703 ext. \_\_\_\_\_

**Reporting Official Information**

First Name: John P.  
Last Name: Miller M.D., Ph.D.  
Title: VP, Quality and Regulatory Affairs  
Phone: 612-884-8534 Ext.  
E-Mail Address: jmiller5@nmdp.org

**Mailing Address of Reporting Official**

Institution Name: National Marrow Donor Program  
Street Address: 3001 Broadway Street N.E.  
Suite 100  
City: Minneapolis  
State: Minnesota

## Review information for accuracy

Done

Start International 2012 Intl registrato... Tissue Establishmen... Preview your Reg... Internet 125% 11:36 AM

Preview your Registration Information - Windows Internet Explorer

https://www.accessdata.fda.gov/scripts/cber/CFApps/HCTERS/Index.cfm?useaction=fuse\_ViewReport&CFID=18296618&CFTOKEN=b3b2dcf82b840990-AA10C2A4-F553-7922-CACD384AD0CCB;

File Edit View Favorites Tools Help

Preview your Registration Information

Institution Name: National Marrow Donor Program  
 Street Address: 3001 Broadway Street N.E.  
 Suite 100  
 City: Minneapolis  
 State: Minnesota  
 Postal Code: 55413  
 Country: United States

### HCT/P Listing Information

Types of HCT/P's	HCT/P's Described in 21 CFR 1271.10	HCT/P's Regulated as Medical Devices	HCT/P's Regulated as Drugs or Biological Products	Proprietary Names
a. Bone				
b. Cartilage				
c. Cornea				
d. Dura Mater				
e. Embryo				
f. Fascia				
g. Heart Valve				
h. Ligament				
i. Oocyte				
j. Pericardium				
k. Peripheral Blood Stem Cells			X	
l. Sclera				
m. Semen				
n. Skin				
o. Somatic Cell Therapy Products				
p. Tendon				
q. Umbilical Cord Blood Stem Cells				
r. Vascular Graft				
s. Therapeutic Cells			X	

### HCT/P Listing - Function Information

Types of HCT/P's	Recover	Screen	Test	Package	Process	Store	Label	Distribute
a. Bone								
b. Cartilage								
c. Cornea								

Done

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https://www.accessdata.fda.gov/cber/CFApps/HCTERS/index.cfm?fuseaction=fuse\_ViewReport&CFID=18298618&CFTOKEN=eb3b2d3f82b640990-AA10C2A4-F553-7922-CACD384ADCCCB

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q. Umbilical Cord Blood Stem Cells  
 r. Vascular Graft  
 s. Therapeutic Cells

X

### HCT/P Listing - Function Information

	Types of HCT/P's	Recover	Screen	Test	Package	Process	Store	Label	Distribute
a.	Bone								
b.	Cartilage								
c.	Cornea								
d.	Dura Mater								
e.	Embryo								
f.	Fascia								
g.	Heart Valve								
h.	Ligament								
i.	Oocyte								
j.	Pericardium								
k.	Peripheral Blood Stem Cells		<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>
l.	Sclera								
m.	Semen								
n.	Skin								
o.	Somatic Cell Therapy Products								
p.	Tendon								
q.	Umbilical Cord Blood Stem Cells								
r.	Vascular Graft								
s.	Therapeutic Cells		<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>

### HCT/P Listing - Donor Information

	Types of HCT/P's	SIP	Directed	Anonymous	Autologous	Family Related	Allogeneic
e.	Embryo						
i.	Oocyte						
k.	Peripheral Blood Stem Cells						<input checked="" type="checkbox"/>
m.	Semen						
o.	Somatic Cell Therapy Products						
q.	Umbilical Cord Blood Stem Cells						

Submit To FDA    Select New Establishment    CBER On-Line Main Menu

Done

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When review is complete and correct, Submit to FDA



# After Submission...

- Screen will display the information submitted with a Confirmation Number. Record this number or print this screen. This can be used to facilitate communication with FDA if there are questions.
- FDA will send the Reporting Official a validated form.
  - Review information
  - Keep copy of form at your facility



# After Submission...

If you named Dr. John Miller as your U.S. Agent, you must send an electronic copy of the validated form to NMDP at [regulatory@nmdp.org](mailto:regulatory@nmdp.org).

Questions? Contact Regulatory Affairs: [regulatory@nmdp.org](mailto:regulatory@nmdp.org)