

Legal Name and Location:
 CryoChoice, LLC
 1777 Northeast Expressway NE
 Suite 180

 Atlanta, Georgia 30329
 USA
 Phone: 404-325-0907 **Ext.:** 7000

Reporting Official:
 [Redacted] Owner
 1777 Northeast Expressway NE
 Suite 180
 Atlanta, Georgia 30329
 USA
 Phone: 404-325-0907 Ext. 7000
 contact@cryochoice.com

Satellite Recovery Establishment: No
Parent Manufacturing Establishment FEI No.:
Testing For Micro-Organisms Only: No

 Note: FDA acceptance of an establishment registration and HCT/P listing does not constitute a determination that an establishment is in compliance with applicable rules and regulations or that the HCT/P is licensed or approved by FDA (21 CFR 1271.27(b)).

HCT/P(s)	Donor Type(s)	Establishment Functions								Date of Discontinuance	Date of Resumption	Proprietary Name(s)
		Recover	Screen	Donor Testing	Package	Process	Store	Label	Distribute			
Amniotic Membrane												
Blood Vessel												
Bone												
Cardiac Tissue - non-valved												
Cartilage												
Cornea												
Dura Mater												
Embryo												
Fascia												
Heart Valve												
HPC Apheresis												
HPC Cord Blood												
Ligament												
Nerve Tissue												
Oocyte												
Ovarian Tissue												
Pancreatic Islet Cells - autologous												
Parathyroid												
Pericardium												
Peripheral Blood Mononuclear Cells												
Peritoneal Membrane												
Sclera												
Semen	SIP	X	X					X	X	X		
Skin												
Tendon												
Testicular Tissue		X	X					X	X	X		
Tooth Pulp												
Umbilical Cord Tissue												