

# FDA Home Page | Contact eHCTERS Technical Support

# HUMAN CELL AND TISSUE ESTABLISHMENT REGISTRATION - Public Query Establishment Details

#### Establishment Name and Location

Current Status: Registered
Last Annual Registration Year: 2022

FDA Establishment Identifier (FEI): 3004195871
Establishment Name: Stembanc, Inc.
Address: 100 7th Avenue

Suite 200

City: Chardon
State: Ohio
Zip: 44024

Country: UNITED STATES Phone: 440-286-6422

#### **Establishment Functions**

| Types of HCT/Ps                     | Recover | Screen | <b>Donor Testing</b> | 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                      |         | V      |                      |         | ے       |       | ے     |            |
| Ligament                            |         |        |                      |         |         |       |       |            |
| Nerve Tissue                        |         |        |                      |         |         |       |       |            |
| Oocyte                              |         |        |                      |         |         |       |       |            |
| Ovarian Tissue                      |         |        |                      |         |         |       |       |            |
| Pancreatic Islet Cells - autologous |         |        |                      |         |         |       |       |            |
| Parathyroid                         |         |        |                      |         |         |       |       |            |
| Pericardium                         |         |        |                      |         |         |       |       |            |
| Peripheral Blood Mononuclear Cells  |         |        |                      |         |         |       |       |            |
| Peritoneal Membrane                 |         |        |                      |         |         |       |       |            |
| Sclera                              |         |        |                      |         |         |       |       |            |
| Semen                               |         |        |                      |         |         |       |       |            |
| Skin                                |         |        |                      |         |         |       |       |            |
| Tendon                              |         |        |                      |         |         |       |       |            |
| Testicular Tissue                   |         |        |                      |         |         |       |       |            |
| Tooth Pulp                          |         |        |                      |         |         |       |       |            |
| Umbilical Cord Tissue               |         | V      |                      |         | ے       |       | ے     |            |

### Establishment HCT/P Listing

| Types of HCT/Ps   | HCT/Ps<br>Described<br>in 21 CFR<br>1271.10 | Proprietary Names |
|-------------------|---|-------------------|
| Amniotic Membrane |   |                   |
| Blood Vessel      |   |                   |
|                   |   |                   |

| Bone                                  |   |  |
|---------------------------------------|---|--|
| Cardiac Tissue - non-valved           |   |  |
| Cartilage                             |   |  |
| Cornea                                |   |  |
| Dura Mater                            |   |  |
| Embryo                                |   |  |
| Fascia                                |   |  |
| Heart Valve                           |   |  |
| HPC Apheresis                         |   |  |
| HPC Cord Blood                        | X |  |
| Ligament                              |   |  |
| Nerve Tissue                          |   |  |
| Oocyte                                |   |  |
| Ovarian Tissue                        |   |  |
| Pancreatic Islet Cells - autologous   |   |  |
| Parathyroid                           |   |  |
| Pericardium                           |   |  |
| Peripheral Blood Mononuclear<br>Cells |   |  |
| Peritoneal Membrane                   |   |  |
| Sclera                                |   |  |
| Semen Semen                           |   |  |
| Skin                                  |   |  |
|                                       |   |  |
| Tendon Testicular Tissue              |   |  |
|                                       |   |  |
| Tooth Pulp                            | V |  |
| Umbilical Cord Tissue                 | X |  |

# HCT/P Listing - Donor Information

| Types of HCT/Ps                    | SIP | Directed | Anonymous | Autologous | Family Related |
|------------------------------------|-----|----------|-----------|------------|----------------|
| Embryo                             |     |          |           |            |                |
| HPC Apheresis                      |     |          |           |            |                |
| HPC Cord Blood                     |     |          |           | ے          | lacksquare     |
| Oocyte                             |     |          |           |            |                |
| Peripheral Blood Mononuclear Cells |     |          |           |            |                |
| Semen                              |     |          |           |            |                |

Print Date: 03/23/2022

| Print This Page | Back To Query Criteria Screen | Back To Query Results Screen |
|-----------------|-------------------------------|------------------------------|
|                 | Exit                          |                              |

eHCTERS v02.13.00 Updated 11/20/2020

<u>Contact eHCTERS Technical Support</u> | <u>Online Help</u> | <u>Release Notes</u>

Contact CBER | Contact FDA | Privacy
FDA Home Page | Accessibility | HHS Home Page

FDA / Center for Biologics Evaluation and Research



# FDA Home Page | Contact eHCTERS Technical Support

# HUMAN CELL AND TISSUE ESTABLISHMENT REGISTRATION - Public Query Establishment Details

#### Establishment Name and Location

Current Status: Registered
Last Annual Registration Year: 2022

FDA Establishment Identifier (FEI): 3006235326

Establishment Name: Stembanc Holdings, Inc

Address: 100 7th Avenue

Suite 200

City: Chardon
State: Ohio
Zip: 44024

Country: UNITED STATES
Phone: 440-286-6422

#### **Establishment Functions**

| Types of HCT/Ps                     | 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                      |         |        |               |         |         | V                       |       | lacksquare |
| Ligament                            |         |        |               |         |         |                         |       |            |
| Nerve Tissue                        |         |        |               |         |         |                         |       |            |
| Oocyte                              |         |        |               |         |         |                         |       |            |
| Ovarian Tissue                      |         |        |               |         |         |                         |       |            |
| Pancreatic Islet Cells - autologous |         |        |               |         |         |                         |       |            |
| Parathyroid                         |         |        |               |         |         |                         |       |            |
| Pericardium                         |         |        |               |         |         |                         |       |            |
| Peripheral Blood Mononuclear Cells  |         |        |               |         |         |                         |       |            |
| Peritoneal Membrane                 |         |        |               |         |         |                         |       |            |
| Sclera                              |         |        |               |         |         |                         |       |            |
| Semen                               |         |        |               |         |         |                         |       |            |
| Skin                                |         |        |               |         |         |                         |       |            |
| Tendon                              |         |        |               |         |         |                         |       |            |
| Testicular Tissue                   |         |        |               |         |         |                         |       |            |
| Tooth Pulp                          |         |        |               |         |         |                         |       |            |
| Umbilical Cord Tissue               |         |        |               |         |         | $\overline{\mathbf{V}}$ |       | ے          |

### Establishment HCT/P Listing

| Types of HCT/Ps   | HCT/Ps<br>Described<br>in 21 CFR<br>1271.10 | Proprietary Names |
|-------------------|---|-------------------|
| Amniotic Membrane |   |                   |
| Blood Vessel      |   |                   |
|                   |   |                   |

| Bone                                  |   |  |
|---------------------------------------|---|--|
| Cardiac Tissue - non-valved           |   |  |
| Cartilage                             |   |  |
| Cornea                                |   |  |
| Dura Mater                            |   |  |
| Embryo                                |   |  |
| Fascia                                |   |  |
| Heart Valve                           |   |  |
| HPC Apheresis                         |   |  |
| HPC Cord Blood                        | X |  |
| Ligament                              |   |  |
| Nerve Tissue                          |   |  |
| Oocyte                                |   |  |
| Ovarian Tissue                        |   |  |
| Pancreatic Islet Cells - autologous   |   |  |
| Parathyroid                           |   |  |
| Pericardium                           |   |  |
| Peripheral Blood Mononuclear<br>Cells |   |  |
| Peritoneal Membrane                   |   |  |
| Sclera                                |   |  |
| Semen Semen                           |   |  |
| Skin                                  |   |  |
|                                       |   |  |
| Tendon Testicular Tissue              |   |  |
|                                       |   |  |
| Tooth Pulp                            | V |  |
| Umbilical Cord Tissue                 | X |  |

# HCT/P Listing - Donor Information

| Types of HCT/Ps                    | SIP | Directed | Anonymous | Autologous | Family Related |
|------------------------------------|-----|----------|-----------|------------|----------------|
| Embryo                             |     |          |           |            |                |
| HPC Apheresis                      |     |          |           |            |                |
| HPC Cord Blood                     |     |          |           | ے          | lacksquare     |
| Oocyte                             |     |          |           |            |                |
| Peripheral Blood Mononuclear Cells |     |          |           |            |                |
| Semen                              |     |          |           |            |                |

Print Date: 03/23/2022

| Print This Page | Back To Query Criteria Screen | Back To Query Results Screen |
|-----------------|-------------------------------|------------------------------|
|                 | Exit                          |                              |

eHCTERS v02.13.00 Updated 11/20/2020

<u>Contact eHCTERS Technical Support</u> | <u>Online Help</u> | <u>Release Notes</u>

Contact CBER | Contact FDA | Privacy
FDA Home Page | Accessibility | HHS Home Page

FDA / Center for Biologics Evaluation and Research