

Certifications, Registrations, Licenses: Itasca, Illinois Table of Contents

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CERTIFICATE OF ACCREDITATION

The ANSI National Accreditation Board

Hereby attests that

Nelson Laboratories, LLC

1500 West Thorndale Avenue Itasca, IL 60143

Fulfills the requirements of

ISO/IEC 17025:2017

and

Good Laboratory Practice for Nonclinical Laboratory Studies, Title 21 CFR Part 58 Accreditation Program

In the field of

TESTING

This certificate is valid only when accompanied by a current scope of accreditation document.

The current scope of accreditation can be verified at www.anab.org.

Jason Stine, Vice President Expiry Date: 16 March 2025

Certificate Number: AT-1382.01









SCOPE OF ACCREDITATION TO ISO/IEC 17025:2017

GOOD LABORATORY PRACTICE FOR NONCLINICAL LABORATORY STUDIES, TITLE 21 CFR PART 58 ACCREDITATION PROGRAM ¹

Nelson Laboratories, LLC

1500 West Thorndale Avenue Itasca, IL 60143

Shana Sanders 630-285-9121 SSanders@nelsonlabs.com

TESTING

Valid to: March 16, 2025 Certificate Number: AT-1382.01

Microbiological¹

Version 018 Issued: February 20, 2024

| Specific Tests and/or Properties Measured | Specification, Standard, Method, or Test Technique | Items, Materials or Product Tested | Key Equipment or Technology |
|--|---|--|--|
| Bacterial Endotoxins | STP <mark>0046;</mark> USP<85>; USP<161>; ANSI/AAMI ST72 | Medical Devices, Pharmaceuticals, Tissues | Microplate Reader |
| Bioburden | STP0036; ISO 11737-1 | Medical Devices, Pharmaceuticals, Tissues | Biosafety Cabinet, Incubators, Laminar Flow Hood |
| Biological Indicator Sterility | STP0079; ISO 11138-1 to -4; USP<55>; ISO 11135; AAMI TIR 14 | BIs, PCDs | BI Sterility Suite ISO Class 5 Hoods Incubators |
| Product Sterility Bacteriostasis / Fungistasis | STP0077; STP0078; ISO 11737-2; USP<71> | Medical Devices, Pharmaceuticals, Tissues | Product Sterility Suite ISO Class 5 Hoods Incubators |
| Biological Indicator Population Verification (Enumeration and Specified Organisms) | STP0045; USP<55>; ISO 11138-1 | Medical Devices, Pharmaceuticals | Incubators |
| Organism Identification (Genetic and Gram Stain) | STP0173; STP0105; USP<1113> | Medical Devices, Pharmaceuticals | Genetic Sequencer, Thermocycler, Automated Gram Stainer, Biosafety Cabinet, Microscope |





Microbiological¹

| Specific Tests and/or Properties Measured | Specification, Standard, Method, or Test Technique | Items, Materials or Product Tested | Key Equipment or Technology |
|--|--|---------------------------------------|---|
| TOC | STP0028 based on USP<643> | Medical Devices, Pharmaceuticals | Washer/Disinfectors Sterilizers (Steam) UV/VIS Spectrophotometer |
| Radiation Dose Unit | STP0044 | Medical Devices | Biosafety Cabinet, Laminar Flow Hood Product Sterility Suite ISO Class 5 Hoods Incubators |

Mechanical

| Specific Tests and/or Properties Measured | Specification, Standard, Method, or Test Technique | Items, Materials or Product Tested | Key Equipment or Technology |
|--|--|--|--|
| Particulates | STP0011 based on USP<788>,<789>, EP 2.9.19, 2.9.31, BP Appendix XIII A, BH EN 45502-1, 45502-2-1 ISO 8536-4 | Medical Devices, Injectables and Ophthalmic Solutions, Pharmaceutical Products | Liquid Particle Counting System, Microscope |

Chemical

| Specific Tests and/or Properties Measured | Specification, Standard, Method, or Test Technique | Items, Materials or Product Tested | Key Equipment or Technology |
|--|--|---------------------------------------|--------------------------------|
| Ethylene Oxide (EO) Residual Analysis | STP0016 based on ANSI/AMMI/ISO 10993-7, 2008; USP <621> | Medical Devices | Gas Chromatograph (GC) |
| Water Purity Analysis TOC | STP0028 based on USP<643> | Water – USP | TOC Analyzer |
| Water Conductivity | STP0147 USP <645> | Water – USP | Conductivity Meter |
| pН | STP0029 USP <791> | Water – USP | pH Meter |

Note:

- 1. Microbiological testing is in conformance to the U.S. FDA GLP (Good Laboratory Practice) Regulations per 21 CFR Part 58.
- 2. This scope is formatted as part of a single document including Certificate of Accreditation No. AT-1382.01.

Jason Stine, Vice President

Version 018 Issued: February 20, 2024



Drug Establishments Current Registration Site

New Search (default.cfm)

Search Results for nelson laboratories

| CSVE2 | <u>kcel</u> |
|---------|-------------|
| Filter: | |

| Firm Name | FDA Establishment Identifier | DUNS | Business Operations | Address | Expiration Date |
|-----------------------------|---------------------------------|-----------|------------------------|---|--------------------|
| Nelson Laboratories, LLC | 3000233845 | 151663234 | ANALYSIS; | 6280 South Redwood Road, Salt Lake City, Utah (UT) 84123, United States (USA) | 12/31/2024 |
| Nelson Laboratories, LLC | 3000717698 | 032350261 | ANALYSIS; | 1500 W Thorndale Ave, Itasca, Illinois (IL) 60143, United States (USA) | 12/31/2024 |

Showing 1 to 2 of 2 entries

Previous1Next

Data Current through: Wednesday, Nov 29, 2023

Return to Drug Firm Annual Registration Status Home Page (default.cfm)

DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC HEALTH SERVICE

FOOD AND DRUG ADMINISTRATION

ESTABLISHMENT REGISTRATION AND LISTING FOR HUMAN CELLS, TISSUES, AND CELLULAR AND TISSUE-BASED PRODUCTS **DESCRIBED IN 21 CFR 1271.10**

FEI: 3007950533

Other FDA Registrations:

Blood: Devices:

Fatablish mant Freezie

Drugs: FEI: 3000717698

Reason For Last Submission: Annual Registration/Listing

Last Annual Registration Year: 2024 Last Registration Receipt Date: 11/16/2023 Summary Report Print Date: 12/01/2023

Legal Name and Location:

Nelson Laboratories, LLC 1500 W. Thorndale Ave

Ext.:

Itasca, Illinois 60143

USA

Phone: 630-285-9121

Reporting Official:

Robert Thoreson, Director of Quality Assurance

6280 South Redwood Road Salt Lake City, Utah 84123

Phone: 801-290-7618 Ext. rthoreson@nelsonlabs.com

Satellite Recovery Establishment:

No

Parent Manufacturing Establishment FEI No.:

Testing For Micro-Organisms Only:

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)).

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

| Additional | Information: | No add |
|------------|--------------|--------|
| | | |

No additional information provided.

Proprietary Name(s):

FEI: 3007950533

Legal Name: Nelson Laboratories, LLC





525-535 West Jefferson Street • Springfield, Illinois 62761-0001 • www.dph.illinois.gov

Effective Date: May 1, 2024 Expires: May 01, 2025

Joseph Spyridakis, Facility Director Nelson Labs 1500 W Thorndale Ave Itasca, IL 60143

Registration Number 0819

State of Illinois <u>2024</u> Sperm/Tissue Bank Registration

Nelson Labs

Dear Director:

We are in receipt of your **Registration** with the State of Illinois. We welcome your cooperation to observe our State laws and you may use this document as proof of registration as required by *Title 77 Public Health Chapter I: Department of Public Health Subchapter D:* Laboratories and Blood Bank Part 470 Sperm Bank and Tissue Bank Code Section 470.30 Registration Requirements.

Sincerely,

Brandon Rakowski
Tissue & Sperm Bank
Program Administrator
Illinois Department of Public Health
Health Care Facilities and Programs

Laboratory Regulations

Annual registration deadline is May 1, and renewal reminders are e-mailed on February of each year.



31 Mar 2023

Regulatory Inspection History, GMP and GLP Compliance, and Debarment Statement

Dear Sponsor,

Nelson Laboratories (NL), LLC located at 1500 W. Thorndale, Itasca, IL 60143, is audited by the U.S. Food and Drug Administration (FDA) according to current good manufacturing practices (GMP), good laboratory practices (GLP), and good tissue practices (GTP), as applicable. We are also currently ISO 17025:2017 accredited by the ANSI- ASQ National Accreditation Board (ANAB) as a testing laboratory.

We certify that the facility, tests, and controls that are used in the analysis of your products are in compliance with the following:

- Current Good Manufacturing Practices, as codified in 21 CFR 210/211 and 820
- Current Good Tissue Practices, as codified in 21 CFR 1270/1271
- Current Good Laboratory Practices, as codified in 21 CFR 58 or 40 CFR 160, when requested
- Current E.U. and TGA Good Manufacturing Practices

10 Year Regulatory Inspection History

| FDA: 2011 | 07-08 Oct | CDRH, CDER, CBER, |
|-----------|----------------|---------------------------|
| 2013 | 30 May-12 June | CDRH, CDER, CBER, CFSAN |
| 2016 | 11 Mar | CDRH, CDER, CBER, CVM |
| 2018 | 06-08 Nov | CDER, CVM |
| 2021 | 14 Apr | *FDA 4003a Document audit |

Pursuant to Section 306(k) of the Federal Food, Drug, and Cosmetic Act (the Act) (21 D.S.C. 335a (k), as amended by the Generic Drug Enforcement Act of 1992 (GDEA), NL certifies that it did not and will not use in any capacity the services of any person debarred under subsection (a) or (b) of the Generic Drug Enforcement Act of 1992. No person employed by NL has currently or in the past five (5) years been convicted of any crime described in Sections 306 (a) or (b) of the Generic Drug Enforcement Act of 1992. NL has not been debarred by the FDA and is not currently involved in any debarment proceeding with the FDA.

Sincerely,

- DocuSigned by:

*Volunt Thorsoon

Signer Name: Robert Thorseon



Signer Name: Robert Thorseon
Signing Reason: I approve this document
Signing Time: Apr 3, 2023 | 4:24 PM MDT
6D561BC75E97432B9FF4CF3EF4893377

Rob Thoreson Director of Quality Assurance 801-290-7618 RThoreson@nelsonlabs.com

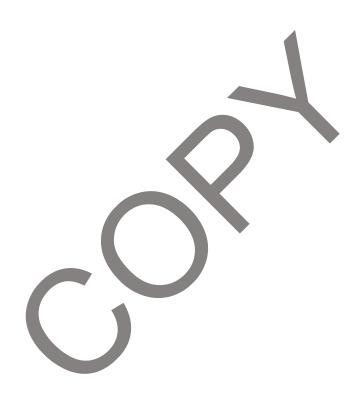
| 2023-3D30-00021-A | | | | | |
|--|--|--|--|--|--|
| DEPARTMENT OF THE TREASURY | PERMIT NUMBER | | | | |
| ALCOHOL AND TOBACCO TAX AND TRADE BUREAU | SDS-IL-20134 | | | | |
| INDUSTRIAL ALCOHOL USER PERMIT | EFFECTIVE DATE | | | | |
| | 01/25/2023 | | | | |
| NELSON LABORATORIES LLC DBA: NELSON LABORATORIES, LLC | MAXIMUM QUANTITY TO BE WITHDRAWN PER CALENDAR YEAR 500 | | | | |
| 1500 W THORNDALE AVE | | | | | |
| ITASCA, IL 60143 | X GALLONS PROOF GALLONS | | | | |
| | | | | | |
| You are hereby authorized to: X Withdraw and use speciall | y denatured alcohol/rum | | | | |
| | cially denatured alcohol/rum | | | | |
| Recover/restore alcohol free of tax Recover/restore and use s | pecially denatured alcohol/rum | | | | |
| | | | | | |
| Operations must be conducted at the above address, subject to applicable law and regreater, and to the conditions set forth below. | ulations, the Federal Water Pollution Control | | | | |
| This permit is continuing and will remain in force unless suspended, revoked, voluntarily | surrendered or automatically terminated. | | | | |
| This permit is not transferable. In the event of any lease, sale or other transfer of the in the proprietorship of such operations, this permit shall automatically terminate unless days. If a timely application is filed, the outstanding permit will continue in effect until the Revenue Center or Puerto Rico Operations Office. | the successor requalifies by the end of thirty | | | | |
| Tax free alcohol may not be used for any purpose or in any manner not shown on an ap | proved permit application. | | | | |
| THIS PERMIT IS SUBJECT TO THE FOLLOWING CONDITIONS: GENERAL CONDITIONS | * | | | | |
| That the permittee complies with the provisions of 26 U.S.C., Chapter 51 and its regulations. That the permittee has made no false statement as to any material fact in the application for this permit. That the permittee furnishes all the material information required by law and regulations. That the permittee and all persons interested in the permitted operations, shall not violate or conspire to violate any law of the United States relating to intoxicating liquor and shall not be convicted of any offense under the United States Code punishable as a felony or of any conspiracy to commit such an offense. That the permittee continues, by reasons of operations, to be warranted to procure, possess and dispose of/use, as the case may be, specially denatured alcohol/rum or alcohol free of tax. That the permittee timely prepares and maintains at the address stated on this permit, adequate and accurate records and reports as required by 26 U.S.C. 5275 and its regulations, and makes timely, true and complete reports of operations as required by law and regulations. That the permittee has not discontinued the operations authorized by this permit for a period exceeding two years. SPECIFIC TAX FREE CONDITIONS That the permittee uses alcohol withdrawn free of tax only for the purposes set forth in this permit and within the conditions and | | | | | |
| limitations specified in 26 U.S.C. 5214 (a)(2) or (3). SPECIFIC SPECIALLY DENATURED ALCOHOL/RUM | CONDITIONS | | | | |
| 1. That the permittee shall use specially denatured alcohol/rum in the manufacture of an article in accordance with an approved formula (including any general use formulas). When using specially denatured alcohol, for laboratory or mechanical purposes, not in the development of a product, use in the manner provided by law and regulations. | | | | | |
| 2. That the permittee manufactures, labels, advertises and sells or uses articles in the r | | | | | |
| 3. That the permittee, if authorized by this permit, recovers completely denatured alcohol, specially denatured alcohol/rum, or articles, in accordance with approved statements of process, in the manner provided by law and regulations. | | | | | |
| 4. That the permittee shall not dispose of specially denatured alcohol/rum to a user with | out a valid copy of the user's permit. | | | | |
| THIS IS AN ORIGINAL PERMIT | ED PERMIT | | | | |
| REASON FOR AMENDMENT (If applicable) | DATE OF AMENDMENT | | | | |
| See Attachments 03/22/2023 | | | | | |
| SIGNATURE AND TITLE OF AUTHORIZED TTB OFFICIAL | | | | | |
| Technician | | | | | |

ATTACHMENT TO TTB F 5150.9

NELSON LABORATORIES LLC Nelson Laboratories, LLC 1500 W THORNDALE AVE ITASCA, IL 60143

Reason for Amendment :

Change in Withdrawal Amount



| DEA REGISTRAT NUMBER | ION THIS REGISTRATION EXPIRES | FEE PAID | | |
|---|-------------------------------|-------------|--|--|
| RN0657695 | RN0657695 10-31-2024 | | | |
| SCHEDULES | BUSINESS ACTIVITY | ISSUE DATE | | |
| 2,2N,3, 3N,4,5 | ANALYTICAL LAB | 08-08-2023 | | |
| NELSON LABORATORIES LLC DBA NELSON LABS 1500 W THORNDALE AVE ITASCA, IL 601431133 | | | | |

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON D.C. 20537

Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE

UNITED STATES DEPARTMENT OF JUSTICE DRUG ENFORCEMENT ADMINISTRATION WASHINGTON D.C. 20537

| DEA REGISTRA NUMBER | ATION THIS REGISTRATION EXPIRES | FEE PAID |
|------------------------|---------------------------------|-------------|
| RN065769 | 10-31-2024 | \$296 |
| SCHEDULES | BUSINESS ACTIVITY | ISSUE DATE |
| 2,2N,3, 3N,4,5 | ANALYTICAL LAB | 08-08-2023 |

NELSON LABORATORIES LLC DBA NELSON LABS 1500 W THORNDALE AVE ITASCA, IL 601431133 Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.

Form DEA-223 (9/2016)

| DEA REGISTRA NUMBER | TION THIS REGISTRATION EXPIRES | FEE PAID | |
|---|--------------------------------|-------------|--|
| RN0657695 | 10-31-2024 | \$296 | |
| | 11.3 | | |
| SCHEDULES | BUSINESS ACTIVITY | ISSUE DATE | |
| 2,2N,3, 3N,4,5 | ANALYTICAL LAB | 08-08-2023 | |
| NELSON LABORATORIES LLC DBA NELSON LABS 1500 W THORNDALE AVE ITASCA, IL 601431133 | | | |

CONTROLLED SUBSTANCE/REGULATED CHEMICAL REGISTRATION CERTIFICATE UNITED STATES DEPARTMENT OF JUSTICE DRUG ENFORCEMENT ADMINISTRATION WASHINGTON D.C. 20537

Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.

Form DEA-223/511 (9/2016) REPORT **CHANGES PROMPTLY**

REQUESTING MODIFICATIONS TO YOUR REGISTRATION CERTIFICATE

To request a change to your registered name, address, the drug schedule or the drug codes you handle, please

- 1. visit our web site at **deadiversion.usdoj.gov** or 2. call our customer Service Center at **1-(800) 882-9539** or
- 3. submit your change(s) in writing to:

Drug Enforcement Administration P.O. Box 2639 Springfield, VA 22152-2639

See Title 21 Code of Federal Regulations, Section 1301.51 for complete instructions.

You have been registered to handle the following chemical/drug codes: