

NEW YORK STATE DEPARTMENT OF HEALTH
PROVISIONAL LICENSE FOR TISSUE BANK OPERATION

Issued in accordance with and pursuant to section 4364 Public Health Law of New York State

Tissue Bank ID No.: G4008

Tissue Bank Director:
Stephen H. Pool, Ph.D.

Medical Director:
Harvey Stern, M.D., Ph.D.

Fairfax Cryobank, Inc.
1944 Lexington Avenue North
Roseville, MN 55113

is hereby **APPROVED** as a Tissue Bank for the following categories of service:

Comprehensive Tissue Procurement Service
Tissue Processing Facility
Tissue Storage Facility

Semen from donors and client-depositors

Semen from donors and client-depositors

Semen, oocytes, embryos, ovarian tissue, and testicular tissue from donor and client-depositors

Issued: March 25, 2016

Expires: April 1, 2018

Owner: Genetics & IVF Institute, Inc.

Property of the New York State Department of Health. Valid only at the address shown. Must be conspicuously posted.

DOH-3908 (04/2001)



Department of Health

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Commissioner

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

March 25, 2016

Shelley L. Carlin, J.D., M.P.H.
Fairfax Cryobank, Inc.
3015 Williams Drive, Suite 110
Fairfax, VA 22031

Re: GA008

Dear Ms. Carlin:


Please find the enclosed provisional license certificate for tissue bank operation for the following location.

Fairfax Cryobank, Inc.
1944 Lexington Avenue North
Roseville, MN 55113

The provisional license is effective until either April 1, 2018 or the issuance of a full license following an on-site survey of your tissue bank. The certificate must be posted conspicuously.

In accordance with the provisions of 10 NYCRR 52-3.7(d), the department will require an annual summary of the activities of your tissue bank. Information to be reported may include the numbers of semen donors and donations, numbers of tests for various infectious diseases, numbers of reproductive tissue specimens collected, stored and distributed, and outcomes of clinical use of semen reported by client facilities. Please report, in writing, any changes in tissue bank director or medical director within five (5) days of the change. Also, report changes in direct or indirect ownership within thirty (30) days and keep the department informed of any relocation of the facilities.

If you have any questions, please contact me at (518) 485-5341. Thank you for your cooperation.

Sincerely,

Thomas J. Favreau
Supervisor, Blood and Tissue
Resources

Enclosure