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eHCTERS - Registration Information

Submitted Registration Information

This information has been submitted to the FDA

Please Remember Your Confirmation Number to Reference this registration submission

YOUR CONFIRMATION NUMBER IS: 67100

Please print this document and maintain as confirmation of your submission. This application is no longer accessible using your pre-confirmation number.

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	FEI: 0002	2370879
Other FDA Registrations		Reason for Submission
Blood 0002370 Devices Drug	0879	☐ Initial Registration/Listing ☑ Annual Registration/Listing ☐ Change in Information ☐ In-Activate Registration
Physical Location		
Legal Name:	LifeShare Blood Cent	er
Street Address:	8910 Linwood Avenue	e
City:	Shreveport	
State:	Louisiana	
Postal Code:	71106	
Country:	UNITED STATES	
Phone:	318-222-7770 ext.	
Reporting Official Information		
First Name:	Chelsea A.	
Last Name:	Sheppard M.D.	
Title:	Medical Director	
Phone:	318-683-6784 Ext.	
E-Mail Address:	wendell.jones@lifesha	are.org
Mailing Address of Reporting Officia	I	

Institution Name: LifeShare Blood Center Street Address: 8910 Linwood Avenue

 $https://www.accessdata.fda.gov/scripts/cber/CFApps/HCTERS/Index.cfm? fuse action=fuse_ViewReport$

City: Shreveport State: Louisiana Postal Code: 71106

Country: UNITED STATES

HCT/P Listing Information

Types of HCT/Ps	HCT/Ps Described in 21 CFR 1271.10	Date of Discontinuance (mm/dd/yyyy)	Date of Resumption (mm/dd/yyyy)	Proprietary Names		
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	Х					
Peritoneal Membrane						
Sclera						
Semen						
Skin						
Tendon						
Testicular Tissue						
Tooth Pulp						
Umbilical Cord Tissue						

HCT/P Listing - Function Information

Types of HCT/Ps	Recover	Screen	Donor Testing	Package	Process	Store	Label	Distribute
Amniotic Membrane								
Blood Vessel								

Bone			T			
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	ے				lacksquare	lacksquare
Peritoneal Membrane						
Sclera						
Semen						
Skin						
Tendon						
Testicular Tissue						
Tooth Pulp						
Umbilical Cord Tissue						
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HCT/P Listing - Donor Information

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

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)

eHCTERS v02.13.04 Updated 07/29/2024

Submitted Registration Information

OMB Control Number 0910-0543; Expiration Date 08/31/2026 See OMB Burden Statement

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