

DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC HEALTH SERVICE FOOD AND DRUG ADMINISTRATION BLOOD ESTABLISHMENT REGISTRATION AND PRODUCT LISTING FOR MANUFACTURERS OF BLOOD PRODUCTS AND LICENSED DEVICES	FEI: 3033046013 DUNS: 020611554 U.S. License Number:	REASON FOR SUBMISSION	DISTRICT OFFICE:New Orleans VALIDATED BY FDA: 11/14/2024
LEGAL NAME AND LOCATION: LifeShare Blood Center 1923-A North Market Shreveport, LA 71107 USA	REPORTING OFFICIAL: Tim G. Peterson, M.D. LifeShare Blood Center 8910 Linwood Ave Shreveport, LA 71106 USA 318-683-6784 wendell.jones@lifeshare.org		U.S. AGENT:
OTHER NAMES USED IN THIS LOCATION: Pelican Plasma	TYPE OF OWNERSHIP: CORPORATION		ESTABLISHMENT TYPE: COMMUNITY (NON-HOSPITAL) BLOOD BANK
	DONOR/RECIPIENT RELATIONSHIP: ALLOGENIC		

PRODUCT	COLLECT	MANUAL APHERESIS	AUTOMATED APHERESIS	PREPARE	LEUKOCYTES REDUCED	IRRADIATED	DONOR RETESTED	TEST	STORE AND DISTRIBUTE TO OTHERS	BACTERIAL TESTING	PATHOGEN REDUCED	POOLED
PLATELETS			X		X							
PLATELETS EXTENDED DATING			X		X							

***** End Of Report *****