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: 3022881402 DUNS: 118660285 U.S. License Number: 1846	REASON FOR SUBMISSION Change in Information	DISTRICT OFFICE:Minneapolis VALIDATED BY FDA: 03/30/2023			
LEGAL NAME AND LOCATION: LifeServe Blood Center 2727 6th Ave SE Suite 102 Aberdeen, SD 57401 USA	REPORTING OFFICIAL: Grant Pfeifer LifeServe Blood Center 431 East Locust Street	·	U.S. AGENT:			
515-309-4846	Des Moines, IA 50309 USA 515-309-4811 grant.pfeifer@lifeservebloodcen	ter.org				
OTHER NAMES USED IN THIS LOCATION:	TYPE OF OWNERSHIP: CORPORATION DONOR/RECIPIENT RELATIO ALLOGENIC	NSHIP:	ESTABLISHMENT TYPE: COLLECTION FACILITY; COMPONENT PREPARATION FACILITY; DISTRIBUTION CENTER			

PRODUCT	COLLECT	MANUAL APHERESIS	AUTOMATED APHERESIS	PREPARE	LEUKOCYTES REDUCED	IRRADIATED	DONOR RETESTED	TEST	STORE AND DISTRIBUTE TO OTHERS	BACTERIAL TESTING	PATHOGEN REDUCED	POOLED
WHOLE BLOOD	х								х			
RED BLOOD CELLS (RBC)			Х	Х	х				х			
CRYOPRECIPITATED AHF									х			
PLATELETS			х	Х	х				х			
PLATELETS EXTENDED DATING			х	Х	х				х			
PLASMA			Х	Х	х				х			
PF24 PLASMA			Х	Х					х			
PF24RT24 PLASMA			Х	Х					х			
FRESH FROZEN PLASMA			х	Х	х				х			
PLASMA CRYOPRECIPITATED REDUCED									х			

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: 3022881402 DUNS: 118660285 U.S. License Number: 1846	REASON FOR SUBMISSION Change in Information	DISTRICT OFFICE:Minneapolis VALIDATED BY FDA: 03/30/2023
LEGAL NAME AND LOCATION: LifeServe Blood Center 2727 6th Ave SE Suite 102 Aberdeen, SD 57401 USA	REPORTING OFFICIAL: Grant Pfeifer LifeServe Blood Center 431 East Locust Street	·	U.S. AGENT:
515-309-4846	Des Moines, IA 50309 USA 515-309-4811 grant.pfeifer@lifeservebloodcen	ter.org	
OTHER NAMES USED IN THIS LOCATION:	TYPE OF OWNERSHIP: CORPORATION DONOR/RECIPIENT RELATIO ALLOGENIC	NSHIP:	ESTABLISHMENT TYPE: COLLECTION FACILITY; COMPONENT PREPARATION FACILITY; DISTRIBUTION CENTER

PRODUCT	COLLECT	MANUAL APHERESIS	AUTOMATED APHERESIS	PREPARE	LEUKOCYTES REDUCED	IRRADIATED	DONOR RETESTED	TEST	STORE AND DISTRIBUTE TO OTHERS	-	PATHOGEN REDUCED	POOLED
LIQUID PLASMA									х			
RECOVERED PLASMA				Х					х			
BLOOD PRODUCTS FOR DIAGNOSTIC USE									Х			
BLOOD BANK REAGENTS									Х			

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