

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: 1972918 DUNS: 806860748 U.S. License Number:		REASON FOR SUBMISSION Annual Registration		DISTRICT OFFICE:Kansas City VALIDATED BY FDA: 10/27/2025	
LEGAL NAME AND LOCATION: DeGowin Blood Center University of Iowa Health Care 200 Hawkins Drive, C 250 GH Iowa City, IA 52242 USA 319-356-2058		REPORTING OFFICIAL: Charles M. Knudson University of Iowa Health Care DeGowin Blood Center 200 Hawkins Drive C250GH Iowa City, IA 52242-1087 USA 319-467-5129 barbara-swanson@uiowa.edu				U.S. AGENT:	
OTHER NAMES USED IN THIS LOCATION: UI DeGowin Blood Center; University of Iowa Health Care ; University of Iowa Hospitals and Clinics		TYPE OF OWNERSHIP: STATE DONOR/RECIPIENT RELATIONSHIP: ALLOGENIC, AUTOLOGOUS				ESTABLISHMENT TYPE: HOSPITAL BLOOD BANK	

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	X											
RED BLOOD CELLS (RBC)			X	X	X	X		X	X			
RBC FROZEN				X								
RBC DEGLYCEROLIZED				X		X		X				
RBC RECONSTITUTED				X		X		X				
RBC WASHED				X		X		X				
CRYOPRECIPITATED AHF												X
PLATELETS			X	X	X	X		X	X	X		
PLATELETS EXTENDED DATING			X	X	X	X		X		X		
PLATELETS WASHED				X	X							

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PRODUCT	COLLECT	MANUAL APHERESIS	AUTOMATED APHERESIS	PREPARE	LEUKOCYTES REDUCED	IRRADIATED	DONOR RETESTED	TEST	STORE AND DISTRIBUTE TO OTHERS	BACTERIAL TESTING	PATHOGEN REDUCED	POOLED
GRANULOCYTES						X		X				
PF24 PLASMA			X	X					X			

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