**LEGAL NAME AND LOCATION:**

Kentucky Blood Center, Inc.
3121 Beaumont Centre Circle
Lexington, KY 40513-1709 USA

859-276-2534

**REPORTING OFFICIAL:**
Kim Turner, Vice President of Quality and Regulatory Affairs
Kentucky Blood Center, Inc.
3121 Beaumont Centre Circle
Lexington, KY 40513-1709 USA
859-519-3785
kiturner@kybloodcenter.org

**OTHER NAMES USED IN THIS LOCATION:**

**TYPE OF OWNERSHIP:**
CORPORATION

**DONOR/RECIPIENT RELATIONSHIP:**
ALLOGENIC, AUTOLOGOUS, DIRECTED

**ESTABLISHMENT TYPE:**
COMMUNITY (NON-HOSPITAL) BLOOD BANK

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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

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LEGAL NAME AND LOCATION:
Kentucky Blood Center, Inc.  
3121 Beaumont Centre Circle  
Lexington, KY 40513-1709 USA

859-276-2534

REPORTING OFFICIAL:
Kim Turner, Vice President of Quality and Regulatory Affairs  
Kentucky Blood Center, Inc.  
3121 Beaumont Centre Circle

Lexington, KY 40513-1709 USA  
859-519-3785  
kturner@kybloodcenter.org

OTHER NAMES USED IN THIS LOCATION:

TYPE OF OWNERSHIP:
CORPORATION

DONOR/RECIPIENT RELATIONSHIP:
ALLOGENIC, AUTOLOGOUS, DIRECTED

ESTABLISHMENT TYPE:
COMMUNITY (NON-HOSPITAL) BLOOD BANK

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**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**

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

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: 1048401
DUNS: 125276147
U.S. License Number: 1836

REASON FOR SUBMISSION
Annual Registration

DISTRICT OFFICE: Cincinnati
VALIDATED BY FDA: 11/18/2019

LEGAL NAME AND LOCATION:
Kentucky Blood Center, Inc.
10 Stonegate Centre
Somerset, KY 42503 USA
606-679-7413

REPORTING OFFICIAL:
Kim Turner, Vice President of Quality and Regulatory Affair
Kentucky Blood Center, Inc.
3121 Beaumont Centre Circle
Lexington, KY 40513-1708 USA
859-519-3785
kturner@kybloodcenter.org

U.S. AGENT:

OTHER NAMES USED IN THIS LOCATION:
Central Kentucky Blood Center, Inc.; Kentucky Blood Center - Somerset, Kentucky Blood Center Inc.

TYPE OF OWNERSHIP:
CORPORATION

DONOR/RECIPIENT RELATIONSHIP:
ALLOGENIC, AUTOLOGOUS, DIRECTED

ESTABLISHMENT TYPE:
COLLECTION FACILITY

FDA information collection OMB Control number: 0910-0052, Expiration Date: 6/30/2021
**Legal Name and Location:**
Kentucky Blood Center, Inc.
472 South Mayo Trail
Pikeville, KY 41501 USA

606-432-4879

**Other Names Used in this Location:**
Central Kentucky Blood Center, Inc.; Kentucky Blood Center - Pikeville; Kentucky Blood Center Inc.

**Type of Ownership:**
Corporation

**Donor/Recipient Relationship:**
Allogenic, AutoLOGous, DIRECTed

**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 |  |  |  |  |  |  |  |  |  |  |  | X
Red Blood Cells (RBC) |  | X |  |  |  |  |  |  |  |  |  |  | X
Platelets |  | X |  |  |  |  |  |  |  |  |  |  | X
Plasma |  |  |  |  |  |  |  |  |  |  |  |  | X

***** End Of Report *****
**LEGAL NAME AND LOCATION:**

Kentucky Blood Center, Inc.
12805 Shelbyville Rd
Suite 4
Louisville, KY 40243 USA

502-290-0537

**REPORTING OFFICIAL:**

Kim Turner, Vice President of Quality and Regulatory Affairs
Kentucky Blood Center
3121 Beaumont Centre Circle

Lexington, KY 40513-1709 USA
859-519-3785
ktturner@kybloodcenter.org

**U.S. AGENT:**

**OTHER NAMES USED IN THIS LOCATION:**

Kentucky Blood Center - Middletown, Kentucky Blood Center, Inc

**TYPE OF OWNERSHIP:**

CORPORATION

**DONOR/RECIPIENT RELATIONSHIP:**

ALLOGENIC, AUTOLOGOUS, DIRECTED

**ESTABLISHMENT TYPE:**

COLLECTION FACILITY

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***** End Of Report *****
### Legal Name and Location:
Kentucky Blood Center, Inc.
5406 Ante Drive
Suite 101
Louisville, KY 40229 USA

502-915-9989

### Reporting Official:
Kim Turner, Vice President of Quality and Regulatory Affairs
Kentucky Blood Center
3121 Beaumont Centre Circle
Lexington, KY 40513-1709 USA
859-519-3785
kimturner@kybloodcenter.org

### Other Names Used in This Location:
Kentucky Blood Center - Hillview

### Type of Ownership:
CORPORATION

### Donor/Recipient Relationship:
ALLOGENIC, AUTOLOGOUS, DIRECTED

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**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:** 3013450009  
**DUNS:** 096999669  
**U.S. License Number:**  
**REASON FOR SUBMISSION:**  
Annual Registration  
**DISTRICT OFFICE:** Cincinnati  
**VALIDATED BY FDA:** 11/18/2019

**LEGAL NAME AND LOCATION:**
Kentucky Blood Center, Inc.  
2605 Kentucky Ave.  
MP3 Suite 104  
Paducah, KY 42003 USA  
270-557-7821

**REPORTING OFFICIAL:**
Kim Turner, Vice President of Quality and Regulatory Affairs  
Kentucky Blood Center, Inc.  
3121 Beaumont Centre Circle  
Lexington, KY 40513-1709 USA  
859-519-3785  
kturner@kybloodcenter.org

**U.S. AGENT:**

**OTHER NAMES USED IN THIS LOCATION:**
Kentucky Blood Center - Paducah

**TYPE OF OWNERSHIP:**
CORPORATION

**DONOR/RECIPIENT RELATIONSHIP:**

**PRODUCT**

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