

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  26D2124373	<b>(X3) Date Survey Completed</b>  05/26/2021
<b>Name of Provider or Supplier</b>  Biolife Plasma Services Lp	<b>Street Address, City, State</b>  8484 Mexico Road, Saint Peters, MO	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>
<b>D0000</b>	The BioLife Plasma Services, LP's Laboratory was found to be in substantial compliance with 42 CFR Part 493, Requirements for Laboratories as a result of an onsite survey on May 26, 2021.