

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: 3014901559  
 DUNS: 080286863  
 U.S. License Number:  
 688

REASON FOR SUBMISSION  
 Annual Registration

DISTRICT OFFICE: New Orleans  
 VALIDATED BY FDA: 10/24/2020

LEGAL NAME AND LOCATION:

Medic, Inc.  
 MEDIC, Inc. (Athens Center)  
 Suite 104, 213 E. Washington Avenue  
 Athens, TN 37303 USA

REPORTING OFFICIAL:

Martha S. Cox, Chief Quality Officer  
 MEDIC, Inc.  
 1601 Alilor Avenue

*M. S. Cox 12/9/2020*

U.S. AGENT:

Knoxville, TN 37921 USA  
 8655243074 x668  
 mcox@medicblood.org

OTHER NAMES USED IN THIS LOCATION:  
 MEDIC Regional Blood Center (Athens)

TYPE OF OWNERSHIP:  
 CORPORATION

ESTABLISHMENT TYPE:  
 COLLECTION FACILITY

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											
RED BLOOD CELLS (RBC)			X		X							
PLATELETS			X		X							
PF24 PLASMA			X									
PF24RT24 PLASMA			X									
FRESH FROZEN PLASMA			X									

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