

State of Tennessee



License No. 0000002261

DEPARTMENT OF HEALTH

This I do Certify, that a license is hereby granted by the Tennessee Department of Health to:

MEDIC REGIONAL BLOOD CENTER

Medical Laboratory Director THOMAS C. WATKINS, D.O.

Ownership Type CORPORATION

To conduct and maintain a Medical Laboratory in the Specialty (ies) of:

- COMPATIBILITY TESTING
- BACTERIOLOGY (LIMITED)
- ANTIBODY DETECTION TRANSFUSION
- ROUTINE CHEMISTRY
- ANTIBODY IDENTIFICATION

- ABO GROUP & RH TYPE
- HEMATOLOGY
- ANTIBODY DETECTION NONTRANSFUSION
- DIAGNOSTIC IMMUNOLOGY

On the premises located at 1601 AILOR AVENUE, KNOXVILLE, TN 37921-6702

County of KNOX

This license shall expire FEBRUARY 28 2025

This license shall be displayed in a conspicuous place where it may be viewed by the public.

The holder of this license is subject to the provisions of T.P.C. Section 68-29-111 and regulations thereto. This license shall not be assignable or transferable and shall be subject to revocation at any time by the State Department of Health for failure to comply with the laws of the State of Tennessee or the rules and regulations of the State Department of Health issued hereunder.

In Witness Whereof, we have hereunto set our hand and seal of the State

this 18TH day of MARCH 2024

By Yvonne L. Rasmussen Esq
ASSISTANT COMMISSIONER, HEALTH LICENSURE & REGULATION

By Spring Williams MT (ASCP)
CHAIRMAN, MEDICAL LABORATORY BOARD

By [Signature]
COMMISSIONER, DEPARTMENT OF HEALTH

