DONOR/REC ALLOGENIC	OTHER NAMES USED IN THIS LOCATION: TYPE O MEDIC Regional Blood Center (Athens) CORPO	4234535846 Knoxville 8655243 mcox@rr	Medic, Inc. MeDIC, Inc. (Athens Center) 927 Decatur Pike Athens, TN 37303 USA REPORTING MEDIC, Inc. (Additional Additional Addit	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 MANUFACTURERS OF BLOOD PRODUCTS AND LICENSED DEVICES
DONOR/RECIPIENT RELATIONSHIP: ALLOGENIC	TYPE OF OWNERSHIP: CORPORATION	Knoxville, TN 37921 USA 8655243074 x668 mcox@medicblood.org	REPORTING OFFICIAL: Martha S. Cox, Chief Quality Officer MEDIC, Inc. 1601 Ailor Avenue Mushalis (1)	FEI: 3014901559 REASON FOR SUBMISSION DUNS: 080286863 Annual Registration U.S. License Number: 688
	ESTABLISHMENT TYPE: COLLECTION FACILITY		U.S. AGENT:	VALIDATED BY FDA: 10/14/2025

PRODUCT	COLLECT	MANUAL APHERESIS	AUTOMATED PREPARE LEUKOCYTES IRRADIATED APHERESIS REDUCED	PREPARE	LEUKOCYTES REDUCED	IRRADIATED	DONOR RETESTED	TEST	STORE AND BACTERIAL PATHOGEN DISTRIBUTE TESTING REDUCED TO OTHERS	BACTERIAL	PATHOGEN REDUCED	POOLED
WHOLE BLOOD	×											
RED BLOOD CELLS (RBC)			×		×							
PLATELETS			×		×		***************************************					
PLATELETS EXTENDED DATING			×		×							
PF24 PLASMA			×									
PF24RT24 PLASMA			×									
FRESH FROZEN PLASMA			×									

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

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