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: 1000143820
DUNS: 079204212
U.S. License Number: 1246

REASON FOR SUBMISSION
Annual Registration

DISTRICT OFFICE: New Orleans

VALIDATED BY FDA: 10/21/2026

LEGAL NAME AND LOCATION:

Marsh Regional Blood Center
111 West Stone Drive, Suite 300
Kingsport, TN 37660 USA

423-408-7500

REPORTING OFFICIAL:
Nicky M. Mann, Donor Services Quality/Compliance
Marsh Regional Blood Center
111 West Stone Drive
Suite 300
Kingsport, TN 37660 USA
423-408-7508
Nicole.Mann@balladhealth.org

U.S. AGENT:

OTHER NAMES USED IN THIS LOCATION:
Julia Davis Collection Center; Marsh Regional Blood Center; Wellmont Health Syatem d/b/a

TYPE OF OWNERSHIP:
CORPORATION

DONOR/RECIPIENT RELATIONSHIP:
ALLOGENIC, AUTOLOGOUS, DIRECTED

ESTABLISHMENT TYPE:
COMMUNITY (NON-HOSPITAL) BLOOD BANK

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	X			
RED BLOOD CELLS (RBC)			X	X	X	X		X	X			
RBC FROZEN									X			
RBC DEGLYCEROLIZED									X			
RBC WASHED				X		X			X			
CRYOPRECIPITATED AHF				X					X			
PLATELETS			X	X	X	X		X	X	X		X
PLATELETS EXTENDED DATING			X	X	X	X		X	X	X		
FRESH FROZEN PLASMA			X	X					X			
LIQUID PLASMA				X					X			

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RECOVERED PLASMA				X					X			
BLOOD PRODUCTS FOR DIAGNOSTIC USE				X					X			

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