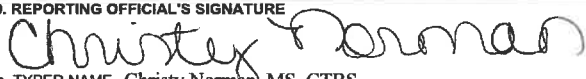


DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC HEALTH SERVICE FOOD AND DRUG ADMINISTRATION ESTABLISHMENT REGISTRATION AND LISTING FOR HUMAN CELLS, TISSUES, AND CELLULAR AND TISSUE-BASED PRODUCTS (HCT/PS) (See reverse side for instructions)		1. REGISTRATION NUMBER (FDA Establishment Identifier) FEI: 3009824075	2. REASON FOR SUBMISSION a. <input type="checkbox"/> INITIAL REGISTRATION / LISTING b. <input checked="" type="checkbox"/> ANNUAL REGISTRATION / LISTING c. <input type="checkbox"/> CHANGE IN INFORMATION d. <input type="checkbox"/> INACTIVE	VALIDATION—FOR FDA USE ONLY VALIDATED BY FDA: 28-NOV-2017 DISTRICT: New Orleans PRINTED BY FDA: 27-JAN-2018																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
PART I - ESTABLISHMENT INFORMATION		PART II - PRODUCT INFORMATION							11. HCT/PS DUTY-CYCLE CFR 1271.10	12. HCT/PS REGULATED AS MEDICAL DEVICES	13. HCT/PS REGULATED AS BIOLOGICAL DRUGS	14. PROPRIETARY NAME(S)																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
3. OTHER FDA REGISTRATIONS a. BLOOD FDA 2830 NO. _____ b. DEVICES FDA 2891 NO. FEI: 0001043534 c. DRUG FDA 2656 NO. _____		10. ESTABLISHMENT FUNCTIONS AND TYPES OF HCT / Ps																																																																																																																																																																																																																																																																																																																																																																																																																																																																																												
4. PHYSICAL LOCATION (Include legal name, number and street, city, state, country, and post office code) Wright Medical Technology, Inc.- Wright Operations Center 11576 Memphis-Arlington Arlington, Tennessee 38002 a. PHONE 901-451-6316 EXT _____ b. <input type="checkbox"/> SATELLITE RECOVERY ESTABLISHMENT (MANUFACTURING ESTABLISHMENT FEI NO. _____) c. <input type="checkbox"/> TESTING FOR MICRO-ORGANISMS ONLY		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2" style="text-align: center;">Types of HCT / Ps</th> <th colspan="8" style="text-align: center;">Establishment Functions</th> <th rowspan="2" style="text-align: center;">Recover</th> <th rowspan="2" style="text-align: center;">Screen</th> <th rowspan="2" style="text-align: center;">Test</th> <th rowspan="2" style="text-align: center;">Package</th> <th rowspan="2" style="text-align: center;">Process</th> <th rowspan="2" style="text-align: center;">Store</th> <th rowspan="2" style="text-align: center;">Label</th> <th rowspan="2" style="text-align: center;">Distribute</th> </tr> <tr> <th style="text-align: center;">Recover</th> <th style="text-align: center;">Screen</th> <th style="text-align: center;">Test</th> <th style="text-align: center;">Package</th> <th style="text-align: center;">Process</th> <th style="text-align: center;">Store</th> <th style="text-align: center;">Label</th> <th style="text-align: center;">Distribute</th> </tr> </thead> <tbody> <tr> <td>a. 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DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
FOOD AND DRUG ADMINISTRATION
**ESTABLISHMENT REGISTRATION AND LISTING FOR HUMAN CELLS, TISSUES,
AND CELLULAR AND TISSUE-BASED PRODUCTS (HCT/Ps)**
(See reverse side for instructions)

1. REGISTRATION NUMBER
(FDA Establishment Identifier)

FEI: 3009824075

ADDITIONAL INFORMATION:

Proprietary Name(s):

a. Bone ALLOMATRIX; ALLOPURE; IGNITE ;OSTEOSET
2 DBM; PROSTIM; FUSIONFLEX; TENFUSE;
TENSIX; Tricortical Blocks; Matrix OI