

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
Location City, State  
Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**ABBEVILLE DIALYSIS**

904 W GREENWOOD ST  
ABBEVILLE, SC 29620-5687 FACILITY #:864-459-0347  
PRICE TAMMY PH#: 803-641-4222  
Facility Email: TAMMI.PHILLIPS@DAVITA.COM  
Fac. Cont. Email: MEGAN.SEIFARTH@DAVITA.COM

ERD-0191 / 09/30/2018  
Abbeville / Corporation  
5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION  
BRENTWOOD, TN 37027-7569  
TOTAL RENAL CARE INC

**Chronic Hemodialysis Stations10 Peritoneal Stations: 1 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 10**

**AIKEN DIALYSIS**

775 MEDICAL PARK DR  
AIKEN, SC 29801-6306 FACILITY #:803-641-4222  
LOGGINS MICHELLE PH#: 803-641-4222  
Facility Email: STEPHANIE.KING1@DAVITA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0034 / 03/31/2018  
Aiken / Corporation  
5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION  
BRENTWOOD, TN 37027-7569  
DVA HEALTHCARE RENAL CARE INC

**Chronic Hemodialysis Stations20 Peritoneal Stations: 1 Home Hemodialysis Training Stations:1**  
**Other Stations: 0 Total Licensed Stations: 21**

**ALLENDALE COUNTY DIALYSIS**

1241 BOUNDARY ST W  
FAIRFAX, SC 29827-3611 FACILITY #:803-632-1587  
DELOACH BRENDA PH#: 803-632-1587  
Facility Email: LASHUNDRA.IVERY@DAVITA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0059 / 02/28/2018  
Allendale / Corporation  
5200 VIRGINIA WAY, LICENSING AND CERTIFICATION  
BRENTWOOD, TN 37027-7569  
DVA HEALTHCARE RENAL CARE INC

**Chronic Hemodialysis Stations21 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 21**

**BAMBERG DIALYSIS CLINIC**

2046 MAIN HWY  
BAMBERG, SC 29003-1082 FACILITY #:803-245-1775  
ZORN BRANDON PH#: 803-245-1775  
Facility Email: JAMES.P.MOLONEY@FMC-NA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0136 / 09/30/2018  
Bamberg / Ltd. Liability  
2046 MAIN HWY  
BAMBERG, SC 29003-1082  
NRA-BAMBERG SOUTH CAROLINA LLC

**Chronic Hemodialysis Stations16 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 16**

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
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County/Ownership Type  
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Licensee

**BLUFFTON DIALYSIS**

101 OKATIE CENTER BLVD S  
BLUFFTON, SC 29909 FACILITY #:843-706-9900  
CONRAD RN SHANE EDWARD PH#: 843-706-9900  
Facility Email: LASHUNDRA.IVERY@DAVITA.COM  
Fac. Cont. Email: MEGAN.SEIFARTH@DAVITA.COM

ERD-0209 / 02/28/2018  
Beaufort / Limited Liability  
5200 VIRGINIA WAY, LICENSING AND CERTIFICATION  
BRENTWOOD, TN 37027-7569  
SHOALS DIALYSIS LLC

**Chronic Hemodialysis Stations:11 Peritoneal Stations: 2 Home Hemodialysis Training Stations:1**  
**Other Stations: 0 Total Licensed Stations: 12**

**BROAD RIVER DIALYSIS CENTER**

4460 BROAD RIVER RD  
COLUMBIA, SC 29210-4047 FACILITY #:803-772-5397  
PHILLIPS RN ADRIENNE PH#:  
Facility Email: ARDIS.JENNY@DOC.STATE.SC.US  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0092 / 12/31/2018  
Richland / State  
PO BOX 21787  
COLUMBIA, SC 29221-1787  
SC DEPT OF CORRECTIONS

**Chronic Hemodialysis Stations:12 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 12**

**CAROLINA DIALYSIS**

115 INTERSTATE PARK  
SPARTANBURG, SC 29303-6611 FACILITY #:864-576-9999  
NILSEN AMANDA PH#: 864-576-9999  
Facility Email: ANILSEN@AMERICANRENAL.COM  
Fac. Cont. Email: ANILSEN@AMERICANRENAL.COM

ERD-0171 / 09/30/2018  
Spartanburg / Limited Liability  
115 INTERSTATE PARK  
SPARTANBURG, SC 29303-6611  
CAROLINA DIALYSIS LLC

**Chronic Hemodialysis Stations:20 Peritoneal Stations: 3 Home Hemodialysis Training Stations:3**  
**Other Stations: 0 Total Licensed Stations: 23**

**CENTRAL BAMBERG DIALYSIS**

67 SUNSET DR  
BAMBERG, SC 29003-1181 FACILITY #:803-245-5166  
NEVAREZ KRISTIN T PH#: 803-263-5518  
Facility Email: LASHUNDRA.IVERY@DAVITA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0133 / 08/31/2018  
Bamberg / Corporation  
5200 VIRGINIA WAY, LICENSING AND CERTIFICATION  
BRENTWOOD, TN 37027-7569  
DVA HEALTHCARE RENAL CARE INC

**Chronic Hemodialysis Stations:20 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 20**

## Renal Dialysis Facilities

DHEC Regulation 61-97

| Name of Facility<br>Location Street<br>Location City, State<br>Administrator                                                                                                                                                           | License#/Expiration<br>County/Ownership Type<br>Mailing Address<br>Licensee                                                               |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|
| <b>CENTRAL COLUMBIA KIDNEY CENTER</b><br>3511 MEDICAL DR<br>COLUMBIA, SC 29203-6504 FACILITY #:803-771-0518<br>GRANT TIA G PH#: 803-771-0518<br>Facility Email: TGRANT@AMERICANRENAL.COM<br>Fac. Cont. Email: TGRANT@AMERICANRENAL.COM | ERD-0116 / 11/30/2017<br>Richland / Limited Liability<br>3511 MEDICAL DR<br>COLUMBIA, SC 29203-6504<br>CENTRAL COLUMBIA KIDNEY CENTER LLC |

**Chronic Hemodialysis Stations:24 Peritoneal Stations: 1 Home Hemodialysis Training Stations:1**  
**Other Stations: 0 Total Licensed Stations: 25**

|                                                                                                                                                                                                                                               |                                                                                                                                                              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>CHARLES TOWNE DIALYSIS</b><br>1964 ASHLEY RIVER RD STE D-3<br>CHARLESTON, SC 29407 FACILITY #:843-852-3537<br>TURBEVILLE LEIGH PH#:<br>Facility Email: STEPHANIE.KING1@DAVITA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0198 / 03/31/2018<br>Charleston / Limited Liability<br>5200 VIRGINIA WAY, LICENSING AND CERTIFICATION<br>BRENTWOOD, TN 37027-7569<br>POINTE DIALYSIS LLC |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Chronic Hemodialysis Stations:20 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 20**

|                                                                                                                                                                                                                                                      |                                                                                                                                                             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>CHARLES TOWNE HOME PROGRAM</b><br>1964 ASHLEY RIVER RD STE D-2<br>CHARLESTON, SC 29407-4782 FACILITY #:843-573-8767<br>MYERS LUCRETIA PH#:<br>Facility Email: STEPHANIE.KING1@DAVITA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0197 / 03/31/2018<br>Charleston / Limited Liability<br>5200 VIRGINIA WAY, LICENSING AND CERTIFICATION<br>BRENTWOOD, TN 37027-7569<br>COAST DIALYSIS LLC |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Chronic Hemodialysis Stations:0 Peritoneal Stations: 4 Home Hemodialysis Training Stations:4**  
**Other Stations: 0 Total Licensed Stations: 4**

|                                                                                                                                                                                                                                       |                                                                                                                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| <b>CLINTON DIALYSIS CLINIC</b><br>103 AB JACKS RD<br>CLINTON, SC 29325-2112 FACILITY #:864-833-0150<br>GIBERT RN LISA PH#: 864-833-0150<br>Facility Email: LRGIBERT@AMERICANRENAL.COM<br>Fac. Cont. Email: LRGIBERT@AMERICANRENAL.COM | ERD-0226 / 07/31/2018<br>Laurens / Limited Liability<br>103 AB JACKS RD<br>CLINTON, SC 29325-2112<br>CLINTON DIALYSIS CLINIC LLC |
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**Chronic Hemodialysis Stations:20 Peritoneal Stations: 2 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 20**

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
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Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**COLUMBIA NORTHEAST KIDNEY CENTER**

7499 PARKLAND RD STE 136  
COLUMBIA, SC 29223-7650 FACILITY #:803-865-0554  
KAISER SANDRA PH#: 803-865-0554  
Facility Email: SKAISER@AMERICANRENAL.COM  
Fac. Cont. Email: SKAISER@AMERICANRENAL.COM

ERD-0159 / 07/31/2018  
Richland / Limited Liability  
7499 PARKLANE RD STE 136  
COLUMBIA, SC 29223-7650  
COLUMBIA NORTHEAST KIDNEY CENTER LLC

**Chronic Hemodialysis Stations:20 Peritoneal Stations: 2 Home Hemodialysis Training Stations:2**  
**Other Stations: 0 Total Licensed Stations: 22**

**CONWAY DIALYSIS CENTER**

838 FARRAR DR  
CONWAY, SC 29526-8747 FACILITY #:843-347-5111  
WARD ESTER PH#: 843-347-5111  
Facility Email: CLINIC1842@FMC-NA.COM  
Fac. Cont. Email: ESTHER.WARD@FMC-NA.COM

ERD-0150 / 10/31/2018  
Horry / Corporation  
838 FARRAR DR  
CONWAY, SC 29526-8747  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations:20 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 20**

**CYPRESS GARDENS DIALYSIS**

418 BROAD ST  
SUMTER, SC 29150 FACILITY #:803-418-5129  
DE LARA ARNEL PH#: 803-418-5129  
Facility Email: TAMMI.PHILLIPS@DAVITA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0220 / 07/31/2018  
Sumter / Corporation  
5200 VIRGINIA WAY  
BRENTWOOD, TN 37027-7569  
TOTAL RENAL CARE INC

**Chronic Hemodialysis Stations:20 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 20**

**CYPRESS GARDENS HOME TRAINING**

526 BROAD ST  
SUMTER, SC 29150-3306 FACILITY #:803-773-5891  
GIBBONS MELISSA PH#: 803-773-5891  
Facility Email: SHARON.E.SCOTT@DAVITA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0212 / 04/30/2018  
Sumter / Limited Liability  
5200 VIRGINIA WAY, LICENSING AND CERTIFICATION  
BRENTWOOD, TN 37027-7569  
GIVHAN DIALYSIS LLC

**Chronic Hemodialysis Stations:0 Peritoneal Stations: 4 Home Hemodialysis Training Stations:4**  
**Other Stations: 0 Total Licensed Stations: 4**

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
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Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**DCI ARCHDALE**

5300 ARCHDALE BLVD  
N CHARLESTON, SC 29418-3343 FACILITY #:843-552-0935  
BRAISTED APRIL PH#: 843-552-0935  
Facility Email: SUSAN.WATTS@DCIINC.ORG  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0195 / 01/31/2018  
Dorchester / Non-Profit Corporation  
1411 KING ST  
CHARLESTON, SC 29403-3008  
DIALYSIS CLINIC INC

**Chronic Hemodialysis Stations:20 Peritoneal Stations: 5 Home Hemodialysis Training Stations:1**  
**Other Stations: 0 Total Licensed Stations: 21**

**DCI AZALEA PLACE**

2270 TECHNICAL PKWY  
NORTH CHARLESTON, SC 29406-4930 FACILITY #:843-863-8974  
SMITH ROCHELLE PH#:  
Facility Email: SUSAN.WATTS@DCIINC.ORG  
Fac. Cont. Email: ROCHELLE.SMITH@DCIINC.ORG

ERD-0006 / 08/31/2018  
Charleston / Non-Profit Corporation  
1411 KING ST  
CHARLESTON, SC 29403-3008  
DIALYSIS CLINIC INC

**Chronic Hemodialysis Stations:20 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 20**

**DCI EAST OF THE COOPER**

1088 JOHNNIE DODDS BLVD  
MOUNT PLEASANT, SC 29464-3142 FACILITY #:843-881-8344  
LEGETTE MARY PH#: 843-881-8344  
Facility Email: SUSAN.WATTS@DCIINC.ORG  
Fac. Cont. Email: SUSAN.WATTS@DCIINC.ORG

ERD-0043 / 07/31/2018  
Charleston / Non-Profit Corporation  
1411 KING ST  
CHARLESTON, SC 29403-3008  
DIALYSIS CLINIC INC

**Chronic Hemodialysis Stations:16 Peritoneal Stations: 1 Home Hemodialysis Training Stations:1**  
**Other Stations: 0 Total Licensed Stations: 17**

**DCI EAST SPARTANBURG**

155 DILLON DR  
SPARTANBURG, SC 29307-1017 FACILITY #:864-585-4840  
SPEARMAN TONYA PH#:  
Facility Email: TONYA.SPEARMAN@DCIINC.ORG  
Fac. Cont. Email: TONYA.SPEARMAN@DCIINC.ORG

ERD-0022 / 11/30/2018  
Spartanburg / Non-Profit Corporation  
155 DILLON DR  
SPARTANBURG, SC 29307-1017  
DIALYSIS CLINIC INC

**Chronic Hemodialysis Stations:32 Peritoneal Stations: 6 Home Hemodialysis Training Stations:3**  
**Other Stations: 0 Total Licensed Stations: 35**

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
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License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**DCI GAFFNEY**

405 TIFFANY PARK  
GAFFNEY, SC 29341-1262 FACILITY #:864-487-1727  
BOLTON RN LAURA A PH#:  
Facility Email: LAURA.BOLTON@DCIINC.ORG  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0052 / 09/30/2018  
Cherokee / Non-Profit Corporation  
405 TIFFANY PARK  
GAFFNEY, SC 29341-1262  
DIALYSIS CLINIC INC

**Chronic Hemodialysis Stations 28    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 28**

**DCI GOOSE CREEK**

98 HAMLET CIR  
GOOSE CREEK, SC 29445-8100 FACILITY #:843-863-8633  
SALVADOR IMELDA P PH#:  
Facility Email: SUSAN.WATTS@DCIINC.ORG  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0172 / 09/30/2018  
Berkeley / Non-Profit Corporation  
1411 KING ST  
CHARLESTON, SC 29403-3008  
DIALYSIS CLINIC INC

**Chronic Hemodialysis Stations 17    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 17**

**DCI JAMES ISLAND**

959 FOLLY RD  
CHARLESTON, SC 29412-3919 FACILITY #:843-795-8386  
HENRY JENNIFER PH#: 843-795-8386  
Facility Email: SUSAN.WATTS@DCIINC.ORG  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0094 / 02/28/2018  
Charleston / Non-Profit Corporation  
1411 KING ST  
CHARLESTON, SC 29403-3008  
DIALYSIS CLINIC INC

**Chronic Hemodialysis Stations 16    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 16**

**DCI LANDRUM**

110 ASBURY DR  
LANDRUM, SC 29356-1401 FACILITY #:864-457-2435  
EDGE CYNTHIA PH#:  
Facility Email: CYNTHIA.EDGE@DCIINC.ORG  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0106 / 06/30/2018  
Spartanburg / Non-Profit Corporation  
110 ASBURY DR  
LANDRUM, SC 29356-1401  
DIALYSIS CLINIC INC

**Chronic Hemodialysis Stations 13    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 13**

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
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County/Ownership Type  
Mailing Address  
Licensee

**DCI MAGNOLIA COURT**  
1427 KING ST  
CHARLESTON, SC 29403-3008 FACILITY #:843-853-3399  
FULLER KYRIN PH#:  
Facility Email: SUSAN.WATTS@DCIINC.ORG  
Fac. Cont. Email: SUSAN.WATTS@DCIINC.ORG

ERD-0074 / 11/30/2018  
Charleston / Non-Profit Corporation  
1411 KING ST  
CHARLESTON, SC 29403-3008  
DIALYSIS CLINIC INC

**Chronic Hemodialysis Stations17 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 17**

**DCI PORT ROYAL**  
8 PRESNELL CIR  
BEAUFORT, SC 29902 FACILITY #:843-521-4300  
CASCIO BARBARA PH#: 843-521-4300  
Facility Email: SUSAN.WATTS@DCIINC.ORG  
Fac. Cont. Email: SUSAN.WATTS@DCIINC.ORG

ERD-0132 / 05/31/2018  
Beaufort / Non-Profit Corporation  
1411 KING ST  
CHARLESTON, SC 29403-3008  
DIALYSIS CLINIC INC

**Chronic Hemodialysis Stations30 Peritoneal Stations: 3 Home Hemodialysis Training Stations:1**  
**Other Stations: 0 Total Licensed Stations: 31**

**DCI SALUDA**  
301 W BUTLER AVE  
SALUDA, SC 29138-1309 FACILITY #:864-445-7755  
HARLING JULIE PH#: 864-445-7755  
Facility Email: JULIE.HARLING@DCIINC.ORG  
Fac. Cont. Email: JULIE.HARLING@DCIINC.ORG

ERD-0188 / 09/30/2018  
Saluda / Non-Profit Corporation  
301 W BUTLER AVE  
SALUDA, SC 29138-1309  
DIALYSIS CLINIC INC

**Chronic Hemodialysis Stations10 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 10**

**DCI SPARTANBURG**  
203 E FREMONT AVE  
SPARTANBURG, SC 29303-2932 FACILITY #:864-585-2046  
FOWLER JENNY PH#: 864-585-2046  
Facility Email: JENNY.FOWLER@DCIINC.ORG  
Fac. Cont. Email: JENNY.FOWLER@DCIINCL.ORG

ERD-0030 / 01/31/2018  
Spartanburg / Non-Profit Corporation  
203 FREMONT AVE  
SPARTANBURG, SC 29303-2932  
DIALYSIS CLINIC INC

**Chronic Hemodialysis Stations43 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 43**

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
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Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**DCI UNION**

921 THOMPSON BLVD  
UNION, SC 29379-1843 FACILITY #:864-427-8250  
GARRETT HEIDI PH#:  
Facility Email: HEIDI.GARRETT@DCIINC.ORG  
Fac. Cont. Email: HEIDI.GARRETT@DCIINC.ORG

ERD-0051 / 08/31/2018  
Union / Non-Profit Corporation  
921 THOMPSON BLVD  
UNION, SC 29379-1843  
DIALYSIS CLINIC INC

**Chronic Hemodialysis Stations: 25    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 25**

**DCI WEST OF THE ASHLEY**

46 MARKFIELD DR STE B  
CHARLESTON, SC 29407-6982 FACILITY #:843-766-2317  
GRIFFIN APRIL PH#: 843-766-2317  
Facility Email: SUSAN.WATTS@DCIINC.ORG  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0008 / 08/31/2018  
Charleston / Non-Profit Corporation  
1411 KING ST  
CHARLESTON, SC 29403-3008  
DIALYSIS CLINIC INC

**Chronic Hemodialysis Stations: 23    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 23**

**DCI WEST SPARTANBURG**

105 TRADD ST  
SPARTANBURG, SC 29301-5085 FACILITY #:864-574-8828  
MITCHELL KENNETH PH#: 843-556-4963  
Facility Email: KEN.MITCHELL@DCIINC.ORG  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0062 / 03/31/2018  
Spartanburg / Non-Profit Corporation  
105 TRADD ST  
SPARTANBURG, SC 29301-5085  
DIALYSIS CLINIC INC

**Chronic Hemodialysis Stations: 25    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 25**

**DCI-WOODRUFF**

251 S PEARSON ST  
WOODRUFF, SC 29388-1958 FACILITY #:864-237-4993  
DIXON BRITTANY PH#: 864-621-7297  
Facility Email: ANNMARIE.ROBERTS@DCIINC.ORG  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0229 / 08/31/2018  
Spartanburg / Non-Profit Corporation  
DIALYSIS CLINIC INC

**Chronic Hemodialysis Stations: 13    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 13**

## Renal Dialysis Facilities

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Name of Facility  
Location Street  
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Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**DENTSVILLE KIDNEY CENTER**

201 COLUMBIA MALL BLVD STE 141  
COLUMBIA, SC 29223-7536 FACILITY #:803-865-1068  
MYERS ALTHERAL PH#: 803-865-1068  
Facility Email: ALMYERS@AMERICANRENAL.COM  
Fac. Cont. Email: ALMYERS@AMERICANRENAL.COM

ERD-0214 / 10/31/2018  
Richland / Limited Liability  
201 COLUMBIA MALL BLVD STE 141  
COLUMBIA, SC 29223-7536  
DENTSVILLE KIDNEY CENTER LLC

**Chronic Hemodialysis Stations10 Peritoneal Stations: 1 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 10**

**DOWNTOWN GREENVILLE DIALYSIS**

297 PETE HOLLIS BLVD  
GREENVILLE, SC 29601-1143 FACILITY #:864-232-9456  
GAINES SAVANNAH PH#: 864-232-9456  
Facility Email: SHARON.E.SCOTT@DAVITA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0128 / 04/30/2018  
Greenville / Corporation  
5200 VIRGINIA WAY, LICENSING AND CERTIFICATION  
BRENTWOOD, TN 37027-7569  
TOTAL RENAL CARE INC

**Chronic Hemodialysis Stations21 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 21**

**FABER PLACE DIALYSIS**

3801 FABER PL DR  
NORTH CHARLESTON, SC 29405-8533 FACILITY #:843-377-1566  
MUKHOPADHYAY SONALI PH#: 843-377-1566  
Facility Email: CHERYL.SINGLETARY@DAVITA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0166 / 09/30/2018  
Charleston / Corporation  
5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION  
BRENTWOOD, TN 37027-7569  
TOTAL RENAL CARE INC

**Chronic Hemodialysis Stations16 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 16**

**FLORENCE MEDICAL MILE**

181-B E EVANS ST STES 8 - 12  
FLORENCE, SC 29501 FACILITY #:843-679-0550  
PRESSLEY GAIL S PH#:  
Facility Email: GAIL.PRESSLEY@FMC-NA.COM  
Fac. Cont. Email: GAIL.PRESSLEY@FMC-NA.COM

ERD-0239 / 06/30/2018  
Florence / Corporation  
181-B E EVANS ST STES 8-12  
FLORENCE, SC 29501  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations20 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 20**

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
Location City, State  
Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**FLOWER TOWN HOME TRAINING**

2143 N MAIN ST  
SUMMERVILLE, SC 29483-6415 FACILITY #:843-875-1779  
SHATTUCK ANN PH#: 843-875-1779  
Facility Email: STEPHANIE.KING1@DAVITA.COM  
Fac. Cont. Email: STEPHANIE.KING1@DAVITA.COM

ERD-0237 / 04/30/2018  
Dorchester / Limited Liability  
L & C DEPARTMENT, 5200 VIRGINIA WAY  
BRENTWOOD, TN 37027  
ATELL DIALYSIS LLC

**Chronic Hemodialysis Stations:0 Peritoneal Stations: 4 Home Hemodialysis Training Stations:4**  
**Other Stations: 0 Total Licensed Stations: 4**

**FMC DIALYSIS SERVICES LAKE MARION**

20 BUFF BLVD  
SUMMERTON, SC 29148-9448 FACILITY #:803-485-2341  
DAWKINS AUDRA PH#: 803-485-2341  
Facility Email: JAMES.P. MOLONEY@FMC-NA.COM  
Fac. Cont. Email: JAMES P. MOLONEY@FMC-NA.COM

ERD-0099 / 02/28/2018  
Clarendon / Corporation  
20 BUFF BLVD  
SUMMERTON, SC 29148-9448  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations13 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 13**

**FMC DIALYSIS SERVICES OF HARTSVILLE**

1308 S 4TH ST  
HARTSVILLE, SC 29550-7447 FACILITY #:843-383-9526  
MORALES BETH A PH#:  
Facility Email: DAVID.DACUS@FMC-NA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0122 / 08/31/2018  
Darlington / Corporation  
1308 S 4TH ST  
HARTSVILLE, SC 29550-7447  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations21 Peritoneal Stations: 1 Home Hemodialysis Training Stations:1**  
**Other Stations: 0 Total Licensed Stations: 22**

**FMC DIALYSIS SERVICES-ANDREWS**

102 S COUNTY LINE RD  
ANDREWS, SC 29510-8125 FACILITY #:843-221-5454  
COHENS RN JACQUELINE PH#: 843-357-4840  
Facility Email: CLINIC2359@FMC-NA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0115 / 05/31/2018  
Williamsburg / Corporation  
102 S COUNTY LINE RD  
ANDREWS, SC 29510-8125  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations12 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 12**

## Renal Dialysis Facilities

DHEC Regulation 61-97

| Name of Facility<br>Location Street<br>Location City, State<br>Administrator                                                                                                                                                                                                                          | License#/Expiration<br>County/Ownership Type<br>Mailing Address<br>Licensee                                                                                                                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FMC DIALYSIS SERVICES-HARTSVILLE HOME DIALYSIS</b><br>1051 SOUTH 4TH ST<br>HARTSVILLE, SC 29550 FACILITY #:843-339-2047<br>HANCOCK LORI MPH#: 843-339-2047<br><b>Facility Email:</b> LORI.M.HANCOCK@FMC-NA.COM<br><b>Fac. Cont. Email:</b> LORI.M.HANCOCK@FMC-NA.COM                               | ERD-0221 / 03/31/2018<br>Darlington /<br>1051 SOUTH 4TH ST<br>HARTSVILLE, SC 29550<br>BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC                                                        |
| <p align="center"> <b>Chronic Hemodialysis Stations:0    Peritoneal Stations: 4    Home Hemodialysis Training Stations:4</b><br/> <b>Other Stations: 0    Total Licensed Stations: 4</b> </p>                                                                                                         |                                                                                                                                                                                             |
| <b>FMC DIALYSIS SERVICES-HILTON HEAD</b><br>25 HOSPITAL CENTER BLVD STE 108, MEDICAL PAVLION<br>HILTON HEAD ISLAND, SC 29926-2735 FACILITY #:843-681-5840<br>KEMMERLIN MARION PH#:<br><b>Facility Email:</b> JENNIFER.COLE@FMC-NA.COM<br><b>Fac. Cont. Email:</b> No Facility Contact Email on Record | ERD-0123 / 07/31/2018<br>Beaufort / Corporation<br>25 HOSPITAL CENTER BLVD STE 108, MEDICAL PAVILION<br>HILTON HEAD ISLAND, SC 29926-2735<br>BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC |
| <p align="center"> <b>Chronic Hemodialysis Stations16    Peritoneal Stations: 1    Home Hemodialysis Training Stations:1</b><br/> <b>Other Stations: 0    Total Licensed Stations: 17</b> </p>                                                                                                        |                                                                                                                                                                                             |
| <b>FMC DIALYSIS SERVICES-LOW COUNTRY DIALYSIS</b><br>10 JOHNNY MORRALL CIR<br>PORT ROYAL, SC 29935-1148 FACILITY #:843-524-2373<br>RIVERA SAMANTHA PH#:<br><b>Facility Email:</b> SAMANTHA.RIVERA@FMC-NA.COM<br><b>Fac. Cont. Email:</b> No Facility Contact Email on Record                          | ERD-0097 / 05/31/2018<br>Beaufort / Corporation<br>10 JOHNNY MORRALL CIR<br>PORT ROYAL, SC 29935-1148<br>BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC                                     |
| <p align="center"> <b>Chronic Hemodialysis Stations22    Peritoneal Stations: 2    Home Hemodialysis Training Stations:2</b><br/> <b>Other Stations: 0    Total Licensed Stations: 24</b> </p>                                                                                                        |                                                                                                                                                                                             |
| <b>FMC DIALYSIS SERVICES-MURRELLS INLET</b><br>5011 HWY 17<br>MURRELLS INLET, SC 29576-5043 FACILITY #:843-357-4840<br>CAMPBELL ELIZABETH MPH#: 843-357-4840<br><b>Facility Email:</b> CLINIC2080@FMC-NA.COM<br><b>Fac. Cont. Email:</b> No Facility Contact Email on Record                          | ERD-0096 / 06/30/2018<br>Georgetown / Corporation<br>5011 HWY 17<br>MURRELLS INLET, SC 29576-5043<br>BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC                                         |
| <p align="center"> <b>Chronic Hemodialysis Stations14    Peritoneal Stations: 0    Home Hemodialysis Training Stations:0</b><br/> <b>Other Stations: 0    Total Licensed Stations: 14</b> </p>                                                                                                        |                                                                                                                                                                                             |

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
Location City, State  
Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**FMC DIALYSIS SERVICES-NORTH MYRTLE BEACH**

710 A HWY 17 S  
NORTH MYTLE BEACH, SC 29582 FACILITY #:843-361-1709  
MENZEL STEPHANIE PH#: 843-361-1709  
Facility Email: CLINIC2276@FMC-NA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0093 / 02/28/2018  
Horry / Corporation  
710 A HWY 17 S  
NORTH MYTLE BEACH, SC 29582  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations15 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 15**

**FMC DIALYSIS SERVICES-PEE DEE DIALYSIS**

331 ELIZABETH ANNE CT  
LAKE CITY, SC 29560-2488 FACILITY #:843-394-3944  
SULLIVAN MELISSA PH#: 843-394-3944  
Facility Email: GAIL.PRESSLEY@FMC-HA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0103 / 05/31/2018  
Florence / Corporation  
331 ELIZABETH ANNE CT  
LAKE CITY, SC 29560-2488  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations30 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 30**

**FMC DIALYSIS SERVICES-THE MARSHLANDS**

28 RICE POND RD  
RIDGELAND, SC 29936-8170 FACILITY #:843-987-0110  
WIRT LELIA PH#: 843-987-0110  
Facility Email: LELIA.WIRT@FMC-NA.COM  
Fac. Cont. Email: LELIA.WIRT@FMC-NA.COM

ERD-0095 / 03/31/2018  
Jasper / Corporation  
28 RICE POND RD  
RIDGELAND, SC 29936-8170  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations17 Peritoneal Stations: 1 Home Hemodialysis Training Stations:1**  
**Other Stations: 0 Total Licensed Stations: 18**

**FMC NORTH CHARLESTON**

2450 ELMS CENTER RD  
NORTH CHARLESTON, SC 29406-9858 FACILITY #:843-553-4742  
JONES ROBERT PH#: 843-553-4742  
Facility Email: ROBERT.JONES@FMC-NA.COM  
Fac. Cont. Email: ROBERT.JONES@FMC-NA.COM

ERD-0154 / 05/31/2018  
Charleston / Limited Liability  
2450 ELMS CENTER RD  
NORTH CHARLESTON, SC 29406-9858  
RAI CARE CENTERS OF SOUTH CAROLINA I LLC

**Chronic Hemodialysis Stations21 Peritoneal Stations: 2 Home Hemodialysis Training Stations:2**  
**Other Stations: 0 Total Licensed Stations: 23**

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
Location City, State  
Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**FORT MILL DIALYSIS**

1975 CAROLINA PL DR  
FORT MILL, SC 29708-6922 FACILITY #:803-802-3027  
RODGERS TRACY PH#: 803-802-3027  
Facility Email: TRACEY.RODGERS@DAVITA.COM  
Fac. Cont. Email: TRACY.RODGERS@DAVITA.COM

ERD-0167 / 08/31/2018  
York / Corporation  
5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION  
BRENTWOOD, TN 37027-7569  
TOTAL RENAL CARE INC

**Chronic Hemodialysis Stations20 Peritoneal Stations: 2 Home Hemodialysis Training Stations:2**  
**Other Stations: 0 Total Licensed Stations: 22**

**FOUNTAIN INN DIALYSIS**

298 CHAPMAN RD  
FOUNTAIN INN, SC 29644-6129 FACILITY #:864-862-2273  
ROBINSON BRENDA A PH#: 864-862-2273  
Facility Email: SHARON.E.SCOTT@DAVITA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0177 / 04/30/2018  
Laurens / Corporation  
5200 VIRGINIA WAY, LICENSING AND CERTIFICATION  
BRENTWOOD, TN 37027-7569  
TOTAL RENAL CARE INC

**Chronic Hemodialysis Stations11 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 11**

**FRESENIUS KIDNEY CARE BLACK CREEK DIALYSIS**

1001 S 4TH ST  
HARTSVILLE, SC 29550 FACILITY #:843-332-2355  
MYERS SHAKEEKA PH#: 843-332-2355  
Facility Email: DAVID.DACUS@FMC-NA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0241 / 08/31/2018  
Darlington / Corporation  
101 S 4TH ST  
HARTSVILLE, SC 29550  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations17 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 17**

**FRESENIUS MEDICAL CARE AIKEN**

690 MEDICAL PARK DR STE 150  
AIKEN, SC 29801-5385 FACILITY #:803-502-4337  
COLLINS GINNY PH#: 803-502-4333  
Facility Email: LISABRYGGER@FMC-NA.COM  
Fac. Cont. Email: GINNY.COLLINS@FMC-NA.COM

ERD-0222 / 07/31/2018  
Aiken / Limited Liability  
690 MEDICAL PARK DR STE 150  
AIKEN, SC 29801-5385  
FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC

**Chronic Hemodialysis Stations11 Peritoneal Stations: 2 Home Hemodialysis Training Stations:2**  
**Other Stations: 0 Total Licensed Stations: 13**

## Renal Dialysis Facilities

DHEC Regulation 61-97

| Name of Facility<br>Location Street<br>Location City, State<br>Administrator                                                                                                                                                                                                                            | License#/Expiration<br>County/Ownership Type<br>Mailing Address<br>Licensee                                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FRESENIUS MEDICAL CARE ANDERSON DIALYSIS CLINIC</b><br>416 E CALHOUN ST STE A<br>ANDERSON, SC 29621-5852 FACILITY #:864-224-1678<br>WADSWORTH AMANDA MARLENE PH#: 864-224-1678<br><b>Facility Email:</b> AMANDA.WADSWORTH@FMC-NA.COM<br><b>Fac. Cont. Email:</b> No Facility Contact Email on Record | ERD-0105 / 07/31/2018<br>Anderson / Limited Liability<br>416 E CALHOUN ST STE A<br>ANDERSON, SC 29621-5852<br>FRESENIUS MEDICAL CARE ANDERSON LLC |

**Chronic Hemodialysis Stations**47    **Peritoneal Stations:** 1    **Home Hemodialysis Training Stations:**1  
**Other Stations:** 0    **Total Licensed Stations:** 48

|                                                                                                                                                                                                                                                            |                                                                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FRESENIUS MEDICAL CARE ATOMIC ROAD</b><br>10263 ATOMIC RD<br>NORTH AUGUSTA, SC 29841 FACILITY #:803-279-3722<br>COLLINS GINNY PH#: 803-279-3722<br><b>Facility Email:</b> GINNY.COLLINS@FMC-NA.COM<br><b>Fac. Cont. Email:</b> GINNY.COLLINS@FMC-NA.COM | ERD-0173 / 09/30/2018<br>Aiken / Limited Liability<br>10263 ATOMIC RD<br>NORTH AUGUSTA, SC 29841<br>NRA-NORTH AUGUSTA SOUTH CAROLINA LLC |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|

**Chronic Hemodialysis Stations**21    **Peritoneal Stations:** 1    **Home Hemodialysis Training Stations:**1  
**Other Stations:** 0    **Total Licensed Stations:** 22

|                                                                                                                                                                                                                                                                                          |                                                                                                                                                              |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FRESENIUS MEDICAL CARE BATESBURG-LEESVILLE</b><br>303 VILLAGE SQUARE DR<br>LEESVILLE, SC 29070-7055 FACILITY #:803-604-8002<br>GORDON JERMAINE PH#: 803-604-8002<br><b>Facility Email:</b> JERMAINE.GORDON@FMC-NA.COM<br><b>Fac. Cont. Email:</b> No Facility Contact Email on Record | ERD-0161 / 02/28/2018<br>Lexington / Limited Liability<br>303 VILLAGE SQUARE DR<br>LEESVILLE, SC 29070-7055<br>FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Chronic Hemodialysis Stations**21    **Peritoneal Stations:** 0    **Home Hemodialysis Training Stations:**0  
**Other Stations:** 0    **Total Licensed Stations:** 21

|                                                                                                                                                                                                                                                                     |                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FRESENIUS MEDICAL CARE BELTON-HONEA PATH</b><br>200 CHURCH ST<br>HONEA PATH, SC 29654-2213 FACILITY #:864-369-6509<br>LINDLEY SHARON PH#: 864-369-6509<br><b>Facility Email:</b> SHARON.LINDLEY@FMC-NA.COM<br><b>Fac. Cont. Email:</b> SHARON.LINDLEY@FMC-NA.COM | ERD-0146 / 05/31/2018<br>Anderson / Corporation<br>200 CHURCH ST<br>HONEA PATH, SC 29654-2213<br>BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|

**Chronic Hemodialysis Stations**17    **Peritoneal Stations:** 0    **Home Hemodialysis Training Stations:**0  
**Other Stations:** 0    **Total Licensed Stations:** 17

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
Location City, State  
Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**FRESENIUS MEDICAL CARE BENNETTSVILLE**

1104 FRANK W EVANS WAY  
BENNETTSVILLE, SC 29512-2169 FACILITY #:843-479-3817  
COOPER RN DAVID PH#: 843-479-3817  
Facility Email: DAVID.DACUS@FMC-NA.COM  
Fac. Cont. Email: DAVID.COOPER@FMC-NA.COM

ERD-0111 / 01/31/2018  
Marlboro / Corporation  
1104 FRANK W EVANS WAY  
BENNETTSVILLE, SC 29512-2169  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations:21 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 21**

**FRESENIUS MEDICAL CARE CAMDEN**

7 HAILE LN  
CAMDEN, SC 29020-3754 FACILITY #:803-425-9000  
HARRIGAN BEULAH PH#: 803-425-9000  
Facility Email: BEULAH.HARRIGAN@FMC-NA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0064 / 02/28/2018  
Kershaw / Limited Liability  
7 HAILE LN  
CAMDEN, SC 29020-3754  
FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC

**Chronic Hemodialysis Stations:21 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 21**

**FRESENIUS MEDICAL CARE CHARLESTON COUNTY**

901 VON KOLNITZ RD STE 102  
MOUNT PLEASANT, SC 29464-3772 FACILITY #:843-881-4842  
ZADROZINSKI MICHELLE PH#: 843-881-4842  
Facility Email: DEVIN.DEICH@FMC-NA.COM  
Fac. Cont. Email: DEVIN.DEICH@FMC-NA.COM

ERD-0193 / 11/30/2017  
Charleston / Corporation  
901 VON KOLNITZ RD STE 102  
MOUNT PLEASANT, SC 29464-3772  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations:11 Peritoneal Stations: 2 Home Hemodialysis Training Stations:1**  
**Other Stations: 0 Total Licensed Stations: 12**

**FRESENIUS MEDICAL CARE CHERAW**

104 GRACE LN  
CHERAW, SC 29520-7132 FACILITY #:843-537-6801  
PARKER PAMELA PH#:  
Facility Email: DAVID.DACUS@FMC-NA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0176 / 05/31/2018  
Chesterfield / Corporation  
104 GRACE LN  
CHERAW, SC 29520-7132  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations:21 Peritoneal Stations: 2 Home Hemodialysis Training Stations:2**  
**Other Stations: 0 Total Licensed Stations: 23**

## Renal Dialysis Facilities

DHEC Regulation 61-97

| Name of Facility<br>Location Street<br>Location City, State<br>Administrator                                                                                                                                                                                              | License#/Expiration<br>County/Ownership Type<br>Mailing Address<br>Licensee                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FRESENIUS MEDICAL CARE CHESTER COUNTY</b><br>501 HEALTH WAY DR<br>CHESTER, SC 29706-2911 FACILITY #:803-377-8127<br>JONES HARRIET PH#: 803-377-8127<br><b>Facility Email:</b> HARRIET.JONES@FMC-NA.COM<br><b>Fac. Cont. Email:</b> No Facility Contact Email on Record | ERD-0140 / 06/30/2018<br>Chester / Corporation<br>501 HEALTH WAY DR<br>CHESTER, SC 29706-2911<br>BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC |

**Chronic Hemodialysis Stations:17 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 17**

|                                                                                                                                                                                                                                                                        |                                                                                                                                                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FRESENIUS MEDICAL CARE CHURCH STREET</b><br>406 S CHURCH ST<br>FLORENCE, SC 29506-3000 FACILITY #:843-679-5945<br>MCGILL FREDA PH#: 843-679-5945<br><b>Facility Email:</b> GAIL.PRESSLEY@FMC-NA.COM<br><b>Fac. Cont. Email:</b> No Facility Contact Email on Record | ERD-0178 / 12/31/2018<br>Florence / Corporation<br>406 S CHURCH ST<br>FLORENCE, SC 29506-3000<br>BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|

**Chronic Hemodialysis Stations:21 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 21**

|                                                                                                                                                                                                                                                                |                                                                                                                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FRESENIUS MEDICAL CARE COLUMBIA</b><br>2125 ADAMS GROVE RD<br>COLUMBIA, SC 29203-7102 FACILITY #:803-779-7511<br>BALABAN VIRGIL PH#: 803-779-7511<br><b>Facility Email:</b> VIRGIL.BALABAN@FMC-NA.COM<br><b>Fac. Cont. Email:</b> VIRGIL.BALABAN@FMC-NA.COM | ERD-0016 / 02/28/2018<br>Richland / Limited Liability<br>2125 ADAMS GRV<br>COLUMBIA, SC 29203-7102<br>FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|

**Chronic Hemodialysis Stations:30 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 30**

|                                                                                                                                                                                                                                                                                            |                                                                                                                                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FRESENIUS MEDICAL CARE COLUMBIA HOME DIALYSIS</b><br>121 PARK CENTRAL DR STE 101<br>COLUMBIA, SC 29203-6476 FACILITY #:803-799-1266<br>LIVINGSTON EBONY PH#: 803-799-1266<br><b>Facility Email:</b> EBONY.LIVINGSTON@FMC-NA.COM<br><b>Fac. Cont. Email:</b> EBONY.LIVINGSTON@GMC-NA.COM | ERD-0190 / 05/31/2018<br>Richland / Limited Liability<br>121 PARK CENTRAL DR STE 101<br>COLUMBIA, SC 29203-6476<br>FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Chronic Hemodialysis Stations:0 Peritoneal Stations: 5 Home Hemodialysis Training Stations:2**  
**Other Stations: 0 Total Licensed Stations: 2**

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
Location City, State  
Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**FRESENIUS MEDICAL CARE DARLINGTON**

103 SALEEBY LOOP  
DARLINGTON, SC 29532-4665 FACILITY #:843-393-1682  
DIXON TARA PH#:  
Facility Email: DAVID.DACUS@FMC-NA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0075 / 11/30/2018  
Darlington / Corporation  
103 SALEEBY LOOP  
DARLINGTON, SC 29532-4665  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations 30    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 30**

**FRESENIUS MEDICAL CARE DILLON**

1304 HWY 301 S  
DILLON, SC 29536-4605 FACILITY #:843-774-3687  
LADSON LATAYA PH#: 843-774-3687  
Facility Email: DAVID.DACUS@FMC-NA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0070 / 08/31/2018  
Dillon / Corporation  
1304 HWY 301 S  
DILLON, SC 29536-4605  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations 21    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 21**

**FRESENIUS MEDICAL CARE FAIRFIELD COUNTY**

1126 US HWY 321 BUS S STE A  
WINNSBORO, SC 29180-7429 FACILITY #:803-712-6732  
HILL ESTELLA PH#: 803-712-6732  
Facility Email: ESTELLA.HILL@FMC-NA.COM  
Fac. Cont. Email: ESTELLA.HILL@FMC-NA.COM

ERD-0114 / 02/28/2018  
Fairfield / Limited Liability  
1126 US HWY 321 BUS S STE A  
WINNSBORO, SC 29180-7429  
FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC

**Chronic Hemodialysis Stations 21    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 21**

**FRESENIUS MEDICAL CARE FLORENCE**

435 N CASHUA DR  
FLORENCE, SC 29501-2097 FACILITY #:843-669-0825  
GRAHAM RN SHIRLEY B PH#: 843-394-0355  
Facility Email: SHIRLEY.GRAHAM@FMC-NA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0141 / 07/31/2018  
Florence / Corporation  
435 N CASHUA DR  
FLORENCE, SC 29501-2097  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations 31    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 31**

## Renal Dialysis Facilities

DHEC Regulation 61-97

| Name of Facility<br>Location Street<br>Location City, State<br>Administrator                                                                                                                                                                          | License#/Expiration<br>County/Ownership Type<br>Mailing Address<br>Licensee                                                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FRESENIUS MEDICAL CARE FORT LAWN</b><br>5707 WILLOWBROOK ST<br>FORT LAWN, SC 29714-8762 FACILITY #:803-872-4149<br>ELKINS KIM PH#: 803-872-4149<br><b>Facility Email:</b> SANDI.MOORE@FMC-NA.COM<br><b>Fac. Cont. Email:</b> KIM.ELKINS@FMC-NA.COM | ERD-0184 / 01/31/2018<br>Chester / Corporation<br>5707 WILLOWBROOK ST<br>FORT LAWN, SC 29714-8762<br>BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC |
| <b>Chronic Hemodialysis Stations17 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0</b><br><b>Other Stations: 0 Total Licensed Stations: 17</b>                                                                                           |                                                                                                                                                     |

|                                                                                                                                                                                                                                                                 |                                                                                                                                                    |
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| <b>FRESENIUS MEDICAL CARE FORT MILL</b><br>535 RIVER CROSSING DR<br>FORT MILL, SC 29715-7900 FACILITY #:803-802-2480<br>ENES DANIELLE PH#: 803-802-2480<br><b>Facility Email:</b> DANIELLE.ENES@FMC-NA.COM<br><b>Fac. Cont. Email:</b> DANIELLE.ENES@FMC-NA.COM | ERD-0147 / 11/30/2018<br>York / Corporation<br>535 RIVER CROSSING DR<br>FORT MILL, SC 29715-7900<br>BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC |
| <b>Chronic Hemodialysis Stations30 Peritoneal Stations: 3 Home Hemodialysis Training Stations:2</b><br><b>Other Stations: 0 Total Licensed Stations: 32</b>                                                                                                     |                                                                                                                                                    |

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| <b>FRESENIUS MEDICAL CARE FREEDOM</b><br>1520 FREEDOM BLVD<br>FLORENCE, SC 29505-6040 FACILITY #:843-667-0654<br>BRIGMAN MONIKA MARIA PH#:<br><b>Facility Email:</b> MONIKA.BRIGMAN@FMC-NA.COM<br><b>Fac. Cont. Email:</b> No Facility Contact Email on Record | ERD-0142 / 07/31/2018<br>Florence / Corporation<br>1520 FREEDOM BLVD<br>FLORENCE, SC 29505-6040<br>BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC |
| <b>Chronic Hemodialysis Stations26 Peritoneal Stations: 4 Home Hemodialysis Training Stations:2</b><br><b>Other Stations: 0 Total Licensed Stations: 28</b>                                                                                                    |                                                                                                                                                   |

|                                                                                                                                                                                                                                                    |                                                                                                                                                     |
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| <b>FRESENIUS MEDICAL CARE GEORGETOWN</b><br>1120 N FRASER ST<br>GEORGETOWN, SC 29440 FACILITY #:843-527-3431<br>BORDEN CORISSA PH#: 843-527-3431<br><b>Facility Email:</b> CLINIC1390@FMC-NA.COM<br><b>Fac. Cont. Email:</b> CLINIC1390@FMC-NA.COM | ERD-0009 / 09/30/2018<br>Georgetown / Corporation<br>712 N FRASER ST<br>GEORGETOWN, SC 29440-3353<br>BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC |
| <b>Chronic Hemodialysis Stations20 Peritoneal Stations: 2 Home Hemodialysis Training Stations:2</b><br><b>Other Stations: 0 Total Licensed Stations: 22</b>                                                                                        |                                                                                                                                                     |

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
Location City, State  
Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**FRESENIUS MEDICAL CARE IRMO**

1012 LYKES LN  
IRMO, SC 29063-8444 FACILITY #:803-749-7088  
REMBERT LAWANDA PH#: 803-749-7088  
Facility Email: LAWANDA.REMBERT@FMC-NA.COM  
Fac. Cont. Email: LAWANDA.REMBERT@FMC-NA.COM

ERD-0117 / 02/28/2018  
Richland / Limited Liability  
1012 LYKES LN  
IRMO, SC 29063-8444  
FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC

**Chronic Hemodialysis Stations: 21    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 21**

**FRESENIUS MEDICAL CARE JOHNSONVILLE**

200 STUCKEY ST  
JOHNSONVILLE, SC 29555-6449 FACILITY #:843-380-1581  
MONT JESSICA PH#: 843-380-1581  
Facility Email: JESSICA.MONT@FMC-NA.COM  
Fac. Cont. Email: JESSICA.MONT@FMC-NA.COM

ERD-0180 / 01/31/2018  
Florence / Corporation  
200 STUCKEY ST  
JOHNSONVILLE, SC 29555-6449  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations: 21    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 21**

**FRESENIUS MEDICAL CARE KINGSTREE**

215 N BROOKS ST  
KINGSTREE, SC 29556-3503 FACILITY #:843-355-9750  
WEATHERFORD RN BARBARA PH#: 843-355-9750  
Facility Email: GAIL.PRESSLEY@FMC-NA.COM  
Fac. Cont. Email: GAIL.PRESSLEY@FMC-NA.COM

ERD-0069 / 02/28/2018  
Williamsburg / Corporation  
215 N BROOKS ST  
KINGSTREE, SC 29556-3503  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations: 31    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 31**

**FRESENIUS MEDICAL CARE LEE COUNTY**

289 FAIRVIEW AVE STE B  
BISHOPVILLE, SC 29010-1513 FACILITY #:803-484-5972  
WARD TAMMY PH#: 803-484-5972  
Facility Email: JAME.P.MOLONEY@FMC-NA.COM  
Fac. Cont. Email: JAME.P.MOLONEY@FMC-NA.COM

ERD-0175 / 05/31/2018  
Lee / Corporation  
289 FAIRVIEW AVE STE B  
BISHOPVILLE, SC 29010-1513  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations: 21    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 21**

## Renal Dialysis Facilities

DHEC Regulation 61-97

| Name of Facility<br>Location Street<br>Location City, State<br>Administrator                                                                                                                                                                                                              | License#/Expiration<br>County/Ownership Type<br>Mailing Address<br>Licensee                                                                                                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FRESENIUS MEDICAL CARE LEXINGTON</b><br>131 WHISPERING WINDS DR<br>LEXINGTON, SC 29072-3869 FACILITY #:803-695-0145<br>THOMAS JANICE G PH#: 803-695-0145<br><b>Facility Email:</b> JANICE.THOMAS@FMC-NA.COM<br><b>Fac. Cont. Email:</b> JANICE.THOMAS@FMC-NA.COM                       | ERD-0107 / 02/28/2018<br>Lexington / Limited Liability<br>131 WHISPERING WINDS DR<br>LEXINGTON, SC 29072-3869<br>FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC              |
| <p align="center"><b>Chronic Hemodialysis Stations:21    Peritoneal Stations: 0    Home Hemodialysis Training Stations:0</b><br/> <b>Other Stations: 0    Total Licensed Stations: 21</b></p>                                                                                             |                                                                                                                                                                             |
| <b>FRESENIUS MEDICAL CARE LOWCOUNTRY HOME DIALYSIS</b><br>1980 N MAIN ST<br>SUMMERVILLE, SC 29483-7812 FACILITY #:843-695-0061<br>WESTBURY ANGELA PH#: 843-695-0061<br><b>Facility Email:</b> CASSANDRA.DENNEY@FMC-NA.COM<br><b>Fac. Cont. Email:</b> No Facility Contact Email on Record | ERD-0218 / 02/28/2018<br>Berkeley / Limited Liability<br>1980 N MAIN ST<br>SUMMERVILLE, SC 29483-7812<br>FRESENIUS MEDICAL CARE GOOSE CREEK HOME DIALYSIS LLC               |
| <p align="center"><b>Chronic Hemodialysis Stations:0    Peritoneal Stations: 6    Home Hemodialysis Training Stations:6</b><br/> <b>Other Stations: 0    Total Licensed Stations: 6</b></p>                                                                                               |                                                                                                                                                                             |
| <b>FRESENIUS MEDICAL CARE LOWER RICHLAND</b><br>1840 PINEVIEW DR<br>COLUMBIA, SC 29209-5085 FACILITY #:803-695-3628<br>JAMES LAVONNE PH#: 803-695-3628<br><b>Facility Email:</b> LAVONNE.JAMES@FMC-NA.COM<br><b>Fac. Cont. Email:</b> LAVONNE.JAMES@FMC-NA.COM                            | ERD-0076 / 02/28/2018<br>Richland / Limited Liability<br>1840 PINEVIEW DR<br>COLUMBIA, SC 29209-5085<br>FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC                       |
| <p align="center"><b>Chronic Hemodialysis Stations:20    Peritoneal Stations: 0    Home Hemodialysis Training Stations:0</b><br/> <b>Other Stations: 0    Total Licensed Stations: 20</b></p>                                                                                             |                                                                                                                                                                             |
| <b>FRESENIUS MEDICAL CARE LUGOFF-ELGIN</b><br>909 CAROLINA DR, JONES HILL BUSINESS PARK<br>LUGOFF, SC 29078-8766 FACILITY #:803-438-0905<br>JORDAN NEKESHIA PH#: 803-438-0905<br><b>Facility Email:</b> NEKEISHA.JORDAN@FMC-NA.COM<br><b>Fac. Cont. Email:</b> NEKEISHA.JORDAN@FMC-NA.COM | ERD-158 / 02/28/2018<br>Kershaw / Limited Liability<br>909 CAROLINA AVE, JONES HILL BUSINESS PARK<br>LUGOFF, SC 29078-8766<br>FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC |
| <p align="center"><b>Chronic Hemodialysis Stations:21    Peritoneal Stations: 0    Home Hemodialysis Training Stations:0</b><br/> <b>Other Stations: 0    Total Licensed Stations: 21</b></p>                                                                                             |                                                                                                                                                                             |

## Renal Dialysis Facilities

DHEC Regulation 61-97

| Name of Facility<br>Location Street<br>Location City, State<br>Administrator                                                                                                                                                                             | License#/Expiration<br>County/Ownership Type<br>Mailing Address<br>Licensee                                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FRESENIUS MEDICAL CARE MANNING</b><br>3107 SUMTER HWY<br>MANNING, SC 29102-9090 FACILITY #:803-505-2121<br>BLACKWELL CHERRYL PH#: 803-505-2121<br>Facility Email: JAMES.P.MOLONEY@FMC-NA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0181 / 06/30/2018<br>Clarendon / Corporation<br>3107 SUMTER HWY<br>MANNING, SC 29102-9090<br>BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC |

**Chronic Hemodialysis Stations: 21    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 21**

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| <b>FRESENIUS MEDICAL CARE MARION</b><br>109 MERRITT CT<br>MARION, SC 29571-6813 FACILITY #:843-423-4673<br>WOODS TARA PH#: 843-423-9526<br>Facility Email: DAVID.DACUS@FMC-NA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0068 / 08/31/2018<br>Marion / Corporation<br>109 MERRITT CT<br>MARION, SC 29571-6813<br>BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC |
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**Chronic Hemodialysis Stations: 41    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 41**

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| <b>FRESENIUS MEDICAL CARE MEADOWLAKE</b><br>7631 WILSON BLVD<br>COLUMBIA, SC 29203-3020 FACILITY #:803-754-7377<br>LANCASTER JESSICA PH#: 803-754-7377<br>Facility Email: JESSICALANACASTER@FMC-NA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0100 / 02/28/2018<br>Richland / Limited Liability<br>7631 WILSON BLVD<br>COLUMBIA, SC 29203-3020<br>FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC |
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**Chronic Hemodialysis Stations: 21    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 21**

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FRESENIUS MEDICAL CARE MIDTOWN</b><br>150 PARK CENTRAL DR<br>COLUMBIA, SC 29203 FACILITY #:803-799-6355<br>YOUNG RN DEQUATA M PH#: 803-771-0107<br>Facility Email: DEQUATA.YOUNG@FMC-NA.COM<br>Fac. Cont. Email: DEQUATA.YOUNG@FMC-NA.COM | ERD-0078 / 02/28/2018<br>Richland / Limited Liability<br>150 PARK CENTRAL DR<br>COLUMBIA, SC 29203<br>FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC |
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**Chronic Hemodialysis Stations: 30    Peritoneal Stations: 3    Home Hemodialysis Training Stations: 3**  
**Other Stations: 0    Total Licensed Stations: 33**

## Renal Dialysis Facilities

DHEC Regulation 61-97

| Name of Facility<br>Location Street<br>Location City, State<br>Administrator                                                                                                                                                                                   | License#/Expiration<br>County/Ownership Type<br>Mailing Address<br>Licensee                                                                            |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FRESENIUS MEDICAL CARE MONCKS CORNER</b><br>112 MCCORMICK CIR<br>MONCKS CORNER, SC 29461-3152 FACILITY #:843-899-4953<br>ZUNIGA SHALES PH#: 843-899-4953<br>Facility Email: DEVIN.DEICH@FMC-NA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0152 / 11/30/2017<br>Berkeley / Limited Liability<br>112 MCCORMICK CIR<br>MONCKS CORNER, SC 29461-3152<br>RAI CARE CENTERS OF SOUTH CAROLINA I LLC |

**Chronic Hemodialysis Stations: 25    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 25**

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| <b>FRESENIUS MEDICAL CARE MOUNT PLEASANT</b><br>1028 EWALL ST<br>MOUNT PLEASANT, SC 29464-3046 FACILITY #:843-884-3115<br>GREEN VICTORIA PH#: 843-884-3115<br>Facility Email: DEVIN.DEICH@FMC-NA.COM<br>Fac. Cont. Email: DEVIN.DEICH@FMC-NA.COM | ERD-0148 / 11/30/2017<br>Charleston / Limited Liability<br>1028 EWALL ST<br>MOUNT PLEASANT, SC 29464-3046<br>NRA-MT PLEASANT SOUTH CAROLINA LLC |
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**Chronic Hemodialysis Stations: 16    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 16**

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| <b>FRESENIUS MEDICAL CARE MYRTLE BEACH</b><br>4592 OLEANDER DR<br>MYRTLE BEACH, SC 29577-5747 FACILITY #:843-839-4273<br>TAYLOR LORI PH#: 843-839-4273<br>Facility Email: CLINIC6289@FMC-NA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0186 / 04/30/2018<br>Horry / Corporation<br>4592 OLEANDER DR<br>MYRTLE BEACH, SC 29577-5747<br>BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC |
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**Chronic Hemodialysis Stations: 21    Peritoneal Stations: 1    Home Hemodialysis Training Stations: 1**  
**Other Stations: 0    Total Licensed Stations: 22**

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| <b>FRESENIUS MEDICAL CARE NEWBERRY</b><br>2850 KINARD ST<br>NEWBERRY, SC 29108 FACILITY #:803-276-2860<br>PUGH CORISSA PH#: 803-276-2860<br>Facility Email: DAVID.J.HAIR@FMC-NA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0020 / 02/28/2018<br>Newberry / Limited Liability<br>2850 KINARD ST<br>NEWBERRY, SC 29108<br>FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC |
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**Chronic Hemodialysis Stations: 22    Peritoneal Stations: 2    Home Hemodialysis Training Stations: 2**  
**Other Stations: 0    Total Licensed Stations: 24**

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
Location City, State  
Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**FRESENIUS MEDICAL CARE NORTH ANDERSON**

2021 CARDINAL CIR  
ANDERSON, SC 29621-1503 FACILITY #:864-224-0024  
COOLEY LINDA C PH#: 864-224-0024  
Facility Email: LINDA.C.COOLEY@FMC-NA.COM  
Fac. Cont. Email: LINDA.C.COOLEY@FMC-NA.COM

ERD-0217 / 02/28/2018  
Anderson / Limited Liability  
2021 CARDINAL CIR  
ANDERSON, SC 29621-1503  
FRESENIUS MEDICAL CARE ANDERSON LLC

**Chronic Hemodialysis Stations: 21    Peritoneal Stations: 2    Home Hemodialysis Training Stations: 4**  
**Other Stations: 0    Total Licensed Stations: 25**

**FRESENIUS MEDICAL CARE NORTH STAR**

140 HIGHLAND CENTER DR  
COLUMBIA, SC 29203-9247 FACILITY #:803-736-0473  
CRAIG KIMBERLY PH#: 803-736-0473  
Facility Email: KIMBERLY.CRAIG@FMC-NA.COM  
Fac. Cont. Email: KIMBERLY.CRAIG@FMC-NA.COM

ERD-0216 / 01/31/2018  
Richland / Limited Liability  
140 HIGHLAND CENTER DR  
COLUMBIA, SC 29203-9247  
FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC

**Chronic Hemodialysis Stations: 21    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 21**

**FRESENIUS MEDICAL CARE PENDLETON**

908 S MECHANIC ST  
PENDLETON, SC 29670-1815 FACILITY #:864-646-6607  
BARNETT DEBORAH PH#: 864-646-6607  
Facility Email: DEBORAH.BARNETT@FMC-NA.COM  
Fac. Cont. Email: DEBORAH.BARNETT@FMC-NA.COM

ERD-0145 / 12/31/2018  
Anderson / Corporation  
908 S MECHANIC ST  
PENDLETON, SC 29670-1815  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations: 11    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 11**

**FRESENIUS MEDICAL CARE ROCK HILL**

1560 HEALTH CARE DR  
ROCK HILL, SC 29732-3857 FACILITY #:803-328-3113  
BURNETT CATHERINE K PH#: 803-328-3113  
Facility Email: CATHERINE.YOCHEM@FMC-NA.COM  
Fac. Cont. Email: CATHERINE.YOCHEM@FMC-NA.COM

ERD-0130 / 05/31/2018  
York / Corporation  
1560 HEALTH CARE DR  
ROCK HILL, SC 29732-3857  
BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

**Chronic Hemodialysis Stations: 23    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 23**

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
Location City, State  
Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**FRESENIUS MEDICAL CARE SOUTH COLUMBIA**

2139 ADAMS GRV RD  
COLUMBIA, SC 29203-7102 FACILITY #:803-779-4073  
CARTER SAMONTRA PH#: 803-779-4073  
Facility Email: SAMONTRA.CARTER@FMC-NA.COM  
Fac. Cont. Email: SAMONTRA.CARTER@FMC-NA.COM

ERD-129 / 02/28/2018  
Richland / Limited Liability  
2139 ADAMS GRV RD  
COLUMBIA, SC 29203-7102  
FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC

**Chronic Hemodialysis Stations:21 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 21**

**FRESENIUS MEDICAL CARE SUMMERVILLE**

109 BURTON AVE STE A  
SUMMERVILLE, SC 29485-8117 FACILITY #:843-875-9800  
BLANKENSHIP KARA PH#: 843-875-9800  
Facility Email: DEVIN.DEICH@FMC-NA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0153 / 11/30/2017  
Dorchester / Limited Liability  
109 BURTON AVE STE A  
SUMMERVILLE, SC 29485-8117  
RAI CARE CENTERS OF SOUTH CAROLINA I LLC

**Chronic Hemodialysis Stations:21 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 21**

**FRESENIUS MEDICAL CARE SUMTER**

615 W WESMARK BLVD  
SUMTER, SC 29150-1900 FACILITY #:803-469-2800  
BROWN SABRA PH#: 803-469-2800  
Facility Email: JAMES.P.MOLONEY@FMC-NA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0085 / 05/31/2018  
Sumter / Limited Liability  
615 W WESMARK BLVD  
SUMTER, SC 29150-1900  
FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC

**Chronic Hemodialysis Stations:53 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 53**

**FRESENIUS MEDICAL CARE SUMTER HOME**

653 W WESMARK BLVD  
SUMTER, SC 29150-1900 FACILITY #:803-905-4267  
CAPERS LASHONDA PH#: 803-905-4267  
Facility Email: LASHONDA.CAPERS@FMC-NA.COM  
Fac. Cont. Email: LASHONDA.CAPERS@FMC-NA.COM

ERD-0215 / 05/31/2018  
Sumter / Limited Liability  
653 W WESMARK BLVD  
SUMTER, SC 29150-1900  
FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC

**Chronic Hemodialysis Stations:0 Peritoneal Stations: 6 Home Hemodialysis Training Stations:6**  
**Other Stations: 0 Total Licensed Stations: 6**

## Renal Dialysis Facilities

DHEC Regulation 61-97

| Name of Facility<br>Location Street<br>Location City, State<br>Administrator                                                                                                                                                                                    | License#/Expiration<br>County/Ownership Type<br>Mailing Address<br>Licensee                                                                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FRESENIUS MEDICAL CARE SWAN LAKE DIALYSIS</b><br>520 PHYSICIANS LN<br>SUMTER, SC 29150-3370 FACILITY #:803-774-2205<br>ROGERS MARIE PH#: 803-484-5972<br>Facility Email: JAMES.P.MOLONEY@FMC-NA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0223 / 05/31/2018<br>Sumter / Corporation<br>520 PHYSICIANS LN<br>SUMTER, SC 29150-3370<br>BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC |

**Chronic Hemodialysis Stations: 21    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 21**

|                                                                                                                                                                                                                                                              |                                                                                                                                                |
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| <b>FRESENIUS MEDICAL CARE WALTERBORO DIALYSIS</b><br>904 N JEFFERIES BLVD<br>WALTERBORO, SC 29488 FACILITY #:843-782-4900<br>YATES RITA PH#: 843-971-8411<br>Facility Email: RITA.MANIGO@FMC-NA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0213 / 03/31/2018<br>Colleton / Limited Liability<br>904 N JEFFERIES BLVD<br>WALTERBORO, SC 29488<br>FRESENIUS MEDICAL CARE WALTERBORO LLC |
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**Chronic Hemodialysis Stations: 16    Peritoneal Stations: 3    Home Hemodialysis Training Stations: 3**  
**Other Stations: 0    Total Licensed Stations: 19**

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| <b>FRESENIUS MEDICAL CARE WEST ASHLEY</b><br>2080 CHARLIE HALL BLVD<br>CHARLESTON, SC 29414-5830 FACILITY #:843-766-4655<br>FRYAR LINDA PH#: 843-766-4655<br>Facility Email: LINDA.FRYAR@FMC-NA.COM<br>Fac. Cont. Email: LINDA.FRYAR@FMC-NA.COM | ERD-0155 / 11/30/2017<br>Charleston / Limited Liability<br>2080 CHARLIE HALL BLVD<br>CHARLESTON, SC 29414-5830<br>RAI CARE CENTERS OF SOUTH CAROLINA I LLC |
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**Chronic Hemodialysis Stations: 26    Peritoneal Stations: 4    Home Hemodialysis Training Stations: 3**  
**Other Stations: 0    Total Licensed Stations: 29**

|                                                                                                                                                                                                                                                         |                                                                                                                                                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FRESENIUS MEDICAL CARE WEST COLUMBIA</b><br>105 SUMMOR DR<br>WEST COLUMBIA, SC 29169-4828 FACILITY #:803-733-1764<br>THOMPSON ROBBIE PH#: 803-733-1764<br>Facility Email: ROBBIE.THOMPSON@FMC-NA.COM<br>Fac. Cont. Email: ROBBIE.THOMPSON@FMC-NA.COM | ERD-0049 / 02/28/2018<br>Lexington / Limited Liability<br>105 SUMMOR DR<br>WEST COLUMBIA, SC 29169-4828<br>FRESENIUS MEDICAL CARE CNA KIDNEY CENTERS LLC |
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**Chronic Hemodialysis Stations: 20    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 20**

## Renal Dialysis Facilities

DHEC Regulation 61-97

| Name of Facility<br>Location Street<br>Location City, State<br>Administrator                                                                                                                                                                          | License#/Expiration<br>County/Ownership Type<br>Mailing Address<br>Licensee                                                                  |
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| <b>FRESENIUS MEDICAL CARE WEST CONWAY</b><br>1702 MILL POND RD<br>CONWAY, SC 29527-4745 FACILITY #:843-488-0328<br>CRAMER ROSARIA PH#: 843-488-0328<br>Facility Email: CLINIC6003@GMC-NA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0182 / 08/31/2018<br>Horry / Corporation<br>1702 MILL POND RD<br>CONWAY, SC 29527-4745<br>BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC |

**Chronic Hemodialysis Stations16 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 16**

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| <b>FRESENIUS MEDICAL CARE WINYAH</b><br>2623 S FRASER ST<br>GEORGETOWN, SC 29440-4374 FACILITY #:843-546-6900<br>CANNON RN BETH PH#: 843-546-6900<br>Facility Email: CLINIC6730@FMC-NA.COM<br>Fac. Cont. Email: CLINIC6730@FMC-NA.COM | ERD-0189 / 10/31/2018<br>Georgetown / Corporation<br>2623 S FRASER ST<br>GEORGETOWN, SC 29440-4374<br>BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC |
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**Chronic Hemodialysis Stations20 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 20**

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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FRESENIUS MEDICAL CARE YORK</b><br>1440 E ALEXANDER LOVE HWY<br>YORK, SC 29745-7758 FACILITY #:803-684-7350<br>SHULER CASEY PH#: 803-684-7350<br>Facility Email: CASEY.SHULER@FMC-NA.COM<br>Fac. Cont. Email: CASEY.P.SHULER@FMC-NA.COM | ERD-0174 / 12/31/2018<br>York / Corporation<br>1440 E ALEXANDER LOVE HWY<br>YORK, SC 29745-7758<br>BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC |
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**Chronic Hemodialysis Stations21 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 21**

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| <b>GASTON DIALYSIS</b><br>5224 HWY 321<br>GASTON, SC 29053-9194 FACILITY #:803-796-7830<br>WHITE APRIL PH#: 803-796-7830<br>Facility Email: MEGAN.SEIFARTH@DAVITA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0205 / 05/31/2018<br>Lexington / Corporation<br>5200 VIRGINIA WAY<br>BRENTWOOD, TN 37027-7569<br>TOTAL RENAL CARE INC |
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**Chronic Hemodialysis Stations11 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 11**

## Renal Dialysis Facilities

DHEC Regulation 61-97

| Name of Facility<br>Location Street<br>Location City, State<br>Administrator                                                                                                                                                                             | License#/Expiration<br>County/Ownership Type<br>Mailing Address<br>Licensee                                                                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>GOOSE CREEK DIALYSIS</b><br>109 GREENLAND DR<br>GOOSE CREEK, SC 29445-5354 FACILITY #:843-377-1199<br>SINGLETARY RN CHERYL S PH#: 000-000-0000<br>Facility Email: LASHUNDRA.IVERY@DAVITA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0164 / 09/30/2018<br>Berkeley / Corporation<br>5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION<br>BRENTWOOD, TN 37027-7569<br>TOTAL RENAL CARE INC |

**Chronic Hemodialysis Stations:17 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 17**

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| <b>GREENVILLE DIALYSIS CLINIC</b><br>220 HOWE ST STE 220A<br>GREENVILLE, SC 29601-3524 FACILITY #:864-271-2002<br>HEGGIE RN DIANNE MORAN PH#: 000-000-0000<br>Facility Email: DHEGGIE@AMERICANRENAL.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0201 / 07/31/2018<br>Greenville / Limited Liability<br>220 HOWE ST STE 220A<br>GREENVILLE, SC 29601-3524<br>GREENVILLE DIALYSIS CLINIC LLC |
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**Chronic Hemodialysis Stations:20 Peritoneal Stations: 2 Home Hemodialysis Training Stations:2**  
**Other Stations: 0 Total Licensed Stations: 22**

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| <b>GREENWOOD DIALYSIS</b><br>109 OVERLAND DR<br>GREENWOOD, SC 29646-4053 FACILITY #:864-227-6011<br>JENNINGS DEANNA YELDELL PH#: 864-227-6011<br>Facility Email: LASHUNDRA.IVERY@DAVITA.COM<br>Fac. Cont. Email: DEANNAJENNINGS@DAVITA.COM | ERD-0026 / 12/31/2017<br>Greenwood / Corporation<br>5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION<br>BRENTWOOD, TN 37027-7569<br>DVA HEALTHCARE RENAL CARE INC |
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**Chronic Hemodialysis Stations:41 Peritoneal Stations: 2 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 41**

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| <b>GREER KIDNEY CENTER</b><br>14152 E WADE HAMPTON BLVD<br>GREER, SC 29651-1554 FACILITY #:864-877-4432<br>WORLEY JENNIFER PH#: 864-877-8005<br>Facility Email: LASHUNDRA.IVERY@DAVITA.COM<br>Fac. Cont. Email: MEGAN.SEIFARTH@DAVITA.COM | ERD-0027 / 12/31/2017<br>Greenville / Corporation<br>5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION<br>BRENTWOOD, TN 37027-7569<br>TOTAL RENAL CARE INC |
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**Chronic Hemodialysis Stations:21 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 21**

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
Location City, State  
Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**GREER SOUTH DIALYSIS**

3254 BRUSHY CREEK RD  
GREER, SC 29650-1000 FACILITY #:864-801-2065  
BENNETT CHRISTINA F PH#: 864-801-2065  
Facility Email: SHARON.E.SCOTT@DAVITA.COM  
Fac. Cont. Email: LASHUNDRA.IVERY@DAVITA.COM

ERD-0162 / 04/30/2018  
Greenville / Corporation  
5200 VIRGINIA WAY, LICENSING AND CERTIFICATION  
BRENTWOOD, TN 37027-7569  
TOTAL RENAL CARE INC

**Chronic Hemodialysis Stations:21 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 21**

**GREER SOUTH HOME TRAINING**

3254 BRUSHY CREEK RD STE A  
GREER, SC 29650-1000 FACILITY #:864-877-9157  
GOLDEN DOUGLAS PH#: 864-801-2065  
Facility Email: LASHUNDRA.IVERY@DAVITA.COM  
Fac. Cont. Email: LASHUNDRA.IVERY@DAVITA.COM

ERD-0202 / 08/31/2018  
Greenville / Limited Liability Company (single member)  
5200 VIRGINIA WAY, LICENSING AND CERTIFICATION  
BRENTWOOD, TN 37027-7569  
LONGWORTH DIALYSIS LLC

**Chronic Hemodialysis Stations:0 Peritoneal Stations: 3 Home Hemodialysis Training Stations:3**  
**Other Stations: 0 Total Licensed Stations: 3**

**HARTS DIALYSIS**

1015 S 4TH ST  
HARTSVILLE, SC 29550-5791 FACILITY #:843-332-5688  
MYERS REGINA PH#: 843-332-5688  
Facility Email: SHARON.E.SCOTT@DAVITA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0206 / 05/31/2018  
Darlington / Corporation  
5200 VIRGINIA WAY, LICENSING AND CERTIFICATION  
BRENTWOOD, TN 37027-7569  
TOTAL RENAL CARE INC

**Chronic Hemodialysis Stations:20 Peritoneal Stations: 2 Home Hemodialysis Training Stations:2**  
**Other Stations: 0 Total Licensed Stations: 22**

**HOLLY HILL DIALYSIS CLINIC**

8532 OLD STATE RD  
HOLLY HILL, SC 29059-8379 FACILITY #:803-496-2800  
MILAM ELIZABETH PH#: 803-496-2800  
Facility Email: JAMES.P.MOLONEY@FMC-NA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0137 / 09/30/2018  
Orangeburg / Limited Liability  
8532 OLD STATE RD  
HOLLY HILL, SC 29059-8379  
NRA-HOLLY HILL SOUTH CAROLINA LLC

**Chronic Hemodialysis Stations:16 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 16**

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
Location City, State  
Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**HOLLYWOOD RAVENEL DIALYSIS CLINIC**

5953 JACOBS POINT BLVD  
RAVENEL, SC 29470-5643 FACILITY #:843-571-4025  
RICHARDS STEPHANIE L PH#: 843-766-4655  
Facility Email: STEPHANIE.RICHARDS@FMC-NA.COM  
Fac. Cont. Email: MSMITHMOORE@NATIONALRENAL.COM

ERD-0157 / 03/31/2018  
Charleston / Limited Liability  
PO BOX 487  
RAVENEL, SC 29470  
NRA-HOLLYWOOD SOUTH CAROLINA LLC

**Chronic Hemodialysis Stations16 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 16**

**JEDBURG DIALYSIS**

2897 W 5TH NORTH ST  
SUMMERVILLE, SC 29483-9674 FACILITY #:843-873-3955  
KENNEDY KATHERYN PH#: 843-873-3955  
Facility Email: LASHUNDRA.IVERY@DAVITA.COM  
Fac. Cont. Email: MEGAN.SEIFARTH@DAVITA.COM

ERD-0236 / 09/30/2018  
Dorchester / Corporation  
5200 VIRGINIA WAY, LICENSING AND CERTIFICATION  
BRENTWOOD, TN 37027-7569  
TOTAL RENAL CARE INC

**Chronic Hemodialysis Stations17 Peritoneal Stations: 0 Home Hemodialysis Training Stations:1**  
**Other Stations: 0 Total Licensed Stations: 18**

**KELLEY CORNERS DIALYSIS**

231 KELLEY ST  
LAKE CITY, SC 29560 FACILITY #:615-320-4214  
LEYDER VALERIE PH#: 615-320-4214  
Facility Email: REGINIA.COPELAND@DAVITA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0240 / 10/31/2018  
Florence / Corporation  
L & C DEPARTMENT, 5200 VIRGINIA WAY  
BRENTWOOD, TN 37027  
TOTAL RENAL CARE INC

**Chronic Hemodialysis Stations16 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 16**

**KEOWEE DIALYSIS CENTER**

537 HWY 123  
SENECA, SC 29678-0845 FACILITY #:864-886-4284  
MCKINNEY LISA PH#: 864-886-4284  
Facility Email: LMCKINNEY@AMERICANRENAL.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0199 / 05/31/2018  
Oconee / Limited Liability  
537 HWY 123  
SENECA, SC 29678-0845  
KEOWEE DIALYSIS CENTER LLC

**Chronic Hemodialysis Stations16 Peritoneal Stations: 1 Home Hemodialysis Training Stations:1**  
**Other Stations: 0 Total Licensed Stations: 17**

## Renal Dialysis Facilities

DHEC Regulation 61-97

| Name of Facility<br>Location Street<br>Location City, State<br>Administrator                                                                                                                                         | License#/Expiration<br>County/Ownership Type<br>Mailing Address<br>Licensee                                                                                             |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>LANCASTER SC DIALYSIS</b><br>1100 W MEETING ST<br>LANCASTER, SC 29720-2251 FACILITY #:803-313-6600<br>PH#:<br>Facility Email: LASHUNDRA.IVERY@DAVITA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0077 / 01/31/2018<br>Lancaster / Corporation<br>5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION<br>BRENTWOOD, TN 37027-7569<br>DVA HEALTHCARE RENAL CARE INC |

**Chronic Hemodialysis Stations: 29    Peritoneal Stations: 2    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 29**

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| <b>LONGS DIALYSIS</b><br>90 CLOVERLEAF DR UNIT 306<br>LONGS, SC 29568-9262 FACILITY #:843-399-5275<br>HEMINGWAY CENDA PH#: 843-399-5275<br>Facility Email: LASHUNDRA.IVERY@DAVITA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0185 / 01/31/2018<br>Horry / Corporation<br>5200 VIRGINIA WAY, LICENSING AND CERTIFICATION<br>BRENTWOOD, TN 37027-7569<br>TOTAL RENAL CARE INC |
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**Chronic Hemodialysis Stations: 10    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 10**

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| <b>LORIS DIALYSIS CENTER</b><br>3827 BELL ST<br>LORIS, SC 29569-2352 FACILITY #:843-756-0300<br>FIPPS JAMIE NORRIS PH#:<br>Facility Email: CLINIC1843@FMC-NA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0108 / 07/31/2018<br>Horry / Corporation<br>3827 BELL ST<br>LORIS, SC 29569-2352<br>BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC |
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**Chronic Hemodialysis Stations: 20    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 20**

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| <b>MARION TOWNE DIALYSIS</b><br>2529 EAST HWY 76<br>MARION, SC 29571 FACILITY #:843-423-8861<br>TODD LORI PH#: 843-423-8861<br>Facility Email: STEPHANIE.KING1@DAVITA.COM<br>Fac. Cont. Email: STEPHANIE.KING1@DAVITA.COM | ERD-0238 / 07/31/2018<br>Marion / Corporation<br>5200 VIRGINIA WAY, LICENSING AND CERTIFICATION<br>BRENTWOOD, TN 37027-7569<br>TOTAL RENAL CARE INC |
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**Chronic Hemodialysis Stations: 12    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 12**

## Renal Dialysis Facilities

DHEC Regulation 61-97

| Name of Facility<br>Location Street<br>Location City, State<br>Administrator                                                                                                                                                            | License#/Expiration<br>County/Ownership Type<br>Mailing Address<br>Licensee                                           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|
| <b>MARKET COMMONS DIALYSIS</b><br>1350 FARROW PKWY STE 100<br>MYRTLE BEACH, SC 29577-1668 FACILITY #:843-839-0966<br>GODWIN RN BEVERLY PH#:<br>Facility Email: SHARON.E.SCOTT@DAVITA.COM<br>Fac. Cont. Email: BEVERLY.GODWIN@DAVITA.COM | ERD-0211 / 04/30/2018<br>Horry / Corporation<br>5200 VIRGINIA WAY<br>BRENTWOOD, TN 37027-7569<br>TOTAL RENAL CARE INC |

**Chronic Hemodialysis Stations 17    Peritoneal Stations: 3    Home Hemodialysis Training Stations: 3**

**Other Stations: 0    Total Licensed Stations: 20**

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| <b>MCCOLL DIALYSIS</b><br>3595 US HWY 15-401 E<br>MCCOLL, SC 29570 FACILITY #:843-523-6274<br>FORD PATRICIA PH#: 843-523-6274<br>Facility Email: STEPHANIE.KING1@DAVITA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0203 / 03/31/2018<br>Marlboro /<br>5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION<br>BRENTWOOD, TN 37027-7569<br>CURLEW DIALYSIS LLC |
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**Chronic Hemodialysis Stations 16    Peritoneal Stations: 2    Home Hemodialysis Training Stations: 2**

**Other Stations: 0    Total Licensed Stations: 18**

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| <b>MYRTLE BEACH DIALYSIS</b><br>3919 MAYFAIR ST<br>MYRTLE BEACH, SC 29577-5773 FACILITY #:843-448-4920<br>TODD LORI PH#:<br>Facility Email: MEGAN.SEIFARTH@DAVITA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0163 / 06/30/2018<br>Horry / Corporation<br>5200 VIRGINIA WAY STE 400<br>BRENTWOOD, TN 37027-7569<br>TOTAL RENAL CARE INC |
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**Chronic Hemodialysis Stations 16    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**

**Other Stations: 0    Total Licensed Stations: 16**

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| <b>NORTH CHARLESTON DIALYSIS</b><br>5900 RIVERS AVE UNIT E<br>NORTH CHARLESTON, SC 29406-6082 FACILITY #:843-747-3447<br>MEREDITH MATTHEW PH#: 843-747-3447<br>Facility Email: LASHUNDRA.IVERY@DAVITA.COM<br>Fac. Cont. Email: LASHUNDRA.IVERY@DAVITA.COM | ERD-0165 / 08/31/2018<br>Charleston / Corporation<br>5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION<br>BRENTWOOD, TN 37027-7569<br>TOTAL RENAL CARE INC |
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**Chronic Hemodialysis Stations 17    Peritoneal Stations: 2    Home Hemodialysis Training Stations: 0**

**Other Stations: 0    Total Licensed Stations: 17**

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
Location City, State  
Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**NORTH MAIN KIDNEY CENTER**

3900 N MAIN ST  
COLUMBIA, SC 29203-6471 FACILITY #:803-779-1201  
POSTON RN PAMELA G PH#: 803-779-1201  
Facility Email: PPOSTON@AMERICANRENAL.COM  
Fac. Cont. Email: PPOSTON@AMERICANRENAL.COM

ERD-0192 / 10/31/2017 (Renewal Pending)  
Richland / Limited Liability  
3900 N MAIN ST  
COLUMBIA, SC 29203-6471  
NORTH MAIN KIDNEY CENTER LLC

**Chronic Hemodialysis Stations:21 Peritoneal Stations: 2 Home Hemodialysis Training Stations:2**  
**Other Stations: 0 Total Licensed Stations: 23**

**NORTH ORANGEBURG DIALYSIS**

124 FIRE TOWER RD  
ORANGEBURG, SC 29118-1401 FACILITY #:803-531-6202  
VARN BRANDI PH#: 803-531-6202  
Facility Email: STEPHANIE.KING1@DAVITA.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0023 / 03/31/2018  
Orangeburg / Corporation  
5200 VIRGINIA WAY STE 400  
BRENTWOOD, TN 37027-7569  
DVA HEALTHCARE RENAL CARE INC

**Chronic Hemodialysis Stations:24 Peritoneal Stations: 2 Home Hemodialysis Training Stations:1**  
**Other Stations: 0 Total Licensed Stations: 25**

**NXSTAGE KIDNEY CARE CHARLESTON**

2270 ASHLEY CROSSING DR STE 130A  
CHARLESTON, SC 29414-5702 FACILITY #:843-213-3660  
PAYTON JENNIFER PH#: 843-213-3660  
Facility Email: JPAYTON@NXSTAGE.COM  
Fac. Cont. Email: JPAYTON@NXSTAGE.COM

ERD-0231 / 05/31/2018  
Charleston /  
2270 ASHLEY CROSSING DR STE 130A  
CHARLESTON, SC 29414-5702  
NKC CHARLESTON LLC

**Chronic Hemodialysis Stations:4 Peritoneal Stations: 1 Home Hemodialysis Training Stations:2**  
**Other Stations: 0 Total Licensed Stations: 6**

**ORANGEBURG DIALYSIS CLINIC**

1184 ORANGEBURG MALL CIR  
ORANGEBURG, SC 29115-3439 FACILITY #:803-531-7501  
LOOPER BRANDY RN PH#: 803-531-7501  
Facility Email: JAMES.P.MOLONEY@FMC-NA.COM  
Fac. Cont. Email: BRANDY.LOOPER@FMC-NA.COM

ERD-0131 / 05/31/2018  
Orangeburg / Limited Liability  
1184 ORANGEBURG MALL CIR  
ORANGEBURG, SC 29115-3439  
NRA-ORANGEBURG SOUTH CAROLINA LLC

**Chronic Hemodialysis Stations:16 Peritoneal Stations: 3 Home Hemodialysis Training Stations:3**  
**Other Stations: 0 Total Licensed Stations: 19**

## Renal Dialysis Facilities

DHEC Regulation 61-97

| Name of Facility<br>Location Street<br>Location City, State<br>Administrator                                                                                                                                                  | License#/Expiration<br>County/Ownership Type<br>Mailing Address<br>Licensee                                                                                           |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>PAGELAND DIALYSIS</b><br>505 S PEARL ST STE A<br>PAGELAND, SC 29728-2222 FACILITY #:843-672-3491<br>RODGERS RN TRACY L PH#: 803-802-3027<br>Facility Email: SCL&C@DAVITA.COM<br>Fac. Cont. Email: TRACY.RODGERS@DAVITA.COM | ERD-0160 / 10/31/2018<br>Chesterfield / Corporation<br>5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION<br>BRENTWOOD, TN 37027-7569<br>DVA RENAL HEALTHCARE INC |

**Chronic Hemodialysis Stations16 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**

**Other Stations: 0 Total Licensed Stations: 16**

|                                                                                                                                                                                                                                                    |                                                                                                                                                      |
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| <b>PALMETTO DIALYSIS</b><br>317 PROFESSIONAL PARK RD<br>CLINTON, SC 29325-7625 FACILITY #:864-833-0717<br>POWELL JEANNIE D PH#: 864-833-0717<br>Facility Email: SHARON.E.SCOTT@DAVITA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0126 / 04/30/2018<br>Laurens / Corporation<br>5200 VIRGINIA WAY, LICENSING AND CERTIFICATION<br>BRENTWOOD, TN 37027-7569<br>TOTAL RENAL CARE INC |
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**Chronic Hemodialysis Stations21 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**

**Other Stations: 0 Total Licensed Stations: 21**

|                                                                                                                                                                                                                                  |                                                                                                                                                               |
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| <b>PAMPLICO DIALYSIS</b><br>1520 FLAG DR<br>FLORENCE, SC 29505 FACILITY #:843-413-0857<br>AKAHARA KELLIE PH#: 843-413-0857<br>Facility Email: LASHUNDRAIVERY@DAVITA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0207 / 11/30/2017<br>Florence / Corporation<br>5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION<br>BRENTWOOD, TN 37027-7569<br>TOTAL RENAL CARE INC |
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**Chronic Hemodialysis Stations20 Peritoneal Stations: 4 Home Hemodialysis Training Stations:4**

**Other Stations: 0 Total Licensed Stations: 24**

|                                                                                                                                                                                                                              |                                                                                                                                                                                                         |
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| <b>PENDLETON DIALYSIS</b><br>7703 HWY 76<br>PENDLETON, SC 29670-1818 FACILITY #:864-646-7715<br>BOWSER DEBRAL PH#: 864-227-6011<br>Facility Email: SCL&C@DAVITA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0143 / 10/31/2018<br>Anderson / Limited Liability Limited Partnership<br>5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION<br>BRENTWOOD, TN 37027-7569<br>RENAL TREATMENT CENTERS-SOUTHEAST LP |
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**Chronic Hemodialysis Stations10 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**

**Other Stations: 0 Total Licensed Stations: 10**

## Renal Dialysis Facilities

DHEC Regulation 61-97

| Name of Facility<br>Location Street<br>Location City, State<br>Administrator                                                                                                                                                                 | License#/Expiration<br>County/Ownership Type<br>Mailing Address<br>Licensee                                                                                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>RIDGELAND DIALYSIS</b><br>112 WEATHERSBY ST<br>RIDGELAND, SC 29936-9514 FACILITY #:843-717-9379<br>DELOACH BRENDA PH#: 843-717-9379<br>Facility Email: MEGAN.SEIFARTH@DAVITA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0187 / 07/31/2018<br>Jasper / Corporation<br>5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION<br>BRENTWOOD, TN 37027-7569<br>TOTAL RENAL CARE INC |

**Chronic Hemodialysis Stations**10    **Peritoneal Stations:** 0    **Home Hemodialysis Training Stations:**0  
**Other Stations:** 0    **Total Licensed Stations:** 10

|                                                                                                                                                                                                                                         |                                                                                                                                                                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>SANTEE DIALYSIS</b><br>228 BRADFORD BLVD<br>SANTEE, SC 29142-8677 FACILITY #:803-854-3133<br>PROVEAUX LAURA PH#: 803-854-3133<br>Facility Email: STEPHANIE.KING1@DAVITA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0121 / 03/31/2018<br>Orangeburg / Corporation<br>5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION<br>BRENTWOOD, TN 37027-7569<br>DVA HEALTHCARE RENAL CARE INC |
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**Chronic Hemodialysis Stations**24    **Peritoneal Stations:** 0    **Home Hemodialysis Training Stations:**0  
**Other Stations:** 0    **Total Licensed Stations:** 24

|                                                                                                                                                                                                                                  |                                                                                                                            |
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| <b>SENECA DIALYSIS CENTER</b><br>685 S OAK ST<br>SENECA, SC 29678-3827 FACILITY #:864-885-0273<br>JOHNSON LULA PH#: 864-885-0273<br>Facility Email: LDJOHNSON@AMERICANRENAL.COM<br>Fac. Cont. Email: LDJOHNSON@AMERICANRENAL.COM | ERD-0104 / 11/30/2018<br>Oconee / Limited Liability<br>685 S OAK ST<br>SENECA, SC 29678-3827<br>SENECA DIALYSIS CENTER LLC |
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**Chronic Hemodialysis Stations**14    **Peritoneal Stations:** 1    **Home Hemodialysis Training Stations:**0  
**Other Stations:** 0    **Total Licensed Stations:** 14

|                                                                                                                                                                                                                                                     |                                                                                                                                                                          |
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| <b>SOUTH ORANGEBURG DIALYSIS</b><br>1080 SUMMERS AVE<br>ORANGEBURG, SC 29115-4920 FACILITY #:803-539-0084<br>CROSBY ANGELA PH#: 803-539-0084<br>Facility Email: LASHUNDRA.IVERY@DAVITA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0083 / 12/31/2017<br>Orangeburg / Corporation<br>5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION<br>BRENTWOOD, TN 37027-7569<br>DVA HEALTHCARE RENAL CARE INC |
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**Chronic Hemodialysis Stations**16    **Peritoneal Stations:** 0    **Home Hemodialysis Training Stations:**0  
**Other Stations:** 0    **Total Licensed Stations:** 16

## Renal Dialysis Facilities

DHEC Regulation 61-97

| Name of Facility<br>Location Street<br>Location City, State<br>Administrator                                                                                                                                                               | License#/Expiration<br>County/Ownership Type<br>Mailing Address<br>Licensee                                                         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|
| <b>SPARTANBURG DIALYSIS</b><br>128 DILLON DR<br>SPARTANBURG, SC 29307-1018 FACILITY #:864-587-1507<br>MYERS ROBIN PH#: 803-865-0554<br>Facility Email: CAMARTIN@AMERICANRENAL.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0196 / 02/28/2018<br>Spartanburg / Limited Liability<br>128 DILLON DR<br>SPARTANBURG, SC 29307-1018<br>SPARTANBURG DIALYSIS LLC |

**Chronic Hemodialysis Stations:21    Peritoneal Stations: 3    Home Hemodialysis Training Stations:3**  
**Other Stations: 0    Total Licensed Stations: 24**

|                                                                                                                                                                                                                                                 |                                                                                                               |
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| <b>U S RENAL CARE EASLEY DIALYSIS</b><br>125 WHITMIRE RD<br>EASLEY, SC 29640-1426 FACILITY #:864-242-0802<br>ROWLAND MATTIE PH#: 864-855-6206<br>Facility Email: LEGAL@USRENALCARE.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0170 / 09/30/2018<br>Pickens / Corporation<br>PO BOX 251549<br>PLANO, TX 75025-1458<br>DIALYSIS NEWCO INC |
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**Chronic Hemodialysis Stations:28    Peritoneal Stations: 0    Home Hemodialysis Training Stations:0**  
**Other Stations: 0    Total Licensed Stations: 28**

|                                                                                                                                                                                                                                                         |                                                                                                                                |
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| <b>U S RENAL CARE EASLEY HOME THERAPIES</b><br>121 COMMERCE BLVD<br>EASLEY, SC 29642-1544 FACILITY #:864-859-7902<br>CUMMINGS SHERI PH#: 864-859-7902<br>Facility Email: LEGAL@USRENALCARE.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0210 / 03/31/2018<br>Pickens / Limited Liability<br>2400 DALLAS PKWY STE 350<br>PLANO, TX 75093-4380<br>DSI GREENVILLE LLC |
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**Chronic Hemodialysis Stations:0    Peritoneal Stations: 4    Home Hemodialysis Training Stations:4**  
**Other Stations: 0    Total Licensed Stations: 4**

|                                                                                                                                                                                                                                                |                                                                                                                  |
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| <b>U S RENAL CARE GREENVILLE DIALYSIS</b><br>1004 GROVE RD<br>GREENVILLE, SC 29605 FACILITY #:864-242-0802<br>JONES MIYAKO PH#: 864-242-0802<br>Facility Email: LEGAL@USRENALCARE.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0169 / 09/30/2018<br>Greenville / Corporation<br>PO BOX 251549<br>PLANO, TX 75025-1458<br>DIALYSIS NEWCO INC |
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**Chronic Hemodialysis Stations:37    Peritoneal Stations: 0    Home Hemodialysis Training Stations:0**  
**Other Stations: 0    Total Licensed Stations: 37**

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
Location City, State  
Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**U S RENAL CARE LYMAN DIALYSIS**

208 HOLLY SPRINGS RD  
LYMAN, SC 29365-1314 FACILITY #:864-439-2138  
BRAGG RENEE PH#: 864-439-2138  
Facility Email: RENEE.BRAGG@USRENALCARE.COM  
Fac. Cont. Email: RENEE.BRAGG@USRENALCARE.COM

ERD-0204 / 03/31/2018  
Spartanburg / Corporation  
2400 DALLAS PKWY STE 350  
PLANO, TX 75093-4380  
DIALYSIS NEWCO INC

**Chronic Hemodialysis Stations13 Peritoneal Stations: 1 Home Hemodialysis Training Stations:1**  
**Other Stations: 0 Total Licensed Stations: 14**

**U S RENAL CARE PLEASANTBURG DIALYSIS**

110 CHALMERS RD STE C  
GREENVILLE, SC 29605-1351 FACILITY #:864-558-2365  
PEPPER SELMA PH#: 864-299-2365  
Facility Email: LEGAL@USRENALCARE.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0168 / 09/30/2018  
Greenville / Corporation  
PO BOX 251549  
PLANO, TX 75025-1500  
DIALYSIS NEWCO INC

**Chronic Hemodialysis Stations16 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 16**

**U S RENAL CARE PLEASANTBURG HOME DIALYSIS**

110 CHALMERS RD STE D  
GREENVILLE, SC 29605-1351 FACILITY #:864-558-2380  
SFEIR RN MARSHA A PH#: 864-558-2375  
Facility Email: LEGAL@USRENALCARE.COM  
Fac. Cont. Email: MSFEIR@DSI-CORP.COM

ERD-0194 / 09/30/2018  
Greenville / Limited Liability  
PO BOX 251549  
PLANO, TX 75025-1458  
DSI GREENVILLE LLC

**Chronic Hemodialysis Stations:0 Peritoneal Stations: 3 Home Hemodialysis Training Stations:3**  
**Other Stations: 0 Total Licensed Stations: 3**

**U S RENAL CARE POWDERHORN DIALYSIS**

16 POWDERHORN RD  
SIMPSONVILLE, SC 29681-3399 FACILITY #:864-962-2222  
CAGLE MELISSA PH#: 864-962-2222  
Facility Email: LEGAL@USRENALCARE.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0127 / 09/30/2018  
Greenville / Corporation  
PO BOX 251549  
PLANO, TX 75025-1458  
DIALYSIS NEWCO INC

**Chronic Hemodialysis Stations21 Peritoneal Stations: 0 Home Hemodialysis Training Stations:0**  
**Other Stations: 0 Total Licensed Stations: 21**

## Renal Dialysis Facilities

DHEC Regulation 61-97

| Name of Facility<br>Location Street<br>Location City, State<br>Administrator                                                                                                                                                                     | License#/Expiration<br>County/Ownership Type<br>Mailing Address<br>Licensee                                                                                     |
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| <b>UPSTATE DIALYSIS CENTER</b><br>308 MILLS AVE<br>GREENVILLE, SC 29605-4022 FACILITY #:864-271-3700<br>GAINES SAVANNAH PH#: 864-271-3700<br>Facility Email: LASHUNDRA.IVERY@DAVITA.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0098 / 09/30/2018<br>Greenville / Corporation<br>5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION<br>BRENTWOOD, TN 37027-7569<br>TOTAL RENAL CARE INC |

**Chronic Hemodialysis Stations 30    Peritoneal Stations: 4    Home Hemodialysis Training Stations: 4**  
**Other Stations: 0    Total Licensed Stations: 34**

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| <b>US RENAL CARE BARNWELL DIALYSIS</b><br>10708 MARLBORO AVE<br>BARNWELL, SC 29812-6376 FACILITY #:803-541-7225<br>COOPER DONNA PH#: 843-464-6212<br>Facility Email: LEGAL@USRENALCARE.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0179 / 12/31/2017<br>Barnwell / Limited Liability<br>PO BOX 251549<br>PLANO, TX 75093-1500<br>DCA OF BARNWELL LLC |
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**Chronic Hemodialysis Stations 15    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 15**

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| <b>US RENAL CARE EDGEFIELD DIALYSIS</b><br>306 MAIN ST<br>EDGEFIELD, SC 29824-1326 FACILITY #:803-637-3225<br>CLARKE SHARON M PH#: 803-637-3225<br>Facility Email: LEGAL@USRENALCARE.COM<br>Fac. Cont. Email: SCLARKE@DIALYSISCORPORATION.COM | ERD-0149 / 09/30/2018<br>Edgefield / Limited Liability<br>PO BOX 251549<br>PLANO, TX 75025-1500<br>DCA OF EDGEFIELD LLC |
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**Chronic Hemodialysis Stations 15    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 15**

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| <b>US RENAL CARE NORTH AIKEN DIALYSIS</b><br>208 UNIVERSITY PKWY STE 208<br>AIKEN, SC 29801 FACILITY #:803-642-2670<br>REEDY BONNIE PH#: 803-642-2670<br>Facility Email: LEGAL@USRENALCARE.COM<br>Fac. Cont. Email: No Facility Contact Email on Record | ERD-0208 / 12/31/2017<br>Aiken / Ltd. Liability<br>PO BOX 251549<br>PLANO, TX 75093-1500<br>USRC NORTH AIKEN LLC |
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**Chronic Hemodialysis Stations 11    Peritoneal Stations: 2    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 11**

## Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
Location City, State  
Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

**US RENAL CARE SOUTH AIKEN DIALYSIS**

169 CREPE MYRTLE CT  
AIKEN, SC 29803-7543 FACILITY #:803-644-8484  
CLARKE SHARON PH#: 803-644-8484  
Facility Email: LEGAL@USRENALCARE.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0156 / 03/31/2018  
Aiken / Limited Liability  
2400 DALLAS PKWY STE 350  
PLANO, TX 75093-4380  
DCA OF SOUTH AIKEN LLC

**Chronic Hemodialysis Stations 18    Peritoneal Stations: 2    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 18**

**US RENAL CARE SOUTH AIKEN DIALYSIS**

160 CREPE MYRTLE CT  
AIKEN, SC 29803 FACILITY #:803-544-8484  
PH#:  
Facility Email: LEGAL@USRENALCARE.COM  
Fac. Cont. Email: No Facility Contact Email on Record

ERD-0251 / 09/30/2018  
Aiken / Limited Liability  
PO BOX 251549  
PLANO, TX 75025-1500  
USRC SOUTH AIKEN LLC

**Chronic Hemodialysis Stations 18    Peritoneal Stations: 2    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 18**

**US RENAL CARE TRAVELERS REST DIALYSIS**

36 S MAIN ST  
TRAVELERS REST, SC 29690 FACILITY #:864-660-2050  
STARKE FELICIA PH#: 864-660-2050  
Facility Email: LEGAL@USRENALCARE.COM  
Fac. Cont. Email: FELICIA.STARKE@USRENALCARE.COM

ERD-0235 / 10/31/2018  
Greenville / Limited Liability  
PO BOX 251549  
PLANO, TX 75025-1500  
DSI TRAVELERS REST LLC

**Chronic Hemodialysis Stations 13    Peritoneal Stations: 0    Home Hemodialysis Training Stations: 0**  
**Other Stations: 0    Total Licensed Stations: 13**

**WALTERBORO DIALYSIS**

302 RUBY ST  
WALTERBORO, SC 29488-2758 FACILITY #:843-549-6743  
DELOACH BRENDA PH#: 843-549-6743  
Facility Email: STEPHANIE.KING1@DAVITA.COM  
Fac. Cont. Email: BRENDA.DELOACH@DAVITA.COM

ERD-0113 / 03/31/2018  
Colleton / Corporation  
5200 VIRGINIA WAY, LICENSING AND CERTIFICATION  
BRENTWOOD, TN 37027-7569  
DVA HEALTHCARE RENAL CARE INC

**Chronic Hemodialysis Stations 25    Peritoneal Stations: 2    Home Hemodialysis Training Stations: 2**  
**Other Stations: 0    Total Licensed Stations: 27**

Renal Dialysis Facilities

DHEC Regulation 61-97

Name of Facility  
Location Street  
Location City, State  
Administrator

License#/Expiration  
County/Ownership Type  
Mailing Address  
Licensee

|                                                                                                                                                                                                                                                                    |                                                                                                                                                                |
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| <p><b>WOFFORD DIALYSIS</b><br/>8020 WHITE AVE<br/>SPARTANBURG, SC 29303-2099 FACILITY #:864-583-4798<br/>SPOTO MICHAEL PH#: 864-583-4798<br/><b>Facility Email:</b> SHARON.E.SCOTT@DAVITA.COM<br/><b>Fac. Cont. Email:</b> No Facility Contact Email on Record</p> | <p>ERD-0224 / 04/30/2018<br/>Spartanburg / Limited Liability<br/>5200 VIRGINIA WAY, L &amp; C DEPARTMENT<br/>BRENTWOOD, TN 37027<br/>KANDUNCE DIALYSIS LLC</p> |
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**Chronic Hemodialysis Stations: 11    Peritoneal Stations: 3    Home Hemodialysis Training Stations: 3**  
**Other Stations: 0    Total Licensed Stations: 14**

**Total Number of Facilities: 153**

**Total Licensed Stations : 3,002**

**Chronic Hemodialysis Stations : 2874**

**Peritoneal Stations : 160**

**Home Hemodialysis Training Stations : 128**

**Other Stations : 0**