

**Table 17A-4: Fixed Cardiac Catheterization Equipment Need Determination**

<b>Cardiac Catheterization Service Area</b>	<b>Fixed Cardiac Catheterization Equipment Need Determination*</b>	<b>Certificate of Need Application Due Date**</b>	<b>Certificate of Need Beginning Review Date</b>
It is determined that there is no need anywhere else in the state and no other reviews are scheduled.			

\* Need determinations shown in this document may be increased or decreased during the year pursuant to Policy GEN-2 (see Chapter 4).

\*\* Application due dates are absolute deadlines. The filing deadline is 5:30 p.m. on the application due date. (see Chapter 3).

**Table 17A-5: Shared Fixed Cardiac Catheterization Equipment Need Determination**

<b>Cardiac Catheterization Service Area</b>	<b>Shared Fixed Cardiac Catheterization Equipment Need Determination*</b>	<b>Certificate of Need Application Due Date**</b>	<b>Certificate of Need Beginning Review Date</b>
It is determined that there is no need anywhere in the state and no reviews are scheduled.			

\* Need determinations shown in this document may be increased or decreased during the year pursuant to Policy GEN-2 (see Chapter 4).

\*\* Application due dates are absolute deadlines. The filing deadline is 5:30 p.m. on the application due date. (see Chapter 3).

**Table 17A-6: Mobile Cardiac Catheterization Equipment Need Determination**

<b>Cardiac Catheterization Service Area</b>	<b>Mobile Cardiac Catheterization Equipment Need Determination*</b>	<b>Certificate of Need Application Due Date**</b>	<b>Certificate of Need Beginning Review Date</b>
It is determined that there is no anywhere in the state and no reviews are scheduled.			

\* Need determinations shown in this document may be increased or decreased during the year pursuant to Policy GEN-2 (see Chapter 4).

\*\* Application due dates are absolute deadlines. The filing deadline is 5:30 p.m. on the application due date. (see Chapter 3).