



CAROLINA CARDIOLOGY
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Thomas J. Pulliam, MD
Interim Chairman, State Health Coordinating Council
c/o Dept. of Health Service Regulation
Medical Facilities Planning Section
2714 Mail Services Center
Raleigh, NC 27699-2714

RECEIVED
By K Fisk at 3:56 pm, Aug 17, 2012

Dear Dr. Pulliam:

I have closely monitored the research in the field of Interventional Cardiology throughout my career, and I agree that the Johnston Health petition has shed light on an important issue. I fully support a rule change that would increase patient access to interventional catheterization procedures, and I concur that these procedures can safely be provided in facilities without open heart surgery.

The Johnston Health petition references a 2009 study published in the *Journal of the American College of Cardiology*. That study concluded that there are no differences in patient outcomes for Percutaneous Coronary Intervention (PCI) between facilities with open heart surgery on site and those without. In fact, the risk of emergency surgery was actually higher at facilities with open heart surgery on site. The study also found that similar results for both primary (emergency) PCI and elective PCI were possible. Furthermore, the most recent guidelines from the American College of Cardiology, published in 2011, indicate that PCI without open heart surgery on site is appropriate.

As a physician who sees these patients on a daily basis, I ask you to seriously consider the approval of this petition so that all patients in North Carolina, regardless of where they live, will have equal access to this life saving procedure.

Sincerely,

Ernest Gumprecht, MD, FACC

Board Certified in Interventional Cardiology