



North Carolina Department of Health and Human Services
Division of Health Service Regulation

Pat McCrory
Governor

Richard O. Brajer
Secretary DHHS

Mark Payne
Assistant Secretary for Audit and
Health Service Regulation

March 9, 2016

Colleen M. Crowley
Polsinelli
421 Fayetteville Street, Suite 1100
Raleigh, NC 27601-3000

Exempt from Review – Replacement Equipment

Record #: 1881
Facility Name: DLP Cardiac Partners
FID #: 160094
Business Name: DLP Cardiac Partners
Business #: 2314
Project Description: Replace existing mobile cardiac catheterization equipment serving Novant Health Thomasville Medical Center
County: Davidson

Dear Ms. Crowley:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency), determined that based on your letter of February 25, 2016 and additional information received on March 8, 2016, the above referenced proposal is exempt from certificate of need review in accordance with G.S 131E-184(a)(7). Therefore, you may proceed to acquire, without a certificate of need, the GE Innova 3100 Cardiovascular Imaging System. This determination is based on your representations that the unit being replaced will be removed from North Carolina and will not be used again in the State without first obtaining a certificate of need.

Moreover, you need to contact the Agency's Construction Section to determine if they have any requirements for development of the proposed project.

It should be noted that the Agency's position is based solely on the facts represented by you and that any change in facts as represented would require further consideration by this office and a

Healthcare Planning and Certificate of Need Section

www.ncdhhs.gov

Telephone: 919-855-3873 • Fax: 919-715-4413

Location: Edgerton Building • 809 Ruggles Drive • Raleigh, NC 27603

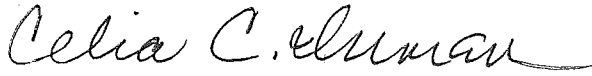
Mailing Address: 2704 Mail Service Center • Raleigh, NC 27699-2704

An Equal Opportunity/ Affirmative Action Employer

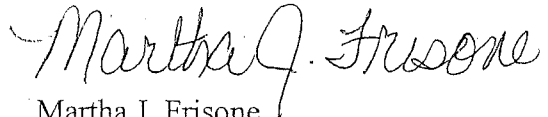


separate determination. If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,



Celia C. Inman
Project Analyst



Martha J. Frisone,
Assistant Chief, Certificate of Need

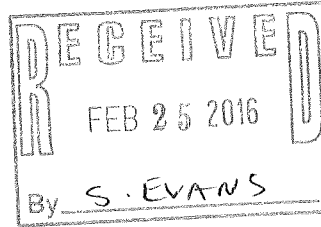
cc: Construction Section, DHSR
Kelli Fisk, Program Assistant, Healthcare Planning, DHSR



421 Fayetteville Street, Suite 1100, Raleigh, NC 27601-3000 • 919.832.1744

February 25, 2016

Via Hand Delivery



Colleen M. Crowley
(919) 835-3402
(919) 882-1794 Fax
ccrowley@polsinelli.com

Martha J. Frisone, Assistant Chief
Certificate of Need Section
Division of Health Service Regulation
N.C. Department of Health and Human
Services
809 Ruggles Drive
Raleigh, NC 27603

Re: DLP Cardiac Partners – Exemption Notice for Replacement of Mobile Cardiac Catheterization Equipment

Our client, DLP Cardiac Partners (“DLP”) seeks to replace its mobile cardiac catheterization equipment (“cardiac cath”) (“Existing Equipment”). The Existing Equipment is grandfathered and was acquired prior to cardiac cath equipment being regulated under the Certificate of Need (“CON”) law. The replacement cardiac cath (“Replacement Equipment”) will replace DLP’s existing GE Advantx mobile cardiac cath which currently serves Novant Health Thomasville Medical Center. The Replacement Equipment is a GE Innova 3100 Cardiovascular Imaging System. DLP previously purchased the Replacement Equipment in 2013 and has never operated it in North Carolina. The Replacement Equipment will be housed in a trailer that DLP has owned in North Carolina since 2011. The Replacement Equipment will continue to serve the current mobile site after it becomes operational.

The General Assembly has chosen to exempt certain, otherwise reviewable events from CON review. Among the exemptions is the acquisition of “replacement equipment,” defined as follows in the CON Law:

“Replacement equipment” means equipment that costs less than two million dollars (\$2,000,000) and is purchased for the sole purpose of replacing comparable medical equipment currently in use which will be sold or otherwise disposed of when replaced.

See N.C. Gen. Stat. § 131E-176(22a).

Cost of Replacement Equipment

The total cost to acquire, install, and make operational the Replacement Equipment is \$158,700. (See Exhibit 1, Invoice for Replacement Equipment¹) The Replacement Equipment was purchased by DLP on December 18, 2013 (subsequently invoiced on December 31, 2013) from Transtate Equipment Company. The Replacement Equipment was previously operated in Wisconsin and has never been operationalized in North Carolina. The Replacement Equipment will be installed in a trailer that DLP has owned and utilized in North Carolina since May 1, 2011. (See Exhibit 2, DMV Certificate of Title for Trailer) The cost to install the Replacement Equipment into the trailer is included in the Invoice for Replacement Equipment. (See Exhibit 1) There is no cost for the removal of the Existing Equipment since it will be moved (driven) out of state by DLP. The only capital cost for acquisition and installation of the Replacement Equipment is \$158,700. There will be no other construction costs or other capital costs associated with this replacement equipment.

Comparable Equipment

The CON rule codified as 10A N.C.A.C. 14C.0303 (the "Regulation") defines "comparable medical equipment" in subsection (c) as follows:

"Comparable medical equipment" means equipment which is functionally similar and will be used for the same diagnostic or treatment purposes.

10A N.C.A.C. 14C.0303(c).

DLP intends to use the Replacement Equipment for substantially the same types of treatments for which it currently uses the Existing Equipment. The Existing Equipment is a GE Advantx that was initially acquired by DLP's predecessor in 2003. This Existing Equipment has been used to provide cardiac cath services since its installation.

The Replacement Equipment will perform all procedures currently performed on the Existing Equipment. The original Replacement Equipment Quotation and Products Specifications detail the capabilities of the Replacement Equipment. (See Exhibits 3 and 4) Any

¹ While the Invoice for the Replacement Equipment includes a credit for trading in other equipment to Transtate Equipment Company, we do not include the credit for purposes of indicating the total cost to acquire, install, and make operational the Replacement Equipment.

expanded capabilities due to technological improvements are minimal and the Replacement Equipment will perform the same general range of cardiac cath procedures. As a result, the Replacement Equipment is “comparable medical equipment” as defined in Subsection (c).

Furthermore, DLP does not intend to increase patient charges or per procedure operating expenses within the first 12 months after acquisition. For further equipment comparison, please refer to Exhibit 5, the Equipment Comparison Chart.

Subsection (d) of the regulation further provides:

- (1) it has the same technology as the equipment currently in use, although it may possess expanded capabilities due to technological improvements; and
- (2) it is functionally similar and is used for the same diagnostic or treatment purposes as the equipment currently in use and is not used to provide a new health service; and
- (3) the acquisition of the equipment does not result in more than a 10% increase in patient charges or per procedure operating expenses within the first twelve months after the replacement equipment is acquired.

10A N.C.A.C. 14C.0303(d). The Replacement Equipment will meet all three of the tests set out in Subsection (d). The Replacement Equipment satisfies the technology and functionality tests in Subsection (1) and (2) as discussed above and identified in the Comparison Chart (See Exhibit 5). Moreover, DLP represents the use of the Replacement Equipment will not result in the type of expense or charge increase described in Subsection (d)(3).

Disposition of Equipment

DLP will remove the Existing Equipment from North Carolina. There is no cost to DLP to remove the Existing Equipment since it is mobile. The Existing Equipment will be placed in DLP's out of state inventory and will not be re-sold or re-installed in North Carolina without appropriate CON approval.

Martha J. Frisone, Assistant Chief
February 25, 2016
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CONCLUSION

Based on the foregoing information, DLP hereby requests that the Agency provide a written response confirming the acquisition of the Replacement Equipment. If the Agency needs additional information to assist in its consideration of this request, please apprise us as soon as possible.

We thank you for your consideration of this notice.

Sincerely,

Colleen M. Crowley

Colleen M. Crowley

CMC:

Enclosures

Martha J. Frisone, Assistant Chief
February 25, 2016
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EXHIBIT LIST

1. Invoice for Replacement Equipment
2. DMV Certificate of Title for Trailer
3. Original Replacement Equipment Quotation
4. Product Specifications for Replacement Equipment
5. Equipment Comparison Chart

EXHIBIT 1

Invoice

TRANSTATE

Equipment Company

PO Box 480005
Charlotte, NC 28269

Date	Invoice #
12/31/2013	2009985

Bill To
DLP Cardiac Partners Accounts Payable 3700 Arco Corporate Drive, Suite 450 Charlotte, NC 28273

Ship To

Date of Sale	Representative	P.O. Number	Terms	Due Date
12/31/2013	BA		Net 30	1/30/2014

Description	Rate	Amount
One each, Reconditioned, GE 3100 IQ cath /angio system with the following: Floor Mounted L-Arm with Offset C-Arm Gantry, Performix 160A Water Cooled X-Ray Tube (DOM 2005), 31 x 31cm Flat Panel Digital Detector with 30, 20, 16, 12 cm Field of View, Standard Innova 3100 User Interface Package, DL Digital Imaging Subsystem with DICOM, Omega V Patient Table with Extender, 18" Monitors (2) with Ceiling Mounted Suspension capable of holding four monitors, installed cardiac and vascular software and all manuals. Installation into customer's trailer is included.	120,000.00	120,000.00T
Installation of system into customer's trailer Mecklenburg County / Charlotte, NC - Sales Tax	30,000.00 7.25%	30,000.00 8,700.00

Phone #	Fax #	Web Site	Total
800-710-9996	919-329-2617	www.transtateonline.com	\$158,700.00

Please note a 25% Restocking Fee will be charged for all returned parts. All accounts 30 days past due will be subject to a 1.5% monthly service fee on the unpaid balance.	Payments/Credits	-\$150,000.00
	Balance Due	\$8,700.00

Transtate Equipment Company, Inc.

PO Box 480005
Charlotte, NC 28269

Credit Memo

Date	Credit #
12/31/2013	2009986

Customer
DLP Cardiac Partners Accounts Payable 3700 Arco Corporate Drive, Suite 450 Charlotte, NC 28273

			Original Invoice #
			2009985
Description	Qty	Rate	Amount
Trade-in credit for Siemens AXIOM Artis dFC 30 x 40 Detector cath /angio system	-1	150,000.00	-150,000.00
		Subtotal	-\$150,000.00
Phone #	Fax #	Web Site	Sales Tax (7.25%) \$0.00
800-710-9996	919-329-2617	www.transtateonline.com	Total -\$150,000.00
			Balance Credit \$0.00

EXHIBIT 2

North Carolina Division of Motor Vehicles

- Duplicate Certificate of Title and Assignment by Registered Owner
- Application for Duplicate Certificate of Title and/or Removal of Lien

Title No. 771446030445122

VEHICLE DESCRIPTION

Year 2002 Make Land Body Style TL Series Model _____
 Vehicle Identification Number 1LH1A2UH721012291 Fuel _____

Name of Registered Owner(s) MedCath Inc.
FIRST NAME MIDDLE NAME LAST NAME
3700 Arco Corporate Drive, Suite 450 Charlotte NC 28273 Iredell
STREET OR R.F.D. CITY STATE ZIP CODE COUNTY

Mailing Address _____ (IF DIFFERENT FROM ABOVE)

LIEN RECORD AS SHOWN ON ORIGINAL TITLE

First Lien	DATE	LIENHOLDER	ADDRESS
Second Lien	DATE	LIENHOLDER	ADDRESS
Third Lien	DATE	LIENHOLDER	ADDRESS

DISCLOSURE SECTION

In 1997, the North Carolina Legislature passed a bill which allows citizens to protect their personal information contained in the records of the Division of Motor Vehicles. Failure to check the block below will allow the Division of Motor Vehicles to release your name and address for marketing and solicitation after January 1, 2000.

- I (We) would like the personal information contained in this application not to be released.

*CHECK APPLICABLE BLOCK

- Application for Duplicate Certificate of Title as Recorded
- Application for Duplicate Certificate of Title and Removal of Lien

If original title was issued subject to a lien and it has been satisfied, lienholder must certify to that effect.
 I/we, the registered owner(s) of the above described vehicle, hereby make application for a duplicate certificate of title and certify that the original has been: (Check applicable block) Lost Never Received

I understand that upon issuance of the duplicate, the original title becomes void and that I am required to return the original title to the Division of Motor Vehicles immediately should it be found.

Current Odometer Reading _____
 Signature(s) of registered owner(s) Debbie Collins for Medcath
 Date 9 March 2012 County Mecklenburg State NC

I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she voluntarily signed the foregoing document for the purpose stated therein and in the capacity indicated: Debbie Collins (name(s) of principal(s)).

Notary Signature: Tanaka C Hunter Notary Printed or Typed Name: Tanaka C Hunter
 My Commission Expires: September 25, 2016

AFFIDAVIT OF FIRST LIENHOLDER

I/we, support the application for a duplicate certificate of title covering the above described vehicle and certify that the original title was:
 (CHECK APPLICABLE BLOCK) Title lost while in my possession; lien has been satisfied
 Lost while in my possession Never Received Surrendered to _____ upon payment of lien in full.

Lienholder's signature by: _____
 Date _____ County _____ State _____

I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she voluntarily signed the foregoing document for the purpose stated therein and in the capacity indicated: _____ (name(s) of principal(s)).

Notary Signature: _____ Notary Printed or Typed Name: _____
 My Commission Expires: _____

(SEAL)

NOTICE: There is a 15-day mandatory waiting period after an application for duplicate title is received by the Division of Motor Vehicles before a certificate of title can be issued.
 *The duplicate title will be issued subject to such liens as were recorded on the last title and mailed to the first lienholder of record, unless lien release is submitted.
 The lienholder may apply for a duplicate title, without the signature(s) of the registered owner(s), if the original title was lost while in the lienholder's possession.
 When a title, mailed to a lienholder by the Division of Motor Vehicles, is not received, affidavits by the registered owner(s) and lienholder(s) are required in order to obtain a duplicate title.

Federal and State law requires that you state the mileage in connection with the transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

A ASSIGNMENT OF TITLE BY REGISTERED OWNER

The undersigned hereby certifies that the vehicle described on the reverse side of this certificate of title has been transferred to the following printed name and address:

Name: DLP Cardiac Partners
Address: 3700 Arco Corporate Drive, Suite 450, Charlotte NC 28273

"I, seller(s) certify to the best of my knowledge that the odometer reading is the actual mileage of the vehicle unless one of the following statements is checked."

ODOMETER READING (No tenths) 1. The mileage stated is in excess of its mechanical limits. 2. The odometer reading is not the actual mileage. **WARNING — ODOMETER DISCREPANCY**

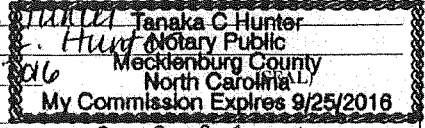
To my knowledge the vehicle described herein:
Yes No Has been involved in a collision or other occurrence to the extent that the cost to repair exceeds 25% of fair market value.
Yes No Has been a flood vehicle.
Yes No Has been a reconstructed or a salvage vehicle.

Date vehicle delivered to purchaser 5/1/2011

Seller(s) Signature Debbie Collins
Seller(s) Hand Printed Name Debbie Collins for medCath
Date 9 March 2012 County Mecklenburg State NC

I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she voluntarily signed the foregoing document for the purpose stated therein and in the capacity indicated:
Debbie Collins / medCath seller(s)/(name(s) of principal(s)).

Notary Public Signature Tanaka C. Hunter
Notary's Printed or Typed Name Tanaka C. Hunter
My Commission expires September 25, 2016



Buyer(s) Signature Erin Gardner
Buyer(s) Hand Printed Name Erin Gardner for DLP Cardiac Partners

B FIRST RE-ASSIGNMENT OF TITLE BY DEALER

The undersigned hereby certifies that the vehicle described in this title has been transferred to the following printed name and address:

Name of Buyer: _____
Address of Buyer: _____

"I, seller(s) certify to the best of my knowledge that the odometer reading is the actual mileage of the vehicle unless one of the following statements is checked."

ODOMETER READING (No tenths) 1. The mileage stated is in excess of its mechanical limits. 2. The odometer reading is not the actual mileage. **WARNING — ODOMETER DISCREPANCY**

To my knowledge the vehicle described herein:
Yes No Has been involved in a collision or other occurrence to the extent that the cost to repair exceeds 25% of fair market value.
Yes No Has been a flood vehicle.
Yes No Has been a reconstructed or a salvage vehicle.

Date vehicle delivered to purchaser _____

Dealer Name _____ Dealer# _____
Dealer(s) Signature _____
Dealer(s) Hand Printed Name _____
Date _____ County _____ State _____

I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she voluntarily signed the foregoing document for the purpose stated therein and in the capacity indicated:
_____ seller(s)/(name(s) of principal(s)).

Notary Public Signature _____
Notary's Printed or Typed Name _____
My Commission expires _____ (SEAL)
Buyer(s) Signature _____
Buyer(s) Hand Printed Name _____

C PURCHASER'S APPLICATION FOR NEW CERTIFICATE OF TITLE

The undersigned purchaser of the vehicle described on the face of this certificate, hereby makes application for a new certificate of title and certifies that said vehicle is subject to the following named liens and none other and that the information contained herein is true and accurate to my best knowledge and belief.

OWNER(S)
Owner 1 DL# _____ Full Legal name of Owner (First, Middle, Last, Suffix) or Company _____
Owner 2 DL# _____ Full Legal name of Owner (First, Middle, Last, Suffix) or Company _____
Residence Address _____
City _____ State _____ Zip Code _____ Tax County _____
Mail Address (if different from above) _____

FIRST LIEN	SECOND LIEN
Date of Lien _____	Date of Lien _____
Account # _____	Account # _____
Lienholder ID _____	Lienholder ID _____
Lienholder Name _____	Lienholder Name _____
Address _____	Address _____
City _____ State _____ Zip Code _____	City _____ State _____ Zip Code _____

I certify for the motor vehicle described herein that I have financial responsibility as required by law.
Insurance Company _____ Policy Number _____
Authorized in NC _____
Signature of Owner(s) _____
Date _____ County _____ State _____

Odometer Reading _____
Plate to be Transferred _____

I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she voluntarily signed the foregoing document for the purpose stated therein and in the capacity indicated:
Notary Public Signature _____
Notary's Printed or Typed Name _____ (SEAL)
My Commission expires _____

NOTE: RETAIL PURCHASER MUST APPLY FOR NEW TITLE WITHIN 28 DAYS AFTER PURCHASE OR PAY STATUTORY PENALTY. ALTERATION OR ERASURES WILL VOID THIS TITLE.

EXHIBIT 3



GE Medical Systems

General Electric Company
P.O. Box 414, Milwaukee,
WI, 53202-0414
gemedical.com

QUOTATION

Reedsburg Area Medical Center
2000 North Dewey Avenue
Reedsburg, WI 53959
Attention: Stan Sukup

Date: June 15, 2004

Quotation Number: 231901A

QTY	CATALOG	DESCRIPTION	PRICE
		Innova 3100 Cardiovascular Imaging System	
		<i>Base Systems</i>	
1	S187312C	Innova 3100 All-Digital Cardiovascular Imaging System	
		Innova LC Positioner	
		<ul style="list-style-type: none"> o Floor Mounted L-Arm with Offset C-Arm Gantry o Patented 3-axis Isocentric Design o Vessel Profiling Capability o Anatomical and Mechanical Movement for Easy Gantry Positioning 	
		Innova Digital Flat Panel Image Chain	
		<ul style="list-style-type: none"> o 31 cm Revolution Digital Flat Panel Imaging System o Completely Digital Imaging Chain o Amorphous Silicon Photodiode Array o Cesium Iodine Scintillator o 31 cm x 31 cm Active Area o 30, 20, 16, and 12 cm Fields of View (measurements are length per side) 	
		Innova J Type SP 100 kW Multipulse Power Unit	
		<ul style="list-style-type: none"> o Automated Image Acquisition Provides Optimal Control of Image Quality at the Lowest Dose o Insite Remote Diagnostics during warranty and under GE Service Contract o Grid Pulsed Fluoroscopy 	
		Performix 160A X-ray Tube:	
		<ul style="list-style-type: none"> o 1.0, 0.6 and 0.3 mm (Biased) Effective Focal Spots o Grid Pulsed Fluoroscopy o 3.7 MHU Anode Heat Storage Capacity o 3200 Watt Continuous Casing Heat Dissipation Rate o Continuous Water Cooling with External Chiller 	



GE Medical Systems

General Electric Company
P.O. Box 414, Milwaukee,
WI, 53202-0414
gemedical.com

QUOTATION

Reedsburg Area Medical Center
2000 North Dewey Avenue
Reedsburg, WI 53959
Attention: Stan Sukup

Date: June 15, 2004

Quotation Number: 231901A

QTY	CATALOG	DESCRIPTION	PRICE
		Innova Angiographic Collimator	
		o Automated Spectral Filters - .1, .2, and .3 mm Thick	
		o Three Independent Motorized Contour Filter Plates Including a Central Leg Filter	
		o Functions Controlled From Tableside	
		Standard Innova 3100 User Interface Package	
		o 43 cm (18 Inch) Color LCD Flat Monitor with Keyboard and Mouse - Integrated Generator, System, and DL Digital Controls on Monitor	
		o System Keypad and Status Bar	
		o Tableside TSSC with Contour Filter Controls, Collimation, 72 User Stored Gantry Positions, and Landscaped Roadmapping at Tableside	
		o Tableside Smartbox Control	
		o Auxillary Upright Table Panning Handle	
		o Dual Footswitch with Table Unlock	
		o InfraRed Remote Control for Tableside Review	
		Innova DL Digital Imaging Subsystem	
		o Conventional Angiographic Acquisition at .5 to 7.5 Frames per Second	
		o Dynamic Cine Acquisition at 15 and 30 Frames per Second	
		o Pulsed Fluoroscopy at 30 or 15 fps	
		o On-the-fly Field of View Adjustment with Four Magnification Selections (30 cm, 20 cm, 16 cm, and 12 cm)	
		o Integrated X-ray Dose Tracking with In-room Display of Cumulative Dose and Dose Area Product	
		o Dose Information Stored on the Exam Browser	
		o Image Storage of 36,000 1024 x 1024 Images	



GE Medical Systems

General Electric Company
P.O. Box 414, Milwaukee,
WI, 53202-0414
gemedical.com

QUOTATION

Reedsburg Area Medical Center
2000 North Dewey Avenue
Reedsburg, WI 53959
Attention: Stan Sukup

Date: June 15, 2004

Quotation Number: 231901A

QTY	CATALOG	DESCRIPTION	PRICE
		<ul style="list-style-type: none"> o DICOM Image Output on 100 mbit Ethernet with Background Auto-send o Images may be Sent at Either 1024 x 1024 Acquisition Resolution or in a Standard 512 x 512 DICOM Format in Uncompressed o Automatic Background Transfer of Images to Either the AW Workstation or a Cardiac Review Station Depending on the Image Content o Automatic Injection Capability for Contrast Media Injector Initiation o User Defined Acquisition Protocols Via Procedure Edit 	
		Image Display	
		<ul style="list-style-type: none"> o Control Room Display <ul style="list-style-type: none"> - Contains 1 x 43 cm (18 Inch) LCD Flat Panel Monochrome Display Monitors for the Live Image Display - Clear Vu Arm Support - Armboard HB 1 Horizontal with replacement PAD - Velcro Quick Straps - 7.6 x 9.14 cm 	
		Broadband capability for Remote Access by GE InSite Remote Diagnostics and Service System (Note: Hospital must provide compatible broadband communications in the appropriate part of the room).	
		Warranty: Full One Year Warranty on System and Revolution Detector. Three Year Non-prorated Warranty on the X-Ray Tube as Detailed in Warranty Documentation.	
1	E4502JE	Innova 4100 Main Power Disconnect Panel Not CE marked - USA use.	
1	S18101SL	Selection of ASM and Separation	
1	S18101SN	Selection of Template	
1	S18111HW	Selection of HV Cable - 100 Foot	
1	S18111LA	Selection of Cable Set - Group 1	
1	S18111LB	Selection of Cable Set - Group 2	
1	S18111SC	Selection of Inboard Monitor Bridge:	



GE Medical Systems

General Electric Company
P.O. Box 414, Milwaukee,
WI, 53202-0414
gemedical.com

QUOTATION

Reedsburg Area Medical Center
2000 North Dewey Avenue
Reedsburg, WI 53959
Attention: Stan Sukup

Date: June 15, 2004

Quotation Number: 231901A

QTY	CATALOG	DESCRIPTION	PRICE
		7' 9" or 9' 6".	
1	S18111SF	Selection of Long or Short Sleeve	
1	S18131SD	Selection of Length for Inboard Rails	
1	S18741PN	Innova 4100 Pre-Installation Kit	
		Table and Table Options	
1	S18061FL	Omega V Angio Table	
		The Omega V Angiographic Table is a Motorized, Full Featured Vascular Table that Allows Easy Patient Positioning	
		- Mechanical Float for Complete Flexibility in Patient Positioning	
		- 131 Inches Long; 18 Inches Wide; 67 Inches Longitudinal Travel for Full Coverage of a Six Foot Six Inch Patient	
		- Power Assist for Easy Longitudinal Movement of Heavy Patients	
		- Motorized Longitudinal Travel for Use with Remote Bolus Chase	
		- Motorized Variable Height From 30.5 Inches to 42.5 Inches Above Floor	
		- Carbon Fiber Tabletop Provides Maximum Rigidity with Low Absorption and Scatter	
		- +/-180 Degree Rotation Allows Fingertip to Fingertip Imaging without Moving the Patient on the Tabletop and Provides Easy Patient Access for Transfer or Emergency Situations	
		- 450 Pound Patient Weight Rating for Mask to Contrast Image Repositioning Accuracy with Tabletop Fully Extended	
		- Includes GE Table Panning Device, a Table Mounted Vertical Grip for Faster and Easier Table Lock Release and Panning	
1	E6420BA	Armboard with Horizontal Rotation, HB-1, for L/U-A (Omega) Tables. Can be used for Right or Left Arm..H	
2	E7058A	GE Anti-Fatigue Floor Mat. Reduces Body Stress and Fatigue for Cardiology, Angiography, and R&F. 36 Inches x 60 Inches x 0.5 Inches Thick.	
1	E3051AA	Dual Lock Double Pivot Under Table Shield	
1	E3051AH	AADCO Center Mount Radiation Barrier with Contoured Cutout	
1	S18061AC	Omega Table Extender	
		- Extender to widen the table top head end for patient comfort	



GE Medical Systems

General Electric Company
P.O. Box 414, Milwaukee,
WI, 53202-0414
gemedical.com

QUOTATION

Reedsburg Area Medical Center
2000 North Dewey Avenue
Reedsburg, WI 53959
Attention: Stan Sukup

Date: June 15, 2004

Quotation Number: 231901A

QTY	CATALOG	DESCRIPTION	PRICE
1	S18061F	Single Plane Footswitch Covers <i>Monitors</i>	
2	P0000KJ	18 Inch Monochrome Flat (LCD) Monitor All Components Required for Viewing of High Quality Images. The Kit Includes: o 18 Inch Monochrome Monitor o All Required Cabling	
1	S18391BC	Three LCD Monitor Suspension All Components Required for In-room Support of Two 18 Inch LCD Monitors and mounting hardware for a third monitor. Display. o Three Monitor Boom Suspension o Articulating Arm Allows Real-time Variable Height Adjustment o Articulating Arm Allows Rotation/Pivot for Optimal Clearance o Pre-cabled for Three Monitors and the Digital System Remote Receiver <i>Options and Accessories</i>	
1	M80501VC	Advantage Workstation 4.2 without Volume Viewer The Advantage Workstation 4.2 is the platform with exceptional stability, quality and flexibility to deliver multi-modality image management, review, comparison and processing with simplicity and power. Powerful software is optimized for state-of-the-art technology to provide modularity and leading edge performance. The AW 4.2 software includes: o Advanced X-ray Analysis: designed to accommodate routine and special procedures, this provides tools specifically for the review of DICOM X-ray images. o 2D image viewer that displays RT, CT, MR, CR X-Ray (Angio and R&F), Digital X-Ray (DX), MG, NM, PET, U/S, Secondary Capture, Secondary Capture Color DICOM Image Objects o Filmer: the multimedia export tool that creates standard or free-format electronic films in DICOM SR that can be saved,	



GE Medical Systems

General Electric Company
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gemedical.com

QUOTATION

Reedsburg Area Medical Center
2000 North Dewey Avenue
Reedsburg, WI 53959
Attention: Stan Sukup

Date: June 15, 2004

Quotation Number: 231901A

QTY	CATALOG	DESCRIPTION	PRICE
-----	---------	-------------	-------

networked or printed to a DICOM, DICOM color or a supported postscript printer
Electronic films can also be exported out of the DICOM environment in a variety of multimedia formats (HTML, PDF, JPEG, PNG, MPEG, AVI, QuickTimey VR).

This Package contains:

- o AW4.2 operating platform, Patient List, database, and DICOM networking
- o 2D Viewer
- o Filmer
- o Data Export
- o Advanced X-ray Analysis
- o Two 18" flat panel monitors
- o HP Xw8000 Workstation:
 - Dual Intely Xeon Processor 2 x 3.06GHz CPU clock speed, 512KB cache per CPU
 - 4GB RAM
 - 2 x 73 GB: Ultra320 SCSI 15,000rpm hard disks (120 GB can be used for image storage)
 - Internal CD-ROM burner (40x read/write) for DICOM media interchange and writing of DataExport electronic films
 - 10/100/1000 base-T network interface
 - US PS2 and mechanical 3-button mouse
 - 3

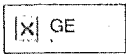
inch floppy drive for service use and preset archive capability

Software

1 S18021CA

Cardiovascular Analysis Package for AW 4.2
The Cardiovascular Analysis Package includes both the Stenosis Analysis Package and the Left Ventricle Analysis Package.
The Stenosis Analysis Package is an application designed to estimate vessel dimensions and relevant parameters of the arterial Stenosis morphology in X-Ray angiography.
The system is capable of automatic detection of vessel edges and display of stenosis severity.
The Left Ventricle Analysis Package is an expert reporting tool designed to estimate wall motion dynamics of the left ventricle, and to perform Global Ejection Fraction analysis in X-Ray angiography. The system is capable providing Wall Motion and Global Ejection Fraction measurements. Wall Motion is built on the centerline method.
GEF analysis is calculated using both Simpson's rule method and the Dodge-Sandler area-length method.

EXHIBIT 4



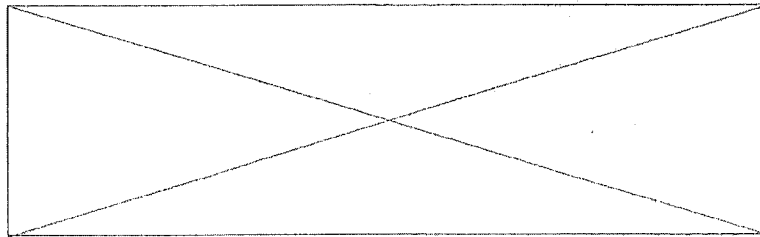
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- [C-Arm](#)
- [Innova 4100^{IQ}](#)
- [Innova 3100](#)
- [Innova IVUS](#)

Innova 3100

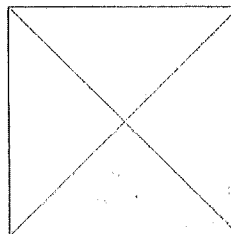


All-Digital Cardiovascular and Interventional Imaging

[Customer Testimonial \(PDF\)](#)

[Case Study \(PDF\)](#)

Innova. Pure innovation. Proven performance.



How do you inject greater confidence into your practice?

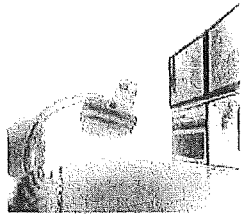
Operate with the world's most tried and trusted all-digital cardiovascular and interventional imaging systems.

The Innova® line of systems is built on GE's industry-leading Revolution™ detector technology for unmatched image quality, and the only demonstrated dose savings.

That's why you'll find Innova in more labs than all other systems combined. More than 1100 installations strong and counting, Innova helps more physicians clearly visualize fine vessels. Precisely place more stents. Successfully perform more lifesaving procedures than any other digital cardiovascular imaging system.

With Innova, you conduct every study with a confidence proven in practice. And the reassurance that every detail is clearly in sight.

Innova 3100



**Exceptional angio. Superb cardiac.
One remarkable system.**

Only the Innova 3100 lets you perform exams from cardiac to angio. On one system. In one room. With no compromises.

An ideal 31 centimeters square, it's perfectly designed for a wide range of cardiovascular and interventional imaging. With a field of view well suited for a variety of vascular and interventional procedures. The agility for steep angulations for angiography, cardiology, neurology and interventional applications. A gantry that rotates 20 degrees in just a second. And a collision-avoidance system to speed every study.

The Innova 3100 is designed to maximize your convenience along with your confidence. With automated simplicity and ease of use that let you focus on your patients and procedures, not the system itself.

Using it, you can offer a broader range of clinical applications. Maintain exceptional image quality in every exam. And successfully treat a diversity of patients and cardiovascular conditions.



**Is Innova 3100 an angio system that delivers great cardiac?
Or a cardiac system that does superb angio?
Absolutely**

The Innova 3100's detector provides a 30 cm field of view for anatomical coverage and a compact design to enable easy positioning for general angiography, cardiac and neurological procedures.

A 31-cm-square Revolution detector makes the Innova 3100 your top choice for performing both cardiovascular and interventional procedures in one room.



The natural evolution of a Revolution

Upholding an image as remarkable as Innova's starts with GE's Revolution flat panel detector – the heart of the Innova family.

The Revolution detector is built to GE's Six Sigma-based quality standards, under our full manufacturing control for unmatched quality and reliability. And it's backed by 15 years of GE research and more than 160 patents.

Its exclusive design maximizes image quality, dose efficiency and clinical utility through:

- Industry-leading Detective Quantum Efficiency, or DQE – the key clinical measurement of image quality and dose efficiency.
- Up to ten times the dynamic range of image-intensifier-based systems.
 - Artifact-free imaging edge-to-edge.
 - No geometric distortion or veiling glare.
- The technology to support advanced applications.

The result: Exceptional visualization of the largest patients and the smallest devices.

Fact is, the Revolution alone has more clinical applications than all other flat panel detectors combined. So it readily handles any diagnostic or interventional procedure on your schedule.

So many details. So little dose.

The Revolution detector shows you the finest details in every procedure you perform. Accurately size vessels and place stents. Easily measure your success in opening arteries. Obtain sharp images of large patients. And be more certain of your diagnostic decisions.

What's more, the Revolution does it all with proven dose efficiency. In study after published study, Innova clearly demonstrated the ability to reduce dose as much as 50% compared to image-intensifier systems.

Innovation beyond imaging

Pinpoint a diagnosis on the first exam – and then treat that condition during the same study. Share clinical data and information effortlessly across your enterprise. Sharpen your clinical efficiency while honing your diagnostic accuracy. Raise your level of patient care to make your hospital a first choice for treatment.

At GE, we're just as committed to fighting heart and vascular disease as you are. That's why we've made sure solutions flow easily throughout your interventional lab.

Our advanced patient monitoring and information technologies, all seamlessly integrated, help you work faster and better. With less invasive diagnostic and treatment options, you can readily address the critical issues in healthcare today. And advanced GE technologies and services let you improve your department's performance while bringing better care to your patients – without missing a beat.

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EXHIBIT 5

EQUIPMENT COMPARISON

	EXISTING EQUIPMENT	REPLACEMENT EQUIPMENT
Type of Equipment (List Each Component)	cardiac cath lab	cardiac cath lab
Manufacturer of Equipment	GE	GE
Tesla Rating for MRIs	N/A	N/A
Model Number	Advantx	Inova
Serial Number	412232C1	96-0468
Provider's Method of Identifying Equipment	N/A	N/A
Specify if Mobile or Fixed	Mobile	Mobile
Mobile Trailer Serial Number/VIN #	1LH142UH721012291	1LH142UH131012885
Mobile Tractor Serial Number/VIN #	Outsourced	Outsourced
Date of Acquisition of Each Component	2/17/2003	12/18/2013
Does Provider Hold Title to Equipment or Have a Capital Lease?	Holds Title	Holds Title
Specify if Equipment Was/Is New or Used When Acquired	New	Used
Total Capital Cost of Project (Including Construction, etc.) *Use attached form*	N/A	N/A
Total Cost of Equipment	783,098	158,700
Fair Market Value of Equipment	783,098	5,000
Net Purchase Price of Equipment	783,098	N/A
Location Where Operated	See attached mobile route list	See attached mobile route list
Number days in Use/To be Used in N.C. Per Year	250	250
Percent Change in patient Charges (by Procedure)	0%	0%
Percent of Change in Per Procedure Operating Expenses (by Procedure)	0%	0%
Type of Procedures Currently Performed on Existing equipment	N/A	N/A
Type of Pricedures New Equipment id Capable of Performing	cardiac catheterizations	cardiac catheterizations

Exhibit A

Novant Health Thomasville Medical Center

Thomasville, NC