

Table 6C: Operating Room Need Determination*

Service Area	Operating Room Need Determination	Certificate of Need Application Deadline**	Certificate of Need Beginning Review Date
Davidson	2	To be determined	To be determined
Henderson	3	To be determined	To be determined
Mecklenburg	4	To be determined	To be determined
Pitt/Greene/Hyde/Tyrrell	5	To be determined	To be determined
It is determined that there is no need anywhere else in the state and no other reviews are scheduled.			

* Any person can apply for a CON to meet the need, not just the health service facility or facilities that generated the need.

** Application deadlines are absolute, pursuant to 10A NCAC 14C.0202(2). The filing deadline is 5:00 p.m. on the application deadline date.