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DEPARTMENT *of* ANESTHESIOLOGY

July 31, 2025

State Health Coordinating Council (SHCC)  
North Carolina Division of Health Service Regulation  
Healthcare Planning and Certificate of Need Section  
2704 Mail Service Center  
Raleigh, NC 27699-2704

**RE: UNC Hospitals Petition for an Adjusted Need Determination in Orange County**

Dear Members of the SHCC,

I am writing to express my strong support for UNC Hospitals' petition to include an adjusted need determination in the *2026 State Medical Facilities Plan* for one additional heart-lung bypass machine in Orange County, designated for an academic medical center. As a physician practicing at UNC Medical Center, I have witnessed firsthand the operational challenges that arise from the current geographic separation of our cardiac services and believe there is a clear need for this additional equipment to maintain our high standards of patient safety and quality care.

As stated in the petition, transcatheter aortic valve replacement (TAVR) and other structural heart interventions are performed in cardiac catheterization laboratories located within the main hospital building, while open-heart surgery procedures are performed in the new surgical tower. While TAVR procedures are less invasive than traditional open-heart surgery, they still carry the potential for adverse events and unforeseen complications that could necessitate rapid conversion to extracorporeal support. To protect patients from these risks, UNC Medical Center safety protocols require heart-lung bypass equipment to be available on standby in case of an emergency. With cardiac procedure volumes growing, there are frequently times when all adult heart-lung bypass machines are in standby or active use, leaving no backup for emergencies. Even when a machine is available, it takes considerable time to manually relocate the equipment from one building to another; moreover, this process diverts staff away from patient activities and creates delays that could potentially impact health outcomes.

The acquisition of an additional adult heart-lung bypass machine would strengthen our ability to provide safe, high-quality cardiac care by eliminating the need for equipment transport between locations and ensuring on-site backup support for lifesaving procedures performed in the cardiac catheterization laboratories. This equipment would serve as dedicated emergency coverage while maintaining our capacity for scheduled open-heart surgeries, thereby supporting both our clinical mission and our commitment to patient safety.

I appreciate UNC Hospitals' commitment to its patients as well as its willingness to support the physicians in improving the health of our patients. In an effort to enable me to focus on patient care, this letter may resemble those signed by my colleagues; however, that should not detract from the fact that I fully support UNC Hospitals' proposal.

Sincerely,

A handwritten signature in black ink that reads "Lavinia M. Kolarczyk MD".

Lavinia Kolarczyk, MD, FASA  
Professor of Anesthesiology

Division Chief, Cardiothoracic Anesthesiology