



STATE OF CONNECTICUT
OFFICE OF HEALTH CARE ACCESS

M. JODI RELL
GOVERNOR

CRISTINE A. VOGEL
COMMISSIONER

May 3, 2007

Augusta Mueller
Director, Planning
Bridgeport Hospital
267 Grant Street
P.O. Box 5000
Bridgeport, CT 06610-0120

Re: Certificate of Need, Docket Number 06-30863-CON
Correction of a Technical Error

Dear Ms. Mueller:

This letter is to inform you of a technical error in the final decision issued on April 20, 2007 under Docket Number 06-30863-CON, which shows the "acquisition of a monoplace hyperbaric oxygen therapy chamber." The correct information should be "the addition of a multiplace/12-person hyperbaric oxygen therapy chamber."

This correction of a technical error does not change the final decision in Docket Number 06-30863-CON, which was signed on April 20, 2007. This notification will be retained in OHCA's file under Docket Number 06-30863-CON. If you have any questions regarding this notification, please contact Paolo Fiducia, Associate Health Care Analyst at (860) 418-7001.

Sincerely,

Signed by Kimberly R. Martone on May 3, 2007

Kimberly R. Martone
Certificate of Need Supervisor

KRM:pf