SAINT FRANCIS
Hospital and Medical Center

R. Christopher Hartley
Senior Vice President
Planning and Facility Development

114 Woodland Street
Hartford, Connecticut
06105-1299

860 714-5573
Fax 860 714-8093

September 21, 2007

Cristine A. Vogel, MPH
Commissioner
Office of Health Care Access
410 Capitol Avenue
MS#13HCA
PO Box 34308
Hartford, CT 06134-0308

Dear Commissioner Vogel;

Attached for your review is a letter of intent for the establishment of a fixed PET/ CT Scanner at Saint Francis Hospital and Medical Center. The existing mobile PET/CT machine is not adequate to service all the necessary imaging cases at Saint Francis Hospital and Medical Center.

Please call me with any questions or concerns at 714-5573.

We appreciate your attention in this matter.

Sincerely,

Chris Hartley
Senior Vice President
Planning and Facilities Development

enclosures

State of Connecticut
Office of Health Care Access
Letter of Intent Form
Form 2030

All Applicants involved with the proposal must be listed for identification purposes. A proposal's Letter of Intent (LOI) form must be submitted prior to a Certificate of Need application submission to OHCA by an Applicant, pursuant to Sections 19a-638 and 19a-639 of the Connecticut General Statutes and Section 19a-643-79 of OHCA's Regulations. Please complete and submit Form 2030 to the Commissioner of the Office of Health Care Access, 410 Capitol Avenue, MS# 13HCA, P.O. Box 340308, Hartford, Connecticut 06134-0308.

SECTION I. APPLICANT INFORMATION

If this proposal has more than two Applicants, please attach a separate sheet, supplying the same information for each additional Applicant in the format presented in the following table.

	Applicant One	Applicant Two
Full legal name	**Saint Francis Hospital and Medical Center**	
Doing Business As	**Saint Francis Hospital and Medical Center**	
Name of Parent Corporation	**Saint Francis Hospital and Medical Center**	
Applicant's Mailing Address, if Post Office (PO) Box, include a street mailing address for Certified Mail	**114 Woodland Street Hartford,CT 06105-1299**	
What is the Applicant's Status: P for Profit or NP for Nonprofit	**Non-Profit**	
Does the Applicant have Tax Exempt Status?	**yes**	
Contact Person, including Title/Position: This Individual will be the Applicant's Designee to receive all correspondence in this matter.	**Chris Hartley** **Senior Vice President** **Planning and Facilities Development**	

Contact Person's Mailing Address, if PO Box, include a street mailing address for Certified Mail	**Saint Francis Hospital and Medical Center Planning Office 114 woodland Street Hartford, CT 06105-1299**	
Contact Person's Telephone Number	**860-714-5573 phone**	
Contact Person's Fax Number	**860-714-8093 fax**	
Contact Person's e-mail Address	**Chartley@stfranciscare.org**	

SECTION II. GENERAL APPLICATION INFORMATION

a. Proposal/Project Title:

The establishment of a fixed PET/CT Scanner

b. Type of Proposal, please check all that apply:

☒ Change in Facility (F), Service (S) or Function (Fnc) pursuant to Section 19a-638, C.G.S.:

☐ New (F, S, Fnc) ☒ Replacement ☐ Additional (F, S, Fnc)

☐ Expansion (F, S, Fnc) ☐ Relocation ☐ Service Termination

☐ Bed Addition` ☐ Bed Reduction ☐ Change in Ownership/Control

☒ Capital Expenditure/Cost, pursuant to Section 19a-639, C.G.S.:

☐ Project expenditure/cost cost greater than $ 3,000,000

☒ Equipment Acquisition

☐ New ☒ Replacement ☐ Major Medical (> $3,000,000)

☒ Imaging ☐ Linear Accelerator

☐ Change in ownership or control, pursuant to Section 19a-639 C.G.S., resulting in a capital expenditure over $3,000,000

c. Location of proposal, identifying Street Address, Town and Zip Code:

Saint Francis Hospital and Medical Center 114 Woodland Street Hartford, CT 06105

d. List each town this project is intended to serve: **Please refer to Attachment 1 for a list of towns.**

e. Estimated starting date for the project: **April 2008**

f. Type of project: **22**
(Fill in the appropriate number(s) from page 7 of this Form)

Number of Beds (to be completed if changes are proposed)

Type	Existing Staffed	Existing Licensed	Proposed Increase or (Decrease)	Proposed Total Licensed
N/A	N/A	N/A	N/A	N/A

SECTION III. ESTIMATED CAPITAL EXPENDITURE INFORMATION

a. Estimated Total Project Cost: $5,181,141

b. Please provide the following tentative capital expenditure/costs related to the proposal:

Medical Equipment Purchases	$203,444
Major Medical Equipment Purchases	**$2,620,800**
Non-Medical Equipment Purchases*	$54,068
Land/Building Purchases	$0
Construction/Renovation	$2,082,358
Other (Non-Construction) Specify:_Project Contingency and A& E fees	$220,471
Total Capital Expenditure	**$5,181,141**
Medical Equipment – Fair Market Value of Leases	$0
Major Medical Equipment – Fair Market Value of Leases	$0

Non-Medical Equipment – Fair Market Value of Leases*	$0
Fair Market Value of Space – Capital Leases Only	$0
Total Capital Cost	**$5,181,141**
Total Project Cost	$5,181,141
Capitalized Financing Costs (Informational Purpose Only)	$0

* Provide an itemized list of all non-medical equipment to be purchased and leased.

See Attachment 2.

c. If the proposal has a total capital expenditure/cost of $20,000,000 or more, you may request a Waiver of Public Hearing pursuant to Section 19a-643-45 of OHCA's Regulations? Please check the your preference as follows:

☐ No ☐ Yes

If you checked "Yes" above, please check the appropriate box below:

☐ Energy ☐ Fire Safety Code ☐ Non Substantive

If you checked "Yes" to the Waiver of Public Hearing, please provide the following:

a) Supporting documentation from elected town officials (i.e. letter from Mayor's Office).

Major Medical and/or Imaging Equipment Acquisition:

Equipment Type	Name	Model	Number of Units	Cost per unit
PET/CT Scanner	**Biograph 64**	**Siemens**	**1**	**$2,620,800**

Note: Provide a copy of the vendor contract or quotation for the major medical/imaging equipment. **Please refer to Attachment 3.**

d. Type of financing or funding source (more than one can be checked):

☒ Applicant's Equity ☐ Capital Lease ☐ Conventional Loan

☐ Charitable Contributions ☐ Operating Lease ☐ CHEFA Financing

☐ Funded Depreciation ☐ Grant Funding ☐ Other (specify): _____

SECTION IV. PROJECT DESCRIPTION

Please provide a description of the proposed project, highlighting each of its important aspects, on at least one, but not more than two separate 8.5" X 11" sheets of paper. At a minimum each of the following items need to be addressed, if applicable.

1. List the types of services are currently being provided. If applicable, provide a copy of each Department of Public Health (DPH) license held by the Applicant.

Please refer to Attachment 4 Saint Francis Hospital and Medical Center license.

2. List the types of services are being proposed and what DPH licensure categories will be sought, if applicable.

No new services are being proposed as part of this letter of intent.

3. Identify the current population served and who is the target population to be served.

The existing patient population will be served in this project.

4. Identify any unmet need and describe how this project will fulfill that need.

Please refer to Attachment 5 for a summary.

5. Are there any similar existing service providers in the proposed geographic area?

Please refer to Attachment 5 for a summary.

6. Describe the anticipated effect of this proposal on the health care delivery system in the State of Connecticut.

Please refer to Attachment 5 for a summary.

7. Who will be responsible for providing the service?

Saint Francis Hospital and Medical Center will be providing the service.

8. Who are the current payers of this service and identify any anticipated payer changes when the proposed project becomes operational?

There is no anticipated change in payor mix as a result of this project.

File:g:word:Liz: LOI for fixed PET

AFFIDAVIT

To be completed by each Applicant

Applicant: **Saint Francis Hospital and Medical Center**

Project Title: **The establishment of a fixed PET/CT Scanner**

I, **Christopher Dadlez, Chief Executive Officer of Saint Francis Hospital and Medical Center** being duly sworn, depose and state that the information provided in this CON Letter of Intent (Form 2030) is true and accurate to the best of my knowledge, and that **Saint Francis Hospital and Medical Center** complies with the appropriate and applicable criteria as set forth in the Sections 19a-630, 19a-637, 19a-638, 19a-639, 19a-486 and/or 4-181 of the Connecticut General Statutes.

Signature

Date 9/19/07

RECEIVED
2007 SEP 24 AM 11:41
OFFICE OF POLICY AND
HEALTH CARE ACCESS

Subscribed and sworn to before me on 9/19/07

Martha E. Hartle
Notary Public/Commissioner of Superior Court

MARTHA E. HARTLE
NOTARY PUBLIC
MY COMMISSION EXPIRES MAY 31, 2009

My commission expires: _____

Project Type Listing

Please indicate the number or numbers of types of projects that apply to your request on the line provided on the Letter of Intent Form (Section II, page 2).

Inpatient

1. Cardiac Services
2. Hospice
3. Maternity
4. Med/ Surg.
5. Pediatrics
6. Rehabilitation Services
7. Transplantation Programs
8. Trauma Centers
9. Behavioral Health (Psychiatric and Substance Abuse Services)
10. Other Inpatient

Outpatient

11. Ambulatory Surgery Center
12. Birthing Centers
13. Oncology Services
14. Outpatient Rehabilitation Services
15. Paramedics Services
16. Primary Care Clinics
17. Urgent Care Units
18. Behavioral Health (Psychiatric and Substance Amuse Services)
19. MRI
20. CT Scanner
21. PET Scanner
22. PET/CT Scanner
23. Other Imaging Services
24. Lithotripsy
25. Other Medical Equipment
26. Mobile Services
27. Other Outpatient
28. Central Services Facility
29. Occupational Health

Non-Clinical

30. Facility Development
31. Non-Medical Equipment
32. Land and Building Acquisitions
33. Organizational Structure (Mergers, Acquisitions, Affiliations, and Changes in Ownership)
34. Renovations
35. Other Non-Clinical

ATTACHMENT 1

Saint Francis Hospital and Medical Center Service Area

Primary Service Area	Secondary Service Area
West Hartford	Rocky Hill
Hartford	Wethersfield
East Hartford	Newington
Bloomfield	New Britain
Windsor	Plainville
Windsor Locks	Cromwell
East Granby	Berlin
Granby	Southington
Suffield	Glastonbury
South Windsor	Marlborough
Simsbury	Hebron
Canton	Bristol
Avon	Burlington
Farmington	Harwinton
East Windsor	Thomaston
Ellington	Plymouth
Somers	Wolcott
Stafford/Union	Middletown
Enfield	Meriden
Manchester/Bolton	Middlefield
Andover	Portland
Vernon	East Hampton
Tolland	Colebrook
	Hartland
	New Hartford
	Norfolk
	Barkhamsted
	Torrington
	Winchester/Winsted

ATTACHMENT 2

Non Medical Equipment						
				Q	Unit Cost	Total
Waiting Room Chairs				17	$ 400	$ 6,800
Waiting Room End tables				4	$ 400	$ 1,600
Magazine Rack				1	$ 350	$ 350
Coat Rack				1	$ 200	$ 200
Lumex Recliners				5	$ 1,000	$ 5,000
Stretchers				1	$ 5,000	$ 5,000
Task Chairs				4	$ 400	$ 1,600
Under counter Pedestal				4	$ 400	$ 1,600
40 quart Tash Cans				7	$ 41	$ 287
Bio med waste cans				8	$ 30	$ 240
Paper Towel Holders				6	$ 30	$ 180
Soap Dispensers				6	$ -	$ -
Glove Boxes				8	$ 30	$ 240
Needle Boxes				8	$ -	$ -
Telephones				4	$ 210	$ 840
Printer laser jet				1	$ 500	$ 500
IDX Printer				1	$ 2,000	$ 2,000
PC's , monitors, stands				1	$ 1,000	$ 1,000
TV Flat Screen				1	$ 1,000	$ 1,000
Linen Cart				1		$ -
stand for cpu under the counter				2	$ 100	$ 200
Coat Hooks				5	$ 50	$ 250
Suction Regulator				1	$ 355	$ 355
Flowmeter				1	$ 26	$ 26
Foam dispenser				8	$ -	$ -
Step Stool				1	$ 200	$ 200
Slide Board				1	$ 300	$ 300
IV Pole				1	$ 300	$ 300
Cart on wheels for injections				1	$ 2,500	$ 2,500
		subtotal				$ 32,568
				Q	Unit Cost	Total
Artwork				8	$ 250	$ 2,000
Nurse Call						$ 5,000
Cubicle Curtains						$ 4,000
Signage						$ 1,000
Overhead Page system						$ 2,000
Video/monitor camera system						$ 7,500
		subtotal				$ 21,500
		Grand Total				$ 54,068

ATTACHMENT 3

SAINT FRANCIS *Care*

PURCHASE REQUISITION

No. 211255

P.O. # 7-506021

Date	Dept #	Dept. Name	Phone	Requestor	Date Required
3 / 16 / 07	54750	PET Scan/Radiology	45935	L.Quartararo,Adm.Dir.Radiology	

Fund/Grant No.: _____

CIP No.: 1040

Electrical Safety

Yes	No

Capital Budget No.: _____ **Clinical Engineering** ____ **Electrical Shop** ____ _____ Signature

Business Unit (Circle One): (SFHMC(01)) RHHCT(08) STFDN(06) WDLPA(17) FAMED(18) CLS(19) CLS(20)

Account/Dept. #	Location	Qty/Unit	Mfg Cat #	Description	Price
CIP-1040/54750	SFHMC	1 only		BIOGRAPH 64 TRUE POINT w/TRUE V	
				(See attached Quote #1-60XGWE Revision 7 for Details)	
				NOTE: Purchase Contingent Upon CON Approval.	
				TOTAL	$2,620,800.00

Suggested Vendor:

SIEMENS MEDICAL SOLUTIONS

Att: Robert Brait, Act.Rep.

Dept. Auth. Sign.

Purchasing Use Only:

___ Nonconfirming; Order to be mailed.

___ Confirming to: Bob Brait

Buyer: [signature] Date: 3/28/07

Capital: Yes No	
Budgeted: Yes No	Approved: Yes No
Vice President	Senior Vice President
Senior VP/CFO	President/CEO

White copy - **Purchasing Dept.** *Yellow copy* - **Department copy** *Pink copy* - **Dept. Processing Copy**

1-180-0-1098

SIEMENS

Siemens Medical Solutions USA, Inc.

51 Valley Stream Parkway, Malvern PA 19355

ST FRANCIS HOSPITAL

114 WOODLAND STREET
HARTFORD, CT 06105

PROPOSAL REFERENCE
Proposal: 1-6NOUSP Date: 3/14/2007
Siemens' REPRESENTATIVE
Mark Hatin

LOCAL SALES OFFICE: Boston
Siemens Medical Solutions USA, Inc.
200 Wheeler Rd, 3rd Floor
Burlington, MA 01803
Phone: (781) 203-6000 Fax: (781) 203-6025

ALL INQUIRIES SHOULD BE DIRECTED TO THE LOCAL SALES OFFICE AND SHOULD SPECIFY THE QUOTE # AND REVISION #

Siemens Medical Solutions USA, Inc., is pleased to submit the following quotation for the products and services described herein at the stated prices and terms, subject to your acceptance of the terms and conditions on the face and back hereof, and on any attachment hereto.

Care Bolus is included in this offering.

DELIVERY SUBJECT TO AVAILABILITY
FREIGHT CHARGES AND TAXES, IF ANY, ARE PAYABLE UPON RECEIPT OF INVOICE.
WARRANTY: See specific product line attachment definitions.
THIS QUOTATION IS IN US DOLLARS AND IS VALID FOR 45 DAYS.
TERMS OF PAYMENT: 00% Down, 80% Delivery, 20% Installation
PURCHASING AGREEMENT: Premier Purchasing Partners, LP

Siemens Medical Solutions USA, Inc.

SUBMITTED BY: ROBERT BRAIT (signature)
NAME: ~~Mark Hatin~~ ROBERT BRAIT
TITLE: Siemens' REPRESENTATIVE
DATE: 3/14/2007

CUSTOMER'S ACCEPTANCE:

BY: [signature] (signature)
NAME: M. VIENT
TITLE: PURCHASING MGR
DATE: 3-28-07

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BIOGRAPH 64 w/TRUE V
The Imaging System specified in the following text is to be installed by Siemens Medical Solutions USA, Inc. Please refer to paragraph 12 of the standard terms and conditions.
Acceptance of this quotation includes acceptance of the Software License Agreement.
Warranty is 12 months for parts and labor.
Siemens is pleased to offer the following Biograph 64

This quote is based upon standard delivery terms and conditions (e.g., standard work hours, first floor delivery, etc.), basic rigging, mechanical installation and calibration. Siemens Medical Solutions USA, Inc., Project Management shall perform a site-specific assessment to ascertain any variations that are out of scope and not covered by the standard terms (examples such as, but not limited to: larger crane, nonstandard work hours, removal of existing equipment, etc.). Any noted variations identified by Siemens Project Management shall remain the responsibility of the customer and will be subject to additional fees.

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PROPOSAL REFERENCE
Proposal: 1-6NOUSP Date: 3/14/2007

Quote #	Quote Name
1-6OXGWE	Biograph 64/40
Revision	**Terms of Payment**
7	00% Down, 80% Delivery, 20% Installation

FOB: Destination

Premier Purchasing Partners, LP terms and conditions apply to system quote #1-6OXGWE.

RELEVANT Items for Quote #1-6OXGWE Revision 7 (Included in Contract Total)

Qty	Part #	Description	Extended Net Price

Biograph 64/40 TruePoint

1	10097302	**Biograph 64 TruePoint w/TrueV**	

The Biograph TruePoint PET ?CT Tomograph is a whole-body tomograph designed for the purposes of oncological, neurological and cardiac imaging and diagnosis. With a single noninvasive procedure, the Biograph produces remarkable images, inherently registered, that reveal detailed anatomy and biological processes at the molecular level.

The Biograph TruePoint PET ?CT provides:

- high-resolution, high-count rate, positron emission tomography (PET) imaging of metabolic and physiologic processes.
- high performance spiral computed tomography (CT) applications.
- highest quality metabolic and anatomic image registration and fusion for optimal lesion detection and identification within the body.

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Proposal: 1-6NOUSP Date: 3/14/2007

RELEVANT Items for Quote #1-6OXGWE Revision 7 (Included in Contract Total)

Qty	Part #	Description	Extended Net Price

- highest quality attenuation correction for quantitative PET imaging.
- highest quality scatter correction for PET imaging, TrueC.

Scope of Delivery:

Scanning Unit (Integrated PET ?CT Gantry)

The fully integrated PET ?CT gantry incorporates CT and PET detector assemblies and electronics in an efficient, compact design that reduces data transmission noise and increases system reliability. The large gantry opening, continuous patient port and short tunnel length provide ease of positioning for all patient types and help to minimize patient claustrophobia.

PET System

The PET imaging capability of the Biograph TruePoint PET ?CT Tomograph consists of the multi-LSO-detector ring system with 3D acquisition and reconstruction and 109 image planes with a 21.6 cm axial field of view (TrueV™).

- High spatial slice resolution in trans-axial and axial dimensions.
- Slice spacing (2 mm) optimized for speed and resolution.
- Pico-3D ultra fast electronics for decreased deadtime and high signal-to-noise.
- ACS III acquisition computer system for high countrate capability.
- PRS reconstruction system for fast reconstruction of PET data.
- Three-dimensional display of organs with a large axial view.

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RELEVANT Items for Quote #1-6OXGWE Revision 7 (Included in Contract Total)

Qty	Part #	Description	Extended Net Price

- Excellent volume sensitivity.
- Fast acquisition and reconstruction of 128 x 128 and 168 x 168 matrices.
- Unique block detector technology provides excellent temporal and energy resolution response.
- Simultaneous data acquisition and image reconstruction for high patient throughput.
- Static, whole body, and list mode acquisition capability.
- 847 mm detector ring diameter.
- 70 cm gantry aperture.
- TrueV™ 21.6 cm axial field of view.
- Dual operator controls on gantry for positioning from either side of patient.
- Unique, accurate Patient Handling System.
- TrueC advanced scatter correction technique.

CT System

The CT imaging capability of the Biograph TruePoint PET ?CT Tomograph consists of a 64-slice CT featuring a full range of SPIRAL CT clinical applications with highest performance.

Gantry:

Aperture: 70 cm; power supplied via low-voltage slipring.

Rotational speed of the gantry: 162 rpm with a rotation time of 370 ms.

Scanning system:

Adaptive Array Detector (AAD) system based on UFC™ (ultrafast ceramics) with 26880

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Qty	Part #	Description	Extended Net Price

elements in 40 rows, 1344 channels per slice and up to 4640 projections per 360° rotation.

Up to 64 images per rotation of 0.4 mm isotropic resolution.

STRATON tube high-performance X-ray system:

The STRATON tube provides direct oil cooling of the anode with the ball bearings located outside the vacuum. The direct anode cooling and the small and compact design of the anode plate (120 mm diameter) eliminates the need for heat storage capacity (0 MHU) and enables an unprecedented cooling rate of 5.0 MHU/min. Therfore cooling delays between multiple long range scans are eliminated, even for large patients.

Z-Sharp technology:

The unique STRATON X-ray tube utilizes an electron beam that is accurately and rapidly deflected, creating two precise focal spots alternating 4,640 times per second. This doubles the X-ray projections reaching each detector element. The two overlapping projections result in an oversampling in z-direction, known as Double z-Sampling. The resulting measurements interleave half a detector slice width, doubling the scan information without a corresponding increase in dose. Siemens' proprietary, high-speed Ultra Fast Ceramic (UFC) detector enables a virtually simultaneous readout of two projections for each detector element - 2 x 32 slices for every viewing angle - resulting in a full 64-slice acquisition.

80 kW X-ray generator:

Microprocessor-controlled, low-noise high-frequency generator with integrated, automatic self-testing system for continuous monitoring of operation. Settings: High-voltage range 80,100, 120 and 140 kV; tube current range: 28 to 665 mA, power max. 80 kW, adjustable in fine steps.

Patient Handling System

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RELEVANT Items for Quote #1-6OXGWE Revision 7 (Included in Contract Total)

Qty	Part #	Description	Extended Net Price

The Biograph TruePoint PET ?CT patient handling system (PHS) has a unique reinforced cantilever design that ensures reliable patient support with the highest weight capacity and minimal pallet deflection.

- Reinforced cantilever design for maximum patient support and absolute positioning between PET and CT scan.
- Integrated patient table design for easy patient positioning.
- Low attenuation carbon fiber pallet.
- 48 cm vertical motion range.
- Maximum 190 cm PETCT co-scan range.
- Low attenuation head holder.
- Maximum patient weight of 204 kg (450 lbs.).

Control and evaluation unit:

CT control box with intercom system with user-programmable patient instruction system. Monitor (flat panel display), keyboard and mouse for *syngo* Acquisition Workplace.

Computer system:

The computer system of the Biograph TruePoint PET ?CT consists of four components.

- *syngo* Acquisition Workplace console for the planning and execution of the CT examination, including evaluation and management of the CT images
- Reconstruction computer for the preprocessing and reconstruction of the CT data
- PET acquisition system (ACS III)
- PET data reconstruction system (PRS)

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Qty	Part #	Description	Extended Net Price

The *syngo* Acquisition Workplace console consists of a high-performance Celsius Windows XP based computer with twin Xeon 3.6 GHz processors, 2 GB RAM and a standard storage capacity for 260,000 images. A high resolution 19 inch (48 cm) LCD monitor is provided.

The CT reconstruction computer contains high-performance processors performing the preprocessing and reconstruction of the CT data at 4 images/sec (512x512). Raw data memory is 128 GB. External USB 2.0 devices for quick and easy raw data storage are supported.

The PET acquisition system (ACS III) provides high performance acquisition and sorting of 3D coincidence events. Supports 3D static and 3D whole body acquisition modes. Disk storage of 300 GB for PET raw data is provided.

The PET reconstruction system (PRS) provides fast 3D image reconstruction of the PET raw data. Iterative and backprojection are supported.

CARE Dose 4D:

This software feature provides automatic, real-time x-ray dose management for all scan modes. The minimal x-ray dose level needed to obtain optimal image quality is determined from extensive computer analysis of the Topogram image and also from the data collected during every slice scanned, on a real time basis. This dual stage automatic approach ensures optimal image quality at the lowest possible x-ray dose.

With this method of dose control, the initial or starting tube current for every axial slice position is determined from the Topogram image. Then, during the data acquisition for each axial slice, the x-ray attenuation values are closely monitored and the tube current is adjusted, on a real time basis, to optimize the x-ray dose level for the specific organs and anatomy in the x-ray path.

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RELEVANT Items for Quote #1-6OXGWE Revision 7 (Included in Contract Total)

Qty	Part #	Description	Extended Net Price

Several clinical benefits are achieved with CARE Dose 4D:

- Significant x-ray dose reduction (up to 66 %) possible for all body regions scanned compared with standard sequence or spiral scanning;

- Consistent, optimal image quality with the x-ray dose level unique for every patient and for every anatomical region;

- Thinner axial slices and/or longer scan ranges possible because of reduced tube loading;

Ultra-low dose examinations for pediatric patients.

Package comprising the following software licenses:

Basic software with CD and dongle for the functions patient browser, filming, image review, 3D postprocessing with image fusion.

syngo user software- *syngo* features an intuitive and thus easy to learn user interface developed from prototypes tested in close cooperation with users. *syngo* performs the examination in individual process steps on so-called task cards, such as the patient registration or examination cards. A number of functions and input parameters, as well as the language used, can be selected according to individual requirements.

Patient registration - The system can accept patient data in different ways. These include entering the data from the keyboard or transferring a worklist via the network.

DICOM worklist: Software module for accepting lists of patient data and requirements from a Radiological Information System (RIS) via DICOM Get Worklist functionality. The program enables very efficient working and ensures consistent patient data. In emergency cases, fast registration is possible. Here, the system automatically assigns an emergency number which can later be replaced by the actual patient number. The input profile can be individually defined.

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Qty	Part #	Description	Extended Net Price

Examination card - The scanner is supplied with a large number of predefined CT and fully integrated PET ?CT examination protocols, making examination planning a very fast and efficient procedure.

Viewing card - On the viewing card it is possible to move interactively with the mouse through the image volume of the ongoing examination. The images of different examinations can be displayed in parallel for comparison. A large number of functions are available for evaluation, documentation and archiving.

Filming card - A virtual film sheet shows a 1:1 display of the film sheets to be printed out, thus permitting an effective preview of the filming job and re-windowing the images, as well as providing a large number of evaluation functions. The printout parameters for the ongoing auto-filming running parallel to acquisition or reconstruction are also defined with the filming card.

3D card - The 3D task card contains the User Interface for the operation of the MIP (Maximum Intensity Projection), SSD (Surface Shaded Display), MPR (Multi-planar Reconstruction) three-dimensional post-processing. syngo Image Fusion and image co registration software is provided.

3D VRT - Advanced 3D functionality as an extension to the basic 3D viewer, containing volume rendering technique (VRT) and advanced editing functions.

Workstream – Planning and reconstruction of diagnostic CT coronal, sagittal, oblique and MIP images can take place directly after scanning.

FusedVision 3D - The advanced FusedVision 3D is a volume rendering technique that

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provides visualization of fused anatomical and functional volumes onto an arbitrary oriented plane in full screen mode or together with the 3-orthogonal fused datasets. This unique function allows precise localization of lesions while using either the Clip Plane View or the Slab Plane View displays. The applications displays correlated rotating Maximum Intensity Projection (MIP), and special 3x3 layout to display correlated CT, PET and fused images.

AC Plus - Extended Field of View - option which allows visualization of objects with a CT FOV up to 70 cm., for improved PET attenuation correction.

Networking and Documentation

Connection to a local Ethernet network for communication with network printers, diagnostic and therapy workstations, RIS systems and teleradiology routers.

Freely configurable network stations; unlimited selection of stations

Support of DICOM 3.0 standard (Digital Imaging and Communications in Medicine) for the transfer of information between DICOM-compatible units from different manufacturers. The scope of function is described in detail in the DICOM Conformance Statement and comprises the following standard functions:

- Send/Receive
- Query/Retrieve
- BasicPrint
- Get Worklist (HIS/RIS)
- MPPS
- Storage Commitment
- Viewer CD

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Image data exchange with MR and therapy units as well as workstations and teleradiology routers which support the DICOM 3.0 standard

System Documentation (1 set)

Operator's Manual (hardcopy + cdrom)

1 10097283 Biograph Power Distribution UnitÂ

Provides improved site readiness by utilizing a single 3-phase (380/400/460/480V) input. The Power Distribution Unit (PDU) than provides 480V, 3-phase power for the CT, as well as isolated 230V, 1-phase for the PET gantry. The PDU also includes pre-programmed temperature controller, temperature probes, emergency power-off switches, and shunt-trip breakers. The PDU incorporates a power quality monitor with network connectivity for remote monitoring.

1 10097238 CT Gantry Water/Water Heat Exch

Water-to-water heat exchanger for the dissipation of heat loss generated in the gantry to an environmentally friendly cooling water circulation system. This optimizes system availability independently of the ambient conditions.

1 10097255 Biograph 64/40 Install Kit

Items necessary for installation.

1 10097300 Biogr. TrueV Sources 1st Fill

Calibration sources for the Biograph with TrueV. These sources are to be purchased with a new Biograph with TrueV scanner.

Sources consist of the following:

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2 LS-ART Set-up rod sources

1 CS-27 Low Activity Uniform Phantom

1 10097286 Biogr. TrueV Uni. Phantom Shield

Contains shield for the Biograph TrueV Uniform Phantom.

1 08727468 CT High Speed Rotation (330 ms)

Fastest CT rotation time of 330 milliseconds for unprecedented image quality and highest scan speed. 0.33s gantry rotation speed is the fastest available in the CT industry today. Fast gantry rotation times are the prerequisite for highest temporal resolution and are therefore essential for brilliant, motion free cardiovascular imaging.

1 08729035 MOD syngo Acq.Workplace Sensation

Multifunctional disk storage unit for digital storage and archiving of image and raw data on removable optical disks with a capacity up to 4.1 GB. Both 2.3 GB or respectively 4.1 GB MOD disks can be used

1 08728565 HI-REZ PET Processing

Optimized image processing for maximum reconstructed image resolution for the most demanding clinical and research applications.

Provides 81 image planes across the 162mm axial field-of-view (2.0 mm slice spacing). Supported reconstruction matrix; 128 x 128, 168 x 168, 256 x 256, 336 x 336. Maximum reconstructed image resolution is 4.5mm FWHM at center. Requires HiRez detector

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PET/CT.

1 **10097262** **Biogr. 64/40 PET Gating/Dyn. Option**

Support for PET gated scan acquisition. Up to 24 gates phased. 1 msec time resolution. Bad beat rejection. Support for retrospective histogramming. Also supports PET dynamic scan acquisition in any arbitrary frame durations of 1 second or greater, and with a maximum of 100 frames defined by available disk space. Also supports PET dynamic scan acquisition in any arbitrary frame durations of 1 second or greater, and with a maximum of 100 frames defined by available disk space. Includes cart for optional trigger device(s).The required trigger device (cardiac or respiratory) is not included.

1 **10097246** **Cardiac Trigger System**

ECG trigger system for PET Gating. Provides ECG waveform display and hardcopy strip. Power: 100-240 V, 50/60 Hz

1 **08729217** **Kit_Respiratory_PET for S-B40/64**

The Respiratory Gating option is comprised of hardware and software components that allow for the capture and storage of a signal representing a patient's respiratory cycle during a spiral CT acquisition. With the Respiratory Gating feature, the respiratory data is synchronized with the CT acquisition data so that a user can freely select the point at which images are retrospectively reconstructed based on the corresponding respiration amplitude. With the Respiration Triggering feature, the user prospectively selects a point in the respiratory cycle at which sequence images will be acquired. By this selection and reconstruction process, organ motion artifacts caused by respiration are minimized or eliminated and a better visualization and localization is possible resulting in more accurate assessment of tumor and organ motion, their position, size, and volume during respiration. This application generates 4D CT datasets that can be used for gated

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treatment planning and simulation and for respiratory-triggered radiation therapy.

The Respiratory Gating application is integrated within the CT *syngo* Acquisition Workplace acquisition workstation. Special scan protocols that allow a scan pitch factor as low as 0.1, thereby creating very detailed data sets, are included. With this option, up to eight reconstruction jobs can be automatically executed upon completion of a scan, each using different trigger points of respiration amplitude and/or phase.

Additionally, the user can edit the respiration curve to remove or add data points where gates are inconsistent or where a patient has moved or coughed.

This option includes the following components:

- Special scan protocolas allwing for pitch as low 0.1
- Special triggered-sequence scan protocols
- Special system software that allows the display and editing of respiration signal data
- Special system software that allows retrospective image reconstruction and DICOM storage of multiple CT volumes based on respiratory levels (amplitude) at different points in the respiratory cycle.
- Special system hardware and software that provides for CT triggered acquisitions based on a selected point in a patient's respiration cycle.

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Qty	Part #	Description	Extended Net Price
1	10097245	**Respiratory Trigger System**	

Respiratory trigger system for PET or CT Gating. The respiratory gating and triggering hardware is comprised of: chest/abdominal belt, pressure transducer, sensor port, Wave Deck, respiratory phantom, laptop PC with connecting cables. Power: 100-240 V, 50/60 Hz

1 **08727476** **Biograph syngo Heartview CT**

Scanning technique and program for ECG controlled data acquisition and image reconstruction with SOMATOM. The package comprises: HeartView CT option on the syngo Acquisition Workplace for the ECG-controlled acquisition and reconstruction of artifactfree images of the heart. The ECG signal is supplied by an ECG device integrated in the gantry. The use of the software of this option is restricted to a single system unit.

The option supports prospective ECG-triggered sequence scanning and retrospective ECG-gated spiral scanning to obtain CT images of the heart in defined phased of the cardiac cycle at a minimum rotation time of 0.37 s. With prospective ECG-triggered sequence scanning, quick scans are triggered by ECG signals. A temporal resolution of up to 185 ms can be achieved. Retrospective gating is based on a continuous spiral scan with simultaneous ECG recording. The cardio spiral reconstruction allows volume imaging in selectable phases of the cardiac cycle with a temporal resolution of up to 92 ms by means of specialized image reconstruction algorithms.

With retrospective ECG-gated spiral scans the ECG signal can be edited for improved image quality in the case of severe arrhythmia. A dedicated "Preview" tool enables the planning of the volume reconstruction during an optimal cardiac phase on the basis of axial single slices. With ECG-pulsed control of the tube current a dose reduction of approx. 50% can be achieved with retrospective ECG-gated spiral scans. The special scan protocols "Cardio-Care" and "Cardio-Sharp" offer a special filter technique for cardiac examinations for improved sharpness and a lower dose.

ECG-controlled imaging techniques are the basis for both the quantification of calcified plaques in the coronary arteries (calcium scoring) and 3D reconstructions of the heart and

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coronary arteries in contrast media studies (CT angiography of the heart). Retrospective ECG gating also allows functional imaging of the heart. Moreover, these techniques suppress pulsation or motion artifacts in the lung and in vessels close to the heart (e.g. ascending aorta). The ECG signal is supplied by an ECG device integrated in the gantry.

1 **08078227** **ECG Cable, IEC2**

ECG cable IEC2 (AHA/US color coding)

1 **10097284** **Biograph Advanced Workflow (B64/40)**

The Biograph Advanced Workflow provides enhanced PET/CT workflow as well as a platform for adding additional advanced display/analysis applications.

The *syngo* Biograph MI Workplace is installed in parallel with the main operator console, the *syngo* Acquisition Workplace. The two consoles are connected via a shared patient database link. The operation of the scanner with the shared database dual console solution with the *syngo* Biograph MI Workplace as the second console is optimized for clinical environments with high patient throughput and workflow needs.

The *syngo* Biograph MI Workplace comprises a dual-processor Windows XP based computer with two 3.6 GHz Xeon processors, 2 GB RAM and shared storage with the *syngo* Acquisition Workplace. Included is a high resolution 19 inch (48 cm) LCD monitor. It is connected to the *syngo* Acquisition Workplace through a high performance data link, allowing virtually delay-free access to the examination data. This optimizes workflow with the Biograph. The *syngo* Biograph MI Workplace is equipped with a CD recorder with a capacity of 700 MB. This corresponds to a storage capacity of approx. 1100 images in 512 x 512 uncompressed.

Package comprising the following software licenses: Basic software with CD and dongle for the functions patient browser, filming, image review, 3D postprocessing with image fusion

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and system service.

3D VRT - Advanced 3D functionality as an extension to the basic 3D viewer, containing volume rendering technique (VRT) and advanced editing functions.

FusedVision 3D - the advanced FusedVision 3D is a volume rendering technique that provides visualization of fused anatomical and functional volumes onto an arbitrary oriented plane in full screen mode or together with the 3-orthogonal fused datasets. The unique function allows precise localization of lesions while using either the Clip Plane View or the Slab Plane View displays. The application displays correlated rotating Maximum Intensity Projection (MIP), and special 3x3 layout to display correlated CT, PET and fused images.

Workstream 4D-3D Recon - 4D workflow with direct generation of axial, sagittal, coronal, or double-oblique CT images from standard scanning protocols. Elimination of manual reconstruction steps.

Workstream MI Workplace Recon - provides retro reconstruction of CT raw data from either console.

Fast Review (MSV) - Additional review capability for multimodality fusion and PET. The MultiSeries Viewer provides advanced multi-modality image display, data fusion capabilities, and semi-quantitative PET image analysis using Standard Uptake Value (SUV) region of interest calculations.

The software functionality can be adapted to special clinical requirements with additional optional modality-specific application modules.

1 08416310 Biograph syngo Calcium Scoring

Dedicated application for the quantification of calcifications in CT images. For best results, CT images acquired with HeartView CT by ECG-synchronized imaging should be used. The Calcium Scoring software calculates various scores (Agatston score, volume score and calcium mass) to assess the risk of a cardiac infarct within user-defined regions for up to four coronary arteries. Two licenses for syngo Acquisition and syngo MI Workplace.

Dedicated application for the quantification of calcifications in CT images. For best results, CT images acquired with HeartView CT by ECG-synchronized imaging should be used. The

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Calcium Scoring software calculates various scores (Agatston score, volume score and calcium mass) to assess the risk of a cardiac infarct within user-defined regions for up to four coronary arteries.

The Calcium Scoring application supports volumetric processing of the data and treats individual calcified lesions as 3D objects. For effective visualization the Calcium Scoring application allows axial images to be displayed together with fast, interactive MIPs. On each image the user can mark calcified regions in up to four coronary arteries. The tabular display showing the score of the four arteries is updated automatically.

- Supports all the usual quantification algorithms: Agatston scoring, volumetric scoring and calcium mass quantification. The effect of overlapping slices is compensated. The volume and mass can be determined on the basis of basic volumetric scoring or volumetric scoring with continuous interpolation. The calcium mass is determined in equivalent CaHA units and is calibrated automatically for SOMATOM systems via the scan mode. The threshold for identifying coronary calcifications is configurable.
- Semiautomatic selection of coronary calcifications by "3D picking" functionality, which allows automatic volumetric region growing of connected lesions in successive slices.
- Selection/deselection of regions which contribute to calcium scoring.
- User-defined assignment of lesions to one of the four arteries (LM, LAD, CX, RCA) or to other lesions or structures.
- 3D editing of lesions.
- Image annotation.

  Detailed printout of the scoring table on film or (optional) printing of the report on a postscript printer.
- Documentation of single images on film.
- Storage of single images including the lesions identified by scoring.
- Interface to user-defined reference database.

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- Generation of a configurable report with individual images, incl. annotation, and assignment of the scoring values based on the user-defined reference database.

Prerequisites:

Correct operation of the software option is guaranteed only for image data collected using SOMATOM scanners with HeartView CT Option

1 08078359 Long RTP Flat Pallet

Flat pallet adapter allows imaging for radiation therapy planning.

Includes quick change bracket assembly for easy pallet exchange between standard curved pallet and flat pallet.

1 08728870 Biograph syngo Security Package

Software option for syngo based systems, providing enhanced security features including user management and audit trail functionality.

Software license enabling system to support Enhanced User and System management, including:

- User authentication to prohibit unauthorized access
- Privileges to define user/role based functionality
- Permissions to control data access.

Audit trails to log system and data access.

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1 07568954 Patient Positioning Accessories Kit

The Patient Positioning Accessories Kit includes positioning aids to improve patient comfort.

Included are the following positioning items:

- Improved 1" thick patient table pad
- Arm support system for above head imaging
- Contoured leg rests height 5 inch and 7 inch
- Multi Purpose Strap for arm fixation (12" x 72")

1 08416146 Coronal Supine Head Holder

For coronal slices in the skull with patient in the supine position.

1 08728755 Biograph 64/40 Installation (US)

Mechanical installation of the PET/CT unit including floor preparation, complete system assembly and alignment, system startup, calibration and performance verification to factory specifications. Also includes labor and travel expenses. (Average installation: 19 days)

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Qty	Part #	Description	Extended Net Price
1	08729126	**English Manual Biograph 64/40** Hardcopy of English Operator's Manual for Biograph 64	
		MI LifeNet	
1	10097258	**MI LifeNet** MI LifeNet is a new comprehensive onlineresource forhybrid molecular imaging(1-year license). The MI LifeNet "Basic" package, offered complimentary to all Siemens Molecular Imaging Biograph customers, contains limited content and applications from MI LifeNet "Premium." MI LifeNet is a new comprehensive online resource for hybrid molecular imaging, offered exclusively to Siemens Molecular Imaging customers (1-year license). A complimentary and limited version of MI LifeNet "Premium," the MI LifeNet "Basic" package contains online dose ordering from PETNET, patient scheduling, plus start-up marketing materials. The full suite of content and applications can be obtained by purchasing MI LifeNet "Premium" (see Part # 10 097 259).	
		syngo MultiModality Workplace	

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Qty	Part #	Description	Extended Net Price
1	10150598	**syngo MultiModality Workplace**	

syngo MultiModality Workplace consists of a Windows XP based PC with syngo basic viewing and filming software and network modules. The syngo MultiModality Workplace is already prepared for advanced 3D post-processing regarding hardware performance and graphic card. The software functionality can be extended to suit specific user clinical needs by adding optional cross-modality and modality-specific application modules.

The syngo MultiModality Workplace configured as a DICOM-connected standalone system. The workstation is ideal for providing additional or specialist clinical workplaces, and is particularly suited to multi-modality installations. The base viewing system can be extended by adding a wide range of cross-modality and modality-specific application options.

Scope of delivery:

- PC
- syngo Base User software

PC

High Performance Windows XP based Workstation with 2 Xeon Processors and a minimum RAM capacity of 3 Gbyte and a minimum RAID-0 disk capacity of 147 Gbyte for patient data. The workstation is equipped with an openGL accelerator board to support 3D applications. To exchange medical images on DICOM-compatible DVD-R´s the system is equipped with a DVD-Recording unit.

The syngo MultiModality Workplace can be connected to an existing network via 10/100/1000 Mbit Ethernet.

syngo Base User Software:

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syngo software features an intuitive and thus easy to learn user interface developed from prototypes tested in close cooperation with users.

Standard functions such as filming or image review, and optional clinical application software, are performed in individual processes on dedicated task cards. A number of functions and input parameters, as well as the language used, can be selected according to individual requirements.

Package comprising the following software licenses:

Base software with CD and dongle for the functions patient browser, filming, image review and system services.

Patient Browser:

patient management

DICOM 3 communication with Send, Receive, Query&Retrieve

DICOM Print

reading of CDs

CD-R module for writing DICOM CDs for data exchange. Writing is in background mode.

Filming:

A virtual film sheet shows a 1:1 display of the film sheets to be printed, thus permitting an effective preview of the filming job and re-windowing the images, as well as providing a large number of evaluation functions.

Image Review:

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Image Review supports interactive 2D review, evaluation and documentation functions. Multiple studies from the same patient can be displayed side-by-side for comparison.

Image display:

1024 x 1024 screen matrix, configurable as up to 64 image segments.

CINE Display:

Automatic or interactive dynamic presentation technique for the visualization of time and volume series.

Synchronized viewing of multiple series.

Measurement and annotation:

Text annotation; Distance, angle, circle, ROI and pixel lens, depending on information available from the acquisition system.

Video sequences stored on offline media:

Any user-selectable file, such as cardic, DSA or InSpace AVI video sequences , can be burned to CD to prepare quality presentations and demos of pathologies.

System services:

Microsoft Office XP (except FrontPage) is supported (not provided).

Software for burning user-selectable files to CD ROM is supported.

Network module:

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Qty	Part #	Description	Extended Net Price

For connection to a local Ethernet (10, 100, 1000 baseT) for communication with networked printers, diagnostic and therapy workstations, HIS/ RIS systems and teleradiology routers.

Scope of functions:

Network stations can be configured.

Unlimited selection of stations.

DICOM: industrial standard for the transmission of information between DICOM-compatible units from different manufacturers. The scope of functions is described in detail in the DICOM Conformance Statement and in its standard version includes the Transmission/ Reception, Query/ Retrieve and Basic Print functions.

1 10183803 syngo MM Basic Evaluation

The syngo MM Basic Evaluation package includes the fundamental applications required for hybrid registration and visualization

***syngo* Basic 3D**

Input Control:

3D series list function with consistency check of 3D-series suitable for 3D-processing. Overlapping 3D-series can be merged into a single consistent 3D series.

Dataset Preparation:

Data to be visualised can be confined by clipbox or irregular volume-of-interest function that allows obstructing information to be punched out.

Image Generation:

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Multi Planar Reconstruction (MPR) for interactive move through 3D volumes at arbitrary orientations

Realtime reconstruction of secondary slices in orthogonal, oblique or double-oblique orientations with variable slice thickness (MPR thick, MPR thin) and slice distance. Calculation of curved cuts. Automatic generation of parallel or radial ranges. Frequently used range settings can be stored. Cutlines can be determined in the reference topogram or from a 3D surface reconstruction.

Maximum Intensity Projection (MIP) for angiographic display

Projection of pixels with highest intensity (vascular information) onto an arbitrarily oriented plane for display and diagnosis of e.g. aneurysms, plaques, stenoses, vascular anomalies or vascular origins. Thin MIP function for projection within a slab of the dataset. Automatic generation of radial ranges. The resulting series can be viewed with a three-dimensional impression using the Movie function.

Shaded Surface Display (SSD) for surface display of complex anatomies

3-dimensional display of surfaces from a series of contiguous slices using a variable threshold with fast preview and high image quality mode. Used to display and analyse various anatomies, e.g. from the visceral cranium, pelvis, hips etc. for the purpose of planning surgical interventions. The 3D objects can be tilted and rotated in realtime on the monitor using a virtual trackball. Automatic generation of radial series of SSD displays.

As MPR, MIP, or SSD are different visualisation filters of the same dataset, the user can arbitrarily switch between these modes as well as blow-up the actual display segment. Reconstructed images or ranges can be stored or send to film sheet.

Image Fusion

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CT, MR, NM, or PET images are accepted as input for image fusion. Studies can be done with the same modality or with different modalities

Registration Algorithms:

- Automatic based on Mutual Information or Surface Matching
- easy-to-use visual alignment with 6 degrees of freedom (3x translation, 3x rotation)
- landmark based registration with convenient landmark editor for point-based registration using anatomical landmarks
- storage of transformation matrix after registration for later retrieval with datasets

Visualisation Techniques:

- side by side visualisation of both datasets with correlated pointer and correlated scrolling with dog ears
- 2D alpha-blending in monochrome or pseudo-color with adjustable balance between the two superimposed data sets.

Syngo CT Basic Evaluation

***syngo* Volume CT**

Volume CT is an evaluation function which allows accurate calculation of a volume from a stack of two-dimensional CT images. This can be done by Volume-of-Interest (VOI) definition and by limiting the minimum and maximum density (HU) values for the calculation. Different views of the image data provide fast navigation and easy volume definition. Potential applications are volume measurements of a tumor or of organs such as lung and kidney.

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Thick slice Multi Planar Reformat (MPR), Maximum Intensity Projection (MIP) or Minimum Intensity Projection (MinIP) reformat image data are displayed in coronal, sagittal and transversal orientations.

Up to 5 different color-coded volumes can be defined using interactive outlining of freehand and elliptical Regions-of-Interest, with the possibility to define evaluation (HU) limits inside the VOI. Regions of Interest are interpolated automatically between user-defined ROIs: i.e. the user only has to define the ROI in selected images within the stack. ROI techniques can be combined with automatic 3D volume measurement based on 3D region growing.

Results are displayed in a separate segment and can be saved and filmed

***syngo* Dynamics CT**

Dynamics is an evaluation function which allows you to analyze the absolute or relative enhancement of Hounsfield values within a Region-of-Interest. The enhancement value is computed from a stack of CT images which are obtained at different points in time after contrast agent injection. For dynamic evaluation, usually images from the same cross-section of the body are taken, such as a Multiscan through an unclear process in the liver. The time to the maximum enhancement (Time-to-Peak)and the way a certain tissue or structure absorbs the contrast medium can be very helpful in differential diagnosis of a given process.

The software allows selection of the slice position to be evaluated in multislice studies and the Dynamic evaluation of up to 5 different regions (circular and irregular) in parallel.

Evaluations are provided as constant display of time-density curves which display for each separate ROI the mean Hounsfield value, the time to peak enhancement, and

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the density value at a given time position.

A separate image stack segment is provided for further output images such as Average, Maximum Intensity, Projection, Peak Enhancement and Time-to-Peak images.

Includes Volume Pro Graphics 4GB

1 10183775 Oncology Engine Premium PET.CT

The Oncology Engine Premium PET.CT facilitates lesion detection, staging, treatment, and treatment follow-up by enabling the visualization, volumetric analysis, and registration/fusion of PET.CT studies acquired at two separate time points. In addition, the Oncology Engine Premium PET.CT provides the capability to visualize PET.CT respiratory gated studies and to export volumes of interest (VOIs) as RT structure sets for therapy planning.

Oncologic diagnosis demands a volumetric visualization technique that provides fused anatomical and functional volumes into orthogonal or arbitrary oriented planes using multiple layout views or full screen mode.

The engine enables physicians to efficiently compare patient scans from two different time points (e.g., pre- and post-therapy) by automatically registering and displaying PET.CT images from studies acquired at different times. This advanced diagnostic application assists physicians in making better-informed diagnostic, therapeutic, and follow-up decisions. The application can display both studies on the same screen at the same time, in compare mode or use a single layout mode. While single-mode layout prominently displays one study, the other study is available in the background. Quantitative analysis of a lesion in terms of volume, HU level and average and peak SUV values are done simultaneously by linking the two studies which are loaded, to assess changes in lesion number, activity and size, often for evaluation of therapeutic response. This engine also provides the ability to store VOIs (volumes of

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interest) created as part of the evaluation of PET.CT datasets as DICOM RT Structured Sets for exporting them to radiation therapy planning systems (RTP). These can be used for RT simulation and planning in order to eliminate additional processing requirements and improve planning accuracy. This engine provides the capability to load and visualize PET and CT respiratory acquired gated data sets too. It offers the possibility to visualize one gated PET or CT dataset fused to a non-gated CT or PET dataset or visualize and fuse gated PET with gated CT data in orthogonal orientations. Visualization of cine loops of individual datasets as well as individual frames within each gate is possible along with cine display of fused gated data. The application also incorporates a unique set of easy-to-use reporting tools.

This engine is built upon the ability of volume rendering techniques for both PET and CT image data. It offers independent control of color, opacity and shading of up to 4 tissue classes, as well as predefined VRT settings which can be selected via an image gallery. It also offers the ability to interactively manipulate the levels of fusion ranging from CT only to PET only and various scaled combinations.

As MPR, MIP, SSD or VRT are different visualization modes possible with the same dataset, the user can arbitrarily switch between these modes as well as switch the actual display segment to full-screen mode. All modes can be registered and linked so the image manipulations including interactive slice browsing and image rotation are viewed in synchronization.

The integrated editing package allows segmentation of 3D datasets either with manual contour creation, thresholding, or volume growing operations. Dataset confinement is possible either using a ClipBox or a variable editing slab. Image quality can be improved with morphological operators such as Erosion and Dilatation. Fusion of separately acquired PET and CT studies is also possible with automated fusion algorithms as well as manually, using multiple planes.

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Applications include: syngo TrueD, syngo TrueD RT Structure Creation, syngo TrueD Gating Visualization

1 **10183772** **Cardiology Engine Premium PET.CT**

The Cardiology Engine Premium PET.CT assists in the diagnosis and quantification of coronary artery disease, risk stratification for acute cardiac events, and stent planning. The PET.CT Cardiology Engine Advanced enables fusion of coronary CT angiography and PET studies, quantified perfusion assessment, automated elimination of the chest wall and pulmonary vasculature, automated coronary tree segmentation and fusion, quantification of coronary calcium, and quantified estimation of coronary stenosis, plaque density and left ventricular function.

This engine provides the functionality to automatically fuse a coronary CT angiography dataset and a PET perfusion or PET viability images. The ability of a one-click heart isolation technique, which eliminates the chest wall and pulmonary vasculature, makes this engine fast and easy to use. Also provided is a unique, real-time reorientation capability based on 3D volumetric images of the fused dataset, into standardized axis for efficient interpretation. The flexible volume rendering of the fused datasets adds a 3 dimensional perception to the integrated visualization of coronary anatomy and myocardial function. This engine creates a simple dataset of Short Axis, Vertical Long Axis and Horizontal Long Axis image planes for the *syngo* database or filming.

This engine additionally gives the user the ability to perform automatic segmentation of CT angiography dataset in order to extract the entire coronary tree, automatic orientation into standard cardiac angiography views, and intuitive documentation using the standard AHA 15 segment model to define location of coronary lesions. CTA data can be further reoriented automatically into a curved plane reformat along with the centerline plotting for accurate measurements. Using the CTA dataset, this engine can also provide semiautomatic left ventricular segmentation and cine display of cardiac phases for myocardial evaluation. Further using the CTA data, the system provides Quantitative estimation of Coronary stenosis and estimation of plaque density, orthogonal views (IVUS view), and help in

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performing stent planning. The estimation of LV function including LV ejection fraction and wall thickening can also be obtained from gated CT data for a comprehensive cardiac evaluation.

The engine also provides the functionality of quantification of coronary calcium from ECG gated CT images. It performs semi-automated quantification of coronary calcification and provides an Agatston score and estimation of the mass and volume of calcium in total as well as for individual coronary arteries. Total calcium burden in the coronary vessels is useful for risk stratification of individuals for future acute cardiac events.

Also provided is the Cedars Cardiac PET Suite which comprises a comprehensive set of quantification parameters for the evaluation of gated or non-gated PET myocardial perfusion images. Semiautomatic generation of parameters including ejection fraction, wall thickening and perfusion defect estimation as well as quantification of 82Rb Stress/Rest studies, ensures complete cardiac processing functionality.

Advanced real-time CT viewing and interpretation is also provided with the Advanced Cardiac Engine which enables a complete suite of 3D viewing tools and display techniques for all vascular structures as well as 4D heart kinetic studies. Vascular tools for measurement and display make this engine a must for cutting edge diagnostic CT angiography.

Applications include: syngo CardioFusion, syngo Circulation with Plaque Analysis, syngo Calcium Scoring, InSpace with Advanced Vessel Analysis, Cedars PET Suite

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Qty	Part #	Description	Extended Net Price
1	08717220	ECAT Transfer Tool	

The ECAT Transfer Tool needs to be installed on the ECAT workstation and is used to send ECAT files to an e.soft workstation.

1	10119093	Siemens LCD Color 19 inch #L	

Siemens 19" Flat Screen Color Monitor

The Siemens 19" LCD flat screen display features a very high contrast even under very bright ambient light conditions.

The Gamma curve was precisely adapted to the CIE-/DICOM recommendation and is thus suited especially for gray scale display.

The controlled background lighting ensures stable lighting throughout the entire product life cycle.

LCD flatscreen display

- 19" (48 cm) screen size
- resolution: 1.280 x 1,024 (pixel)
- Maximum brightness (typ.): 280 cd/m2
- Flicker-free and distortion-free image display
- anti-glare screen

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Qty	Part #	Description	Extended Net Price

1 08733458 syngo Keyboard USA English

USA English syngo keyboard

Syngo Keyboard for the selected language. For easy operation of LEONARDO browser, viewer and filming tasks. Special keys for windows, sheets, printing, marking and network communication.

1 10119093 Siemens LCD Color 19 inch #L

Siemens 19" Flat Screen Color Monitor

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Qty	Part #	Description	Extended Net Price

- Maximum brightness (typ.): 280 cd/m2
- Flicker-free and distortion-free image display
- anti-glare screen

1 08733672 syngo Security Package #L

Software option for syngo based LEONARDO, providing enhanced security features including user management and audit trail functionality.

Software license enabling system to support Enhanced User and System management,

including:

- User authentication to prohibit unauthorized access
- Privileges to define user/role based functionality
- Permissions to control data access
- Audit trails to log system and data access.

1 08719424 Emory Cardiac Toolbox #L

The Emory Cardiac Toolbox is a comprehensive collection of processing tools that highly automate clinical cardiology procedures. The Toolbox features a complete CEqual package with databases. In addition cardiac parameters such as Ejection Fraction, Volumes, Myocardial Mass, Wall Thickening and Transient Ischemic Dilatation, are calculated. The program also utilizes a 3-D image fusion technique that superimposes generic coronary arterial trees only 3-D rendered surfaces. An interactive display permits arbitrary three-dimensional rotation of the beating heart for the simultaneous evaluation of wall motion and perfusion.

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Standard functionality also includes a Gated Quality Control Analysis tool to assess gating activity in addition, outputs include DICOM secondary capture and result files to aid in the quick review of previously processed data.

Emory Cardiac Toolbox also contains an integrated set of tools to quantify PET data. A match/mismatch tool for analyzing the relationship between metabolism/function and identifying variants between PET myocardial tracers F-18, FDG and Rb-82.

PET applications supported consist of the following:

- Rest/Stress Rubidium-82 normal databases for myocardial perfusion quantification
- Quantification of global and regional function tools using ECG-gated FDG Perfusion/FDG match/mismatch tools which include percent change between perfusion and perfusion normalized metabolism
- Extent of the resting perfusion defect that shows improvement in the FDG distribution
- Extent of myocardium where the FDG distribution improves compared to the rest perfusion distribution
- Extent of the resting perfusion defect that shows improvement in the FDG distribution as percent of the maximum

Normals database include:

- Dual-isotope rest Tl-201/stress Tc-99m sestamibi
- One-day and two day rest/stress Tc-99m sestamibi
- Enhanced Tl-201 (applicable to stress/redictribution and stress/reinjection protocol)
- One-day stress/rest Tetrofosmin
- PET rest rest Rubidium-82/gated FDG

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- Rest/stress N-13 Ammonia

Supported software for PET and biograph cardiac data.

1 10183183 syngo Scenium PETÂ Â Â Â Â Â

Scenium™ advances neurological evaluation by providing a clinically focused software solution for brain analysis when used with PET and PET/CT imaging. This exceptional application offers powerful tools to radiologists and nuclear medicine physicians assessing patients with neurological disorders and dementias, such as Alzheimer's disease. By combining standardized anatomy and a comprehensive normal database with advanced fusion techniques, Scenium enables automatic correlation of the patient's study with an average brain for quick computation of abnormalities. The fusion engine produces results that are reliable and reproducible between multiple sessions and multiple users.

The superior quantification tools include voxel-by-voxel and regional evaluation of abnormal glucose metabolism and automatic positioning of anatomical regions of interest which are optimized for evaluation of dementia. Scenium also includes additional anatomical brain regions of interest which make the application flexible to evaluate a number of neurological disorders. In addition, several anatomical regions may be selected for quick assessment of a single patient scan or for quantitative comparison to other scans. Color-coded statistical analysis highlighting patterns of hyper-metabolism and hypo-metabolism are created and can easily be incorporated into clinical reports.

Scenium provides unique fusion techniques, automated evaluation steps, and comprehensive quantification tools to meet the needs of emerging PET and PET.CT neurological evaluations.

Features

- Fully integrated with syngo MI Application™ on the syngo MI Application @syngo MultiModality Workplace.

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- Optimized workflow for PET neurological studies
- Clear and quick assessment of hyper- and hypo-metabolic brain regions
- Standard voxel-by-voxel reporting of statistics
- Predefined 3D anatomical brain regions
- Cortical View details entire cortex on a single view
- Advanced evaluation tools
  - Minimum, maximum and mean SUV
  - Standards deviation from normals
  - Multiple color-maps
  - Gallery or single image views
  - One-click image snapshot capabilities.
- Hybrid visualization of anatomy (CT.MR) and physiology (PET)
- Report Generation

Scenium is non-diagnostic software. It is an aid to assessment and quantification of pathologies.

1	**08716933**	**syngo Advanced CT LungCARE**

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Qty	Part #	Description	Extended Net Price
1	10183319	**USA License**	
1	14402891	**syngo CT Workplace #D**	

A dedicated CT processing syngo workplace, designed to optimize data management at the CT scanner.

***syngo* CT Workplace**

The *syngo* CT Workplace is a dedicated CT processing workplace that provides instant access to image and scan data via a shared database with the *syngo* Acquisition Workplace.

The syngo CT workplace comes with the following standard features:

- ***syngo* software platform**
- ***syngo* 3D Basic**
  - Basic 3D Viewer platform for display of 3D series with multiplanar reconstruction (MPR), surface shaded display (SSD), and maximum intensity projection (MIP).
  - Offers dual monitor support (a second monitor is optional and must be purchased separately)
  - **syngo VRT**
  - Direct Volume Rendering Technique (VRT) for viewing 3D-volumes
  - Projection of volume information onto an arbitrarily orientation plane. For each projection ray the density, opacity, and refraction of the penetrated volume is evaluated and the resulting intensity/color is recorded.
  - Independent control of color, opacity and shading of up to 4 tissue classes.
  - Predefined VRT settings can be selected via an image gallery.
  - Facilitates automated bone removal

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- 3D VRT can be supported by the optional Volume Pro graphics accelerator, providing image quality and performance
- **Workstream 4D with 3D Recon –**
- Acceleration of workflows by direct planning and reconstruction of diagnostic MPR / MIP images
- Drastic reduction of the amount of data, since only data relevant for diagnosis are stored
- Double-oblique planes for easy planning in the case of complex anatomic structures
- Programming of standard projections
- Maximum flexibility, since the CT system remains fully functional during image reconstruction
- Up to 24 multiphase reconstructions can be initiated in parallel.

HW Configuration:

High-performance computer

Standard 2 x Xeon 3.6 GHz processor

Graphics accelerator

Standard NVIDIA Quadro FX 3400 DVI graphics card for fast 3D postprocessing

Optional 2 GB Volume Pro Graphics Accelerator on-board image memory additionally accelerates applications

Standard monitor

Flat screen 19" (48 cm) monitor with 1,280 x 1,024 resolution, 1,024 x 1,024 image display matrix and 0.29 mm pixel size.

Optional second monitor with dual display functionality (optional plug-in for *syngo* 3D) flat screen monitor 19" (48 cm) Enables splitting of the syngo task cards onto two monitors.

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Qty	Part #	Description	Extended Net Price

Standard RAM storage 2 GB

Image storage Shared database with syngo Acquisition Workplace

Additional storage

CD-R 700 MB; 1,100 images

Optional MOD DICOM* 5.2 GB drive 2.3/4.1 GB cartridge 4,000/7,500 images

DICOM viewer

Included on each CD; automatically started on the viewer's PC.

1 14406485 Keyboard English

Keyboard in the above-mentioned language.

1 14402743 UPS 110 V # syngo CT Workplace

Uninterruptible power supply with battery backup for 110 volt networks. The UPS ensures the supply of power to the computer system and color monitor in the event of line voltage fluctuations and brief power failures.

1 14403188 syngo Dual Energy scan

The X-ray tube's kilo voltage (kV) determines the average energy level of the X-ray beam. Changing the kV setting results in an alteration of photon energy and a corresponding attenuation modification of the materials scanned. In other words, X-ray absorption is energy dependent, e.g. scanning an object with 80 kV results in a different attenuation than with 140 kV. In addition, this attenuation depends also on the type of tissue scanned. Iodine, for instance, has its maximum attenuation at low energy, while its CT-value is only about half in

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high-energy scans. The attenuation of bones, on the other hand, changes much less when exposed to low-energy scans compared to high-energy examinations. syngo Dual Energy Scan exploits this effect: Two X-ray sources running simultaneously at different energies (80 kV and 140 kV) acquire two spiral data sets showing different attenuation levels.

1 14406531 syngo Dual Energy #CTWP

The syngo Dual Energy option allows the initial evaluation of Dual Energy DICOM data. Prerequisit is the syngo Dual Energy Scan option. The resulting two data sets (80kV and 140 kV) that contain diverse information can be reviewed with a generic viewer located on a dedicated syngo task card.

The syngo Dual Energy option offers a viewer that displays a fused image for initial diagnosis. The additional, optional Dual Energy applications utilize syngo Dual Energy's two data sets even further: the material-specific difference in attenuation enables an easy classification of the elementary chemical composition of the scanned tissue.

1 14406458 syngo Dual Energy Advanced #CTWP

Based on two spiral data sets acquired in a single scan utilizing the syngo Dual Energy option, *syngo* Dual Energy Advanced offers the following Dual Energy applications:

- *syngo* DE Direct Angio and *syngo* InSpace DE Bone Removal accurately highlights bone structures on CT angiography (CTA) datasets. The highlighted pixels can be removed by a single click, e.g. subtract bone in CTA's. Overcoming limitations of conventional bone removal software, the Dual Energy approach reliably isolates even complex vasculature, for example, at the base of the skull where CTA's are difficult to interpret.

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- *syngo* DE Virtual Unenhanced generates a unenhanced liver or kidney image, from an enhanced Dual Energy image without additional scans by subtracting the contrast medium out of enhanced CT dataset. The resulting image helps, to characterize liver and kidney lesions.

- *syngo* DE Lung Perfusion enables a fast evaluation of lung perfusion defects without use of an additional non-contrast scan. It directly visualizes the local iodine concentration in the lung parenchyma, which is a measure of the local blood volume, thus enabling a display of the area of possibly affected tissue.

- *syngo* DE Musculoskeletal offers the enhanced visualization of tendons and ligaments in a CT image.

- *syngo* DE Calculi Characterization characterizes kidney stones.

- *syngo* DE Ca++ Removal enables the identification and automatic removal of calcifications from a CTA image. By therefore differentiating between hard plaques and contrast agent this Dual Energy application helps to display of true vessel lumen without interfering hard plaques.

biograph 64 - Local

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Qty	Part #	Description	Extended Net Price
1	MI_EX_BIO_PLUS	**expert plus education package Biograph**	

This curriculum teaches the technologist how to competently and efficiently utilize their new system with advanced features. It is specifically designed for the Clinical Technologist who is primarily responsible for the daily operation of the system.

- The eXpert Plus Package includes eXpert Package and additional offerings for 24-month period from initial Applications Visit. This package is the advanced education series for all Biograph systems.
- The curriculum includes attendance for one person to the syngo MI basics biograph course at a Siemens Training Center (travel & tuition included.)
- Attendance for one person to the syngo MI Advanced course at a Siemens training Center (Travel & Tuition included).
- The initial on-site visit consists of 32 hours of applications time.
- A follow up visit of 32 hours- product specific is included,.
- Any trial license would include an additional 6 hours on-site applications time.
- Tuition, hotel, for (1) attendee to Siemens Education Symposium.
- Tuition, Hotel, and airfare for (1) attendee to a pre-approved seminar/symposium within the continental United States sponsored by Siemens Medical within a 24 months of purchase. Example's University of Michigan Cardiac class, SNM Pet Learning Center.
- A package for (6) Journal Education series worth 12 CEU'S (can be utilized by up to four

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Technologist)

ALL PACKAGES EXPIRE AT 24 MONTHS

1 **MI_PET_BGH_TL** **syngo MI basics Bio (Cary NC) trvl incld**

The *syngo* MI Basics Biograph course is designed as an initial class for PET/CT users who have purchased a Biograph system. This course will be taught by both a CT instructor and a PET instructor. The course will familiarize the user with the various components of the acquisition interface. Post-processing of both CT and PET images, as well as image analysis and quality control procedures will also be covered.

The CT portion of the course will introduce the CT basics and the common *syngo* software implemented in the Siemens Medical Solutions PET/CT products. Operation of the PET/CT scanner is described and demonstrated in class and in hands-on laboratory sessions. The customer will be able to understand the relationship between the various possible selections available in scanning parameters and their effect on the clinical image.

The PET portion of the course covers introductory PET theory, scanner design, and basics of PET acquisition and image reconstruction. It also covers *syngo* MI applications basics, DICOM terminology, SUV calculations, and image Fusion in detail.

This course enhances what the customer will learn from their onsite Applications Specialist. It is recommended that this course be taken prior to the onsite applications visit.

The *syngo* MI Biograph course is four-days and includes Travel arrangements

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1	MI_5220228L	**Pet follow-up Apps Training day one**	

- Applications support to supplement training provided during system turnover and software upgrades in the United States

- Applications support can be purchased in one-day increments with a minimum training period for two (2) consecutive days (including travel time).

- Continuing education credits are not applicable to per-diem applications support.

- Additional training is purchased for a specific modality, and is not transferable

1	MI_5220228ADDL	**Pet follow-up Apps Training addl days**	
1	MI_PET_GATED_APPS	**Addl 20 Hour Apps for Adv Gate option**	

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1	7568103L	**Project Mgmt/Site Planning (US only)**	
1	M2SCT212PET	**Medrad Dual head PET/CT Injector Ciel.**	
1	LAPCT43	**RED Laser Marking System (Wall Mount)**	

LAP's Laser Marking System is used in CT/virtual simulation. Consists of three movable solid state red crosshair lasers on a computerized rail. Positioning and travel accuracy < 0.25 mm. Each rail contains a microcomputer, an absolute encoder for position feedback and verification and a movable laser.

Lasers are controlled through the virtual simulation workstation (if interface is available), the IsoMark Software, or the keypad to define patient isocenter in the CT room. Includes PC with IsoMark Software loaded and tested.

Isomark Software:

IsoMark applications software program for transmitting, recording and verifying isocenter coordinate data. Control of the transfer of isocenter coordinates from the RTP workstation to the LAP PC. Additional manual input of patient data and isocenter and field corners coordinates. Permanent storage files for transmitted and marked patient and laser isocenter coordinate data. Zeroing lasers. User interface.

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RELEVANT Items for Quote #1-6OXGWE Revision 7 (Included in Contract Total)

Qty	Part #	Description	Extended Net Price

Includes two-year parts and labor warranty from LAP.

1	LAPLI3	**Installation, LAP Laser System**	

LAP two-day installation, calibration, and user training of CT-3 Laser Marking system in the Americas and Western Europe. Requires CT room to be prepared prior to on-site arrival of LAP installation team.

1	LAPDOMS	**Free Standing Dorado Bridge**	

Free Standing Dorado Bridge – Custom made, rigid mounting structure not exceeding 96" x 108".

This optional item should only be used with the LAP DORADO Movable Laser System when the room has no stable mounting surfaces such as wooden truss ceiling.

One year warranty is provided by LAP.

1	NU_PET_MISC_MATL	**PET Basics-Radiation Safety Included (5 days). Tuition @ $1600/day for total of $8,000.**	

SIEMENS

Siemens Medical Solutions USA, Inc.

51 Valley Stream Parkway, Malvern PA 19355

ST FRANCIS HOSPITAL

114 WOODLAND STREET
HARTFORD, CT 06105

PROPOSAL REFERENCE
Proposal: 1-6NOUSP Date: 3/14/2007

Extended Contract Total: **$2,620,800**

FINANCING:

The equipment listed above may be financed through Siemens. Ask us about our full range of financial products that can be tailored to meet your business and cash flow requirements. For further information, please contact your local Sales Representative.

ACCESSORIES:

Don't forget to ask us about our line of OEM imaging accessories to complete your modality purchase. All accessories can be purchased or financed as part of this order. To purchase accessories directly or to receive our accessory catalogs, please call us directly at 1-888-222-9944 ext. 7 or contact your local sales representative.

ATTACHMENT 4

STATE OF CONNECTICUT

Department of Public Health

LICENSE

License No. 0054

General Hospital

In accordance with the provisions of the General Statutes of Connecticut Section 19a-493:

Saint Francis Hospital and Medical Center of Hartford, CT, d/b/a Saint Francis Hospital and Medical Center is hereby licensed to maintain and operate a General Hospital.

Saint Francis Hospital and Medical Center is located at 114 Woodland Street and 500 Blue Hills Avenue, Hartford, CT 06105

The maximum number of beds shall not exceed at any time:

65 Bassinets
617 General Hospital beds

This license expires **December 31, 2007** and may be revoked for cause at any time.

Dated at Hartford, Connecticut, January 1, 2006. RENEWAL.

License revised to reflect:
* Removed (1) Satellite effective 10/15/05

J Robert Galvin M.D., M.P.H.

J. Robert Galvin, M.D., M.P.H.,
Commissioner

ATTACHMENT 5

Summary

Saint Francis Hospital and Medical Center is a tertiary, general acute care hospital. Saint Francis has been named as a Top 100 hospital by Solucient seven times. Also, Saint Francis Hospital and Medical Center was named a top 100 hospital in cardiovascular services three times. Saint Francis is currently fully accredited by the Joint Commission on Accreditation of Hospitals. Saint Francis operates a Level 2 Trauma Center, a Level III neonatology intensive care unit, a large open heart surgery program and a regional cancer center as well as many other important health services. Saint Francis provided services to 31,638 inpatients, 62,176 Emergency Department visits and provided over 82,000 outpatient visits through its many clinic programs in FY 2006 on the Saint Francis campus. As an affiliate of the University of Connecticut School of Medicine, Saint Francis Hospital and Medical Center also trains a large number of interns and residents as well as other allied health professionals. To meet these varied demands, Saint Francis must provide up to date, state of the art diagnostic equipment.

Saint Francis Hospital and Medical Center currently provides mobile PET/CT scanner services three days a week. Positron Emission Tomography/Computed Tomography (PET/CT) is a non-invasive technique for imaging physiologic process and is the workhorse for the new field of Molecular Imaging. While PET/CT imaging can be used for imaging a variety of physiologic process in the body, it has become the standard of care for detecting cancer and plays and important role in diagnosing neurodegenerative diseases and heart disease. PET/CT imaging involves administering a radioactive drug (FDG) to a patient that emits positrons. The PET/CT scanner can then determine the location in the patient where the radioactive tracer travels to by detecting emitted positrons from administered drug as it travels through the body. This provides a 'molecular map' of the patient which is superimposed on a standard CT image for interpretation. The PET/CT can therefore diagnose disease earlier and more accurately many times than with standard non-molecular imaging such as cross sectional imaging techniques (CT, MR, and Ultrasound).

Saint Francis Hospital and Medical Center has seen an explosive growth in the number of PET/CT scans performed for diagnosing and monitoring treatment response of cancer. PET/CT offers the most precise evaluation of the amount of tumor within a patient, frequently finding small amounts of tumor scattered throughout the body below the detectability of standard imaging techniques. Such accurate staging information leads to better choice of therapy (surgery, chemotherapy, radiation therapy, etc) and improves patient care and quality of life. Also, PET/CT is the most accurate test for determining tumor response to treatment yielding information about how well a therapy is working on a molecular level thus allowing treatment to be optimized for patient care while limiting toxicity. In actual volumes, Saint Francis Hospital and Medical performed 1,138 cases in FY 2005 and 1,328 cases in FY 2006. This volume increase represents a growth of 17%. Also, in FYTD'07 through August Saint Francis Hospital and Medical Center performed 1,447 cases. If this data is annualized Saint Francis Hospital and Medical Center is likely to perform 1,578 cases in FY 2007. Saint Francis Hospital and Medical Center expects the volume to continue to grow in future years. The existing 3 days of mobile PET/CT service cannot meet Saint Francis Hospital and Medical Center's increasing volume demand.

In addition to the growing demand, due to the limitation of service days Saint Francis Hospital and Medical Center has been averaging a three week scheduling backlog. This contracted mobile service with Alliance Imaging will expire on January 10, 2008. Over the course of this contracted service Saint Francis Hospital and Medical Center has experienced significant interruptions and downtime in service, mainly attributed to the movement/traveling of the mobile PET/CT van. This interruption of service has

a negative impact on patient schedules, causing increased backlogs, delayed patient care and poor patient and physician satisfaction.

Given the high volume of patients seen on this machine and the expected growth in demand for this important diagnostic equipment Saint Francis Hospital and Medical Center wishes to acquire a state – of- the art fixed PET/CT scanner that will be used five days Monday – Friday for eight hours per day. Saint Francis Hospital and Medical Center proposes to replace this existing mobile PET/CT service with a state -of - the - art fixed Siemens Biograph 64 PET/CT unit to be housed in the Radiology Department at Saint Francis Hospital and Medical Center. This new machine will provide the highest quality images for patients at Saint Francis. The addition of a fixed unit will also be beneficial on several levels from an operational perspective. Currently, Saint Francis Hospital and Medical Center's mobile unit is located in a separate part of the hospital campus, away from the rest of the radiology department and the main hospital. Frequently, patients undergoing PET/CT scanning have complex medical problems also have to have other imaging performed to stage or monitor their disease (MRI, Ultrasound, CT, etc). Such imaging can be time sensitive, especially if the patient is receiving regularly scheduled doses of chemotherapy. The separation from the main department and scheduling difficulties have lead to excess hardship for patients and their physicians, both of which need the critical information this study provides to make decisions regarding cancer therapy and management. The addition of a fixed unit in the Radiology Department will allow better coordination of other imaging studies a patient may require, so that the necessary imaging tests can be performed in a timely fashion without creating delays in the dosing of radiation or chemotherapy a patient may be receiving. The added capacity will help Saint Francis Hospital and Medical Center to continue to provide the highest level of care for our local community. Equally important access to PET/CT will be greatly improved as a result of this proposal.

Saint Francis Hospital and Medical Center currently receives 91% of its patients from the towns listed in Attachment 1. There will be no change in the population served.

This project will not affect other area providers since Saint Francis Hospital and Medical Center is meeting the demand of its existing patient base from the greater Hartford area and beyond. This proposal will improve the delivery of health care in the greater Hartford area by providing increased access to PET/CT services at Saint Francis Hospital and Medical Center. Replacing the mobile PET/CT scanner with a fixed PET/CT scanner in the Radiology Department provides five days a week PET coverage, increased image quality In addition, it affords the community improved access to care, reduced waiting time, and improved diagnostic imaging. Finally, the health care delivery system in Connecticut will benefit from this proposal as patients referred to Saint Francis Hospital and Medical Center from outlying community hospitals will be treated using state –of- the-art equipment.

No new licenses are being sought as a result of this project.

Saint Francis Hospital and Medical Center accepts all patients regardless of their race, creed, age, gender, religion or their ability to pay. Saint Francis Hospital and Medical Center expects the payer sources to be unchanged as a result of this project.

STATE OF CONNECTICUT

OFFICE OF HEALTH CARE ACCESS

M. JODI RELL
GOVERNOR

CRISTINE A. VOGEL
COMMISSIONER

September 26, 2007

R. Christopher Hartley
Senior Vice President, Planning and Facilities Development
Saint Francis Hospital and Medical Center
114 Woodland Street
Hartford, CT 06105-1299

RE: Certificate of Need Application Forms; Docket Number: 07-31044-LOI
Saint Francis Hospital and Medical Center's Proposal to
Acquire a 64-Slice, Fixed-Based PET/CT Scanner in Place
of a Three Day per Week, Mobile-Based PET/CT Scanner

Dear Mr. Hartley:

Enclosed are the application forms for Saint Francis Hospital and Medical Center's Certificate of Need ("CON") proposal for the acquisition of a 64-slice, fixed-based PET/CT scanner with an associated capital expenditure of $5,181,141. According to the parameters stated in Section 19a-639 of the Connecticut General Statutes the CON application may be filed between November 23, 2007, and January 22, 2008.

When submitting your CON application, please paginate and date each page contained in your submission. In addition, please submit one (1) original and five hard copies; as well as a scanned copy of the complete application, including all attachments, on CD or Diskette. OHCA requests that the electronic copy be in Adobe or MS Word format and that the Financial Attachment and other data as appropriate be in MS Excel format.

The OHCA analyst assigned to the CON application is Jack A. Huber. Please feel free to contact him at (860) 418-7034, if you have any questions.

Sincerely,

Kimberly Martone
Certificate of Need Supervisor

Enclosures

HOSPITAL AFFIDAVIT

Applicant: _____

Project Title: _____

I, _____, _____
(Name) (Position – CEO or CFO)

of _____ being duly sworn, depose and state that the (Hospital Name) information submitted in this Certificate of Need application is accurate and correct to the best of my knowledge. With respect to the financial impact related to this CON application, I hereby affirm that:

1. The proposal will have a capital expenditure in excess of $15,000,000.

   ☐ Yes ☐ No

2. The combined total expenses for the proposal's first three years of operation will exceed one percent of the actual operating expenses of the Hospital for the most recently completed fiscal year as filed with the Office of Health Care Access.

   ☐ Yes ☐ No

_____ _____
Signature Date

Subscribed and sworn to before me on_____

_____

Notary Public/Commissioner of Superior Court

My commission expires: _____

OFFICE OF HEALTH CARE ACCESS

REQUEST FOR NEW CERTIFICATE OF NEED

FILING FEE COMPUTATION SCHEDULE

APPLICANT: _____	FOR OHCA USE ONLY:	DATE	INITIAL
PROJECT TITLE: _____	1. Check logged (Front desk)	_____	_____
DATE: _____	2. Check rec'd (Clerical/Cert.)	_____	_____
	3. Check correct (Superv.)	_____	_____
	4. Check logged (Clerical/Cert).)	_____	_____

SECTION A – NEW CERTIFICATE OF NEED APPLICATION	
1. Check statute reference as applicable to CON application (see statute for detail):	
_____ 19a-638.Additional function or service, change of ownership, service termination. **No Fee Required.**	
_____ 19a-639 Capital expenditure exceeding $3,000,000 or capital expenditure exceeding $3,000,000 for major medical equipment, CT scanner, PET scanner, PET/CT scanner, MRI scanner, cineangiography equipment or linear accelerator. **Fee Required.**	
_____ 19a-638 and 19a-639. **Fee Required.**	
2. Enter $0 on "Total Fee Due" line (SECTION B) if application is required pursuant to Section 19a-638 only, otherwise go on to line 3 of this section.	
3. Enter $400 on "Total Fee Due" line (SECTION B) if application is for capital expenditure for major medical equipment, imaging equipment or linear accelerator less than $3,000,000	
4. Section 19a-639 fee calculation (applicable if section 19a-639 capital expenditure for major medical equipment, imaging equipment or linear accelerator exceeding $3,000,000 or other capital expenditure exceeding $3,000,000 is checked above **OR** if both 19a-638 and 19a-639 are checked):	
a. Base fee: _____	$ 1,000.00
b. Additional Fee: (Capital Expenditure Assessment)_____	$_____.00
(To calculate: Total requested Capital Expenditure/Cost excluding capitalized financing costs multiplied times .0005 and round to nearest dollar.) ($_____ x .0005)	$_____.00
c. Sum of base fee plus additional fee: (Lines A4a + A4b)_____	
d. Enter the amount shown on line A4c. on "Total Fee Due" line (SECTION B).	
SECTION B TOTAL FEE DUE:_____	$_____.00

ATTACH HERE CERTIFIED OR CASHIER'S CHECK ONLY (Payable to: Treasurer, State of Connecticut)

State of Connecticut
Office of Health Care Access
Certificate of Need Application

Please address all application questions. If a question is not relevant to your proposal, an answer stating "Not Applicable" may be considered an acceptable response. Your Certificate of Need application will be eligible for submission no earlier than November 23, 2007, and no later than January 22, 2008. The OHCA analyst assigned to your application is Jack A. Huber. He may be reached directly at the Office of Health Care Access by dialing (860) 418-7034.

Docket Number:	07-31044-CON
Applicant Name:	Saint Francis Hospital and Medical Center
Contact Person:	R. Christopher Hartley
Contact Title:	Senior Vice President, Planning and Facilities Development
Contact Address:	Saint Francis Hospital and Medical Center 114 Woodland Street Hartford, CT 06105-1299
Project Location:	Hartford
Project Name:	Acquisition of a 64-Slice, Fixed-Based PET/CT Scanner in Place of a Three Day per Week, Mobile-Based PET/CT Scanner
Proposal Type:	Section 19a-639, C.G.S.
Estimated Total Capital Expenditure:	$5,181,141

1. Expansion of Existing Service

What services/imaging studies are currently offered at your facility that the proposed fixed-based PET/CT scanner will augment or replace? Please list.

Augment: _____

_____

Replace: _____

_____

2. State Health Plan

No questions at this time.

3. Applicant's Long Range Plan

Is this application consistent with your long-range plan?

☐ Yes ☐ No

If "No" is checked, please provide an explanation.

4. Clear Public Need

A. Explain how it was determined there was a need for the proposal in your service area.

B. Provide the following information:
   a) List the primary service area (PSA) towns. Provide a rationale for choosing the selected PSA towns.
   b) List the secondary service area (SSA) towns. Provide a rationale for choosing the selected SSA towns.
   c) Describe the population to be served, including the number of individuals to receive the proposed fixed-based PET/CT services. Include demographic Information, as appropriate.
   d) Scheduling backlogs in service area.
   e) Travel distance from proposed site to service area towns.
   f) Hours of operation of proposed fixed-based PET/CT service.

C. Provide the units of service projected for the first three years of operation of the proposed fixed-based PET/CT scanner. **Include all assumptions and calculations used in the derivation of your volume projections.**

D. Provide an itemization of the projected number of annual PET/CT scans by category (i.e. cardiac and neurology, etc.) for the proposed fixed-based scanner.

E. Provide the current capacity of the existing mobile-based PET/CT scanner showing the method used to calculate the annual volume of scans.

F. Provide the anticipated capacity of the proposed fixed-based PET/CT scanner showing the method used to calculate the annual volume of scans.

G. Identify the existing PET/CT providers in your PSA and SSA. Provide the information as outlined in the following table.

Description of Service[1]	Provider Name and Location	Hours and Days of Operation[2]	Current Utilization[3]

[1] Provide a description of the equipment used by the Provider, if known.
[2] Specify days of the week and start and end time for each day.
[3] Number of scans performed on specified scanner by Provider for the most recent 12 month period, if known.

H. What will be the effect of your proposal on existing providers (i.e. patient volume, financial stability, quality of care, etc.)?

I. Will your proposal remedy any of the following barriers to access? Please provide an explanation.

☐ Cultural ☐ Transportation

☐ Geographic ☐ Economic

☐ None of the above ☐ Other (Identify) _____

If you checked other than None of the above, please provide an explanation.

J. Provide copies of any of the following plans, studies or reports related to your proposal:

☐ Epidemiological studies ☐ Needs assessments

☐ Public information reports ☐ Market share analysis

☐ Other (Identify) _____

5. Quality Measures

A. Check off all the Standard of Practice Guidelines that will be utilized by the Applicant for the proposed service. Please submit the most recent copy of each report related to the proposal:

☐ American College of Cardiology
☐ National Committee for Quality Assurance
☐ Public Health Code & Federal Corollary
☐ National Association of Child Bearing Centers
☐ American College of Obstetricians & Gynecologists
☐ American College of Surgeons
☐ Report of the Inter-Society Council for Radiation Oncology
☐ American College of Radiology
☐ Substance Abuse and Mental Health Services Administration
☐ Other: Specify _____

B. Describe in detail how the Applicant plans to meet the each of the guidelines checked off above.

C. Submit a list of **all** key professional and administrative personnel, including the Hospital's Chief Executive Officer (CEO) and Chief Financial Officer (CFO), Medical Director, physicians, etc., related to the proposal and a copy of their Curriculum Vitae.

Note: For physicians, please provide a list of hospitals where the physicians have privileges.

D. Provide a copy of the most recent inspection reports and/or certificate for your facility:

☐ DPH
☐ JCAHO
☐ Fire Marshall Report
☐ Other States Health Dept. Reports (new out-of-state providers)
☐ AAAHC
☐ AAAASF
☐ Other: _____

Note: Above referenced acronyms are defined below. [1]

[1] DPH – Department of Public Health; JCAHO – Joint Commission on Accreditation of Hospitals Organization; AAAHC – Accreditation Association for Ambulatory Health Care, AAAASF – American Association for Accreditation of Ambulatory Surgery Facilities, Inc.

E. Provide copies of any Quarterly Action Reports, Consent Decrees or Statement of Charges against the Hospital, its physicians and any staff related to the proposal, for the past five (5) years.

F. Provide a copy of any plan of action which has been formulated to address the above action against the Hospital, its physicians working at the Hospital and/or any staff related to the proposal.

G. Provide a copy of the related Quality Assurance plan.

6. Improvements to Productivity and Containment of Costs

In the past year has your facility undertaken any of the following activities to improve productivity and contain costs?

☐ Energy conservation ☐ Group purchasing

☐ Reengineering ☐ None of the above

☐ Application of technology (e.g., computer systems, robotics, telecommunication systems, etc.)

☐ Other (identify)_____

7. Miscellaneous

A. Will this proposal result in new (or a change to) your teaching or research responsibilities?

☐ Yes ☐ No

If you checked "Yes," please provide an explanation.

B. Are there any characteristics of your patient/physician mix that makes your proposal unique?

☐ Yes ☐ No

If you checked "Yes," please provide an explanation.

C. Provide a copy of the State of Connecticut Department of Public Health license currently held.

8. Financial Information

A. Type of ownership: (Please check off all that apply)

☐ Corporation (Inc.) ☐ Limited Liability Company (LLC)

☐ Partnership ☐ Professional Corporation (PC)

☐ Joint Venture ☐ Other (Specify): _____

B. Provide the following financial information:

i) Pursuant to Section 19a-644, C.G.S., each hospital licensed by the Department of Public Health is required to file with OHCA copies of the hospital's audited financial statements. If the Applicant is a hospital that has filed its most recently completed fiscal year audited financial statements, the Applicant may reference that filing for this proposal.

ii) Provide a copy of the most recently completed internal monthly financial statements, including utilization volume totals to date.

iii) Identify the entity that will be billing for the proposed service.

9. Major Cost Components/Total Capital Expenditure

Submit a final version of all capital expenditures/costs as follows:

Medical Equipment (Purchase)	$
Imaging Equipment (Purchase)	
Non-Medical Equipment (Purchase)*	
Land/Building (Purchase)	
Construction/Renovation	
Other (Non-Construction) Specify:_____	
Total Capital Expenditure	**$**
Medical Equipment (Lease (FMV))	$
Imaging Equipment (Lease (FMV)	
Non-Medical Equipment (Lease (FMV))*	
Fair Market Value of Space – (Capital Leases Only)	
Total Capital Cost	**$**
Capitalized Financing Costs	
Total Capital Expenditure with Cap. Fin. Costs	$

* Provide an itemized list of all non-medical equipment.

10. Construction Information

A. Provide a detailed description of the proposed new construction/renovation including the related gross square feet of new construction/renovation.

B. Provide all schematic drawings related to the project that are available, including existing and proposed floor plans.

C. Explain how the proposed new construction or renovations will affect the delivery of patient care.

D. Provide the following information regarding the schedule for new construction/ renovation:

Construction Commencement Date	
Construction Completion Date	
DPH Licensure Date	
Commencement of Operations Date	

11. Capital Equipment Lease/ Purchase

If the CON involves any capital equipment lease and/or purchase, please answer all of the following that apply:

1.	What is the anticipated residual value at the end of the lease or loan term?	$_____
2.	What is the useful life of the equipment?	____ Years
3.	Please submit a copy of the vendor quote or invoice as an attachment.	
4.	Please submit a schedule of depreciation for the purchased equipment as an attachment.	

For multiple items, please attach a separate sheet for each item in the above format.

12. Type of Financing

A. Check type of funding or financing source and identify the following anticipated requirements and terms: (Check all which apply)

☐ Applicant's equity:

Source and amount:

Operating Funds Source/Entity Name Available Funds	$ _____ _____ _____
Contributions	$ _____
Funded depreciation	$ _____
Other	$ _____

☐ Grant:

Amount of grant	$ _____
Funding institution/ entity	_____

☐ Conventional loan or
☐ Connecticut Health and Educational Facilities Authority (CHEFA) financing:

Current CHEFA debt	$ _____
CON Proposed debt financing	$ _____
Interest rate	_____ %
Monthly payment	$ _____
Term	_____ Years
Debt service reserve fund	$ _____

☐ Lease financing or
☐ CHEFA Easy Lease Financing:

Current CHEFA Leases	$_____
CON Proposed lease financing	$ _____
Fair market value of leased assets at lease inception	$ _____
Interest rate	_____ %
Monthly payment	$_____
Term	_____ Years

☐ Other financing alternatives:

Amount	$ _____
Source (e.g., donated assets, etc.)	_____

B. Please provide copies of the following, if applicable:
   i. Letter of interest from the lending institution,
   ii. Letter of interest from CHEFA,
   iii. Amortization schedule (if not level amortization payments),
   iv. Provide a copy of any written agreement (e.g. vendor quote) or memorandum of understanding between the hospital and the vendor.

14. Revenue, Expense and Volume Projections

A. Payer Mix Projection

i) Please provide the current and projected payer mix for the CON proposal based on Net Patient Revenue in the following reporting format separately for:

a) The service proposed; and

b) The total facility operation.

Total Facility Description	Current Payer Mix	Year 1 Projected Payer Mix	Year 2 Projected Payer Mix	Year 3 Projected Payer Mix
Medicare*	%	%	%	%
Medicaid* (includes other medical assistance)				
CHAMPUS or TriCare				
Total Government Payers				
Commercial Insurers*				
Uninsured				
Workers Compensation				
Total Non-Government Payers				
Total Payer Mix	100.0%	100.0%	100.0%	100.0%

*Includes managed care activity.

ii. Please describe the impact of the proposal on the interests of consumers of health care services and the payers of such services.

B. Does the Applicant have Tax Exempt Status? ☐ Yes ☐ No

C. Provide the following information regarding the proposal's financial and statistical projections taking into account the affect *The Deficit Reduction Act of 2005, and its subsequent reductions in Medicaid and Medicare reimbursements, may have in the development of the financial projections.*

i) A summary of revenue, expense and volume statistics, without the CON project, incremental to the CON project, and with the CON project. **Please complete the enclosed Financial Attachment I.** Please note that the actual results for the fiscal year reported in the first column must agree with the Applicant's audited financial statements.

ii) A three year projection of incremental revenue, expense, and volume statistics attributable to the proposal by payer. **Please complete the enclosed Financial Attachment II.**

iii) The operating assumptions utilized in developing the projections: (e.g.,

1. Full time equivalent personnel by position,
2. Volume statistics,
3. Other expenses,
4. Revenue and expense percentage increases/decreases,
5. Project date for commencing operation, and
6. Any other assumption utilized.

iv) An explanation for any annual incremental loss from operations contained in the financial projections that result from the implementation and operation of the CON proposal.

v) Provide a copy of the rate schedule for the proposed service.

vi) Describe how this proposal is cost effective.

13. B (i). Please provide one year of actual results and three years of ***Total Hospital Health System*** projections of revenue, expense and volume statistics without, incremental to and with the CON proposal in the following reporting format:

Total Hospital Health System: Description	FY Actual Results	FY Projected W/out CON	FY Projected Incremental	FY Projected With CON	FY Projected W/out CON	FY Projected Incremental	FY Projected With CON	FY Projected W/out CON	FY Projected Incremental	FY Projected With CON
NET PATIENT REVENUE										
Non-Government				$0			$0			$0
Medicare				$0			$0			$0
Medicaid and Other Medical Assistance				$0			$0			$0
Other Government				$0			$0			$0
Total Net Patient Patient Revenue	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Other Operating Revenue										
Revenue from Operations	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
OPERATING EXPENSES										
Salaries and Fringe Benefits				$0			$0			$0
Professional / Contracted Services				$0			$0			$0
Supplies and Drugs				$0			$0			$0
Bad Debts				$0			$0			$0
Other Operating Expense				$0			$0			$0
Subtotal	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Depreciation/Amortization				$0			$0			$0
Interest Expense				$0			$0			$0
Lease Expense				$0			$0			$0
Total Operating Expenses	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Income (Loss) from Operations	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Non-Operating Income				$0			$0			$0
Income before provision for income taxes	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Provision for income taxes										
Net Income	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Retained earnings, beginning of year		$0	$0	$0	$0	$0	$0	$0	$0	$0
Retained earnings, end of year	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
FTEs				0			0			0

*Volume Statistics:
Provide projected inpatient and/or outpatient statistics for any new services and provide actual and projected inpatient and/or outpatient statistics for any existing services which will change due to the proposal.

13.C(ii). Please provide three years of projections of incremental revenue, expense and volume statistics **attributable to the proposal** in the following reporting format:

Type of Service Description

Type of Unit Description:

# of Months in Operation

Year 1	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
FY Projected Incremental Total Incremental Expenses:		Rate	Units	Gross Revenue	Allowances/ Deductions	Charity Care	Bad Debt	Net Revenue	Operating Expenses	Gain/(Loss) from Operations
				Col. 2 * Col. 3				Col.4 - Col.5 -Col.6 - Col.7	Col. 1 Total * Col. 4 / Col. 4 Total	Col. 8 - Col. 9
Total Facility by Payer Category:										
Medicare				$0				$0	$0	$0
Medicaid		$0		$0				$0	$0	$0
CHAMPUS/TriCare		$0		$0				$0	$0	$0
Total Governmental			0	$0	$0	$0	$0	$0	$0	$0
Commericial Insurers		$0	5	$0				$0	$0	$0
Uninsured		$0	2	$0				$0	$0	$0
Total NonGovenrment		$0	7	$0	$0	$0	$0	$0	$0	$0
Total All Payers		$0	7	$0	$0	$0	$0	$0	$0	$0

STATE OF CONNECTICUT

OFFICE OF HEALTH CARE ACCESS

M. JODI RELL
GOVERNOR

CRISTINE A. VOGEL
COMMISSIONER

September 27, 2007

Mr. R. Christopher Hartley
Senior Vice President, Planning and Facilities Development
Saint Francis Hospital and Medical Center
114 Woodland Street
Hartford, CT 06105

Re: Letter of Intent; Docket Number: 07-31044-LOI
Saint Francis Hospital and Medical Center's Proposal to
Acquire a 64-Slice, Fixed-Based PET/CT Scanner in Place
of a Three Day per Week, Mobile-Based Scanner
Notice of Letter of Intent

Dear Mr. Hartley:

On September 24, 2007, the Office of Health Care Access ("OHCA") received the Letter of Intent ("LOI") Form of Saint Francis Hospital and Medical Center ("Applicant") for the acquisition of a 64-slice, fixed-based PET/CT scanner in place of a three day per week, mobile-based scanner, at a total capital expenditure of $5,181,141.

A notice to the public regarding OHCA's receipt of the LOI was published in *The Hartford Courant* pursuant to Section 19a-639 of the Connecticut General Statutes. Enclosed for your information is a copy of the notice to the public.

Sincerely,

Kimberly R. Martone
Certificate of Need Supervisor

KRM:lmg

STATE OF CONNECTICUT

OFFICE OF HEALTH CARE ACCESS

M. JODI RELL
GOVERNOR

CRISTINE A. VOGEL
COMMISSIONER

September 27, 2007

Requisition # HCA08-058
Email: Publicnotices@courant.com

Hartford Courant
285 Broad Street
Hartford, CT 06115

Gentlemen/Ladies:

Please make an insertion of the attached copy, in a single column space, set solid under legal notices, in the issue of your newspaper by no later than **Monday, October 1, 2007.**

Please provide the following **within 30 days** of publication:

- Proof of publication (copy of legal ad. acceptable) showing published date along with the invoice.

If there are any questions regarding this legal notice, please contact Jack Huber at (860) 418-7034.

KINDLY RENDER BILL IN DUPLICATE ATTACHED TO THE TEAR SHEET.

Sincerely,

Kimberly R. Martone
Certificate of Need Supervisor

Attachment

KRM:JH:lmg

c: Sandy Salus, OHCA

Hartford Courant
Docket Number: 07-31044-LOI

Letter of Intent
September 27, 2007

PLEASE INSERT THE FOLLOWING:

Statute Reference:	19a-639
Applicant:	Saint Francis Hospital and Medical Center
Town:	Hartford
Docket Number:	07-31044
Proposal:	Acquisition of a 64-Slice, Fixed-Based PET/CT Scanner in Place of a Three Day per Week, Mobile-Based Scanner
Capital Expenditure:	$5,181,141

The Applicant may file its Certificate of Need application between November 23, 2007 and January 22, 2008. Interested persons are invited to submit written comments to Cristine A. Vogel, Commissioner Office of Health Care Access, 410 Capitol Avenue, MS13HCA P.O. Box 340308 Hartford, CT 06134-0308.

The Letter of Intent is available for inspection at OHCA. A copy of the Letter of Intent or a copy of Certificate of Need Application, when filed, may be obtained from OHCA at the standard charge. The Certificate of Need application will be made available for inspection at OHCA, when it is submitted by the Applicant.

Public N

OXFORD

INVITATION TO BID
TOWN OF OXFORD
FIRE DEPARTMENT

Notice is hereby given that the Board of Selectmen and Board of Chiefs of the Town of Oxford are requesting bids for:

HEAVY DUTY REAR-MOUNT QUINT AERIAL LADDER TRUCK WITH 500 GALLONS OF WATER CAPACITY AND 1500 GALLON PER MINUTE PUMP AND ASSOCIATED EQUIPMENT.

Bid specifications and instructions are available at the Office of the First Selectman located at the Oxford Town Hall, 486 Oxford Road, Oxford, Connecticut, starting Monday October 1, 2007. Pick-up hours will be 9:30 AM - 4:30 PM.

Bids will be due on Monday, October 22, 2007 by 3:00 PM and will be opened on that day at 3:15 PM.

WATERFORD

Town of Waterford
Board of Selectmen
Request for Qualification Information
Architectural/Engineering Design Services
Waterford High School

The Director of Finance will accept RFQ's until 2:00 PM on October 19, 2007 at the Finance Office. RFQ's must be submitted in a sealed envelope and clearly marked RFQ Architectural/Engineering Design Services WHS. RFQ's may be mailed or hand-delivered to the Finance Office, Town of Waterford, 15 Rope Ferry Road, Waterford, CT 06385-2886. Specifications are available at waterfordct.org/purchase.htm and the Finance Office. The Board of Selectmen reserves the right to reject any or all bids, in whole or in part, and to waive any informality in any bid when such action is deemed in the best interest of the Town; their decision is final.

Ruth A. Beers
Director of Finance
September 28, 2007

WEST HARTFORD

West Hartford
Legal Notice

BEN BRONZ FOUNDATION, INC. Notice is hereby given that the annual return of the above Foundation for the year 2006 required to be filed under Section 6033 of the Internal Revenue Code of 1986, as amended, is available at its principal office, 139 North Main Street, West Hartford, Connecticut 06107, Attention: Aileen Stan-Spence, for inspection during regular business hours by any citizen who requests it within 180 days after the date of publication of this notice. Name of principal manager: Aileen Stan-Spence (telephone number 860-236-5807).

CONNECTICUT

LEGAL NOTICE

Pursuant to Conn. Gen. Stat. § 16-43, the Department of Public Utility Control (Department) will conduct a hearing concerning Docket No. 07-09-03, Application of The Connecticut Water Company for Approval of $15,000,000 CDA Financing. Specifically, the Department will review the Company's request for approval to issue a promissory note in the principal amount of $15,000,000 to be financed by the CDA. The hearing in this matter will be held on Friday, October 5, 2007 at 9:30 a.m. at the Department offices, Ten Franklin Square, New Britain, Connecticut. The Department may continue the hearing as deemed necessary. For more information and the Notice of Hearing filed with the Secretary of State's Office, contact: Department of Public Utility Control, LOUISE E. RICKARD, ACTING Executive Secretary.

CONNECTICUT

LEGAL NOTICE

The University of Connecticut is currently seeking proposals for the following:

1. Center for Continuing Studies – Stamford Property Leasing
   Bid No: SA092807
   Opening Date: October 23, 2007 @ 2:00 p.m.

Interested parties should visit our website at http://www.purchasing.uconn.edu/currentbid/currentbid.html, or call 860-486-2619. Inquiries must be made by Bid Number.

HARTFORD

LEGAL NOTICE
LETTER OF INTENT

Statute Reference:	19a-639
Applicant:	Saint Francis Hospital and Medical Center
Town:	Hartford
Docket Number:	07-31044
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CONNECTICUT

REQUEST FOR PROPOSALS

STATE OF CO
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Automobiles

OUTBACK '01 95K WAGON/LIMITED/ LLPWR,LEATHER, S/ROOF, 4X4, CD NEW TIRES, 647-7259

AVALON '05 Limited, 39K mi. Loaded! FIED! #P04264U. Middletown Toyota, 888-223-8027

ALON '01 78K miles LS, 78K, Silver, Auto, unroof, one owner rt Wood 203-272-mpw@cox.net

TA AVALON '00 K, Exc Cond, Loaded, $6,000 Call 860-635-0786

ALON '95 XLS, auto ver, leather, 100,000 excellent condition, all 860-883-6048

AMRY LE '03 4 dr, yl, AC, PS, PW, power nt and side air bags, tires: 1 owner, non 35K miles. Exc cond. 860-716-7807 or 1111.06067

TA CAMRY LE '02 Loaded! CERTIFIED! 8U. $12,983. Middle-yota, 888-223-8027

AMRY LE '01 95K ,sil-steering/windows, d. $7700. 860-644-60-202-8886

AMRY '98 76K $5995 4-CYL, AC, AT, 3-CD , All power, Excint-50-610-1050

A CAMRY LE '98 auto, r, ac, 97K, exc cond, 5 (860)742-5706

AMRY '98 94K $4490 C, ALLPWR, 4CYLIND-AT GAS MILEGE, CD, E NEW. 860-647-7259

YOTA CAMRY '90 ni, AC, CD, AT, Good 55/bo 860-205-2178

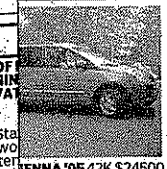
TA COROLLA LE '04 er, 54K miles. CERT! 5U. $12,983. Middle-yota, 888-223-8027

OROLLA CB '04 auto, es, silver, cd, alarm, $11,200/negotiable. 6420

OROLLA '00 103K mi DW, Auto,Stereo/ cas-player, AC,Excellent n, Call 860-895-8513

YOTA PRIUS '04 excellent condition. 0 MPG, $15,999. 60-496-9040

TA SCION '05 Silver, t Condition, Leather, f, 50k Miles, $12,200 860)459-0806



ENNA '05 42K $24500 ited AWD, Leather, rim, CD Player, Rear e and much Call Jamie: 9270

Automobiles

VW GTI '04, 56K mi, blk, exc cond, factory svc, sunroof, in-dash CD, cold wthr pkg, 1.8T, 5 spd, great buy. $13,650. Lee 860-347-8445, soarchs @yahoo.com

VOLKSWAGEN JETTA '01 66K mi $6900 Excellent condition, 2nd owner, LOADED, 6cd, heated seats, moonroof, sports bra, great gas mileage, we priced this TO SELL! Call Erik 860-919-4249 eman924@cox.net

VOLKSWAGEN JETTA GT '97 5 spd, A/C, mn roof, CD, nw clutch, garaged, immaculate, $1900 B/O 860-276-9167

Autos Wanted

AUTOMOBILES WANTED
Get a FREE VACATION by donating your vehicle, boat, electronics, collectables & property to DVAR. Maximize your IRS deductions & help teens in crisis. Call 1-800-338-6724

CAR DONATION PROGRAM Alzheimer's Association of CT. Don't Trade/Junk It, Donate it! Tax Deductible. Free Pick Up. www.donationline.com 1-800-826-0754

DONATE 1-800-899-4928. Running or not. Tax deductible. Free towing. USI. Charity.

FAST FREE REMOVAL of scrap farm equip., construction, buses, trucks, cars, SUVs, & vans. If it's heavy, we buy it! (413)783-3963 24 hrs.

Jeep Wrangler TJ '97 Hrd Top, blk, "like new" tires 06 $1200 B.O. 860-798-4812

WILL PAY CASH FOR YOUR TOYOTA OR NISSAN PICKUPS, any condition. Will consider other foreign makes & models. (203)848-5864

Motorcycles

DUCATI Hypermotard 1100S '08 Red. Pristine. Perfect $13,999. 860-558-8726

GSXR '02 Bombers 600 low miles 4700 Call Noel 860-308-2190

Harley Davidson Custom Sportster 1997 10K Chrome + Wilgo Fast! $5500.00 Roger 860-819-2764

HARLEY DAVIDSON FLSTF FAT-BOY '05 2 Tone Cherry/Black pearl, Fuel Injected, 5500 Mi, Stage 1 Exhaust, Backrest, Windshield, Sport Rack, Passing Lamps, Duffle Bag, Dust Cover, Exc Cond! $14,500 Rick (860)461-0907

HARLEY DAVIDSON FXDL '01 5000 mi, $11,000 860-944-2518

NEW TODAY

HARLEY DAVIDSON FXDXT '02 exc cond, 8,200 miles, many extras, priced to sell at $8,900 (860)490-2806

Harley FXSTS 1999 Custom paint, extra chrome 11k miles screaming eagle exhaust.Mint $11000 Call 860-565-1779

HONDA 1100 SHADOW AERO '99 Showroom Condition, Blue/Black, Extras, $5,395. (860)228-0060 /(860)212-3101

Honda CRF70F 05 Dirt Bike w/ trailer and accessories Call Angela 203-626-5635

HONDA SHADOW 750 ACE '03 Less Than 1300 mi; Like New! Windshield, Asking $5,000/bo (860)989-7134

HONDA TWIN STAR CM200T '80 Ex Cond, 7k, $750 860-569-2773 zr2inct@comcast.net

KAWASAKI KLX400SR '04 Dual sport, many extras, hand guards, skid plate, 3 sets of tires, 1800 mi $3300 428-1032

Kawasaki KX250 '95 Lots of extras MUST SELL! $800 Call Josh 860-647-8315

Scooter Kinetic Milano, electric start, 50cc, 650 miles. Stored inside, excellent condition. $500. Call Bob 860-