Acquire Hybrid IR Room
Project #6249 HS

Mercy Hospital St. Louis
St. Louis, MO

October 2025

Certificate of Need Program

NEW OR ADDITIONAL EQUIPMENT APPLICATION

Applicant's Completeness Checklist and Table of Contents

Project Name: Acquire hybrid IR room Project No: 6249 HS

Project Description: Mercy Hospital St. Louis intends to acquire a hybrid IR room

Done	Page	N/A	Description
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✔	7-8	☐	2. Representative Registration (From MO 580-1869)
✔	9	☐	3. Proposed Project Budget (Form MO 580-1863) and detail sheet with documentation of costs.
			Divider II. Proposal Description:
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✔	12	☐	2. Provide a timeline of events for the project, from CON issuance through project completion.
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✔	14	☐	7. Provide the historical utilization for each of the past three years and utilization projections through the first three (3) **FULL** years of operation of the new equipment.
✔	15	☐	8. Provide the methods and assumptions used to project utilization.
✔	15	☐	9. Document that consumer needs and preferences have been included in planning this project and describe how consumers had an opportunity to provide input.
✔	15	☐	10. Provide copies of any petitions, letters of support or opposition received.
✔	15	☐	11. Document that providers of similar health services in the proposed service area have been notified of the application by a public notice in the local newspaper.
✔	15	☐	12. Document that providers of all affected facilities in the proposed service area were addressed letters regarding the application.
			Divider III. Service Specific Criteria and Standards:
☐		✔	1. For new units, address the minimum annual utilization standard for the proposed geographic service area.
☐		✔	2. For any new unit where specific utilization standards are not listed, provide documentation to justify the new unit.
✔	92	☐	3. For additional units, document compliance with the optimal utilization standard, and if not achieved, provide documentation to justify the additional unit.
☐		✔	4. For evolving technology address the following:
☐		✔	- Medical effects as described and documented in published scientific literature;
☐		✔	- The degree to which the objectives of the technology have been met in practice;
☐		✔	- Any side effects, contraindications or environmental exposures;
☐		✔	- The relationships, if any, to existing preventive, diagnostic, therapeutic or management technologies and the effects on the existing technologies;
☐		✔	- Food and Drug Administration approval;
☐		✔	- The need methodology used by this proposal in order to assess efficacy and cost impact of the proposal;
☐		✔	- The degree of partnership, if any, with other institutions for joint use and financing.
			Divider IV. Financial Feasibility Review Criteria and Standards:
✔	95	☐	1. Document that sufficient financing is available by providing a letter from a financial institution or an auditor's statement indicating that sufficient funds are available.
✔	95	☐	2. Provide Service-Specific Revenues and Expenses (Form MO 580-1865) projected through three (3) **FULL** years beyond project completion.
✔	95	☐	3. Document how patient charges are derived.
✔	95	☐	4. Document responsiveness to the needs of the medically indigent.

Divider I

Application Summary

DIVIDER I – Application Summary

1. Application Identification and Certification (Form MO 580-1861)

The Application Identification and Certification form is included in Divider I – Attachments

2. Representative Registration (Form MO 580-1869)

Representative Registration forms are included in Divider I – Attachments

3. Proposed Project Budget (Form MO 580-1863)

The proposed budget form is included in Divider I – Attachments

All equipment quotes included in the application are valid.

Attachments

Divider I
Application Summary

Certificate of Need Program

APPLICANT IDENTIFICATION AND CERTIFICATION

*The information provided must match the **Letter of Intent** for this project, without exception.*

1. Project Location *(Attach additional pages as necessary to identify multiple project sites.)*

Title of Proposed Project	Project Number
Acquire hybrid IR room	6249 HS
Project Address *(Street/City/State/Zip Code)*	**County**
615 S. New Ballas Rd, St. Louis, MO 63141	St. Louis County

2. Applicant Identification *(Information must agree with previously submitted Letter of Intent.)*

List All Owner(s): *(List corporate entity.)*	Address (Street/City/State/Zip Code)	Telephone Number
Mercy Health East Communities	615 S. New Ballas Rd, St. Louis, MO 63141	314-251-1952

List All Operator(s): *(List entity to be licensed or certified.)*	Address (Street/City/State/Zip Code)	Telephone Number
Mercy Hospital St. Louis	615 S. New Ballas Rd, St. Louis, MO 63141	314-251-6000

3. Ownership *(Check applicable category.)*

☑ Nonprofit Corporation	☐ Individual	☐ City	☐ District
☐ Partnership	☐ Corporation	☐ County	☐ Other_____

4. Certification

In submitting this project application, the applicant understands that:

(A) The review will be made as to the community need for the proposed beds or equipment in this application;
(B) In determining community need, the Missouri Health Facilities Review Committee (Committee) will consider all similar beds or equipment within the service area;
(C) The issuance of a Certificate of Need (CON) by the Committee depends on conformance with its Rules and CON statute;
(D) A CON shall be subject to forfeiture for failure to incur an expenditure on any approved project six (6) months after the date of issuance, unless obligated or extended by the Committee for an additional six (6) months:
(E) Notification will be provided to the CON Program staff if and when the project is abandoned; and
(F) A CON, if issued, may not be transferred, relocated, or modified except with the consent of the Committee.

We certify the information and date in this application as accurate to the best of our knowledge and belief by our representative's signature below:

5. Authorized Contact Person *(Attach a Contact Person Correction Form if different from the Letter of Intent.)*

Name of Contact Person		Title
Denise Scoffic		Chief Financial Officer
Telephone Number	**Fax Number**	**E-mail Address**
314-251-1917		denise.scoffic@mercy.net
Signature of Contact Person		**Date of Signature**
Denise Scoffic		10-17-25

MO 580-1861 (03/13)

Certificate of Need Program

REPRESENTATIVE REGISTRATION

*(A registration form must be completed for **each** project presented.)*

Project Name	Number
Acquire hybrid IR room	6249 HS

(Please type or print legibly.)

Name of Representative	Title
Denise Scoffic	Chief Financial Officer

Firm/Corporation/Association of Representative (may be different from below, e.g., law firm, consultant, other)	Telephone Number
Mercy	314-251-1917

Address (Street/City/State/Zip Code)

615 S. New Ballas Rd, St. Louis, MO 63141

Who's interests are being represented?
(If more than one, submit a separate Representative Registration Form for each.)

Name of Individual/Agency/Corporation/Organization being Represented	Telephone Number
Mercy Health East Communities-Mercy Hospital St. Louis	314-251-6000

Address (Street/City/State/Zip Code)

615 S. New Ballas Rd, St. Louis, MO 63141

Check one. Do you:

- ☑ Support
- ☐ Oppose
- ☐ Neutral

Relationship to Project:

- ☐ None
- ☑ Employee
- ☐ Legal Counsel
- ☐ Consultant
- ☐ Lobbyist
- ☐ Other (explain):

Other Information:

I attest that to the best of my belief and knowledge the testimony and information presented by me is truthful, represents factual information, and is in compliance with §197.326.1 RSMo which says: *Any person who is paid either as part of his normal employment or as a lobbyist to support or oppose any project before the health facilities review committee shall register as a lobbyist pursuant to chapter 105 RSMo, and shall also register with the staff of the health facilities review committee for every project in which such person has an interest and indicate whether such person supports or opposes the named project. The registration shall also include the names and addresses of any person, firm, corporation or association that the person registering represents in relation to the named project. Any person violating the provisions of this subsection shall be subject to the penalties specified in §105.478, RSMo.*

Original Signature	Date
Denise Scoffic	10-17-25

MO 580-1869 (11/01)

Certificate of Need Program

REPRESENTATIVE REGISTRATION

*(A registration form must be completed for **each** project presented.)*

Project Name	Number
Acquire hybrid IR room	6249 HS

(Please type or print legibly.)

Name of Representative	Title
Tyler Sturgeon	Chief Financial Officer

Firm/Corporation/Association of Representative (may be different from below, e.g., law firm, consultant, other)	Telephone Number
Mercy	314-251-1917

Address (Street/City/State/Zip Code)

615 S. New Ballas Rd, St. Louis, MO 63141

Who's interests are being represented?
(If more than one, submit a separate Representative Registration Form for each.)

Name of Individual/Agency/Corporation/Organization being Represented	Telephone Number
Mercy Health East Communities-Mercy Hospital St. Louis	314-251-6000

Address (Street/City/State/Zip Code)

615 S. New Ballas Rd, St. Louis, MO 63141

Check one. Do you:

- ☑ Support
- ☐ Oppose
- ☐ Neutral

Relationship to Project:

- ☐ None
- ☑ Employee
- ☐ Legal Counsel
- ☐ Consultant
- ☐ Lobbyist
- ☐ Other (explain):

Other Information:

I attest that to the best of my belief and knowledge the testimony and information presented by me is truthful, represents factual information, and is in compliance with §197.326.1 RSMo which says: *Any person who is paid either as part of his normal employment or as a lobbyist to support or oppose any project before the health facilities review committee shall register as a lobbyist pursuant to chapter 105 RSMo, and shall also register with the staff of the health facilities review committee for every project in which such person has an interest and indicate whether such person supports or opposes the named project. The registration shall also include the names and addresses of any person, firm, corporation or association that the person registering represents in relation to the named project. Any person violating the provisions of this subsection shall be subject to the penalties specified in § 105.478, RSMo.*

Original Signature	Date
Ty St	10/23/25

MO 580-1869 (11/01)

Certificate of Need Program

PROPOSED PROJECT BUDGET

Description	**Dollars**
COSTS:*	*(Fill in every line, even if the amount is "$0".)*
1. New Construction Costs ***	
2. Renovation Costs ***	
3. Subtotal Construction Costs (#1 plus #2)	$0
4. Architectural/Engineering Fees	
5. Other Equipment (not in construction contract)	
6. Major Medical Equipment	$2,425,643
7. Land Acquisition Costs ***	
8. Consultants' Fees/Legal Fees ***	
9. Interest During Construction (net of interest earned) ***	
10. Other Costs ***	
11. Subtotal Non-Construction Costs (sum of #4 through #10	$2,425,643
12. Total Project Development Costs (#3 plus #11)	$2,425,643 **
FINANCING:	
13. Unrestricted Funds	$2,425,643
14. Bonds	
15. Loans	
16. Other Methods (specify)	
17. Total Project Financing (sum of #13 through #16)	$2,425,643 **

18. New Construction Total Square Footage	
19. New Construction Costs Per Square Foot *****	
20. Renovated Space Total Square Footage	
21. Renovated Space Costs Per Square Foot ******	

* *Attach additional page(s) detailing how each line item was determined, including all methods and assumptions used. Provide documentation of all major costs.*

** *These amounts should be the same.*

*** *Capitalizable items to be recognized as capital expenditures after project completion.*

**** *Include as Other Costs the following: other costs of financing; the value of existing lands, buildings and equipment not previously used for health care services, such as a renovated house converted to residential care, determined by original cost, fair market value, or appraised value; or the fair market value of any leased equipment or building, or the cost of beds to be purchased.*

***** *Divide new construction costs by total new construction square footage.*

****** *Divide renovation costs by total renovation square footage.*

Divider II

Proposal Description

DIVIDER II – Proposal Description

1. Provide a complete detailed project description and include equipment bid quotes.

Overview

Mercy Hospital St. Louis is experiencing a growing demand for advanced interventional radiology (IR) procedures that require both computed tomography (CT) and angiography capabilities. At present, patients requiring comprehensive image-guided interventions must be transported between separate CT and angiography rooms to complete their procedures. This workflow introduces inefficiencies, delays in care, and additional risk to critically ill patients. Establishing a hybrid interventional radiology suite (hybrid IR room) will enable integrated, multi-modality imaging and treatment in a single location—enhancing patient safety, clinical outcomes, and departmental efficiency. Mercy Hospital St. Louis currently operates two full interventional radiology suites (IR rooms) and four CT scanners that together support a high and steadily increasing procedural volume

Background and Need

In fiscal year 2025, the Mercy Hospital St. Louis Emergency Department saw over 100,000 patient visits, demonstrating the continued growth in emergency and acute care demand. As a regional referral center, our hospital receives a high volume of complex cases requiring advanced diagnostic imaging and immediate interventional procedures. The number of interventional radiology cases continues to rise, driven by increased volumes in trauma, stroke, vascular access, embolization, and oncologic interventions.

Currently, when both CT and angiographic imaging are required, patients must be transferred between two separate procedure rooms. This workflow:

- Extends overall procedure time
- Delays treatment in time-sensitive cases such as trauma or stroke
- Increases the risk of complications during patient transport
- Limits the availability of both CT and IR procedure rooms for other patients

Proposed Solution

To address these challenges, the project proposes the installation of a hybrid interventional radiology suite (hybrid IR room) within the Interventional Radiology department. This system combines high-resolution CT imaging with advanced angiographic capabilities in one suite, allowing for seamless transition between diagnostic imaging and interventional therapy without moving the patient.

Key Benefits and Impacts

- Enhanced patient safety and outcomes: Eliminates the need to transport patients mid-procedure, reducing risk and maintaining a sterile, controlled environment.
- Improved efficiency and throughput: Enables multi-modality imaging and treatment in a single setting, shortening procedure times and optimizing use of clinical staff and anesthesia resources.

DIVIDER II – Proposal Description (continued)

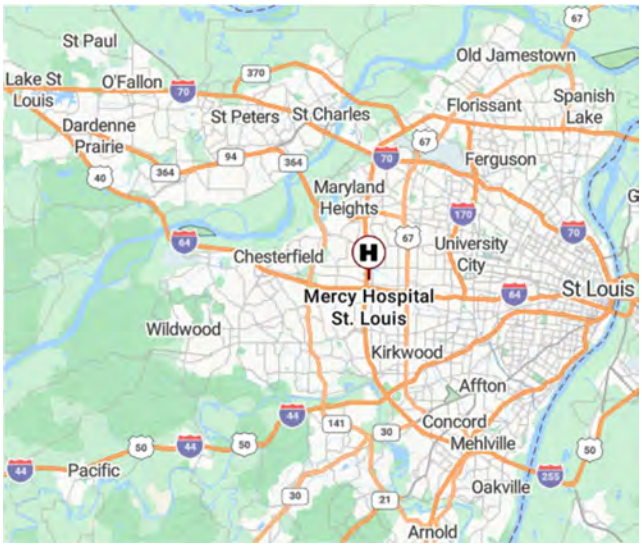
- Increased diagnostic imaging capacity: By freeing the existing CT scanner currently used for interventional procedures, additional diagnostic CT capacity will become available to support increasing hospital demand.
- Operational integration with surgical and critical care services: Locating the hybrid IR suite adjacent to the operating room will streamline workflow and enhance coordination with anesthesia and surgical teams, especially for emergent or complex cases.
- Alignment with Mercy's mission and strategic goals: This project reflects Mercy's commitment to state-of-the-art technology, patient-centered care, and operational excellence, ensuring that our facilities remain capable of meeting the evolving needs of the communities we serve.

Conclusion
The addition of a hybrid interventional radiology suite (hybrid IR room) at Mercy Hospital St. Louis represents a strategic investment in patient safety, clinical capability, and operational efficiency. This project will allow clinicians to deliver timely, comprehensive care to some of our most critically ill patients while positioning Mercy as a continued leader in advanced interventional radiology services in the region.

2. Provide a timeline of events for the project, from CON issuance through project completion.

Project timeline assumes CON issuance January 2026
Equipment Arrival: April 2026
Equipment Installation: May 2026
Go-Live: June 2026

3. Provide a legible city or county map showing the exact location of the project.



DIVIDER II – Proposal Description (continued)

4. Define the community to be served and provide the geographic service area for the equipment.

Mercy provides imaging services to patients who reside throughout the greater St. Louis region. Mercy Hospital St. Louis is one of the area's largest hospitals in the region. The primary service area includes seven counties; St. Louis County, St. Charles, Franklin, Warren, Lincoln, Jefferson, and St. Louis City. The patient origin of imaging patients is similar to the geographic region of all other patients served by Mercy St. Louis.

Mercy operates other hospitals in the area as well, in Festus (Jefferson County), Troy (Lincoln County) and Washington (Franklin County), as well as a rehabilitation specialty hospital in West St. Louis County. Mercy physician offices and outpatient facilities are widely spread throughout the entire area.

5. Provide other statistics to document the size and validity of any user-defined geographic service area.

Mercy St. Louis is an acute care, level one trauma facility and stroke center, providing 24-hour emergency room care and a full range of diagnostic, preventative and restorative health care services.

Mercy St. Louis is licensed for 900 inpatient care beds. In FY25, the hospital had 44,959 inpatient discharges, 909,296 outpatient visits, and 101,387 ED visits. Additionally, the hospital performed 41,043 surgeries and employed 6,506 coworkers.

Mercy Hospital St. Louis serves patients from a large geographic area. According to the Missouri Department of Health and Senior Services, the 2030 estimated population projections for the seven counties in Mercy St. Louis' primary service area is 2.1 million. The population projections are documented in the table below:

2030 Population Projections Mercy Hospital St. Louis Primary Service Area	
Franklin	108,981
Jefferson	238,004
Lincoln	72,348
St. Charles	444,252
St. Louis City	253,864
St. Louis County	968,327
Warren	41,129
Total	2,126,905

Source: MO Department of Health & Senior Services

DIVIDER II – Proposal Description (continued)

6. Identify specific community problems or unmet needs the proposal would address.

Our region is facing several community health challenges that intensify the need for integrated and rapid diagnostic and interventional capabilities:

- **High incidence of cardiovascular and cerebrovascular disease:** St. Louis consistently reports elevated rates of stroke and peripheral vascular disease compared with state and national averages. Immediate access to hybrid imaging for endovascular therapy can significantly reduce treatment times and improve outcomes for these time-critical conditions.
- **Growing trauma volume:** As one of the area's busiest trauma referral centers, Mercy sees a rising number of multi-system trauma patients requiring rapid imaging, vascular repair, and hemorrhage control—all of which can be performed more safely and efficiently in a hybrid suite.
- **Increasing cancer and oncologic intervention needs:** St. Louis has one of the highest cancer incidence rates in Missouri. Demand for minimally invasive oncologic procedures—such as tumor ablation, targeted embolization, and biopsy—continues to grow, requiring advanced imaging capabilities.
- **Rising demand for complex vascular and dialysis access procedures:** The region's aging population and high prevalence of diabetes and renal disease are driving increased need for image-guided vascular access and maintenance procedures.

7. Provide the historical utilization for each of the past three years and utilization projections through the first three (3) FULL years of operation of the new equipment.

Historical Utilization (2 units)	
FY 23	4,816
FY 24	4,661
FY 25	4,496
Projected Utilization (3 units)	
Year 1	5,252
Year 2	5,267
Year 3	5,283
Year 4	5,298

DIVIDER II – Proposal Description (continued)

8. Provide the methods and assumptions used to project utilization.

Projected utilization is based on Mercy Hospital St. Louis' historical experience in the interventional radiology department. Mercy Hospital St. Louis expects the number of interventional radiology cases to continue to rise, driven by increased volumes in trauma, stroke, vascular access, embolization, and oncologic interventions.

9. Document that consumer needs and preferences have been included in planning this project and describe how consumers had an opportunity to provide input.

When planning new services, Mercy incorporates comments from members of the medical staff, patients, area residents and Mercy co-workers. Additionally, the hospital's board of directors includes community leaders who provide input into the services of the hospital.

10. Provide copies of any petitions, letters of support or opposition received.

Three letters of support are attached to this application and are included in this section. The letter authors include:

- Emily Combs, COO
- Labib Haddad, MD
- David Meiners, MD

No opposition has been received for the acquisition of the interventional radiology system. If any letters of opposition are received, they will be forwarded to the CON Program Office.

11. Document that providers of similar health services in the proposed service area have been notified of the application by a public notice in the local newspaper.

A public notice seeking comment on this matter was published in The St. Louis Post Dispatch on 10/13/2025. A copy of the ad is included in Divider II-Attachments.

12. Document that providers of all affected facilities in the proposed service area were addressed letters regarding the application.

Emails regarding the application were sent to affected facilities in the service area. A list of all affected facilities and copies of each email are included in Divider II-Attachments.

Attachments

Divider II
Proposal Description

CANON MEDICAL SYSTEMS USA, INC.

Made For life

QUOTATION/ORDER SUMMARY

DATE: 5/5/2025
SID #: 30111091
QUOTE #: 192147-3

PRESENTED TO:

MERCY HOSPITAL ST LOUIS
615 S NEW BALLAS RD
SAINT LOUIS, MO. 63141

4DCT/SKY+HD/PRIME-SP/3.000
[V9.5] ALPHENIX 4D CT SKY+ HD / AQUILION PRIME SP SYSTEM

This quotation shall remain valid until June 30, 2025.

All prices are F.O.B. destination.
Payment terms are: Cash - 0% down payment, 80% upon shipment, 20% upon completion of installation and/or availability for first use, whichever is earlier. All invoice terms are net 30 days.

This quotation/order will be subject to and governed by the Agreement for Vascular equipment products between HealthTrust Purchasing Group and Canon Medical Systems USA, Inc., Reference contract no. 79857, effective January 1, 2022. Vendor represents and warrants that it will continue to support and provide Services to repair and maintain those Products that are Equipment for a minimum of ten (10) years from installation of such Product.

Please return signed quotation to Canon Medical Systems USA, Inc. by email OrderAdmin@us.medical.canon or fax 714-441-9320.

ACCEPTED AGREED AND ORDERED:

PURCHASER'S SIGNATURE/TITLE	DATE	CANON MEDICAL SYSTEMS REP	DATE

EQUIPMENT SUMMARY:

4DCT/SKY+HD/PRIME-SP/3.000 **[V9.5] ALPHENIX 4D CT SKY+ HD / AQUILION PRIME SP SYSTEM**

PART NUMBER	QTY	DESCRIPTION	
4DCT/HD/SKY+16/PRIME-SP.100	1	SYSTEM KIT: ALPHENIX 4D CT WITH HD SKY + 12" X 16"	$1,885,000.00
	1	MAIN UNIT: ALPHENIX HD FPD SKY+ 12" X 16" SYSTEM	
	1	CATHETERIZATION TABLE (TILT/CRADLE)	
	1	INTERFACE CAT-880B TO CAS-930A	
	1	MUSHROOM HANDLE FOR CAT-850B, CAT-880B	
	1	ANGIO-CT MODIFICATION KIT FOR 4DCT	
	1	4 M CEILING RAIL FOR 4D CT	
	1	SINGLE ARM BOARD	
	1	ANTI-FATIGUE FLOOR MAT	
	1	SERVICE INSTALLATION COMPONENTS	
	1	MAVIG TABLE MOUNTED RADIATION SHIELD	
	1	KNEE SUPPORT PAD	
	1	HEAD HOLDER / IMMOBILIZATION KIT	
	1	[KIT] COPPER PHANTOM FOR WAKEUP PROGRAM KIT FOR ALPHENIX SINGLE PLANE AND DUAL PLANE	
	1	COPPER PHANTOM FOR WAKE UP PROGRAM FOR ALPHENIX	
	1	WAKEUP CHECK PROCEDURE BOOKLET	
	6	COOLANT - 1 GALLON	
	1	19" COLOR MONITOR	
	1	[KIT] AQUILION PRIME SP WITH WINDOWS 10 FAST SYSTEM (80 DETECTOR ROW) WHOLE BODY CT SCANNER WITH AIDR 3D	

PART NUMBER	QTY	DESCRIPTION	
	1	CT SCANNER AQUILION PRIME SP WHOLE BODY CT SCANNER	
	1	AQUILION DETECTOR UPGRADE	
	1	SELF-PROPELLED CT SCAN BASE KIT WITH 2500 MM GANTRY MOVEMENT STROKE	
	1	PHANTOM, IMAGE QUALITY	
	4	NON-CORROSIVE FLOOR LEVELING EPOXY KIT	
	1	DVD-R 4.7 GB 10 PACK SLIM CASE	
	1	72 KW X-RAY HIGH VOLTAGE GENERATOR 600 MA UPGRADE	
	1	SURECONNECT DICOM CONNECTIVITY PACKAGE	
	1	DICOM 3 STORAGE SERVICE CLASS PROVIDER (SCP)	
	1	DICOM 3 MODALITY WORKLIST MANAGEMENT (MWM) SERVICE CLASS USER (SCU) SYSTEM	
	1	DICOM 3 PERFORMED PROCEDURE STEP SCU	
	1	DICOM 3 QUERY/RETRIEVE SCP	
	1	DICOM 3 QUERY/RETRIEVE SCU AQ/MP	
	1	DICOM 3 STORAGE COMMITMENT SCU SOFTWARE	
	1	PRESENTATION OF GROUPED PROCEDURES (PGP) AND EXAM HARD SPLIT	
	1	STANDARD APPLICATIONS TRAINING	
CTF/PRIMESP/3.100	1	[KIT] SUREFLUORO: CT FLUORO KIT FOR AQUILION PRIME SP WITH TOUCH CONSOLE AND MOBILE CART	$38,860.00
	1	CT FLUOROSCOPY (TOUCH CONSOLE/MOBILE CART)	
	1	19" LCD MONITOR FOR SUREFLUORO	
	1	NEEDLE HOLDER KIT FOR CT FLUOROSCOPY	

PART NUMBER	QTY	DESCRIPTION	
REARPNL/PRIMESP.100	1	GANTRY REAR CONTROL PANEL KIT FOR AQUILION PRIME SP	$4,461.00
	1	REAR GANTRY PANEL KIT	
AQ/PDU	1	POWER DISTRIBUTION UNIT	$44,400.00
UNISPOT-SP.100	1	[KIT] CONTROL ROOM UNISPOT FOR SINGLE PLANE SYSTEMS	$20,300.00
	1	UNISPOT DISPLAY KIT WITH 32" 4K MONITOR	
	1	UNISPOT DISPLAY KIT WITH LICENSE AND DECODER	
	1	MONITOR INTEGRATION SYSTEM ACCESSORY KIT	
BARCO-58/2.100	1	[KIT] BARCO 58" V7 LARGE MONITOR WITH BUILT-IN PROTECTIVE GLASS NIVR58-T7 G KIT	$85,840.00
	1	BARCO 58" V7 NIVR58-T7 G KIT (COMPOSITOR, 4 ENCODERS, NETWORK SWITCH AND CABLES)	
	3	100FT CAT5E BLUE PATCH CABLE CABL CAT5 SNAGLESS MOLDED M/M RJ45 350MHZ	
	3	6FT CAT5 CAT5E BLUE PATCH CABLE CABL SNAGLESS MOLDED M/M RJ45 350MHZ	
	1	BACKUP MONITOR INTERFACE KIT FOR BARCO 58" MONITOR	
	1	CABINET FOR LARGE LCD COLOR DISPLAY MONITOR	
	1	TRIPP LITE WALL MOUNT CABINET	
	2	TRIPPLITE 6 OUTLET RACKMOUNT POWER STRIP PERP 1U REAR FACING	
	1	TRIPPLITE 1U RACK ENCLOSURE FIXED SHELF	
	2	TRIPPLITE WALL MOUNT RACK ROOF FAN KIT FAN	
	1	BLACKBOX 10 PORT GIGABIT WEB SMART	
BARCO-58-HDMI-INPUT.100	1	[KIT] HDMI VIDEO INPUT HD ENCODER FOR BARCO V7	$2,087.00

PART NUMBER	QTY	DESCRIPTION	
	1	K9303320 MNA-420 ENC HDMI INCLUDES: MNA-420 ENC, 2XHDMI-DVI 10FT CABLE AND 10GSFP+	
	1	1M FIBER MMF LC-LC OM3 DX 2MM CABLE CUSTOM	
	1	30M LC-LC OM3 MM DX 2MM CABLE CUSTOM	
BARCO-FHD-OUTPUT.100	1	[KIT] FHD-VIDEO READY OUTPUT DECODER KIT FOR DIAGNOSTIC MONITOR INTERFACE	$2,958.00
	1	MNA-420 DEC V2 HD DUAL CHANNEL DECODER 2X HDMI OUTPUT ADDITIONAL 10G SFP+	
	1	DVI TO HDMI ADAPTOR (2 PCS 8" ADAPTORS INCLUDED)	
	1	ONE KIT 36M OPTIC FIBER CABLE TMS	
CL19196	1	19" COLOR MONITOR	$3,364.00
F310MON	1	SKYTRON F310 SERIES - MONITOR SUPPORT (58") (INSTALLATION INCLUDED)	$59,740.00
XIDF-REF801/DV-ALPH/SPDASH.100	1	[KIT] ADDITIONAL REFERENCE IMAGE KIT FOR SINGLE PLANE (MONITOR NOT INCLUDED)	$6,589.00
	1	ADDITIONAL REF MONITOR PORT FOR SINGLE PLANE	
XGCP-930AA	1	JOYSTICK CONTROL UNIT WITH STAND (SKY + ONLY)	$11,600.00
XACP-001BA/C1	1	TABLE SIDE TABLET CONSOLE (4M CABLE)	$12,180.00
XIDF-QCA850/B1.100	1	BASIC KIT FOR CLINICAL ANALYSIS APPLICATION	$4,640.00
	1	CAAS BASIC KIT FOR CLINICAL ANALYSIS APPLICATION	
XIDF-QCA852/B1	1	QUANTITATIVE VESSEL ANALYSIS - 9MM OR ABOVE	$12,760.00
XIDF-AWS801/CA2/3.100	1	[KIT] ALPHENIX ANGIO WORKSTATION (AWS PRO) AND MONITOR	$43,036.00
	1	ALPHENIX ANGIO WORKSTATION (AWS PRO)	

PART NUMBER	QTY	DESCRIPTION	
	1	ROCKET LINK CONNECTION KIT	
	1	21" MONITOR, LCD COLOR (BASE PLATE INCLUDED)	
	2	DISPLAY PORT TO DVI-D ADAPTER/VIDEO CONVERTER 1080P	
3D-ANGIO-SW-KIT/AL.100	1	BASE 3D ACQUISITION SOFTWARE	$7,274.00
	1	3-D ANGIO SOFTWARE	
APPS-ONSITE-32	1	ON-SITE APPLICATIONS TRAINING - 32 HOURS	$7,000.00
XIDF-PVG801/A1.100	1	3D VIEWER KIT	$23,432.00
	1	3D VIEWER KIT	
XIDF-TCE801/A1	1	EMBOLIZATION PLAN KIT (REQUIRES 3D VIEW KIT)	$14,500.00
XIDF-3DP802/C1.100	1	3D ROADMAP WITH NEEDLE GUIDANCE KIT ON AWS	$31,317.00
	1	3D ROADMAP WITH NEEDLE GUIDANCE KIT ON AWS	
XIDF-3DP804	1	MULTI-MODALITY ROADMAP KIT (CT & MR)	$20,300.00
XIDF-ROT801	1	ROTATIONAL DSA KIT	$12,760.00
XBER-001A	1	TABLE SIDE CONTROL EXTENSION RAIL SET (PAIR)	$5,037.00
XBET-001A	1	FOOT-END TABLE EXTENSION (REQUIRES XBER-001A)	$3,587.00
9412	1	2" TABLE FOOT-END EXTENSION PAD FOR PART # XBET-001A	$217.00
FOOTSWITCH/W/SP/880.100	1	WIRELESS FOOTSWITCH FOR CAT-880B SINGLE AND DUAL PLANE	$4,316.00
TS1006-US	1	MAVIG TRACK 4.0 M LENGTH / 335 MM WIDTH WITH SPOOLER	$3,306.00
57CM-COLUMN-TROLLEY.100	1	MAVIG CEILING 360 COLUMN WITH TROLLEY (57 CM) WITH BRAKE STRAP	$2,842.00
OT90001-US	1	MAVIG PORTEGRA2 (95/90 CM) EXTENSION SPRING ARM WITH CENTER MOUNTED CONTOUR CUT-OUT SHIELD (61X76 CM)	$4,959.00

PART NUMBER	QTY	DESCRIPTION	
LE9017100	1	MAVIG PORTEGRA2 (95/90 CM) EXTENSION SPRING ARM WITH YLED-1F LED LAMP	$5,220.00
MARK7-TABLE/2.100	1	[KIT] MEDRAD / BAYER MARK 7 ARTERION INJECTOR, INSTALL INCLUDED (TABLE MOUNT)	$30,160.00
	1	MEDRAD / BAYER MARK 7 ARTERION INJECTOR, INSTALL INCLUDED (TABLE MOUNT)	
XIDF-DTS802/C1.100	1	[KIT] DOSE TRACKING SYSTEM WITH MONITOR FOR ALPHENIX	$11,601.00
	1	DOSE TRACKING SYSTEM FOR ALPHENIX	
	1	21" MONITOR, LCD COLOR (BASE PLATE INCLUDED)	

TOTAL QUOTE PRICE **$2,425,643.00**
Applicable Sales Tax Additional

PURCHASABLE OPTIONS:

Please initial next to the option item you would like to purchase. Selected purchasable options will increase the total quote price by the noted "ADD" dollar amount listed on the item line:

PART NUMBER	QTY	DESCRIPTION	ADD	INITIALS
CONEXACT-PRIMESP.100	1	CONEXACT DOUBLE SLICE KIT FOR PRIME 80 TO 160 SLICE UPGRADE	$46,774.00	_____
SECOND-CONSOLE/PRIMESP10.100	1	[KIT] SECOND CONSOLE KIT FOR AQUILION PRIME SP (CA-ONLY REQUIRES VERSION 10)	$34,800.00	_____
AICE-303B/8.100	1	AICE FOR PRIME SP10 (TSX-303B/4, /8, /D ONLY- TSX-303B/1, /4 WITH CGS-98B)	$87,557.00	_____
CCFR-010A/1B	1	ULTRA-FAST IMAGE RECONSTRUCTION KIT	$37,299.00	_____
FLEX-PED	1	MEDRAD STELLANT FLEX PEDESTAL DUAL FLOW INJECTOR	$38,065.00	_____

FINANCE OPTIONS:
Finance options are available through Canon Medical Finance USA, a program of Canon Medical Systems USA, Inc.

CANON MEDICAL FINANCE USA OFFERINGS:

- Fair Market Value, $1.00 Buy Out (Lease to Own), and Loan structures
- Finance terms ranging from 12 months to 84 months
- Financing for 3rd party assets (including, but not limited to leasehold improvements & I.T.)

CANON MEDICAL FINANCE USA BENEFITS:

- No progress payments. Payments begin after delivery and installation
- Upgrades to the current technology platform can be financed.
- Flexible finance structures, such as deferred payments, tiered repayments, and bridge financing, to meet cash flow needs

Finance options are subject to credit underwriting, approval, and a fully executed contract.

For more information, please contact Trish Malone, Sr. Dir. Financial Programs at:
tmalone@us.medical.canon or visit us at https://us.medical.canon/service-and-support/financial-programs/

COMPONENT SUMMARY:

PART NUMBER	QTY	DESCRIPTION
4DCT/HD/SKY+16/ PRIME-SP.100	**1**	**SYSTEM KIT: ALPHENIX 4D CT WITH HD SKY + 12" X 16"**

STANDARD SYSTEM COMPONENTS

- CAS-930A/F1 — Multi-Axis C-arm, Ceiling Mounted
- DSRX-T7345GFS — High-Capacity X-ray Tube
- BLA-900A — Automatic Rotating Collimator
- TFP-1216C/A1 — 12”x16” HD Flat Panel Detector
- CAT-880B/FC — Catheterization (Tilting) Table
- XGCP-880BA/B1 — Tableside Console Hyper Handle
- XBFS-880S — Standard Footswitch
- XTP-8100XG — High-Frequency X-ray Generator 100 kW
- DFP-8000C/A2 — Multitasking Digital Fluoroscopy Processor
- XIDF-MIC802 — Microphone Kit
- XIDF-MCC80S — Main Console
- XIDF-FS801S — Control Room Footswitch
- XJDK-001A/V9 — Dose Meter Controller
- XJDC-016A — Dose Chamber

ALPHENIX 4D CT HD SKY+ 12X16 AQUILION PRIME SP WITH WINDOWS 10 – SYSTEM - OVERVIEW

The Alphenix™ 4D CT Sky + 12”x16” imaging system is comprised of the Alphenix Sky (ceiling mounted) cardiovascular imaging series and the Aquilion™ PRIME SP with Windows 10 operating system. This synergistic combination is designed to enable enhanced imaging capability to support clinician guided diagnosis and intervention, ease of patient access and efficient workflow to facilitate interventional procedures.

A specially designed tabletop, used for both the Alphenix Sky and Aquilion PRIME SP Series CT scanner components of the system, enables easy switching between angiography and CT imaging. The interventional angiography procedure can then be performed without the need to transfer the patient to another table. This combination enables patient access and efficient workflow for interventional procedures.

A unique Canon Medical Systems capability provided in Alphenix 4D CT Aquilion PRIME SP Series system is the SureGuidance, which provides a fast and accurate position-linkage of centralizing the target exposure area between CT and angiography without moving the patient during interventional procedures. The CT gantry, Angiographic C-arm and table

moves automatically to do the rest, improving workflow and saving procedure time.

The following overview summarizes the key capabilities of the Alphenix 4D CT Sky 12" x 16" Aquilion PRIME SP Series system.

Imaging Capabilities

Interventional Imaging:

- Alphenix Sky +'s 12"x 16" flat-panel detector with ceiling mounted multi-axis C-arm offers ease of movement and Access Halo (180 degree head-end access) for enhanced patient and equipment interaction. Ideally suited for body work and extremities, the system also has the capability to perform other cardiovascular imaging procedures.
- Canon Medical Systems' proprietary Advanced Imaging Processing (AIP) technology generates high-resolution images to enhance wire, stent, and device placement. Built-in features include DSA, enhanced fluoroscopy visualization, and Dynamic Trace imaging.

ALPHENIX SKY + MULTI-AXIS C-ARM, CEILING MOUNTED - CAS-930A

The flexible, ceiling-suspended C-arm provides all clinical angles for diagnostic and interventional procedures. The superb access to the patient allows the operator to approach and work in the desired relationship to the patient (without moving the table), enabling catheterization techniques to be freely executed.

Specifications

- Variable speeds up to 80 degrees per second for rotational acquisition from tableside
- Stroke of flat panel detector movement (SID): 300 mm, motor-driven
- Isocenter height: 1050 mm (41.3")
- ±135-degree column rotation (270-degree head-end open access)

Positioning Features to Enhance Workflow

The ceiling-suspended, multi-axis C-arm is designed to enhance workflow. Features include:

- **C-arm Movement:** Flexible positioner that, combined with low-profile housing of the X-ray tube and flat panel detector (FPD), optimizes imaging angles. Enables variable-speed axial rotations and isocentric fluoroscopy and fluorography with rotations from:
  - RAO 180 degrees to LAO 120 degrees (when the C-arm is in head-end position)
  - RAO 90 degrees to LAO 70 degrees (side position)
- **Auto-Positioning/Auto-Set Functions:** Specify auto-positioning settings sequentially for each study protocol. Quickly initiate C-arm positioning and system settings for the desired imaging requirements. Record and

reproduce over 64 programs of: angulations and SID, initial field-of-view (FOV), table height, compensation filter position.
- **Auto-Angle:** For acquired images, auto-angle stores the following for one-touch recall (can be customized to site): C-arm angle, initial field-of-view (FOV), table height, compensation filter position, FOV, Live Digital Zoom.

SURE**Guidance:** Provides a fast, accurate means of centralizing the target exposure area between CT and angiography, obviating the need to move the patient during interventional procedures. The CT gantry, Angiographic C-arm and table moves automatically to do the rest, improving workflow and saving procedure time.

AUTOMATIC ROTATING COLLIMATOR - BLA-900A
- Four dose-adjustment filters with industry-standard filtration materials: aluminum 1.8 mm, copper 0.2 mm, 0.3 mm, 0.5 mm
- Automatic or manual rotating collimator keeps a heads-up alignment
- ±135-degree rotation permits optimized collimation for off-angled imaging
- Automatic selection of appropriate filter is possible when registered in the fluorographic program
- Additional compensation filters are provided: iron 1.2 mm
- Two left/right filters (heart-shaped or straight filters available)
- One center filter (straight)

HIGH-CAPACITY X-RAY TUBE WITH LIQUID METAL BEARING - DSRX-T7735GFS
Includes a standard 36-month, non-prorated tube warranty. Triple-focus design provides small-focal-spot redundancy. Highly efficient, pulsed fluoroscopy with built-in beam-hardening aluminum and copper filters reduces dose. Continuous, high-speed (9000 rpm) anode rotation provides immediate display of fluoroscopic and fluorographic images. Other features include:
- Grid switch
- Maximum kV: 125 kV
- Focal spot: 0.4/0.6/1.0 mm
- Maximum ratings: 17/48/100 kW
- Target angle: 11 degrees
- Maximum anode heat storage: 3000 kHU
- Maximum anode cooling rate: 7700 HU/s

12"X16" CANON EXCLUSIVE NEW HIGH DEFINITION FLAT PANEL DETECTOR - TFP-1216C/A1
Canon exclusive new High Definition panel consists of a 12" x 16" (Standard) Amorphous panel that is combined with a 3.5" x 3.5" (High Definition) CMOS panel. This results in resolutions of 2.6 lp/mm (Standard) and 6.6 lp/mm (High Definition). The High Definition (3.5" x 3.5") small pixel

detector panel contains a novel proprietary architecture that utilizes 76 × 76 µm in addition to the standard architecture of 194 × 194 µm.

- Multiple fields-of-view:
  12″x16″, 12″ X12″, 10″x10″, 8″x8″, 6″x6″ (Standard)
  3″x3″, 2.3″x2.3″, 1.5″x1.5″ (High Definition)

CATHETERIZATION (TILTING) TABLE - CAT-880B/CT

Facilitates catheterization of cardiac, cerebral, abdominal and peripheral areas. As a hybrid catheterization table, can also support some open surgical procedures. Micro-processor-controlled longitudinal movement enables table to be used for numerous radiographic techniques. Flat surface eases movement of patient on and off the table.

Specifications

- Sliding movements (manual):
  - Longitudinal stroke: 1500 mm (59.1")
  - Lateral stroke: ±200 mm (±7.9")
- Vertical movement (motor-driven): 754 mm to 1054 mm (29.7" to 41.5") (from floor level)
- Tilt: 16 degrees head up and 16 degrees head down (motor drive for longitudinal shift when tilted)
- Lateral tilt: 16 degrees left and 16 degrees right (manual lateral panning is possible, even when tilted laterally)
- Tabletop rotation range (manual pivot): +90 to -90 degrees
- Maximum patient weight:
  - 507 lbs. (230 kg) at maximum table extension
  - Can support additional loading of up to 220 lbs. (100 kg) for cardiopulmonary resuscitation (CPR)

TABLESIDE CONSOLE HYPER HANDLE - XGCP-880BA/B1

Adjustable, rail-mounted, tableside control provides functional control of component movement and interface with digital console. Control features a slim profile and ergonomic design with tactile control buttons, enhancing the user experience.

STANDARD FOOTSWITCH - XBFS-880S

A pedal footswitch provides various image acquisition and other programmable functions via foot pedals and buttons, freeing the clinician's hands and allowing more focus on the patient and image display.

HIGH-FREQUENCY X-RAY GENERATOR 100 KW - XTP-8100XG

Uses dual-inverter method for increased reliability with redundant inverter. Operates in normal/standard mode, low-dose mode and high-dose mode fluoroscopy. Includes: control console, control cabinet, power cabinet with high-speed starter, fluoroscopy control cabinet, system power source cabinet.

Fluorographic Ratings
- 125 kV, 800 mA (0.1 s)
- 100 kV, 1000 mA (0.1 s)

Pulsed Fluoroscopy Function
- Fluoroscopic tube voltage range: 50 kV to 120 kV
- Fluoroscopic tube current range: 200 mA peak
- Pulse width: 1.0 ms to 13.3 ms
- Repetition pulse rate: 30, 20, 15, 10, 7.5, 5, 3, 2, 1 exp/s (can be selected at the time of installation)
- Auto brightness control (ABC) function: provides the automatic adjustment of the tube voltage and tube current to maintain uniform monitor brightness

Digital Subtraction Angiography (DSA) Functions
- Tube voltage range: 50 kV to 125 kV
- Tube current range: maximum 1000 mA (may be restricted depending on the rating of the X-ray tube assembly)
- Pulse width: 1.0 ms to 100 ms

Digital Angiography (DA) Functions
- Tube voltage range: 50 kV to 125 kV
- Tube current range: maximum 1000 mA (may be restricted depending on the rating of the X-ray tube assembly)
- Pulse width: 1.0 ms to 25 ms

MULTITASKING DIGITAL FLUOROSCOPY PROCESSOR - DFP-8000C/A2

Canon Medical Systems' digital processor provides a variety of features to enhance workflow and image processing.

Fluoro and Acquisition Modes
- Fluoro:
- Input image: 1024^2 matrix, 16 bits
- Pulse rate: continuous or 1, 2, 3, 5, 7.5, 10, 15, 20, 30 exp/s

- DA Acquisitions (selected at the time of installation):
- Matrix of 1024^2: 16 bits at 1, 2, 3, 5, 7.5, 10, 15, 30 FPS
- Matrix of 512^2: 16 bits at 60 FPS (only available for less than 8" input size)

- DSA Acquisitions (selected at the time of installation):
- Matrix of 1024^2 : 16 bits at 1/3, 1/2, 1, 2, 3, 6, 10, 15, 30 FPS

Common Graphic User Interface

The new digital platform comes with a graphic user interface that is common across modalities on all Canon Medical Systems devices, for more intuitive operation of all systems.

Advanced Image Processing (AIP)
Canon Medical Systems' exclusive imaging technology, AIP is a combination of software, filters and proprietary hardware. AIP enables enhanced visualization of small devices and structures while providing real-time response to optimize the collection of critical imaging information during the most demanding procedures.

Advantages Over Conventional Imaging
Virtually instant-on fluoroscopy helps to capture critical information at fluoro initiation. Noise and anti-blooming suppression technology is designed to provide a more uniform, high-resolution presentation of the image during fluoroscopy. Virtually zero lag during fluoroscopic imaging helps to further enhance visualization during movement and while manipulating wires.

Proprietary Technology
AIP proprietary computing technology brings a new dimension to the overall performance of the system, adding specific functions for either targeted or general anatomical imaging to advance treatment planning and intervention. This includes:

- **Dynamic Pattern Recognition Filter (DPRF):** Enhances visibility with digital recognition of devices to differentiate devices from anatomy.
- **Dynamic Digital Compensation Filter (DDCF):** Improves exam efficiency and decreases dose by reducing the need for acrylic filters.
- **Super Noise Reduction Filter (SNRF):** Allows for better visualization of anatomy and device by reducing noise, even with acute angulations. These enhancements reduce the amount of noise and lag in digital imaging for both digital angiography (DA) and fluoroscopy.

Dynamic Trace
Use of a panning mode while imaging the lower extremities, and for bolus chase examinations, for a more uniform image display and background compression. This provides greater vessel detail even when vessels overlap bone.

Guide View Subtracted 2-D Roadmap Fluoro
Canon Medical Systems' proprietary Guide View technology is particularly useful during roadmap imaging. Guide View provides the ability to combine features to better distinguish and visualize guide wires within the vessel. These features include:

- Fade vessel or background, adjust brightness and contrast in real time, and reverse blacks and whites
- Provide boney landmark
- Create roadmap using Last Image Hold (LIH) or an acquired image:
- Peak Pixel Roadmap: Provides the optimal, live, peak, subtracted fluoroscopic roadmap image.

- Add Subtracted Fluoroscopy: Provides a completely subtracted display to better visualize live contrast injections or embolic materials.
- CO_2 DSA: Provides the optimal, live, CO_2 (low-density pixel), subtracted fluoroscopic roadmap image without the use of iodinated contrast media.

Fluoro Record and Fluoro Store
Enables the easy use of fluoro store and playback to further study regions of interest, potentially reducing overall radiation dose. Ideal for pediatric imaging.

- Tableside, one-button control
- Maximum: 90 seconds or 1020 frames of prospective recording
- Maximum: 60 seconds or 900 frames of retrospective recording

Live Digital Zoom
Live zoom digitally enlarges images in real time during both fluoroscopy and digital acquisition (DA) and offers the capability to provide a dose-savings alternative compared to traditional field-of-view (FOV) magnifications.

Virtual Position
Virtual Position displays an outline of the last image hold with a center point on the Live monitor which may be used as a reference to reposition the patient without the use of fluoroscopy. The outline and the center point moves during panning of the table to indicate the next area of exposure.

Virtual Collimation using Last Image Hold
Provides an electronic outline to position the collimator and acrylic filter without fluoroscopy, with no additional dose.

DA and DSA
The user-friendly, icon-driven platform provides intuitive, rapid, tableside control over image processing and data management.

Radiographic One-Shot Mode
Allows the capture of a single image at radiographic technique level. Image can be used as a mask for functions such as subtracted roadmap fluoroscopy.

Simultaneity
True multitasking, including: image retrieval, image acquisition, post processing, archiving, printing.

Prevision
Enables retrieval and display of previously acquired Alphenix series images as reference during follow-up procedures.

Post-Processing Software
Auto-window, pan and zoom, distance measurement and stenosis ratio measurement, spatial filtering (edge enhancement), brightness/contrast

control, landmarking percent, peak trace, CO_2 trace, shutter control, annotation, image rotation, pixel shift, panoramic view (available with Stepping DSA).

Image Recording Unit
High-capacity, high-speed disk (RAID Level 3):
- Maximum recording number: 1024^2 16-bits: 80,400; 512^2 16 bits: 321,400
- Online recording
- DVD-R and CD-R recording
- DICOM 3.0, 512^2 or 1024^2 8/10/12-bits, JPEG loss-less compression
- Up to 4800 frames at 512^2x8 bits
- Recording operation: manual or automatic background recording can be performed after examination

DICOM Conformance and Dose Reporting
- DICOM Store/Store Commitment, Query/Retrieve
- DICOM MWM and MPPS
- DICOM Structured Dose Reporting provides a comprehensive data set of procedural dose information that is available for output to further analyze and track dose information.

MICROPHONE KIT - XIDF-MIC802
- Includes noise-reduction transformer
- Remote operator activates microphone/speaker with footswitch
- In-room microphone/speaker mounts on monitor support

MAIN CONSOLE - XIDF-MCC80S
Control-room console with similar functions as exam-room console, which enhances workflow due to a more intuitive use of the system. From inside the control room a user can:
- Operate the ring menu
- Use pre-programmed functions
- Control collimator and filters
- Review and manipulate images

CONTROL ROOM FOOTSWITCH - XIDF-FS801S
Footswitch enables fluoroscopy to be initiated from inside the control room.

DOSE METER CONTROLLER - XJDK-001A/V9
Manages dose when combined with a dose chamber (XJDC-009A or XJDC-016A) on the front of the beam-limiting device. Sends the following data to the digital fluoroscopy processor:
- Exposure time
- Dose area product (DAP) in µGycm²
- Dose area product rate (DAP) in µGycm²/s
- Calculated surface dose in mGy and in mGy/s

DOSE CHAMBER - XJDC-016A
For cardiovascular tube. Mounted on top of the collimator to enable dose data for real-time display.

CT Imaging
Employing Aquilion premium technology, the Aquilion™ Prime SP, with Adaptive Iterative Dose Reduction 3D Enhanced (AIDR 3D Enhanced) is a scalable up to 160*1 slice system that employs the newest technology, PUREVision Optics and the PUREVision detector, that provides excellent image quality with reconstruction speeds up to 70*2 images per second.
The speed of this 80-row, or up to 160 slice system offers significant benefits to patients – especially trauma, pediatric and critically ill patients while at the same time enabling physicians to visualize internal injuries and disease in less time.

1-The coneXact double slice upgrade is required to obtain additional reconstructed slices in a single axial rotation.
2 – Optional (CCFR-010A Fast Image Reconstruction)

The PUREViSION Optics, with 40% better light output, supports better dose reduction and low contrast detectability.

Body CT
- Up to 31% Dose Reduction at equivalent Low Contrast Detectability
- Up to 22% improvement in Low Contrast Detectability at equivalent dose
- Reduced streak artifact

Brain CT
- Up to 19% improvement in Low Contrast Detectability at equivalent dose

Aquilion Prime SP employs the newest PUREViSION detector technology that produces 40% greater light output.

Combined, PUREViSION Optics and PUREViSION detector, they provide an improved and more homogenous X-ray spectrum with better light output for an overall more efficient imaging chain.

Encorporating a 7.5-MHU large-capacity X-ray tube, the PRME SP supports 40 mm of detector coverage scanning with short scan times (0.35 rotatin speed) and fits into an installation space as small as 19.3m2 leaving more room for technologists and physicians to provde patient care.

Single-Energy Metal Artifact Reduction (SEMAR)
SEMAR utilizes a sophisticated reconstruction algorithm to reduce artifacts caused by metal while improving visualization of the implant, supporting bone and adjacent soft tissues* for accurate imaging.
SEMAR can be retrospectively applied to a routine low-dose scan, including volumetric and helical scans, combined with AIDR 3D Enhanced to achieve

the best possible image quality without the need for additional exposure dose or a dedicated scan procedure. SEMAR is included with each system as a value add, valued at $50,000.

**** Bone structures near the metal-tissue interface may become distorted. Metal artifacts may not be completely removed in areas near the metal material.***
Comparison with the original images is suggested when performing diagnosis using SEMAR images.

Prerequisite: Requires Version 6.0 software. Not available on the Aquilion Large Bore or RXL.

Ultra-Fast Workflow with Patient Comfort
The Aquilion Prime SP boosts productivity with fast scan and image reconstruction times up to 50 images per second* while offering comfort features such as the wide bore (78 cm) and large table capacity (660 lbs) for patients of all sizes pediatric to bariatric.

Aquilion Prime SP makes exams easier for all patients. The routine fast scans made possible by the PUREViSION detector also mean short breath-holds for better patient compliance.

* ***Fast Reconstruction Kit option (CCFR-010A) required for up to 70 fps.***

Dose-Reduction Features
Aquilion Prime SP reinforces the ALARA principle for every patient. To achieve this, Aquilion Prime SP has an array of adaptive and integrated dose-reduction strategies that are implemented at every stage, from patient registration to image reconstruction. In addition, patient dose reduction is integrated into the protocol software, so it activates prior to turning on the x-ray beam.

SUREPosition
Patient centering plays a key role in a dose reduction strategy. The Aquilion PRIME allows technologists to adjust the patient centering from the scanogram*1. This supports improved patient iso-centering for more accurate mA modulation and may help to eliminate repeat scanograms.

*1 *For lateral Table movement, the Lateral Tech Assist option is required (CALU-001A)*

Auto Couch Height Positioning Compensation
SUREExposure will compensate for incorrect patient positioning to ensure accurate body size calculation and exposure dose. This avoids incorrect positioning errors in patient size calculation.

SUREExposure3D (x, y, z automated mA modulation software)

SUREExposure3D software automatically adjusts the mAs based on patient anatomy to adapt to and compensate for changes in attenuation level.

In addition, an Organ Effective Modulation function is provided. Combined with SUREExpsoure, SUREkV and AIDR3D Enhanced, Organ Effective Modulation has the potential to reduce CT patient dose depending on the clinical task, patient size, anatomical location and clinical procedure

Active Collimation
Active collimation synchronizes the width of the x-ray beam at the ends of the scan range to the clinically useful area needed for image reconstruction. By eliminating exposure that is not used for diagnosis, patient dose is reduced.

Adaptive Iterative Dose Reduction 3D (AIDR 3D Enhanced)
AIDR 3D Enhanced is the fourth generation in the evolution of iterative reconstruction technology. AIDR 3D Enhanced is an iterative algorithm intended to reduce pixel noise from the original data, the results analyzed, and the process repeated until the target level of noise-reduction is achieved. This iterative algorithm is excellent in reducing background noise while preserving diagnostic information compared to non-iterative approaches.

AIDR 3D Enhanced can be integrated into all acquisition modes for routine clinical use and is able to reduce pixel noise magnitude in a way that may result in dose reduction.

SUREkV
Auto kV can be set for protocols using SUREExposure™, and the effective kV will be automatically selected based on patient size and SUREExposure settings.

NEMA XR 25, XR 26 and XR 29
Aquilion Prime SP meets the National Electrical Manufacturers Association's (NEMA) Medical Imaging & Technology Alliance (MITA) standards XR 25, XR 26 and XR 29.

- MITA XR 25 Computed Tomography Dose Check
  - Includes dose alerts and allows facilities to set dose notification values.
- MITA XR 26 Access Controls for Computed Tomography: Identification, Interlocks, and Logs
  - Provides access control ensuring only authorized operators can alter controls of the CT equipment.
- MITA XR 29 Standard Attributes on Computed Tomography (CT) Equipment Related to Dose Optimization and Management
  - Smart Dose standard bundles four important features to ensure that equipment produces high-quality diagnostic images while supporting patient safety:
    - DICOM Structured Reporting

- CT Dose Check
- Automatic Exposure Controls,
- Pediatric and adult reference protocols.

Components

- Large-aperture 78 cm, slip-ring gantry
- High-power 72 kW x-ray generator and tube
- Ergonomic and patient friendly couch - can be lowered to a minimum of 332 mm from the floor – providing easier patient access.
- Single console with Microsoft Windows 10 operating system
- Ergonomic operator controls
- 3D and 4D software for display console
- High-capacity hard disks
- Image data transfer link
- Custom patient table pad and positioning accessories
- Operator manuals and quality-assurance phantoms

KEY FEATURES

Routine Fast Scanning

The Aquilion Prime SP is capable of reconstructing 80 to 160[*1] unique slices with every rotation of the gantry and incorporates a host of ergonomic and automated features to streamline productivity and deliver the highest quality images while lowering radiation dose. Further, patients benefit from the fast acquistions times, such as CTA examinations for vascualar imaging, by having a shorter exam time and thus supporting better patien compliance.

1-The coneXact double slice upgrade is required to obtain additional reconstructed slices in a single axial rotation.

Optimal Space Utilization

The Aquilion Prime SP has only four main components: gantry, couch, console and transformer. The recommended minimum CT room size is only 14.8 square meters with the compact couch.

SURE Technologies

Improve workflow with real-time imaging, which provides the ability to view a scan at 12 frames per second (512x512) during the acquisition. This allows the operator to rapidly assess if additional images are needed.

The following are standard features on Aquilion Prime SP:

- SURE Exposure – Dose modulation based on scanogram
- SURE Start – Real-time contrast detection at 12 fps. With SURE Start there is no need to perform a timing bolus, saving up to 30 cc's of contrast.

Easy Operation

Aquilion Prime SP is easy to operate using the 19-inch LCD monitor, mouse and ergonomic keyboard. Scan automatically by programming procedures with eXam Plan and vocal instructions through VoiceLink™.

EQUIPMENT COMPONENTS

Gantry with iStation

The Aquilion Prime SP Gantry possess many work flow advantages from the iStation to the gantry controls that are accessible from the gantry or the scan console.

iStation

The iStation is a 12-inch LCD screen that uses video and voice prompts to ensure patient compliance during scanning. This is especially useful during pediatric scanning as the iStation displays a video of a small child that tells the patient when to raise their arms, when to hold their breath, and so on. These child-friendly instructions, coming from a child figure helps assure compliance. iStation also allows the user to visualize the patient's ECG waveform when acquiring ECG-gated exams.

The Gantry

- Gantry tilts ±30 degrees
- Large aperture: 78 cm
- Two scan fields of view
- Wide range of scan times provides greater flexibility for optimal image quality
- Control touch panel – many functions can be controlled in-room for quick setup and improved workflow

Console – Acquire and Display

- Powerful, ergonomic console computer handles display, image feed, filming and transferring multi-planar reconstructions with the same interface used for axial images.
- InstaView - Full matrix real-time image review
- Capable of true simultaneous scanning, retrieving, archiving and filming without interruption using the optional second console. This is a genuine multi-tasking system for multi-slice and volume data sets.
- Includes user-friendly keyboard, mouse, monitor, CPU cabinet/reconstruction enclosure.

MegaCool™ X-ray Tube

This compact, high-performance tube is designed to minimize tube-cooling delays with heavy patient loads at all scan times. It was built on the proven, anode-grounded, MegaCool tube technology used on every Aquilion multi-slice CT.

Other features include:

- Dual focal spots
- Anode capacity of 7.5 MHU
- Dissipation rate of 1,386 kHU per minute maximum

PURE ViSION Detectors and DAS

- Unique ceramic, solid-state detector array and DAS
- Ultra-fast DAS to acquire large-volume data
- Solid-state detector array with 0.5 mm detector elements

System	Axial/ Vol. Slices	Helical Slices
Aquilion Prime SP 80	80	160
Aquilion Prime SP 160*1	160	160

- System capable of reconstructing image data at 0.1 mm increments.
- Slice values are based on one rotation and the Aquilion ONE coneXact Double Slice technology (Axial/Vol.) and 0.5mm slice x 0.25 mm increment for helical scans.

*1- ***ConeXact double slice upgrade is required to obtain additional reconstructed slices in a single axial rotation.***

High-Power Generator

Robust, high-voltage circuits that generate 72 kW at 600 mA, standard on all Aquilion Prime SP systems. This provides support for the 7.5 MHU x-ray tube and allows helical scans of up to 100 seconds.

Multiple kV Selections: 80, 100, 120 and 135 kV.

NETWORKING

- DICOM 3.0 Conformance Standards
- DICOM 3.0 Modality Worklist Management
- DICOM 3.0 Performed Procedure Step SCU
- DICOM 3.0 Enhanced CT Image Storage and Transfer
- DICOM 3.0 Presentation of Grouped Procedures (PGP) and Study Split
- DICOM 3.0 (Storage SCU)
- DICOM 3.0 Query/Retrieve Service Class Provider (SCP)
- DICOM 3.0 (Print SCU)

HELICAL SCAN & FUNCTIONALITY

MultiView

Built into protocol for fast multi-planar reconstruction in batch mode specifically for multi-slice data sets. Coronal, sagittal and axial images are created and displayed for immediate viewing.

3D Imaging on Console

Provides excellent image quality with surface-shaded renderings and volume-rendered 3D images. Provides zooming and panning over the 3D surface and performs distance measurements.

Other features include:
- Easy 3D
- Bone removal
- Maximum intensity projection (MIP)
- Minimum intensity projection
- Intensity volume rendering

Quantitative Analysis
- Profile display of CT numbers along a selected line in the axial plane
- Distance measurement and display
- CT number display
- Histogram display

eXam Plan Protocols
- 600+ eXam plan protocols that can be adjusted while scanning
- Four preset reconstructions

Archiving
- Can be automated with each eXam plan
- Raw data and image data can be protected to prevent deletion

Filming
- Auto filming can be set as part of the eXam plan
- Images are displayed in 512x512 or 1024x1024

CUSTOMER CARE SERVICES

Developed with customer input, innovative support programs have resulted in increased customer satisfaction. These include the following:

InTouch Center®

This centralized service facility provides applications and service support for customers 24 hours a day, seven days a week.

InnerVision™ Plus

Remote system diagnostics are available around-the-clock to help identify problems and provide potential solutions before care is interrupted or an engineer can arrive. InnerVision Plus is included at no charge and connected while any CT is under warranty, or any service agreement including Full Service, In-House Support, Partnership and/or VISN Master Service Agreement

InTouch Agreements

Based on customer needs, InTouch customer agreements can range from an a-la-carte approach to full-security agreements that provide complete system protection.

Technical Assistance
Customer support specialists are available 24/7 to help resolve technical issues in real time. Application support specialists are also available to assist staff with protocol and image-quality issues.

Local Customer Teams
A single call mobilizes a local team of customer engineers. With an average of 10 years of experience and 105 hours of specialized training, they can resolve almost any performance issue.

Parts Support
A complete inventory of product parts is ready for shipment when and where they are needed, any time of day or night.

The operating system is based on Microsoft Windows 10 IoT Enterprise 2019 LTSC.

1 **MAIN UNIT: ALPHENIX HD FPD SKY+ 12" X 16" SYSTEM**

1 **CATHETERIZATION TABLE (TILT/CRADLE)**

1 **INTERFACE CAT-880B TO CAS-930A**

1 **MUSHROOM HANDLE FOR CAT-850B, CAT-880B**

1 **ANGIO-CT MODIFICATION KIT FOR 4DCT**

1 **4 M CEILING RAIL FOR 4D CT**

1 **SINGLE ARM BOARD**
Carbon fiber arm rest for the right or left side. One is included standard with CAT-850B table.

1 **ANTI-FATIGUE FLOOR MAT**

1 **SERVICE INSTALLATION COMPONENTS**

1 **MAVIG TABLE MOUNTED RADIATION SHIELD**
Provides additional radiation protection from direct and scatter X-ray exposure.
- Mounts on Canon Medical Systems tableside rails, reversible for right or left side mounting
- Three-piece radiation shield assembly:

  - Main shield: 181 mm x 645 mm
  - Angled side shield: 700 mm x 645 mm
  - Tabletop scatter shield: 700 mm x 700 mm (removes to facilitate patient loading)
- Wall storage holders:
  - Upper shield: 600 mm
  - Lower shield: 460 mm
- Includes mini-rail for mounting table-function controls, if desired.

1 KNEE SUPPORT PAD
White coated pad for below the waist elevation of the upper leg via support behind the knee.

1 HEAD HOLDER / IMMOBILIZATION KIT
Effective immobilization and comfortable positioning tool for a patient's head during vascular imaging procedures. Vinyl-coated foam positioning sponges. Kit includes:
- 9408 Headholder
- 9402 Mandibular support pads
- 9403 Forehead pad and strap
- 9404 Chin strap
- 9405 Neck wedges, set of 3 (different sizes for different-sized heads)

1 [KIT] COPPER PHANTOM FOR WAKEUP PROGRAM KIT FOR ALPHENIX SINGLE PLANE AND DUAL PLANE

1 COPPER PHANTOM FOR WAKE UP PROGRAM FOR ALPHENIX
Wake Up Check test phantom for daily QA.

Includes 2 mm copper and instructions to be used for the Wakeup Check protocol, which checks the imaging conditions for DA, DSA and One Shot acquisition.

1 WAKEUP CHECK PROCEDURE BOOKLET

6 COOLANT - 1 GALLON

1 19" COLOR MONITOR

1 [KIT] AQUILION PRIME SP WITH WINDOWS 10 FAST SYSTEM (80 DETECTOR ROW) WHOLE BODY CT SCANNER WITH AIDR 3D

1 CT SCANNER AQUILION PRIME SP WHOLE BODY CT SCANNER

1 AQUILION DETECTOR UPGRADE

This Canon Medical Systems detector upgrade kit will expand the Aquilion Prime SP to the full 80 detector row capable of generating 160[*1] x 0.5 unique slices per rotation.

This upgrade allows a number of operational and clinical applications that enhance workflow and increase examination throughput.

Benefits of upgrading the Aquilion Prime SP CT Scanner:
The Aquilion Prime SP with 160[*1] slice capability includes Aquilion's 0.5 mm detector, 80 channel detector that covers up to 40 mm of anatomy every rotation.

The speed of this technology offers clinical benefits to patients – especially when scanning trauma, pediatric and critically ill patients. This technology enables physicians to clearly visualize internal injuries and disease in less time.

Ultra-Fast Workflow with Patient Comfort
The 80 detector row capability boosts productivity with fast scan and image reconstruction times while offering comfort features for patients of all sizes. The routine fast scans made possible by the 80-row detector also mean short breath-holds that supports better patient compliance.

*[*1] The coneXact double slice upgrade is required to obtain additional reconstructed slices in a single axial rotation.*

1 SELF-PROPELLED CT SCAN BASE KIT WITH 2500 MM GANTRY MOVEMENT STROKE

1 PHANTOM, IMAGE QUALITY
Measures CT image quality to ensure compliance to Canon Medical Systems standards for:
- High-contrast resolution
- Low-contrast resolution
- Slice thickness
- Noise
- Contrast scale

4 NON-CORROSIVE FLOOR LEVELING EPOXY KIT

1 DVD-R 4.7 GB 10 PACK SLIM CASE
- 4.7 GB

1 72 KW X-RAY HIGH VOLTAGE GENERATOR 600 MA UPGRADE
This kit is designed to provide a high power output (maximum tube current: 600 mA).

NOTE: For the Aquilion PRIME TSX-303A and Cartesion Prime PET-CT PCD-1000A ONLY.

1 SURECONNECT DICOM CONNECTIVITY PACKAGE

This package is designed to meet the DICOM needs of most departments.

COT-32D DICOM Modality Worklist Management

Allows the CT system to receive patient demographic data from an HIS/RIS system in conformance with the DICOM 3.0 standard.

COT-33D (MPPS)

In combination with COT-32D (MWM), MPPS provides notification of the start and end of the examination back to an RIS that supports DICOM MPPS (SCP). Exam record and patient information can also be sent to the RIS.

COT-35D Query/Retrieve (SCU) The Q/R Service Class User (SCU)

Allows a device to initiate a request for patient, study, series and/or image information from the provider device in accordance with the DICOM 3.0 standard.

COT-41D Storage Commitment

Verifies image transfer and storage.

- Allows operator to determine if data is stored correctly at the PACS server, avoiding unintentional image deletion.
- Improves efficiency of image management operations.
- Provides fail-safe method to prevent image data from being deleted unintentionally even in the event of a communication failure (during image transfer or during a storage verification response).

COT-44A PGP Study Split

PGP is an Integrated Health Enterprise (IHE) standard designed specifically with multiple examination orders (Requested Procedures) that can be performed in single CT examination.

- Provides preset and automatic transfer solutions for multiple exams from a single CT exam.
- Facilitates clinical viewing of images and reporting of individual requested procedures.
- Use with PACS systems that are IHE PGP compliant.
- Use the study split option for PACS systems that are not yet IHE PGP compliant to physically split images into multiple examinations.

Note: This option does not include a DICOM gateway for the HIS/RIS system.

1 DICOM 3 STORAGE SERVICE CLASS PROVIDER (SCP)

- Exchanges DICOM 3.0 compliant image objects on a network

- Allows the system to perform functions requested by a Storage Class User (SCU) device

1 **DICOM 3 MODALITY WORKLIST MANAGEMENT (MWM) SERVICE CLASS USER (SCU) SYSTEM**

Allows the CT system to obtain details of patients and scheduled examinations electronically from the HIS/RIS system, avoiding the potential mistakes of manual entry.

Note: This option does not include a DICOM gateway for the HIS/RIS system.

1 **DICOM 3 PERFORMED PROCEDURE STEP SCU**

In combination with COT-32D (MWM), MPPS provides notification of the start and end of the examination back to an RIS that supports DICOM MPPS (SCP). Exam record and patient information can also be sent to the RIS.

1 **DICOM 3 QUERY/RETRIEVE SCP**

- Allows a Storage Class User (SCU) to query the SCP device
- Enables user devices to retrieve patient, study, series and/or image information in conformance with the DICOM 3.0 standard

1 **DICOM 3 QUERY/RETRIEVE SCU AQ/MP**

Allows a device to initiate a request for patient, study, series and/or image information from the provider device in accordance with the DICOM 3.0 standard.

1 **DICOM 3 STORAGE COMMITMENT SCU SOFTWARE**

Verifies image transfer and storage.

- Allows operator to determine if data is stored correctly at the PACS server, avoiding unintentional image deletion.
- Improves efficiency of image management operations.
- Provides fail-safe method to prevent image data from being deleted unintentionally even in the event of a communication failure (during image transfer or during a storage verification response).

1 **PRESENTATION OF GROUPED PROCEDURES (PGP) AND EXAM HARD SPLIT**

PGP is an Integrated Health Enterprise (IHE) standard designed specifically with multiple examination orders (Requested Procedures) that can be performed in a single CT examination.

- Provides preset and automatic transfer solutions for multiple exams from a single CT exam.
- Facilitates clinical viewing of images and reporting of individual requested procedures.
- Use with PACS systems that are IHE PGP compliant.

- Use the study split option for PACS systems that are not yet IHE PGP compliant to physically split images into multiple examinations.

1 STANDARD APPLICATIONS TRAINING

APPLICATION TRAINING

Each system includes a custom developed three phase education program and the industry exclusive Performance Pro guarantee.

Performance Pro is a unique approach to education utilizing blended learning with the goal of achieving technical proficiency and optimal productivity for both physicians and technologists. If for any reason the customer is not satisfied with any portion of the onsite training, Canon Medical Systems will conduct that portion of the training again. This is only valid during the warranty period and does not include training new technologists.

Pre-Installation: Planning meeting at customer facility with Canon Medical Systems personnel to discuss objectives and timing of training, and to co-develop a custom program based on the facility's specific needs.

Choice of two (2) Medical Imaging Consultants (MIC) self-study programs; The CT CrossTrainer and/or The CT Registry Review Program.

The CT CrossTrainer is designed to acquaint the less-experienced technologist with important CT principles, technology and clinical exams. The program consists of 6 comprehensive StudyModules that have been accredited for 17 Category A CE credits; credits are earned by passing a post test for each StudyModule.

The CT Registry Review Program is designed to help the experienced CT technologist prepare to pass the ARRT's post-primary exam in CT. The course consists of 8 comprehensive StudyModules that have been accredited for 25 Category A CE credits; credits are earned by passing a post-test for each StudyModule.

Installation: A Clinical Evaluation will be conducted by the applications team prior to the turnover, to ensure the system is ready for the go-live date.

Phase I: Four (4) attendance vouchers provided for technologist-focused courses held at the Canon Academy. The vouchers may be utilized towards the VL and/or CT courses. Each of these courses provides the fundamentals of operating Canon Medical Systems' CT and VL systems. This includes a variety of techniques with the latest dose reduction procedures and practices. These courses include in-depth lectures and hands-on training. At the completion of each course, the attendee will be proficient in the following applications and operations: basic to advanced imaging console use, system menus, default protocols, utilization of various parameters, post-processing image data, and Canon Medical Systems' recommended system operating

procedures. This course is all inclusive of the following: tuition, airfare (booked by Canon Medical Systems), lodging, and meals. Accredited for CE credits by the ASRT Education Foundation. Training at the Canon Academy is dependent upon facility availability. If not available, alternative training will be provided.

Phase II: Two consecutive, thirty-two (32) hour weeks of on-site education will be provided at the customer facility during system go-live. Unique with Performance Pro, Canon Medical Systems will send two applications specialists for the first two weeks of the on-site education sessions. The specialists will provide training for up to four (4) imaging professionals including those individuals that attended the Phase I training, to focus on maximizing imaging techniques and protocols. The specialists will also work with the physicians to achieve desired system proficiency and optimized image quality. Training is scheduled consecutively, Monday through Friday, with Monday mornings and Friday afternoons scheduled as travel time for the applications specialist. CE credits are earned by participants that attend the Phase II training events in their entirety.

Phase III: Two additional thirty-two (32) hour sessions of on-site education will be provided for the same imaging professionals that participated in Phase II training, approximately 6-8 weeks following installation to optimize staff proficiency and system productivity. Training can be scheduled as needed to focus on the specific modality system needs.

Note: *Canon Medical Systems personnel are not responsible for scanning patients, patient safety, any actual patient contact, or operation of equipment during education sessions. Canon Medical Systems will only demonstrate proper equipment operation.*

The training is offered to the Customer at no charge, providing that it is completed no later than one (1) year after the warranty start date.

Additional classroom and onsite training is available for purchase.

Applications support is available by phone on the toll-free ASSIST line, 1-800-521-1968.

CTF/PRIMESP/3.100	**1**	**[KIT] SUREFLUORO: CT FLUORO KIT FOR AQUILION PRIME SP WITH TOUCH CONSOLE AND MOBILE CART**

The CT Fluoroscopy option permits real-time image reconstruction to display 3 images obtained by combining data from the area detector. Moreover, SUREFluoro employs:

- Volume ONE shot, which is CT fluoroscopy volumetric scanning with MPR oblique display.

- MPR and oblique image guidance optimizes needle positioning with complete confidence during complex biopsy procedures, helping save time and improving patient safety.
- Half scan can be selected for the scan mode, and the exposure angle can be specified.
- Single image viewing rate is 12 fps in a 512 matrix.
- All operations are performed by an operator at tableside. The operator is able to control table movement, gantry movement, and X-ray exposure while observing the progress of the procedure.
- Tilting can be performed from the extension operating panel.
- The *last-image hold* feature maintains the latest image while the beam is switched off.

This option can greatly improve CT scanner productivity for biopsies and percutaneous therapy by speeding the procedures and allowing small targets close to critical structures to be accurately and safely approached.

Patient dose is kept within reasonable levels by using low tube currents. A complimentary biopsy needle holder is provided so the operator can manipulate a needle while X-rays are "ON" without exposing extremities to the primary X-ray beam.

Contents:
- In-room control console and stand
- X-ray on/off footswitch
- CT Fluoro biopsy tool kit
  - Biopsy needle insertion guide holder
  - Syringe clamp
- Hardware interfaces and electronics

1 CT FLUOROSCOPY (TOUCH CONSOLE/MOBILE CART)

1 19" LCD MONITOR FOR SUREFLUORO
Simultaneously displays the same images as those on the main console to assist in needle placement.

Includes:
- Flat-panel, image-display unit
- Stand
- Video cables (30 m)
- Manuals
- Resolution controller
- Multiplexer

Prerequisite: CT Fluoroscopy

1 NEEDLE HOLDER KIT FOR CT FLUOROSCOPY

Allows users to keep their hands outside the primary X-ray beam while inserting a biopsy needle under CT fluoroscopic guidance.

REARPNL/PRIMES P.100 **1** **GANTRY REAR CONTROL PANEL KIT FOR AQUILION PRIME SP**

This kit adds additional controls positioned on left and right rear of the gantry, significantly enhancing operator efficiency and facilitating a more efficient workflow.

Prerequisite: Aquilion Prime SP (TSX-303B/1) Series

1 **REAR GANTRY PANEL KIT**
This kit adds control panels on the left and right rear of the gantry, facilitating a more efficient workflow and better patient access for specific exams.

Prerequisite: Aquilion Prime SP (TSX-303B/1) Series

AQ/PDU **1** **POWER DISTRIBUTION UNIT**
The PDU is engineered to address common power problems found in the hospital environment and to isolate the CT system components to meet IEC 60601-1 Third Edition requirements. This is important to assure optimal reliability and performance of CT systems. Customer is responsible for complying with Canon Medical Systems' site specifications for electrical power.

This device provides most of the electrical site preparation requirements of Canon Medical Systems CT systems. The PDU contains a low impedance isolation step-down transformer with a shielding plate between primary and secondary.

Voltage Conversion
Wiring costs are significantly reduced since the PDU accepts a single, 480V delta input, supplying 200V to the generator and the various other parts of the system.

Distribution
The PDU comes prepackaged with the distribution breakers needed for each system feed. Having all system breakers in one location also makes it easier for service personnel to remove power.

Installation
Installation is much faster, more predictable, and less expensive with a factory-assembled and tested system.

UNISPOT-SP.100 **1** **[KIT] CONTROL ROOM UNISPOT FOR SINGLE PLANE SYSTEMS**

The Control Room UniSpot offers one view of all information including flexible layouts. The UniSpot has been designed to improve teamwork and reduce clutter and complexity in the interventional control room. It brings together all imaging sources on a single display, managed by a single keyboard and mouse.

The software enables clinical staff to manage up to 6 sources or applications from one integrated display. No need for separate displays or keyboards and mice. The intuitive interface allows to manage source selection and define preset configurations.

With the MDSC-8532 surgical display, you'll experience excellence in surgical precision on one of the most versatile displays in the operating room. Providing you with our recognized image quality, this 4K UHD display offers exceptional brightness and crisp contrast.

The MDSC-8532 has been designed for endoscopy imaging and the integrated operating room. The display has a wide color gamut and offers advanced color calibration algorithms. This results in accurate color reproduction, making it the preferred choice for real-time imaging.

The dual user interface is user friendly – there is one at the front as well as at the back – makes it easy to operate the display. The intuitive user interface allows you to easily set up the screen or change the display's layout configurations to fit the procedure. On top of that, dedicated shortcut buttons further enable fluent configuration of the display.

The 32" screen is designed in an stylish and sleek industrial style, envisioned to assure a professional, purposeful, and elegant fit for the surgical suite. Moreover, the MDSC-8532 SSTP is fanless, which contributes to its low weight.

In the MDSC-8532, our automated failover feature has been further improved with a faster switching time and the possibility to have a 4K UHD image as backup. The display is easy to disinfect thanks to the smooth surface and splash-proof housing. The integrated cable cover combined with the rubber joystick ensure optimal hygiene. Approved for use in patient vicinity area.

The MNA-240 decoder converts RAW IP packets into DVI video signals and other signals such as audio and USB. End-to-end latency is short and is guaranteed not to exceed a single frame (< 15 ms). The video streams that are distributed over the Nexxis network can go up to a resolution of 4K.

Includes:

- One Color LCD Display (MDSC-8532, mfg. part #K9352530) – a 32" 4K display with DP (DisplayPort) input for UniSpot
- One Power extension cable (5 meter, mfg. part # K3495079)

- One Display desk stand (mfg. part # K9350821)
- One MNA 240 Decoder (mfg. part # K9303275A)
- One Power extension cable for MNA-240 DEC (10 meter, mfg. part # C9826127)
- One UniSpot license (also known as Barco Nexxis WorkSpot Software license, mfg. part # K9350219)
- One 36m Optic Fiber Cable (mfg. part # C9826172)
- One accessory kit, which includes one key board, one mouse, and one attachment plate (CMSC part # XIDF-MISAA2)

Note: All product Designed and Manufactured by Barco Corporation, with the exception of the accessory kit (part # XIDF-MISA/A2), which is from Canon Medical Systems Corporation Japan.

1 UNISPOT DISPLAY KIT WITH 32" 4K MONITOR

1 UNISPOT DISPLAY KIT WITH LICENSE AND DECODER

1 MONITOR INTEGRATION SYSTEM ACCESSORY KIT

BARCO-58/2.100 **1 [KIT] BARCO 58" V7 LARGE MONITOR WITH BUILT-IN PROTECTIVE GLASS NIVR58-T7 G KIT**

A Barco large-screen surgical display with LED backlight, provides the opportunity to have all relevant clinical data to display within customizable layouts. It features a 58-inch LCD panel (16:9), Ultra-HD (UHD) resolution (3840x2160), a maximum luminance of 700 cd/m^2 and 4000:1 contrast ratio.

Video input signals:

- DVI Dual link (full screen image 2 x DVI inputs)
- DVI Signal link (full screen image 4 x DVI inputs or 4 Quadrant Drive from 4 independent sources)
- DP 1.2 SST (full screen image; 4k native or 2k upscale)

Kit includes:

- Built-in glass protective cover with non-reflective coating
- Compositor, 4x encoders, 8 inputs, 13-inch touchscreen monitor manager, and associated cables

Note: designed and manufactured by Barco, Inc.

1 BARCO 58" V7 NIVR58-T7 G KIT (COMPOSITOR, 4 ENCODERS, NETWORK SWITCH AND CABLES)

3 100FT CAT5E BLUE PATCH CABLE CABL CAT5 SNAGLESS MOLDED M/M RJ45 350MHZ

	3	**6FT CAT5 CAT5E BLUE PATCH CABLE CABL SNAGLESS MOLDED M/M RJ45 350MHZ**
	1	**BACKUP MONITOR INTERFACE KIT FOR BARCO 58" MONITOR**
	1	**CABINET FOR LARGE LCD COLOR DISPLAY MONITOR** Wall or floor mounted storage unit to house large LCD monitor electronic components.
	1	**TRIPP LITE WALL MOUNT CABINET**
	2	**TRIPPLITE 6 OUTLET RACKMOUNT POWER STRIP PERP 1U REAR FACING**
	1	**TRIPPLITE 1U RACK ENCLOSURE FIXED SHELF**
	2	**TRIPPLITE WALL MOUNT RACK ROOF FAN KIT FAN**
	1	**BLACKBOX 10 PORT GIGABIT WEB SMART**
BARCO-58-HDMI-INPUT.100	1	**[KIT] HDMI VIDEO INPUT HD ENCODER FOR BARCO V7**
	1	**K9303320 MNA-420 ENC HDMI INCLUDES: MNA-420 ENC, 2XHDMI-DVI 10FT CABLE AND 10GSFP+**
	1	**1M FIBER MMF LC-LC OM3 DX 2MM CABLE CUSTOM**
	1	**30M LC-LC OM3 MM DX 2MM CABLE CUSTOM**
BARCO-FHD-OUTPUT.100	1	**[KIT] FHD-VIDEO READY OUTPUT DECODER KIT FOR DIAGNOSTIC MONITOR INTERFACE**
	1	**MNA-420 DEC V2 HD DUAL CHANNEL DECODER 2X HDMI OUTPUT ADDITIONAL 10G SFP+**
	1	**DVI TO HDMI ADAPTOR (2 PCS 8" ADAPTORS INCLUDED)**
	1	**ONE KIT 36M OPTIC FIBER CABLE TMS**
CL19196	1	**19" COLOR MONITOR**
F310MON	1	**SKYTRON F310 SERIES - MONITOR SUPPORT (58") (INSTALLATION INCLUDED)** F310MON (Skytron) – F310 Series- Monitor Support (58″) with a heavy-duty radial arm with long reach and patented Active Assist braking technology.

Monitor support (58") with a heavy-duty radial arm with long reach and patented Active Assist braking technology supports a large monitor (up to 60″) protective frame with slim line carrier. The boom also includes a secondary 40″ arm that provides motorized vertical elevation adjustment for the monitor. The system includes dual backup monitor display mounts for 19″ monitors. The large monitor can be positioned from head to toe on either side of the patient table.

System includes:
- (1) F310 Series Mount
- (1) Primary 68" HD Active Assist arm
- (1) Secondary 40" HD Vertical Motor Arm
- (1) 60" Protective frame with slim line carrier
- (1) 2E up/down control for large display frame (3 pos)
- (2) BackUp Monitor Display Mounts

F310MON is manufactured, installed, and serviced by Skytron, LLC.

XIDF-REF801/DV-ALPH/SPDASH.100	**1**	**[KIT] ADDITIONAL REFERENCE IMAGE KIT FOR SINGLE PLANE (MONITOR NOT INCLUDED)**
	1	**ADDITIONAL REF MONITOR PORT FOR SINGLE PLANE**
XGCP-930AA	**1**	**JOYSTICK CONTROL UNIT WITH STAND (SKY + ONLY)**
XACP-001BA/C1	**1**	**TABLE SIDE TABLET CONSOLE (4M CABLE)** This tablet console is mounted tableside to the existing table rails and includes a 4-meter cable. The tablet console is used in addition to or in place of the standard system controls to select the following functions in the examination room. • Select the desired acquisition program • Select the desired auto-positioning number • Select the desired function • Provide assistance in angiographic workstation operation • Play back, stop, and frame advance cine images • Switch between a cine image file and a map image file • Select specific hemodynamic functions if available
XIDF-QCA850/B1.100	**1**	**BASIC KIT FOR CLINICAL ANALYSIS APPLICATION**
	1	**CAAS BASIC KIT FOR CLINICAL ANALYSIS APPLICATION** **Application** This is platform software for running the clinical analysis applications such as QCA, QVA, LVA, LVA-BP, RVA, QCA3D, and Stent Enhancer.

Features
Table side operation is available.

XIDF-QCA852/B1	**1**	**QUANTITATIVE VESSEL ANALYSIS - 9MM OR ABOVE**

Application
XIDF-QCA850/B1 is required. XIDF-QCA852/B1 is a QVA (quantitative vessel analysis) software package for use in clinical practice and research. The QVA software is used for quantitative analysis of blood vessels such as the aorta, iliac arteries, renal arteries, etc. QVA supports automatic contour detection for vessels up to 50 mm in diameter.

Features
- Automatic contour detection is supported for QVA.
- Various calibration methods such as catheter calibration, sphere calibration, and distance calibration are available.
- Report files of QVA can be transferred to the PACS server and can be referred to in the examination room and control room.
- Table side operation is available.

XIDF-AWS801/CA2/3.100	**1**	**[KIT] ALPHENIX ANGIO WORKSTATION (AWS PRO) AND MONITOR**
	1	**ALPHENIX ANGIO WORKSTATION (AWS PRO)**

Alphenix Workstation Pro-(Software Version 9.5.)
Angio Workstation (Alphenix Workstation Pro) (XIDF-AWS801/B4)

This general-purpose workstation is used in combination with an interventional angiography system (Alphenix series system) for performing selective catheterization and angiography of the heart, head, abdomen, and lower extremities. It provides the image information and measurement results that are required when performing IVR procedures such as PCI and embolization procedures.
Note: This unit is intended for use with existing imaging from the cleared device. The unit is not intended for stand-alone use or diagnosis

- Supports Analysis and Planning Software.
- Supports 3D-DA/DSA applications.
- Supports 3-D Roadmap and Multi-Modality Roadmap.
- Supports Alpha CT (Low Contrast Imaging) Display
- Supports Dose Tracking System Option (DTS)
- Supports Dynamic Device Stabilizer
- Supports Emboliztion Plan
- Supports Cerebral Aneurysm Analysis
- Supports Parametric Imaging.
- Supports TAVR.
- Supports Dose Tracking System (DTS)

Hardware Specification
Angio Workstation (Alphenix Workstation) (XIDF-AWS801/B4)
- System software plus image storage total capacity: 1.7 TB (SSD)
- Total image storage capacity for all installed applications: 1.2 TB
- CPU: Intel® Xeon® Silver 4215 2.5GHz (2 CPUs)
- RAM: 32 GB (16 GB x 2)

Parametric Imaging (PI) Functions*
- Displays an entire image sequence as a single composite DSA image that is color coded in order to characterize the contrast media dynamics and to allow easier visual evaluation
- Color Coded Circulation (CCC) can create movies by shifting color scale gradually so that it is easy to understand vessel flow

**Parametric Imaging Software is not intended for stand-alone use or diagnosis*

Note: All advance 3D and Analysis software is optional.
If it is desired to extend viewing and control of advanced imaging applications into the exam room the extension kit must be selected as an option and possibly other components dependent on current monitor configuration.

AWS Pro is not backward compatible with Alphenix version 8.3 or prior versions.

	1	**ROCKET LINK CONNECTION KIT**
	1	**21" MONITOR, LCD COLOR (BASE PLATE INCLUDED)**
	2	**DISPLAY PORT TO DVI-D ADAPTER/VIDEO CONVERTER 1080P**
3D-ANGIO-SW-KIT/AL.100	1	**BASE 3D ACQUISITION SOFTWARE**

This option for Alphenix systems provides the necessary software for acquisition, reconstruction and display of 3-Dimensional Angiographic image data. From the head-end approach to the patient table, the c-arm can be programmed to acquire a serial acquisition over a 200-degree arc around the target area. A special high-speed reconstruction workstation provides fast transfer and display of the 3-D images on the AWS with 3D Viewer software option.

This option is integral and a prerequisite for the optional Low Contrast Imaging (CT-like data) and Roadmapping options.
Onsite Applications Training Included

Note: Requires XIDF-ROT801 and Angio Workstation (v9.0 or greater).

	1	**3-D ANGIO SOFTWARE**
APPS-ONSITE-32	1	**ON-SITE APPLICATIONS TRAINING - 32 HOURS** Four (4) days, thirty-two (32) hours, of additional onsite applications support. Training is scheduled consecutively, Monday through Friday, with Monday mornings and Friday afternoons scheduled as travel time for the applications specialist. Note: Canon Medical Systems personnel are not responsible for scanning patients, patient safety, any actual patient contact, or operation of equipment during education sessions. Canon Medical Systems will only demonstrate proper equipment operation. Education expires two (2) years from the later of purchase date or warranty start date.
XIDF-PVG801/A1.100	1	**3D VIEWER KIT** This kit enables users to operate 3D viewers on AWS. Graphical user interface (GUI) and faster 3D volume rendering with graphics processing unit (GPU) maximize operation and workflow efficiencies. A series of tools such as Edge enhancement and Ellipse drawing can be used for 3D Roadmap to highlight anatomical landmarks for treatment.
	1	**3D VIEWER KIT** This kit allows the operator of the XIDF-AWS801/B3 to apply the study list image storage, 3D Viewer, and 3D reconstruction function used at the Vitrea™ workstation. This kit includes Viewer and GPU. ***Prerequisite: 3D-ANGIO***
XIDF-TCE801/A1	1	**EMBOLIZATION PLAN KIT (REQUIRES 3D VIEW KIT)** **Embolization Plan Kit (XIDF-TCE801/A1)** This is a post processing software that is intended to assist physicians in the visualization of the liver arterial tree using CT or LCI (Alpha CT). The output is intended to be an adjunct means that allows automatic and manual planning of the liver arterial vessels for guidance of the embolization procedure. The output is a 3D visualization of the hepatic arteries to high dense lesion in the liver. • Functions – Retrieve images and display them in multiplanar reformation (MPR) and volume-rendering (VR) modes – Store the segmentation result as volume data and transfer it to the specified address – Analysis for multiple feeding vessels.

XIDF-3DP802/C1.100	**1**	**3D ROADMAP WITH NEEDLE GUIDANCE KIT ON AWS**

1 3D ROADMAP WITH NEEDLE GUIDANCE KIT ON AWS

Alphenix software option to provide 3-D Angio image super-imposed over live fluoroscopy

- Superimposed 3-D image is linked to all system mechanical movements to maintain accurate alignment of 3-D image with fluoroscopy projection as c-arm or table position changes
- Device enhance processing improves visualization of fine metallic interventional devices
- Simple, convenient user interface for manual adjustment, if desired
- Multiple display modes, solid or hollow vessel with transparency adjustment
- Needle Guidance
  - Included as standard with Canon Medical Systems' Volume Navigation 3-D Roadmap is a Needle Guidance application, which provides pathway planning and real-time guidance for percutaneous interventions

Prerequisite:

- *3-D Angio, including XIDF-3DI801,XIDF-ROT801 Rotational DSA Kit, XIDF-PVG801/A1 3D Viewer Kit and XIDF-AWS801/B3 software and hardware.*
- *Modality image which the Needle Guidance application can fuse:*
  - *3D-Angio (3D-DA, 3D-DSA) included as standard*
  - *Alpha CT, Requires option XIDF-LCI801*
  - *CT/MR fusion with fluoro requires option XIDF-3DP804*

XIDF-3DP804	**1**	**MULTI-MODALITY ROADMAP KIT (CT & MR)**

3-D Multi-Modality Fusion Roadmap is a software application that enables overlay of live 2-D fluoro images, with previously acquired 3-D image data sets, to enhance 3-D anatomical reference. The previously acquired 3-D data sets can be rendered from either a CT or MR scanner or the Canon Medical Systems Cardiovascular systems using CT-like imaging or 3-D DSA.

3-D volumes are reconstructed using the Angio Work Station PC, then projected on the exam room monitor where it is overlaid by live 2-D fluoro images. This functionality enables real-time integration of 3-D anatomical information to better aid clinical guidance and procedure planning. Automated c-arm positioning is integrated with the 3-D anatomical reference image for enhanced clinical workflow.

Requires DFP-8000B/B2 and XIDF-AWS801/B1 or later, 3D-ANGIOKIT and 3D Roadmap software. LCI software is required when customer desires to perform tableside CT-like imaging for creating a 3D model of the LA for ablations as well as using previously acquired CT datasets.

XIDF-ROT801 **1** **ROTATIONAL DSA KIT**

The system has integrated multiple forms of rotation technology to include high-speed C-arm rotation for 3-D acquisition and 2-D rotational capabilities. High-speed rotation provides acquisition frame rates ideal for high-resolution 3-D reconstructions.

Specifications

- Image size: 1024x1024; 16-bit
- Image rate (FPS): Up to 25 FPS at 1024x1024 matrix
- Acquires images throughout and up to a 200-degree C-arm arc
- X-ray exposure timing: angle trigger method
- Provides 3-D color image display for enhanced diagnosis, treatment planning and interventional procedures.

Rotational DSA

- Programmable single-axis rotation (manual or auto) to optimize display area
  - Mask - Return - Contrast acquisition (MRC method)
  - Mask - Contrast acquisition (MC method)
  - Mask - Return - Contrast - Contrast acquisition
  - (MRCC method)
  - Mask - Contrast - Contrast acquisition (MCC method)
  -
  - Data acquisition range: RAO 100° to LAO 100°
  -
  - C-arm rotation speed: 50°/s or 30°/s
  -
  - Fluorography techniques: 3D-DSA
  - Reconstruction image type:
  - • Blood vessel display in 3D from rotational DSA images
  - • Blood vessel display in 3D from rotational DSA images/ visualization of interventional device images from mask images/Interventional device display in 3D (Depending on the functions of the workstation used in combination, blood vessel interventional device images can be fused after acquisition (device fusion).)
  -
  - 3D-DSA acquisition mode:
  - ·10242 16 bits: 2°/frame: C-arm rotation speed 50°/s
  - 1°/frame: C-arm rotation speed 30°/s*
  -
  - * (When the C-arm rotation speed of 30°/s is selected,
  - acquisition is performed at intervals of 1.2°/frame.)
  - ·512² 16 bits: 1°/frame: C-arm rotation speed 50°/s*
  -
  - * (Only for TFP-1216A/C1, TFP-1200A/C1 and TFP-1200C/A1)

- – Time for image transfer and Angio Workstation: When this Angio Workstation PC is used in combination, the reconstruction time is less than 5s in the fastest mode.

XBER-001A 1 **TABLE SIDE CONTROL EXTENSION RAIL SET (PAIR)**

- Designed for application with the CAT-850B, CAT-860B or CAT-880B tables only
- Tableside rail set (2), one for each side
- Designed to accommodate Infinix table controls and common accessories (*e.g.,* I.V. pole)

XBET-001A 1 **FOOT-END TABLE EXTENSION (REQUIRES XBER-001A)**

Auxiliary table extension installed at the foot end of the table. Easily folds over on to the foot end of the table when not in use.

9412 1 **2" TABLE FOOT-END EXTENSION PAD FOR PART # XBET-001A**

2" x 27.6" x 29.5" pad for foot end of Infinix table used as a work station. Coordinates with 9409 Table pad, elevates work area to flush level with patient pad area. Black stretch vinyl cover.

FOOTSWITCH/W/SP/880.100 1 **WIRELESS FOOTSWITCH FOR CAT-880B SINGLE AND DUAL PLANE**

The wireless footswitch provides cable-free operation. More flexibility for the customer, and easy maintenance. This kit requires a Table Modification Kit XBFM-880A in accordance with the combined table.

Key Product Features:

- Charging time: 4.5 hours
- Standby mode time: 48 hours
- Continuous use: 20 hours
- Battery needs to be replaced after 500 hours or 1 year
- 5M max distance from transmitter
- AC Charger
- System Cable to direct connect footswitch to table
- LED indicators for charged, charging, needs charge
- LED indicators also indicates errors

Prerequisite – requires software version 6.1 or above

TS1006-US 1 **MAVIG TRACK 4.0 M LENGTH / 335 MM WIDTH WITH SPOOLER**

The Mavig 4.0 M Ceiling Track with spooler enables up to two devices (maximum of one lamp) to be mounted on a single trolley.

57CM-COLUMN-TROLLEY.100 1 **MAVIG CEILING 360 COLUMN WITH TROLLEY (57 CM) WITH BRAKE STRAP**

The Mavig 57 cm 360 column with trolley has one electrified pin with 240 degrees of rotation capability and a lower pin with 360 degrees of rotation.

Each pin has a load capacity of 18 kgs. Each trolley comes standard with a Brake Handle Strap which makes the system more user friendly.

OT90001-US	**1**	**MAVIG PORTEGRA2 (95/90 CM) EXTENSION SPRING ARM WITH CENTER MOUNTED CONTOUR CUT-OUT SHIELD (61X76 CM)** The MAVIG Center Mounted Contour Cut-Out Shield measures 76 cm by 61 cm and includes a Portegra2 Extension Spring Arm with two arms measuring 95 cm and 90 cm. The transparent acrylic shield contains 0.50 mm Pb and is easily manipulated into position by use of a height adjustable handle.
LE9017100	**1**	**MAVIG PORTEGRA2 (95/90 CM) EXTENSION SPRING ARM WITH YLED-1F LED LAMP**
MARK7-TABLE/2.100	**1**	**[KIT] MEDRAD / BAYER MARK 7 ARTERION INJECTOR, INSTALL INCLUDED (TABLE MOUNT)**
	1	**MEDRAD / BAYER MARK 7 ARTERION INJECTOR, INSTALL INCLUDED (TABLE MOUNT)** The Mark 7 Arterion Table Mount injector takes advantage of latest technologies, making it light, maneuverable and easy to use. Includes: • Table rail mount • Ergonomic injector head handle for easier maneuverability • Unique front-load syringe • Desk type display control unit • Imaging system interface • Injector installation by Medrad included
XIDF-DTS802/C1.100	**1**	**[KIT] DOSE TRACKING SYSTEM WITH MONITOR FOR ALPHENIX** DTS provides a virtual patient dose map with real time tracking of estimated peak and accumulated skin dose during an interventional procedure. • Color-coded and easy to read 3D spatial visualization of radiation exposure to the patient and clear indication of radiation distribution. • Automatically activated when examination starts with patient information obtained through Modality Worklist Management (MWM) allowing for smooth workflow. • Total of 8 target positions are available, meeting every clinical situation including: Heads up/Upside down images for supine and prone positions, left lateral decubitus position and right lateral decubitus position • Real time feedback enables the clinician to make procedural adjustments and thus limit exposure in any area for prolonged periods.

- Estimation of peak skin dose available on cardiovascular/neurovascular procedures.

Please note: Dose Tracking System for Alphenix requires AWS for Alphenix (XIDF-AWS801/B4). Additional monitors for exam room viewing may be required depending on current configuration and are not included.

1 DOSE TRACKING SYSTEM FOR ALPHENIX

DTS provides a virtual patient dose map with real time tracking of estimated peak and accumulated skin dose during an interventional procedure.

- Color-coded and easy to read 3D spatial visualization of radiation exposure to the patient and clear indication of radiation distribution.
- Real time feedback enables the clinician to make procedural adjustments and thus limit exposure in any area for prolonged periods.
- Estimation of peak skin dose available on cardiovascular/neurovascular procedures.

Please note: Dose Tracking System for Alphenix requires AWS for Alphenix (XIDF-AWS801/B4). Additional monitors for exam room viewing may be required depending on current configuration and are not included.

1 21" MONITOR, LCD COLOR (BASE PLATE INCLUDED)

OPTIONS

CONEXACT-PRIMESP.100	**CONEXACT DOUBLE SLICE KIT FOR PRIME 80 TO 160 SLICE UPGRADE** This upgrade kit adds coneXact double slice technology to the Aquilion Prime SP platform, enabling 160 unique images reconstructed per axial scan. **Enhancements** Utilizing Canon Medical Systems' proprietary coneXact algorithms developed for the Aquilion Dynamic Volume CT, this double slice reconstruction package enables volume reconstruction in double density, effectively creating 0.5mm slices at every 0.25mm. The coneXact algorithm achieves this by first reconstructing data sets as a volume, and then using information from oblique cone angle projections to extract distinct axial slices in between detector planes without resorting to interpolation or upsampling. A summary of benefits includes: • More true-to-original reconstruction in MPR and 3-D rendered images • Increased detail in the z-direction - ideal for IAC and extremities • Reduction of partial volume effects leading to more detailed images while maintaining superior low contrast detectability ***Requires: Aquilion Prime SP (TSX-303B) series.***
SECOND-CONSOLE/PRIMESP10.100	**[KIT] SECOND CONSOLE KIT FOR AQUILION PRIME SP (CA-ONLY REQUIRES VERSION 10)**
AICE-303B/8.100	**AICE FOR PRIME SP10 (TSX-303B/4, /8, /D ONLY- TSX-303B/1, /4 WITH CGS-98B)** Canon Medicals' Deep Learning Reconstruction (DLR) solution supports the Advanced Intelligent Clear-IQ Engine (AiCE). AiCE Representing a paradigm shift in image reconstruction technology, AiCE (Advanced intelligent Clear-IQ Engine) utilizes a deep learning neural network to bring you images that are sharp, clear, and distinct. Following our company philosophy of helping you achieve the best possible healthcare outcomes for all, AiCE has now been optimized and integrated as AiCE for Prime SP. AiCE is trained to reconstruct images to match the spatial resolution and low-noise properties of an advanced Model-based Iterative Reconstruction (MBIR) method and store this knowledge within layers of a neural network. Applying this knowledge during image reconstruction makes AiCE extraordinarily efficient in routinely providing high spatial resolution and low noise in CT examinations that help improve your diagnostic confidence in every patient.

- Is integrated into SUREExposure 3D, ensuring automatic dose reduction.

CCFR-010A/1B

ULTRA-FAST IMAGE RECONSTRUCTION KIT

The fast image reconstruction system model CCFR-010A is available for Aquilion™ PRIME Edition, Lightning and Cartesion Prime PET-CT and Exceed Large Bore, as an optional component. It is designed to shorten the CT reconstruction time, resulting in higher patient throughput and more efficient examinations.

Reconstruction Times		
SYSTEM	Standard	CCFR-010 Upgrade
PRIME SP	50	70
PRIME	30	60
LIGHTNING	20	50
Cartesion Prime	50	70
Exceed LB	50	70

Prerequisite:

- ***Requires Aquilion™ PRIME SP (TSX-303B/1) and above***
- ***Requires Aquilion™ PRIME (TSX-303A/F) and above***
- ***Requires Aquilion Lightning (TSX-036A/4) and above***
- ***Cartesion Prime PET-CT***
- ***Aquilion Exceed Large Bore (TSX-202A/3D)***

FLEX-PED

MEDRAD STELLANT FLEX PEDESTAL DUAL FLOW INJECTOR

Pedestal mounted Stellant Flex DualFlow CT injector includes MedRad Certegra Workstation Display informatics-ready platform.

Note: This configuration does not include injector synchronization.

PRODUCT WARRANTY AND SERVICE COVERAGE

SYSTEM WARRANTY TERMS

Canon Medical Systems warrants that the Equipment will be free from defects in material and workmanship, for the duration and subject to the terms and conditions stated below. Any part furnished to Customer during the warranty period (stated in the table below) to correct a warranty failure will be warranted to the extent of the unexpired term of the warranty applicable to the Equipment.

The warranty period will commence on the date the installation of the product is complete. Notwithstanding the foregoing, in the event that the installation of the product is delayed for a total of thirty (30) days or more from the date of delivery for any reason or reasons for which Canon Medical Systems is not responsible, the warranty period for such product may, at Canon Medical Systems' option, commence on the thirtieth (30th) day from the date such product is delivered to Customer.

WARRANTY EXCLUSIONS

Warranty coverage does not include any defect which results, in whole or in part, from (1) negligent storage or handling of the product by Customer, its employees, agents, or contractors, (2) failure of Customer to prepare the site or provide power requirements or operating environmental conditions in compliance with any applicable instructions or recommendations of Canon Medical Systems, (3) absence of any product, component, or accessory recommended by Canon Medical Systems but omitted at Customer's direction, (4) any design, specification or instruction furnished by Customer, its employees, agents, or contractors, (5) any alteration of the product by persons other than Canon Medical Systems, (6) combining Canon Medical Systems' product with any product furnished by others that is not approved by Canon Medical Systems, (7) combining incompatible products of Canon Medical Systems, without Canon Medical Systems' prior approval, (8) improper use of the product, improper maintenance of the product by a party other than Canon Medical Systems, or failure to comply with any applicable instructions or recommendations of Canon Medical Systems, or (9) acts of God, fires, floods, strikes or other labor disturbances, or other causes beyond the reasonable control of Canon Medical Systems.

Canon Medical Systems does not warrant any products not manufactured by Canon Medical Systems such as, without limitation, monitors, cameras, computer equipment, injectors, and lasers. Such items will be furnished subject only to the manufacturer's warranty, if any, and without any warranty whatsoever by Canon Medical Systems.

Warranty coverage also excludes consumables, including but not limited batteries, storage media, positioning pads, table pads, cassettes, magazines, printer consumables, and power units.

GLASSWARE WARRANTY

X-ray Vascular tubes are covered under a separate warranty. X-ray Vascular tubes included with the purchase of a new system is governed by the glassware warranty, described below, not the system warranty.

Tube Type	Time-Based Warranty
Liquid Bearing Tubes (DSRX-TXXXX)	36 months, non-prorated

Tubes with Non-Prorated, Time-Based Warranty:

Tubes with a non-prorated warranty will be replaced during the initial warranty period at no charge to the customer. The replacement tube carries the remainder of the original warranty on the system. For example, a tube with a 12-month non-prorated warranty fails at month eleven (11), the tube is replaced at no charge and carries a one (1) month of warranty.

REMEDIES

If Canon Medical Systems determines that any product fails to meet the above-mentioned warranty during the applicable warranty period, Canon Medical Systems will correct any such failure by either, at its option, repairing, adjusting, or replacing without charge to Customer any defective or nonconforming parts of the product. Canon Medical Systems will have the option to furnish either new or remanufactured replacement parts or assemblies. However, remanufactured parts will meet the manufacturer's specifications for new components as of the date of completion of installation. All defective parts replaced by Canon Medical Systems will become the property of Canon Medical Systems.

SOFTWARE UPDATES

Canon Medical Systems will furnish to Customer, free of charge for the life of the Equipment, all Canon Medical Systems software or hardware upgrades to the Equipment purchased by Customer, which are intended to correct a safety risk. Software updates offering enhancements to previously purchased software features will be provided during the term of the warranty, if they do not require hardware modifications or additions. Software upgrades providing new features or capabilities not originally purchased, will be made available for purchase by Customer upon request when compatible with the originally purchased hardware. Canon Medical Systems retains the sole right to determine whether a software release is considered an update or an upgrade for which Customer will be charged. The above items will be performed only during the Covered Hours stated in the warranty. Service required outside these hours will be billed at Canon Medical Systems' differential rates in effect at the time such items are provided to Customer.

WARRANTY SERVICE

Warranty service during the applicable warranty period will be performed without charge to Customer during Canon Medical Systems' normal business hours, Monday through Friday, excluding Canon Medical Systems holidays. Subject to the availability of personnel, after-hours service is available upon request at an additional charge.

Customer must promptly notify Canon Medical Systems within the applicable warranty period of any defect that is covered by the warranty, and make the Equipment promptly available for repair and maintenance.

DISCLAIMERS AND LIMITATIONS ON LIABILITY

Canon Medical Systems' obligations stated above will be Customer's sole and exclusive remedy for a breach of the warranty set forth above. SUCH WARRANTY WILL BE IN LIEU OF ALL OTHER WARRANTIES, EXPRESS OR IMPLIED, INCLUDING WITHOUT LIMITATION, THE WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE.

Canon Medical Systems does not warrant that the operation of the Equipment will be uninterrupted.

WARRANTIES BY PRODUCT LINE

ITEM TYPE	X-RAY VASCULAR
EQUIPMENT	12 Months
ACCESSORY OPTIONS	6 Months
REPLACEMENT & OPTIONAL PARTS*	90 Days
UPGRADE COMPONENTS	6 Months

* The above 90-day period applies only to parts that are not furnished pursuant to a warranty repair for the Equipment. Any part furnished to Customer during the warranty period to correct a warranty failure will be warranted to the extent of the unexpired term of the warranty applicable to the System.

TERMS AND CONDITIONS OF SALE

1. TITLE AND RISK OF LOSS. Title and risk of loss to the Equipment purchased under this Agreement will pass to Customer: (a) if Canon Medical Systems is to provide installation, upon Canon Medical Systems' completion of installation, or (b) if Canon Medical Systems will not provide installation, upon delivery by Canon Medical Systems to Customer.

2. TERMS OF PAYMENT. Prices stated are F.O.B. Customer's facility. All taxes which are payable by Canon Medical Systems in connection with the sale, use, or possession of the Equipment (excluding income taxes), will be paid by Customer in addition to the quoted price. Terms of payment will be as stated in the first page of this Quotation. All invoices paid after due date will be assessed a late payment charge of the lesser of 1 1/2% per month or the maximum rate permitted by law.

3. DELAYS. If Customer changes the scheduled delivery date during the period of 120 days preceding the delivery date, Customer will nevertheless pay the installment of the purchase price which would have been payable upon delivery, on the Scheduled Delivery Date as if delivery had been made on such date. In addition, Customer will pay all extra costs incurred by Canon Medical Systems as a result of such delay, including, without limitation, storage and transportation. Storage fees will be charged at commercially comparable rates for storage on Canon Medical Systems' site. If delivery is delayed by 12 months or more from the Scheduled Delivery Date, except through the fault of Canon Medical Systems, the price set forth in this Agreement may be increased by Canon Medical Systems to a level equal to the prevailing price in effect at the time of the revised delivery date.

4. EQUIPMENT INSTALLATION. Canon Medical Systems will provide, at no additional cost, standard labor and rigging services to unload the Product from the transport vehicle and move to the final position. The shoring of floors, the widening of doorways, and other nonstandard rigging requirements will be negotiated between the Canon Medical Systems and Customer separately if it is determined they are required. Canon Medical Systems will install all Equipment purchased under this Agreement and connect them to existing power and/or plumbing lines at no additional charge to Customer. Customer will be responsible for electrical wiring, plumbing, carpentry, plastering, painting, or all other site preparation required prior to installation and connection of the Equipment by Canon Medical Systems. Customer will provide space at the installation site for the safe storage of Canon Medical Systems' tools, test equipment and other materials used for installation at no charge to Canon Medical Systems. Customer shall, at its cost, obtain all permits and licenses required by governmental authorities in connection with the installation and operation of the Equipment. Customer acknowledges that the System and Software are designed to operate within certain power, temperature, airborne contamination, and humidity ranges. Customer will be responsible for, without limitation: (i) preparing and maintaining the Customer facility in conformance with the Site Preparation Guide; (ii) maintaining its network infrastructure; (iii) providing Canon Medical Systems, access to a network connection in or near the area of the System being serviced by the equipment service staff; and (iv) supplying computer grade AC power. The Equipment relies upon a stable grounded connection to the main power grid in order to function effectively. Customer acknowledges that AC power supply quality may be a problem in old facilities or in those facilities receiving poor quality utility service and that power conditioning may be necessary in such cases.

5. EQUIPMENT OPERATION. Customer agrees that all Equipment purchased under this Agreement will be operated exclusively by duly qualified technicians and/or medical doctors in a safe and reasonable manner in accordance with Canon Medical Systems' written instructions, applicable laws and regulations, and for the purposes for which such Equipment was intended.

6. LIMITED WARRANTY AND REMEDY. A. For the warranty period described below by product, Canon Medical Systems, as its only obligation, will replace or repair, without charge to Customer during Canon Medical Systems' normal working hours (if Customer requests warranty service outside such hours, Customer will pay overtime premium for labor), any component of the Equipment that is defective in materials or workmanship, provided such defect is reported to Canon Medical Systems within the warranty period. Canon Medical Systems' warranty period is as follows: (a) Systems and Major Components – one year from date of completion of installation; (b) Accessories/Options (except glassware) – six months from date of completion of installation. Components not manufactured by Canon Medical Systems will be furnished subject only to the manufacturer's warranty, if any, and without any warranty whatsoever by Canon Medical Systems. During the warranty period, Canon Medical Systems will furnish free of charge any parts, including software required to correct any defect in the Equipment or as required under applicable laws.

B. Canon Medical Systems does not warrant that the operation of the Equipment of the System will be uninterrupted. All defective parts replaced by Canon Medical Systems will become the property of Canon Medical Systems. Replacement parts may be re-manufactured. However, such parts will meet the manufacturer's specifications for new components as of the date of completion of installation. CANON MEDICAL SYSTEMS' OBLIGATION TO REPAIR OR REPLACE DEFECTIVE PARTS OR SOFTWARE WILL BE CUSTOMER'S SOLE AND EXCLUSIVE REMEDY FOR A BREACH OF THE WARRANTY SET IN THIS AGREEMENT. SUCH WARRANTY WILL BE IN LIEU OF ALL OTHER WARRANTIES, EXPRESS OR IMPLIED, INCLUDING WITHOUT LIMITATION, THE WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE. The warranty set forth in this Agreement will not apply to, and Canon Medical Systems will not be liable for any defects resulting from misuse, repairs performed by unauthorized third parties, accidents, acts of God, or neglect of anyone other than Canon Medical Systems.

7. LATEST HARDWARE AND SOFTWARE AT TIME OF DELIVERY. Canon Medical Systems agrees that the Equipment ordered by Customer will, at the time of delivery to Customer, contain, at no additional charge to Customer, the latest hardware and software manufactured by Canon Medical Systems for such Equipment that are commercially available in the United States and which are provided as part of Canon Medical Systems' standard configuration for such Equipment at the time of delivery. This commitment applies only to components and not an upgrade to the entire system. Furthermore, it is limited to hardware and software that (a) have been ordered by Customer, and not any optional or other items that were not ordered by Customer, and (b) are cleared by the FDA as of the date of delivery of the Equipment. This clause does not apply to Assure, Demonstration or Used Equipment.

8. LIMITATION OF LIABILITY. A. NEITHER CANON MEDICAL SYSTEMS NOR CUSTOMER WILL UNDER ANY CIRCUMSTANCES BE LIABLE FOR CONSEQUENTIAL, SPECIAL, INCIDENTAL, OR EXEMPLARY DAMAGES OR ECONOMIC LOSS ARISING OUT OF OR RELATED TO THE TRANSACTIONS CONTEMPLATED IN THIS AGREEMENT, EVEN IF EITHER PARTY IS APPRISED OF THE LIKELIHOOD OF SUCH DAMAGES OCCURRING.

B. IN NO EVENT WILL CANON MEDICAL SYSTEMS' LIABILITY TO THE CUSTOMER (WHETHER BASED ON AN ACTION OR CLAIM IN CONTRACT, TORT, INCLUDING NEGLIGENCE, STRICT LIABILITY, OR OTHERWISE) ARISING OUT OF OR RELATING TO THE TRANSACTIONS CONTEMPLATED IN THIS AGREEMENT EXCEED THE AGGREGATE AMOUNT ACTUALLY PAID BY CUSTOMER TO CANON MEDICAL SYSTEMS UNDER THIS AGREEMENT. THE LIMITATION OF LIABILITY SET FORTH ABOVE WILL NOT APPLY TO CLAIMS FOR PERSONAL INJURY OR PROPERTY DAMAGE CAUSED BY EQUIPMENT DEFECTS.

9. SECURITY INTEREST. Canon Medical Systems hereby reserves and Customer grants to Canon Medical Systems a security interest pursuant to the Uniform Commercial Code, in and to the Equipment (and all products and proceeds of it) until full payment of the purchase price is received. In the event that Customer finances its acquisition of the Equipment through a lease, conditional sale contract, secured loan agreement or other financing agreement (collectively, "Lease") with Canon Medical Systems, then the security interest in the Equipment (and all products and proceeds thereof) shall secure all obligations of Customer due and to become due under the Lease.

10. REMOVAL OF EQUIPMENT. Until Canon Medical Systems has received full payment of the purchase price, Customer will not remove all or any part of the Equipment from Customer's premises, nor will Customer sell, lease, transfer or otherwise part with the possession of, or permit any lien or encumbrance to be placed on all or any part of the Equipment.

11. TRADE-IN. If this quotation includes the trade-in of Customer's existing equipment and the removal date of the trade-in equipment is delayed due to no fault of Canon Medical Systems or if the trade-in equipment is damaged or its condition deteriorates from the date of this quotation through the date of removal, Canon Medical Systems reserves the right to increase the pricing of the new equipment in an amount equal to the reduction in the resale price of the trade-in equipment. Customer must convey free and clear title to the trade-in equipment. If there are any liens or encumbrances on the trade-in equipment, Canon Medical Systems cannot accept the trade-in. Canon reserves the right to adjust trade-in values for equipment not removed by the agreed upon date. The trade-in equipment shall include any associated parts or accessories, included but not be limited to: backup software, manuals, service dongles, positioning pads, straps, CD's, chillers, coils, transducers, UPS systems, and other ancillary items. The trade-in equipment needs to be maintained to OEM specifications up until the time of removal and is subject to inspection by Canon or a Canon designated third party. Equipment must be available for inspection at least 30 days prior to removal. Customer is responsible for a clear removal path to include removal of any walls or doorways, if necessary, as well as responsible for removal of all patient information from the system prior to the removal date. HARD DRIVES MUST BE INCLUDED, INTACT, FUNCTIONAL, AND IRREVERSABLY WIPED OF ALL DATA. For CT system trade-ins: if the CT tube is replaced prior to removal of the CT system, the tube must either be documented as a new tube or documented used tube and less than 100k scan seconds, 40 million mAs, or 100k slices each. For MR system trade-ins: MRI cryogen level must be at a minimum of 70% at the time of removal. Equipment found to be performing below OEM specifications will be subject to a reduced trade-in amount.

12. REMEDIES OF CANON MEDICAL SYSTEMS. If Customer fails to make any payment when due under this Agreement, or becomes insolvent or makes an assignment for the benefit of creditors, or if a petition in Bankruptcy is filed by or against Customer, or if the financial responsibility of Customer becomes impaired, or if Customer otherwise breaches any of the terms and conditions of this Agreement, then Canon Medical Systems may, without prior notice or demand, defer shipments, cancel the balance of the order, suspend performance of any obligation (including without limitation, all obligations set forth under Limited Warranty And Remedy above), and/or take immediate possession of the Equipment delivered, until the full purchase price of the Equipment is paid by Customer or, at Canon Medical Systems' discretion, until security satisfactory to Canon Medical Systems is given by Customer. Any costs incurred by Canon Medical Systems as a result of suspending performance or repossession or collection will be payable by Customer. Canon Medical Systems may sell repossessed Equipment with proceeds to be applied to unpaid balance and expenses incurred in sale, repossession and collection. Customer will pay any remaining deficiency. Canon Medical Systems may exercise any other rights available to it by law.

13. **EXCUSED PERFORMANCES.** Except for Customer's payment obligations hereunder, neither party will be liable to the other for non-performance or delay in performance resulting directly or indirectly from any occurrences beyond such party's control, including without limitation, strikes or other labor troubles, acts of God, war, accidents, fires, floods, other catastrophes, inclement weather, transportation, delays caused by suppliers, or laws, regulations, or acts of any governmental agency.

14. **SOFTWARE.** All rights and interest in any software that may be furnished under this Agreement, and any updates and enhancements to it, will remain the property of Canon Medical Systems. Such software is being furnished to Customer under a non-exclusive license. Customer will not, or allow others to decompile, modify, copy, reproduce, or transcribe the software nor allow third parties to use the same without Canon Medical Systems' prior written consent. In the event a third party's software is furnished to Customer, Customer may be required to execute a software license agreement as requested by such third party as a condition to delivery and/or purchase of the third party's product. Canon Medical Systems will furnish Customer with a copy of such license agreement for its review and execution. In the event Customer sells the Equipment to a third party, the purchaser thereof will have the same rights and obligations with respect to any Canon Medical Systems software as Customer. Customer will need to make its own determination whether it needs to obtain any consent from a third party for non-Canon Medical Systems software. Any Canon Medical Informatics, Inc. products quoted herein are conditioned on and subject to the Software License located: https://us.medical.canon/download/CMI-Capital-License-Agreement. Any Dell, Inc. software, which may be imbedded in Canon products are conditioned and subject to the Software License located: https://i.dell.com/sites/csdocuments/Legal_Docs/en/us/reseller-terms-of-sale.pdf. Both the CMI and Dell licenses are incorporated herein by reference.

15. **CANCELLATION.** Customer may not cancel the order subject to this Agreement except with Canon Medical Systems' prior written consent. Canon Medical Systems will allow Customer to modify the product one time, as long as such request is approved by Canon Medical Systems in accordance with timeline below:
a. CT: No later than 120 days before scheduled delivery date:
b. MR: No later than 150 days before scheduled delivery date:
c. VL: No later than 150 days before scheduled delivery date:
d. XR (excluding Mobile XR): No later than 120 days before scheduled delivery date:

In the event of cancellation without Canon Medical Systems' written consent, Canon Medical Systems will be entitled to recover liquidated damages in an amount equal to twenty percent (20%) of the purchase price of the Equipment

16. **ASSIGNMENT.** Neither party may assign any of its obligations under this Agreement without the prior written consent of the other party However, some of the obligations stated in this Agreement, such as the ones relating to installation of items not manufactured by Canon Medical Systems and the warranty thereof may be performed by Canon Medical Systems' contractors or suppliers.

17. **EXPORT REGULATIONS.** This Agreement involves products, and/or technical data that may be controlled under the U.S. Export Administration Regulations and may be subject to the approval of the U.S. Department of Commerce prior to export. Any export or re-export by Customer, directly or indirectly, in contravention of such Regulations is prohibited.

18. **ATTORNEY'S FEES COSTS.** In the event of any legal proceeding involving any party to this Agreement against the other relating to the subject matter of this Agreement, the prevailing party in such proceeding will be entitled to recover reasonable attorney's fees, expert fees, and court costs against the non-prevailing party

19. **ACCEPTANCE BY CANON MEDICAL SYSTEMS.** This Quotation/Order will not be binding on Canon Medical Systems even if signed by a Canon Medical Systems' employee, until Customer's order for the Equipment is booked by Canon Medical Systems' Headquarter office.

20. **END USER CERTIFICATION.** Purchaser represents, warrants and covenants that it is acquiring the Products for its own end use and not for reselling, leasing or transferring to a third party (except for leaseback financing).

21. **CONFIDENTIALITY.** The parties agree that the use of the Equipment purchased and any associated output (including but not limited to binary data files) shall remain confidential between the parties and shall not be shared externally with any third party without the express written permission of Canon Medical Systems.

22. **ENTIRE AGREEMENT.** This quotation contains the entire agreement between the parties and supersedes all prior and contemporaneous agreements between the parties, whether oral or written, relating to its subject matter, including, without limitation, all different or additional terms and conditions which may be contained in Customer's bid documents, purchase order or any other documents furnished by Customer. The provisions of this Agreement may not be modified unless in writing and executed by both parties.

Mercy St. Louis
Administration
615 S. New Ballas Rd.
St. Louis, MO 63141
314-251-6028

To Whom It May Concern

On behalf of Mercy Hospital St. Louis, I am writing to respectfully request approval for a Certificate of Need to establish a Hybrid Interventional Radiology (IR) Room within Mercy St. Louis.

In fiscal year 2025, our Emergency Department saw over 100,000 patient, reflecting the growing demand for advanced, efficient, and integrated care services in our community. As a regional referral center, we are experiencing a significant increase in complex cases requiring both diagnostic imaging and immediate interventional procedures. The addition of a hybrid IR suite will allow us to meet this demand by combining high-resolution imaging capabilities with a sterile surgical environment, enabling real-time image-guided interventions. Our hospital has seen a steady rise in patients requiring interventional radiology procedures, including trauma, stroke, vascular access, embolization, and oncologic interventions. A hybrid suite will reduce patient transfers between departments, minimize delays, and improve outcomes by enabling immediate intervention following diagnosis. This investment aligns with our mission to provide state-of-the-art care and supports our commitment to patient safety, reduced procedural times, and improved recovery rates. As one of the few hospitals in the region with the capacity to offer such advanced services, this suite will serve not only our immediate population but also patients referred from surrounding rural and underserved areas.

We believe this project is essential to meeting the current and future healthcare needs of our community. We respectfully request your favorable consideration of this application.

Thank you for your time and dedication to improving healthcare access and quality across Missouri. Please do not hesitate to contact me with any additional questions concerning this letter of support.

Sincerely,

Emily Combs

Emily Combs

Chief Operating Officer

Mercy St. Louis

WEST COUNTY RADIOLOGY GROUP

SPECIALISTS IN IMAGING EXCELLENCE

11475 Olde Cabin Road, Suite 200, Saint Louis, Missouri 63141 314-991-8200

October 23, 2025

To Whom It May Concern,

This letter is written in support of the acquisition of a hybrid angiography suite the radiology department at Mercy Hospital St. Louis. As the second largest hospital in the region, this expansion is a critical step in advancing our minimally invasive, vascular interventional and interventional oncology care capabilities.

The hybrid angiography suite will combine state-of-the-art imaging technology with a fully equipped imaging environment combining angiography and computed tomography, enabling our teams to perform complex procedures with enhanced precision and safety.

This suite is essential for diagnosing, and treating patients with vascular disease, oncology diagnoses and cerebro-vascular diseases, including but not limited to the emergency treatment of stroke, among many other critical health issues that require both diagnostic imaging and immediate intervention.

Mercy's mission is to deliver compassionate, exceptional, and high-quality care to elevate the patient experience through innovation and excellence. This addition will allow us to provide timely, comprehensive care while improving outcomes and minimizing patient transfers.

Labib Haddad, MD
Chairman
Department of Radiology
West County Radiological Group

David J. Meiners, M.D.
President, Mercy St. Louis Communities
615 S. New Ballas Road
St. Louis, MO 63141
(314) 251-1976
www.mercy.net

October 6, 2025

Certificate of Need, DHSS
IR Hybrid Room

To whom it may concern,

I am writing in reference for a CON for Mercy Hospital St Louis — this request if for Hybrid unit for our hospital. We experience ever increasing volumes of patients who require simultaneous CT and Angiographic studies, and we must transport the patient to separate rooms. This is obviously not only an issue for efficiency, but more importantly patient safety. If you would find yourself in the unenviable position of needing such services, I am certain you would prefer to have it done in one location.

As a Level 1 trauma center and the provider of quaternary care for all the Mercy hospitals in the region (and many patients from other health systems as well), we care for a tremendous number of critically ill patients. This will help us deliver that care more efficiently and safely.

The hybrid room will also increase our CT capacity, and provide services closer to the operating room, should the patient need to go urgently to surgery (not that uncommon).

We have always provided ourselves in the delivery of the highest quality of care, and this will enable us to continue to provide the state-of-the-art treatment for those patients with complex life threatening conditions requiring advanced interventional radiology services.

Sincerely,

David J. Meiners, M.D.
President
Mercy St. Louis Communities

ST. LOUIS POST-DISPATCH

SCAN THE QR CODE TO PLACE AN AD

MARKETPLACE

TO PLACE AN AD - SELF-SERVE: https://www.stltoday.com/place_an_ad/ **Call:** 314-621-6666

LEGALS AND PUBLIC NOTICE: tlemons@post-dispatch.com **Call:** 314-340-8549

OBITUARIES: obits@post-dispatch.com **Call:** 314-340-8600

CLASSIFIEDS: **Call:** 314-621-6666

SHOP LOCAL / BUSINESS DIRECTORY: https://www.stltoday.com/places/

Public Notices

Notice of Initiation of the Section 106 Process: Public Participation

Habenab Towers proposes the construction of a monopole style telecommunications tower within a 25' x 25' lease area at 342 Marshall Rd., Valley Park, St. Louis County, MO. The height of the tower will be 36.6 meters above ground level (120 feet above ground level) and 39.0 meters above ground level including appurtenances (128 feet above ground level with appurtenances). Proposed project will include ground disturbance. Members of the public interested in submitting comments on the possible effects on historic properties included in or eligible for inclusion in the National Register of Historic Places may send their comments to Andrew Smith, RESCOM Environmental Corp., PO Box 361 Petoskey, MI 49770 or call 260-385-6999.

Public Notice

Mercy Hospital St. Louis will file a certificate of need application with the Missouri Health Facilities Review Committee, requesting approval to acquire a hybrid interventional radiology room. The room will be located at Mercy Hospital St. Louis at 615 S. New Ballas Rd, in St. Louis, MO. Anyone with comments or questions about this matter should contact Denise Scoffic, Chief Financial Officer for Mercy at 314-251-1917 or denise.scoffic@mercy.net

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STATE OF SOUTH DAKOTA
COUNTY OF CUSTER

IN CIRCUIT COURT
ss.
SEVENTH JUDICIAL CIRCUIT

DEANN R. JOHNSON, by and through her Guardian and Conservator,
RODNEY BRAKKEN

Plaintiff,

v.

ROBERT JOHNSON
Defendant.

16DIV25-09

SUMMONS

(SERVICE BY PUBLICATION)

THE STATE OF SOUTH DAKOTA TO THE ABOVE-NAMED DEFENDANT, ROBERT JOHNSON:

You are hereby summoned and required to serve upon the Plaintiff's attorney, Matthew Hays McCoy, whose address is 220 N. 5th Street, Custer, South Dakota 57730, an Answer to the Complaint which has been filed in the Office of the Clerk of the Circuit Court in and for Custer County, South Dakota, within thirty (30) days after the completed service of this Summons by publication, exclusive of the day of first publication. Service of this Summons shall be deemed complete upon the last publication thereof, and the time in which your Answer is required shall commence to run on the day following such last publication, and you must serve and file your Answer within thirty (30) days thereafter. If you fail to answer within that time, judgment by default will be taken against you for the relief demanded in the Complaint.

Dated this 1st day of October, 2025.

Matthew Hays McCoy (#5703)
Attorney for Plaintiff

Public and Self Storage

ROBERT BERRY
Kimberly Tat
Marco Henderson
Elizabeth Willis
ERIKA FRANKLIN
MIRIAM MENDOZA
Austin Pyatt
Essie Campbell
LATRELL DIMERY
JERRY MCCOY
MICHAEL COLTER
Johanna Jones
MALCOMN ROACH
ALEXANDER WATSON
GARY MCCABE
Nicholas Gay
E. LEE MCCULLEY
Eugene Burns
CHAD BORAH
Scott Wilson
Leon Tally
JOSEPY JOHNSON
CARMELO TEMICH
JAMES CALLAHAN 3RD
Martinez Smith
Greg Berin
ANDREW SCHEMPF
THOMAS STARKS
KEITH SAVAGE SSEP
Joey Riney
LORENA ABRAHAM
PATRICK NESTER

This notice is given in accordance with the provisions of Missouri Law Title XXVI Trade and Commerce Chapter 415 Warehouse and Self

Bids and Proposals

QuestCDN, UNTIL 2:30 PM, November 6, 2025, then publicly opened. A Non-Mandatory Pre-Bid meeting will be held for this project at 10:00 AM on October 22, 2025, at the Northeast Regional Office Conference Room, 3500 S. Baltimore Street, Kirksville, MO 63501. Project bid documents must be downloaded at https://mdc.mo.gov/bidding, Quest number 9903604, for a non-refundable cost of $42.00, which will add your company to the Planholder List and allow access to VirtuBid for online submittal of your bid. For project questions contact Steve Dutrow, (573) 300-6219 , bidding questions contact Veronica Mecko, (573) 522-4115 ext. 3744. QuestCDN Customer Support is available at 952-233-1632 or info@questcdn.com

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ADVERTISEMENT FOR BID

Sealed bids for the Whetstone Creek Conservation Area Big Lake Dam Repair (76-01-16), Callaway County, Missouri, will be received online at Virtubid with QuestCDN, UNTIL 2:00 PM, November 6, 2025, then publicly opened. A Non-Mandatory Pre-Bid meeting will be held for this project at 2:30 PM on October 21, 2025, at the

Bids and Proposals

project are on file at the office of the Architect, Hoener Associates, Inc., 6707 Plainview Avenue, St. Louis, MO 63109, (314) 781-9855.

Information as to bidding instructions and requirements for procuring bidding documents may be obtained from the Architect.

Not less than the prevailing hourly wage rates, as determined by the State of Missouri, Division of Labor Standards, shall be paid all workers employed on this project.

The Board of Education reserves the right to waive technicalities, to select any contractor filing a proposal, and to reject any or all bids.

NO PRE-BID MEETING IS SCHEDULED.

By: Mr. Brian Bishop,
Interim Superintendent
Wentzville R-IV School District

Bids for Install Access Points for Wi-Fi at Missouri Veterans Home, Bellefontaine Neighbors, Project No. U2411-01, will be received by FMDC, State of MO, UNTIL 1:30

Affected Facilities

Hospital	Administrator
BJC - Barnes Jewish Hospital	John Lynch, MD
BJC – Barnes Jewish St. Peters	Gregory Patterson
BJC – Progress West	Gregory Patterson
BJC - Christian Hospital	Rick Stevens
BJC - Missouri Baptist Medical Center	Ann Abad
BJC - St Louis Children's Hospital	Trish Lollo
BJC - Barnes Jewish West County Hospital	Angelleen Peters-Lewis
SSM - Cardinal Glennon Children's Hospital	Hossain Marandi
SSM - DePaul Hospital	Deborah Berini
SSM - St. Clare Hospital - Fenton	Kyle Grate
SSM - St. Joseph's – Lake St. Louis	Jerry Rumph
SSM - St. Joseph's – St. Charles	Jake Brooks
SSM - St. Joseph's – Wentzville	Jake Brooks
SSM - St Mary's Hospital-St Louis	Kim Henrichsen
SSM - St. Louis University Hospital	Kim Henrichsen
SSM - St. Louis University Hospital - South	Kim Henrichsen
St. Luke's Hospital	Andrew Bagnall

Jackson, Lisa

From: Flaherty, Melissa on behalf of Scoffic, Denise
Sent: Monday, October 20, 2025 4:37 PM
To: john.lynch@bjc.org
Subject: CON Notice for Mercy Hospital St. Louis - Hybrid IR Room
Attachments: Hybrid IR CON_Barnes Jewish Hospital.pdf

Dear Dr. Lynch,

Mercy Hospital St. Louis is applying to the Missouri Health Facilities Review Committee for a hybrid interventional radiology room. Missouri Certificate of Need regulations require hospitals in the area be notified directly.

If you have questions or concerns about our implementation of the project, please contact Denise Scoffic at denise.scoffic@mercy.net or 314-251-1917.

Thank you.

Denise Scoffic
Chief Financial Officer
Mercy Hospital St. Louis

Jackson, Lisa

From: Flaherty, Melissa on behalf of Scoffic, Denise
Sent: Monday, October 20, 2025 4:37 PM
To: Gregory.patterson@bjc.org
Subject: CON Notice for Mercy Hospital St. Louis - Hybrid IR Room
Attachments: Hybrid IR CON_Barnes Jewish St Peters Hospital.pdf

Dear Mr. Patterson,

Mercy Hospital St. Louis is applying to the Missouri Health Facilities Review Committee for a hybrid interventional radiology room. Missouri Certificate of Need regulations require hospitals in the area be notified directly.

If you have questions or concerns about our implementation of the project, please contact Denise Scoffic at denise.scoffic@mercy.net or 314-251-1917.

Thank you.

Denise Scoffic
Chief Financial Officer
Mercy Hospital St. Louis

Jackson, Lisa

From: Flaherty, Melissa on behalf of Scoffic, Denise
Sent: Monday, October 20, 2025 4:34 PM
To: Gregory.patterson@bjc.org
Subject: CON Notice for Mercy Hospital St. Louis - Hybrid IR Room
Attachments: Hybrid IR CON_Progress West Hospital.pdf

Dear Mr. Patterson,

Mercy Hospital St. Louis is applying to the Missouri Health Facilities Review Committee for a hybrid interventional radiology room. Missouri Certificate of Need regulations require hospitals in the area be notified directly.

If you have questions or concerns about our implementation of the project, please contact Denise Scoffic at denise.scoffic@mercy.net or 314-251-1917.

Thank you.

Denise Scoffic
Chief Financial Officer
Mercy Hospital St. Louis

Jackson, Lisa

From: Flaherty, Melissa on behalf of Scoffic, Denise
Sent: Monday, October 20, 2025 4:34 PM
To: Rick Stevens
Subject: CON Notice for Mercy Hospital St. Louis - Hybrid IR Room
Attachments: Hybrid IR CON_Christian Hospital.pdf

Dear Mr. Stevens,

Mercy Hospital St. Louis is applying to the Missouri Health Facilities Review Committee for a hybrid interventional radiology room. Missouri Certificate of Need regulations require hospitals in the area be notified directly.

If you have questions or concerns about our implementation of the project, please contact Denise Scoffic at denise.scoffic@mercy.net or 314-251-1917.

Thank you.

Denise Scoffic
Chief Financial Officer
Mercy Hospital St. Louis

Jackson, Lisa

From: Flaherty, Melissa on behalf of Scoffic, Denise
Sent: Monday, October 20, 2025 4:34 PM
To: ann.abad@bjc.org
Subject: CON Notice for Mercy Hospital St. Louis - Hybrid IR Room
Attachments: Hybrid IR CON_Missouri Baptist Medical Center.pdf

Dear Ms. Abad,

Mercy Hospital St. Louis is applying to the Missouri Health Facilities Review Committee for a hybrid interventional radiology room. Missouri Certificate of Need regulations require hospitals in the area be notified directly.

If you have questions or concerns about our implementation of the project, please contact Denise Scoffic at denise.scoffic@mercy.net or 314-251-1917.

Thank you.

Denise Scoffic
Chief Financial Officer
Mercy Hospital St. Louis

Jackson, Lisa

From: Flaherty, Melissa on behalf of Scoffic, Denise
Sent: Monday, October 20, 2025 4:33 PM
To: trish.lollo@bjc.org
Subject: CON Notice for Mercy Hospital St. Louis - Hybrid IR Room
Attachments: Hybrid IR CON_St Louis Childrens Hospital.pdf

Dear Ms. Lollo,

Mercy Hospital St. Louis is applying to the Missouri Health Facilities Review Committee for a hybrid interventional radiology room. Missouri Certificate of Need regulations require hospitals in the area be notified directly.

If you have questions or concerns about our implementation of the project, please contact Denise Scoffic at denise.scoffic@mercy.net or 314-251-1917.

Thank you.

Denise Scoffic
Chief Financial Officer
Mercy Hospital St. Louis

Jackson, Lisa

From: Flaherty, Melissa on behalf of Scoffic, Denise
Sent: Monday, October 20, 2025 4:33 PM
To: Peters Lewis, Angelleen
Subject: CON Notice for Mercy Hospital St. Louis - Hybrid IR Room
Attachments: Hybrid IR CON_Barnes Jewish West County Hospital.pdf

Dear Ms. Peters-Lewis,

Mercy Hospital St. Louis is applying to the Missouri Health Facilities Review Committee for a hybrid interventional radiology room. Missouri Certificate of Need regulations require hospitals in the area be notified directly.

If you have questions or concerns about our implementation of the project, please contact Denise Scoffic at denise.scoffic@mercy.net or 314-251-1917.

Thank you.

Denise Scoffic
Chief Financial Officer
Mercy Hospital St. Louis

Jackson, Lisa

From: Flaherty, Melissa on behalf of Scoffic, Denise
Sent: Monday, October 20, 2025 4:33 PM
To: Marandi, Hossain
Subject: CON Notice for Mercy Hospital St. Louis - Hybrid IR Room
Attachments: Hybrid IR CON_Cardinal Glennon Childrens Hospital.pdf

Dear Dr. Marandi,

Mercy Hospital St. Louis is applying to the Missouri Health Facilities Review Committee for a hybrid interventional radiology room. Missouri Certificate of Need regulations require hospitals in the area be notified directly.

If you have questions or concerns about our implementation of the project, please contact Denise Scoffic at denise.scoffic@mercy.net or 314-251-1917.

Thank you.

Denise Scoffic
Chief Financial Officer
Mercy Hospital St. Louis

Jackson, Lisa

From: Flaherty, Melissa
Sent: Monday, October 20, 2025 4:32 PM
To: Deborah.Berini@ssmhealth.com
Subject: CON Notice for Mercy Hospital St. Louis - Hybrid IR Room
Attachments: Hybrid IR CON_SSM Health DePaul Hospital.pdf

Dear Ms. Berini,

Mercy Hospital St. Louis is applying to the Missouri Health Facilities Review Committee for a hybrid interventional radiology room. Missouri Certificate of Need regulations require hospitals in the area be notified directly.

If you have questions or concerns about our implementation of the project, please contact Denise Scoffic at denise.scoffic@mercy.net or 314-251-1917.

Thank you.

Denise Scoffic
Chief Financial Officer
Mercy Hospital St. Louis

Jackson, Lisa

From: Flaherty, Melissa on behalf of Scoffic, Denise
Sent: Monday, October 20, 2025 4:31 PM
To: kyle.grate@ssmhealth.com
Subject: CON Notice for Mercy Hospital St. Louis - Hybrid IR Room
Attachments: Hybrid IR CON_SSM Health St Clare Hospital Fenton.pdf

Dear Mr. Grate,

Mercy Hospital St. Louis is applying to the Missouri Health Facilities Review Committee for a hybrid interventional radiology room. Missouri Certificate of Need regulations require hospitals in the area be notified directly.

If you have questions or concerns about our implementation of the project, please contact Denise Scoffic at denise.scoffic@mercy.net or 314-251-1917.

Thank you.

Denise Scoffic
Chief Financial Officer
Mercy Hospital St. Louis

Jackson, Lisa

From: Flaherty, Melissa on behalf of Scoffic, Denise
Sent: Monday, October 20, 2025 4:30 PM
To: Jerry.Rumph@ssmhealth.com
Subject: CON Notice for Mercy Hospital St. Louis - Hybrid IR Room
Attachments: Hybrid IR CON_SSM Health St Josephs Hospital Lake St Louis.pdf

Dear Mr. Rumph,

Mercy Hospital St. Louis is applying to the Missouri Health Facilities Review Committee for a hybrid interventional radiology room. Missouri Certificate of Need regulations require hospitals in the area be notified directly.

If you have questions or concerns about our implementation of the project, please contact Denise Scoffic at denise.scoffic@mercy.net or 314-251-1917.

Thank you.

Denise Scoffic
Chief Financial Officer
Mercy Hospital St. Louis

Jackson, Lisa

From: Flaherty, Melissa
Sent: Monday, October 20, 2025 4:30 PM
To: jake.brooks@ssmhealth.com
Subject: CON Notice for Mercy Hospital St. Louis - Hybrid IR Room
Attachments: Hybrid IR CON_SSM Health St Josephs Hospital St Charles.pdf

Dear Mr. Brooks,

Mercy Hospital St. Louis is applying to the Missouri Health Facilities Review Committee for a hybrid interventional radiology room. Missouri Certificate of Need regulations require hospitals in the area be notified directly.

If you have questions or concerns about our implementation of the project, please contact Denise Scoffic at denise.scoffic@mercy.net or 314-251-1917.

Thank you.

Denise Scoffic
Chief Financial Officer
Mercy Hospital St. Louis

Jackson, Lisa

From: Flaherty, Melissa on behalf of Scoffic, Denise
Sent: Monday, October 20, 2025 4:29 PM
To: jake.brooks@ssmhealth.com
Subject: CON Notice for Mercy Hospital St. Louis - Hybrid IR Room
Attachments: Hybrid IR CON_SSM Health St Josephs Hospital Wentzville.pdf

Dear Mr. Brooks,

Mercy Hospital St. Louis is applying to the Missouri Health Facilities Review Committee for a hybrid interventional radiology room. Missouri Certificate of Need regulations require hospitals in the area be notified directly.

If you have questions or concerns about our implementation of the project, please contact Denise Scoffic at denise.scoffic@mercy.net or 314-251-1917.

Thank you.

Denise Scoffic
Chief Financial Officer
Mercy Hospital St. Louis

Jackson, Lisa

From: Flaherty, Melissa on behalf of Scoffic, Denise
Sent: Monday, October 20, 2025 4:29 PM
To: kim.henrichsen@ssmhealth.com
Subject: CON Notice for Mercy Hospital St. Louis - Hybrid IR Room
Attachments: Hybrid IR CON_SSM Health St Marys Hospital St Louis.pdf

Dear Ms. Hendrichsen,

Mercy Hospital St. Louis is applying to the Missouri Health Facilities Review Committee for a hybrid interventional radiology room. Missouri Certificate of Need regulations require hospitals in the area be notified directly.

If you have questions or concerns about our implementation of the project, please contact Denise Scoffic at denise.scoffic@mercy.net or 314-251-1917.

Thank you.

Denise Scoffic
Chief Financial Officer
Mercy Hospital St. Louis

Jackson, Lisa

From: Flaherty, Melissa on behalf of Scoffic, Denise
Sent: Monday, October 20, 2025 4:28 PM
To: kim.henrichsen@ssmhealth.com
Subject: CON Notice for Mercy Hospital St. Louis - Hybrid IR Room
Attachments: Hybrid IR CON_SSM Health St Louis University Hospital.pdf

Dear Ms. Hendrichsen,

Mercy Hospital St. Louis is applying to the Missouri Health Facilities Review Committee for a hybrid interventional radiology room. Missouri Certificate of Need regulations require hospitals in the area be notified directly.

If you have questions or concerns about our implementation of the project, please contact Denise Scoffic at denise.scoffic@mercy.net or 314-251-1917.

Thank you.

Denise Scoffic
Chief Financial Officer
Mercy Hospital St. Louis

Jackson, Lisa

From: Flaherty, Melissa on behalf of Scoffic, Denise
Sent: Monday, October 20, 2025 4:28 PM
To: kim.henrichsen@ssmhealth.com
Subject: CON Notice for Mercy Hospital St. Louis - Hybrid IR Room
Attachments: Hybrid IR CON_SSM Health St Louis University Hospital South Campus.pdf

Dear Ms. Hendrichsen,

Mercy Hospital St. Louis is applying to the Missouri Health Facilities Review Committee for a hybrid interventional radiology room. Missouri Certificate of Need regulations require hospitals in the area be notified directly.

If you have questions or concerns about our implementation of the project, please contact Denise Scoffic at denise.scoffic@mercy.net or 314-251-1917.

Thank you.

Denise Scoffic
Chief Financial Officer
Mercy Hospital St. Louis

Jackson, Lisa

From: Flaherty, Melissa on behalf of Scoffic, Denise
Sent: Monday, October 20, 2025 4:27 PM
To: Andy Bagnall
Subject: CON Notice for Mercy Hospital St. Louis - Hybrid IR Room
Attachments: Hybrid IR CON_St Lukes Hospital.pdf

Dear Mr. Bagnall,

Mercy Hospital St. Louis is applying to the Missouri Health Facilities Review Committee for a hybrid interventional radiology room. Missouri Certificate of Need regulations require hospitals in the area be notified directly.

If you have questions or concerns about our implementation of the project, please contact Denise Scoffic at denise.scoffic@mercy.net or 314-251-1917.

Thank you.

Denise Scoffic
Chief Financial Officer
Mercy Hospital St. Louis

Divider III

Service Specific Criteria & Standards

DIVIDER III – Service Specific Criteria & Standards

1. **For new units, address the minimum annual utilization standard for the proposed geographic service area.**

   Not applicable

2. **For any new unit where specific utilization standards are not listed, provide documentation to justify the new unit.**

   Not applicable

3. **For additional units, document compliance with the optimal utilization standard, and if not achieved, provide documentation to justify the additional unit.**

   There is no CON utilization standard for hybrid interventional radiology systems.

   Mercy Hospital St. Louis currently operates two full interventional radiology suites (IR rooms) and four CT scanners that together support a high and steadily increasing procedural volume. While these resources provide strong diagnostic and interventional capability, they are functionally separate, limiting the hospital's ability to perform complex, multi-modality procedures in a time-critical and coordinated manner.

   The two existing full interventional radiology suites (IR rooms) are heavily utilized for neurointerventional and vascular procedures, operating near or at capacity. These rooms are optimized for angiographic imaging but cannot provide the cross-sectional detail required for certain trauma, oncology, and complex vascular cases that depend on CT imaging for localization, procedural planning, and post-intervention assessment. When CT imaging is required intra-procedure, patients must currently be transported out of the full interventional radiology suite to one of the four diagnostic CT scanners, which are located in separate areas of the hospital and also operate at near-maximum utilization for emergency and inpatient diagnostic studies. Adding a hybrid interventional radiology suite (hybrid IR room) directly addresses these issues by integrating both imaging modalities within a single procedural environment. This allows clinicians to perform CT imaging, angiography, and interventional treatment **without moving the patient**, enabling faster, safer, and more comprehensive care.

DIVIDER III – Service Specific Criteria & Standards (continued)

4. **For evolving technology address the following:**
    - Medical effects as described and documented in published scientific literature;
    - The degree to which the objectives of the technology have been met in practice;
    - Any side effects, contraindications or environmental exposures;
    - The relationships, if any, to existing preventive, diagnostic, therapeutic or management technologies and
    - Food and Drug Administration approval;
    - The need methodology used by this proposal in order to assess efficacy and cost impact of the proposal;
    - The degree of partnership, if any, with other institutions for joint use and financing.

Not applicable

Divider IV

Financial Feasibility Review Criteria and Standards

DIVIDER IV – Financial Feasibility Review Criteria and Standards

1. Document that sufficient financing is available by providing a letter from a financial institution or an auditor's statement indicating that sufficient funds are available.

Ernst & Young LLP conducted the external audit for Mercy Health, the applicant's parent organization, for fiscal year ending June 30, 2025. The consolidated balance sheet (included in Divider IV – Attachments) verifies the ability of the applicant to fund this project.

2. Provide Service-Specific Revenues and Expenses (Form MO 580-1865) projected through three (3) FULL years beyond project completion.

Mercy's fiscal year runs from July 1-June 30 each year.

The Service-Specific Revenues and Expenses Forms for the projected periods are included in Divider IV – Attachments.

3. Document how patient charges are derived.

The applicant currently offers interventional radiology services and patient charges are already established. Changes are not anticipated to the charge structure with the addition of this system other than normal inflationary increases in future years.

4. Document responsiveness to the needs of the medically indigent.

Mercy Hospital St. Louis is a Catholic, not-for-profit organization. Collection policies are sensitive to those patients who do not have the ability to meet full financial obligations. Mercy Hospital St. Louis provides financial assistance to patients based on need as determined by the Federal Poverty Guidelines. Patients who qualify for financial assistance will not be required to pay more than amounts normally billed to individuals who have insurance. The amount billed is a discounted percentage of the amount due based on federal poverty guidelines.

In fiscal year 2025, Mercy Hospital St. Louis provided $24.9 million in unreimbursed charity care (based on the cost of providing services) and $33.6 million in unreimbursed care for Medicaid patients.

Attachments

Divider IV

Financial Feasibility Review Criteria and Standards

Mercy Health

Consolidated Balance Sheets
(In Thousands)

	June 30 2025	2024
Assets		
Current assets:		
Cash and cash equivalents	**$ 446,676**	$ 614,297
Accounts receivable, net	**1,189,808**	1,087,505
Inventories	**175,864**	159,640
Short-term investments	**51,081**	46,883
Other current assets	**196,858**	197,853
Total current assets	**2,060,287**	2,106,178
Investments	**4,197,227**	3,979,443
Property and equipment, net	**3,713,925**	3,609,138
Other assets	**1,027,029**	984,390
Total assets	**$ 10,998,468**	$ 10,679,149
Liabilities and net assets		
Current liabilities:		
Current maturities of long-term obligations	**$ 62,758**	$ 63,939
Accounts payable	**399,547**	450,597
Accrued payroll and related liabilities	**571,960**	572,394
Accrued liabilities and other	**533,966**	490,959
Total current liabilities	**1,568,231**	1,577,889
Insurance reserves and other liabilities	**800,194**	750,924
Pension liabilities	**164,678**	193,953
Long-term obligations, less current maturities	**2,541,773**	2,588,822
Total liabilities	**5,074,876**	5,111,588
Net assets:		
Without donor restrictions	**5,754,306**	5,346,005
With donor restrictions	**169,286**	221,556
Total net assets	**5,923,592**	5,567,561
Total liabilities and net assets	**$ 10,998,468**	$ 10,679,149

See accompanying notes.

Certificate of Need Program

SERVICE-SPECIFIC REVENUES AND EXPENSES

Project Title: Acquire hybrid IR room **Project #:** 6249 HS

Historical Financial Data for Latest Three Full Years plus Projections Through Three Full Years Beyond Project Completion

Use an individual form for each affected service with a sufficient number of copies of this form to cover entire period, and fill in the years in the appropriate blanks.

	Year FY2023	FY2024	FY2025
Amount of Utilization:*	4,816	4,661	4,496
Revenue:			
Average Charge**	$25,790	$30,833	$30,270
Gross Revenue	$124,204,640	$143,712,613	$136,093,920
Revenue Deductions	92,526,065	106,297,354	102,987,092
Operating Revenue	31,678,575	37,415,259	33,106,828
Other Revenue			
TOTAL REVENUE	**$31,678,575**	**$37,415,259**	**$33,106,828**
Expenses:			
Direct Expenses			
Salaries	1,836,927	1,819,885	1,855,564
Fees	2,773,541	294,256	6,178
Supplies	14,043,012	21,726,856	21,531,560
Other	598,533	584,008	686,930
TOTAL DIRECT	$19,252,013	$24,425,005	$24,080,232
Indirect Expenses			
Depreciation	724,875	741,913	678,043
Interest***	0	0	0
Rent/Lease	0	0	0
Overhead****	1,345,084	1,761,575	1,563,278
TOTAL INDIRECT	$2,069,959	$2,503,488	$2,241,321
TOTAL EXPENSES	**$21,321,972**	**$26,928,493**	**$26,321,553**
NET INCOME (LOSS):	**$10,356,603**	**$10,486,766**	**$6,785,275**

*Utilization will be measured in "patient days" for licensed beds, "procedures" for equipment, or other appropriate units of measure specific to the service affected.

**Indicate how the average charge/procedure was calculated.

***Only on long term debt, not construction.

****Indicate how overhead was calculated.

Certificate of Need Program

SERVICE-SPECIFIC REVENUES AND EXPENSES

Project Title: Acquire hybrid IR room **Project #:** 6249 HS

Historical Financial Data for Latest Three Full Years plus Projections Through Three Full Years Beyond Project Completion

Use an individual form for each affected service with a sufficient number of copies of this form to cover entire period, and fill in the years in the appropriate blanks.

	Year 1	Year 2	Year 3
Amount of Utilization:*	5,252	5,267	5,283
Revenue:			
Average Charge**	$27,341	$28,093	$28,866
Gross Revenue	$143,594,932	$147,965,831	$152,499,078
Revenue Deductions	108,946,451	112,606,438	116,413,830
Operating Revenue	34,648,481	35,359,393	36,085,248
Other Revenue		0	
TOTAL REVENUE	**$34,648,481**	**$35,359,393**	**$36,085,248**
Expenses:			
Direct Expenses			
Salaries	1,981,635	2,032,809	2,085,337
Fees	7,434	7,679	7,932
Supplies	22,445,166	23,124,035	23,823,549
Other	826,510	853,757	881,944
TOTAL DIRECT	$25,260,745	$26,018,280	$26,798,762
Indirect Expenses			
Depreciation	1,163,172	1,163,172	1,163,172
Interest***	0	0	0
Rent/Lease	0	0	0
Overhead****	1,642,943	1,679,312	1,716,529
TOTAL INDIRECT	$2,806,115	$2,842,484	$2,879,701
TOTAL EXPENSES	**$28,066,860**	**$28,860,764**	**$29,678,463**
NET INCOME (LOSS):	**$6,581,621**	**$6,498,629**	**$6,406,785**

*Utilization will be measured in "patient days" for licensed beds, "procedures" for equipment, or other appropriate units of measure specific to the service affected.

**Indicate how the average charge/procedure was calculated.

***Only on long term debt, not construction.

****Indicate how overhead was calculated.

Certificate of Need Program

SERVICE-SPECIFIC REVENUES AND EXPENSES

Project Title: Acquire hybrid IR room **Project #:** 6249 HS

Historical Financial Data for Latest Three Full Years plus Projections Through Three Full Years Beyond Project Completion

Use an individual form for each affected service with a sufficient number of copies of this form to cover entire period, and fill in the years in the appropriate blanks.

	Year		
	Year 4		
Amount of Utilization:*	5,298		
Revenue:			
Average Charge**	$29,658		
Gross Revenue	$157,128,084	$0	$0
Revenue Deductions	120,301,710		
Operating Revenue	36,826,374	0	0
Other Revenue			
TOTAL REVENUE	**$36,826,374**	**$0**	**$0**
Expenses:			
Direct Expenses			
Salaries	2,139,256	0	0
Fees	8,194	0	0
Supplies	24,544,341	0	0
Other	911,108	0	0
TOTAL DIRECT	$27,602,899	$0	$0
Indirect Expenses			
Depreciation	1,163,172	0	0
Interest***	0	0	0
Rent/Lease	0	0	0
Overhead****	1,754,614	0	0
TOTAL INDIRECT	$2,917,786	$0	$0
TOTAL EXPENSES	**$30,520,685**	**$0**	**$0**
NET INCOME (LOSS):	**$6,305,689**	**$0**	**$0**

*Utilization will be measured in "patient days" for licensed beds, "procedures" for equipment, or other appropriate units of measure specific to the service affected.

**Indicate how the average charge/procedure was calculated.

***Only on long term debt, not construction.

****Indicate how overhead was calculated.