

**ROY COOPER** • Governor MANDY COHEN, MD, MPH • Secretary MARK PAYNE • Director, Division of Health Service Regulation

#### VIA EMAIL ONLY

August 20, 2021

Lisa Griffin llgriffin@novanthealth.org

**Exempt from Review – Replacement Equipment** 

Record #: 3634

Date of Request: August 13, 2021

Facility Name: Novant Health Forsyth Medical Center

FID #: 923174

Business Name: Novant Health, Inc.

Business #: 1341

Project Description: Replace existing linear accelerator

County: Forsyth

Dear Ms. Griffin:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency), determined that the above referenced project is exempt from certificate of need review in accordance with G.S. 131E-184(f). Therefore, you may proceed to acquire without a certificate of need the Varian TrueBeam linear accelerator to replace the Elekta Versa HD, Serial Number 018 Linac 1. This determination is based on your representations that the existing unit will be sold or otherwise disposed of and will not be used again in the State without first obtaining a certificate of need if one is required.

It should be noted that the Agency's position is based solely on the facts represented by you and that any change in facts as represented would require further consideration by this office and a separate determination. If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,

Celia C. Unman Celia C. Inman Project Analyst

Micheala Mitchell Micheala Mitchell

Chief, Certificate of Need

cc: Radiation Protection Section, DHSR

Construction Section, DHSR

#### NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION **HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION**

August 13, 2021



#### Via Email

Celia Inman, Project Analyst, Certificate of Need N.C. Department of Health Service Regulation 809 Ruggles Drive Raleigh, North Carolina 27603

Re: Novant Health Forsyth Medical Center (FID 923174)

Replacement of Existing Linear Accelerator # 1

Winston-Salem, NC (Forsyth County)

Dear Ms. Inman:

Pursuant to N.C. Gen. Stat. § 131E-184(f), this letter serves as prior written notice that Novant Health Forsyth Medical Center ("NHFMC") intends to replace an existing fixed linear accelerator currently located in the Cancer Center on the first floor of the hospital. NHFMC's project meets the requirements set forth in N.C. Gen. Stat. 131E-184(f) for "replacement equipment" that exceeds two million (\$2,000,000) threshold in the following ways:

#### **Main Campus**

NHFMC is located at 3333 Silas Creek Parkway, Winston-Salem, North Carolina. The Radiation-Oncology Department is located on the ground floor in the Cancer Center on the rear side of the main hospital on Bethesda Court (Entrance M on the enclosed Campus Map in **Attachment A**). The main hospital building is the location at which NHFMC exercises financial and administrative control over the entire facility and the administrative suite is located on the first floor of NHFMC (per Entrance A on the enclosed Campus Map in **Attachment A**).

#### **Previous Certificate of Need**

The existing linear accelerator is a replacement of a unit that dates back to 2014; however, we are unable to find the documentation regarding its original certificate of need. NHFMC has reported four linear accelerators for many years on the Annual License Renewal Application ("LRA"). The most recent LRA is included as support that this linear accelerator has been in use and is still in use. **See Attachment B** for an excerpt of NHFMC's 2021 LRA.

#### **Replacement Equipment**

The proposed project meets the definition of "replacement equipment" found in N.C.G.S. 131E-176(22a) and 10A N.C.A.C 14C.0303 for the reasons found on the following page:

2085 Frontis Plaza Boulevard Winston-Salem, NC 27103 Ms. Celia Inman August 13, 2021 Page 2

- (1) NHFMC will replace the existing equipment with the proposed equipment that is functionally similar and will be used for the same diagnostic purposes, although it possesses expanded capabilities due to technological improvements.
- (2) The proposed equipment will not be used to provide a new health service.
- (3) The acquisition of the proposed equipment will not result in more than a 10% increase in patient charges or per procedure operating expenses within the first twelve months after the replacement equipment is acquired.

The replacement involves the existing linear accelerator which was acquired in 2014 and is in need of an upgrade. **Attachment C** contains the Equipment Comparison Form.

See **Attachment D** for the Equipment Quote for the new linear accelerator. As part of the equipment cost, the vendor will provide onsite clinical training for the equipment. Also, the existing equipment will be traded in and removed from North Carolina by Varian as indicated on the cover page of the Varian quote. The total capital cost for the proposed replacement equipment project is estimated to be \$3,406,682. See **Attachment E** – Project Capital Cost Form.

In support of our request, please find attached:

Attachment A - NHFMC Campus Map

Attachment B - NHFMC 2021 LRA Excerpt

**Attachment C** – Equipment Comparison Form

Attachment D – Equipment Quote

**Attachment E** – Projected Capital Costs

NHFMC's acquisition of the replacement fixed linear accelerator does not require a certificate of need because none of the definitions of "new institutional health services" set forth in N.C.G.S. Section 131E-176(16) apply to the proposed project. As outlined above, the total cost for the project is \$3,406,682. The proposed capital cost includes equipment, as well as studies, surveys, designs, plans, working drawings, specifications, construction installation and other activities essential to making the equipment operational.

Based on the information provided, please confirm that NHFMC's replacement equipment request does not constitute a new institutional health service and is exempt from certificate of need review as indicated above.

If you need additional information, please do not hesitate to contact me.

Sincerely,

Lisa Griffin

DocuSigned by:

Manager, Operational Planning

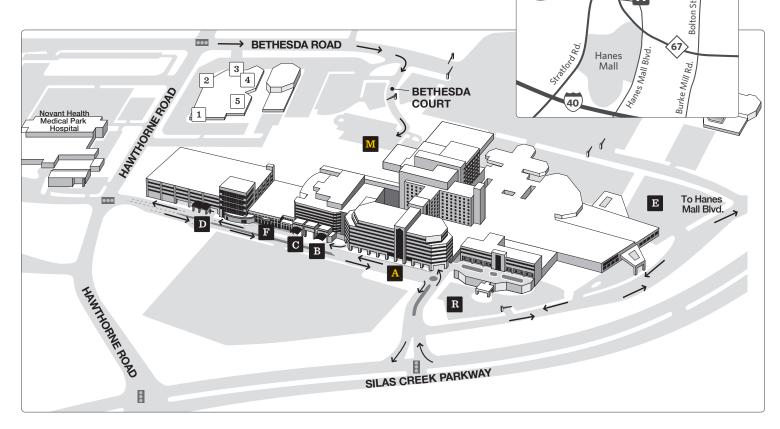
Novant Health, Inc.

## **ATTACHMENT A**



# Campus map

**Novant Health Forsyth Medical Center** 



### Entrance A

- Administration
- Cashier/business office
- EKG
- Endoscopy lab
- EOPS
- Lab services
- Outpatient day center
- Patient registration
- Radiology
- SPPU (Day of surgery)
- Valet parking

### Entrance B

All registration from 7 p.m.-5:30 a.m. and weekends (after 5:30 a.m.)

- Birthing center
- Community rooms
- Gyn anesthesia unit
- Gyn surgery
- Prenatal care
- Novant Health Maya Angelou Women's Health & Wellness Center
- Valet parking

### Entrance C

- Cardiac procedures
- Preanesthesia visits
- Valet parking

#### **Entrance D**

- Handicapped
- Public parking deck

#### Entrance E

• Emergency Services

### Entrance F

Conference center

### Entrance M

1010 Bethesda Court Winston-Salem, NC 27103

## Novant Health Cancer Center

- Patient parking (Radiology and Cancer Center only)
- PET/CT, nuclear medicine & MRI
- Novant Health Imaging
- Novant Health Oncology Specialists
- Valet parking

#### Entrance R

Healy Dr.

- CHF clinic
- Infant audiology
- Heart & Wellness
- Rehabilitation services
- Wellness programs
- Novant Health
  Hawthorne
  Outpatient Surgery

Hawthorne Rd.

- 2 Novant Health Rehabilitation Center
- 3 Novant Health Wound Care
- Forsyth
  Nutrition Center
- **5** Salem Room



## ATTACHMENT B

All responses should pertain to October 1, 2019 through September 30, 2020.

License No: <u>H0209</u> Facility ID: <u>923174</u>

### 11. Linear Accelerator Treatment Data continued

Ç	ampus - if multiple sites: For Syth Medical Contest			
a.	a. Number of <u>patients</u> who received a course of radiation oncology treatments on linear accelerators (not the Gamma Knife®). Patients shall be counted once if they receive one course of treatment and more if they receive additional courses of treatment. For example, one patient who receives one course of treatment counts as one, and one patient who receives three courses of treatment counts as three			
	Number of Patients \( \sum_505 \) (This number should match the number of patients reported in the Linear Accelerator Patient Origin Table or page 32.)			
ь.	TOTAL number of Linear Accelerators:			
	Of the TOTAL above,			
	Number of Linear Accelerators configured for stereotactic radiosurgery:			
	Number of CyberKnife® Systems:			
	Number of other specialized linear accelerators:			
e,	Number of Gamma Knife® units			
ď.	Number of <u>treatment</u> simulators  ("machine that produces high quality diagnostic radiographs and precisely reproduces the geometric relationships of megavoltage radiation therapy equipment to the patient." (GS 131E-176(24b)))			
e,	Number of grandfathered Linear Accelerators.			
.F	or questions, please contact Healtheare Planning and Certificate of Need at 919-855-3873.			
f:	CON Project ID numbers for all non-grandfathered Linear Accelerators: 6-6586-02			
	Bemaining are Grandfatherd			

## ATTACHMENT C

### **EQUIPMENT COMPARISON**

NH Forsyth Medical Center Linear Accelerator #1	EXISTING EQUIPMENT	REPLACEMENT EQUIPMENT
Type (e.g., Cardiac Catheterization, Gamma Knife®, Heart-lung bypass machine, Linear Accelerator, Lithotriptor, MRI, PET, Simulator, CT Scanner, Other Major Medical Equipment)	Linear Accelerator	Linear Accelerator
Manufacturer	Elekta	Varian
Model number	Versa HD	TrueBeam
Other method of identifying the equipment (e.g., Room #, Serial Number, VIN #)	SN: 018 Linac 1	TBD
Is the equipment mobile or fixed?	Fixed	Fixed
Date of acquisition	08/2014	TBD
Was the existing equipment new or used when acquired? / Is the replacement equipment new or used?	New	New
Total projected capital cost of the project <attach a="" capital="" cost="" form="" projected="" signed=""></attach>	NA	\$3,406.682
Total cost of the equipment	NA	\$2,400,000
Location of the equipment <attach a="" equipment="" for="" if="" mobile="" necessary="" separate="" sheet=""></attach>	FMC Rad Onc Dept.	FMC Rad Onc Dept.
Document that the existing equipment is currently in use	See Enclosed LRA Excerpt	NA
Will the replacement equipment result in any increase in the average charge per procedure?	NA	No
If so, provide the increase as a percent of the current average charge per procedure	NA	NA
Will the replacement equipment result in any increase in the average operating expense per procedure?	NA	No
If so, provide the increase as a percent of the current average operating expense per procedure	NA	NA
Type of procedures performed on the existing equipment <attach a="" if="" necessary="" separate="" sheet=""></attach>	Radiation Therapy	NA
Type of procedures the replacement equipment will perform <attach a="" if="" necessary="" separate="" sheet=""></attach>	NA	Radiation Therapy

Date of last revision: 5/17/19

## ATTACHMENT D



## **Custom System Proposal**

Quotation Number - 2021-308712

TrueBeam Price- \$2,400,000. Pricing based on Letter of commitment contingent on Board approval no later than 7-30-2021

Looking further



\*\*\* Confidential - Proposal is intended for Recipient and Recipient's Site Representatives Only \*\*\*



#### NOVANT HEALTH FORSYTH MEDICAL CENTER ("Customer")

LALITH KUMARASWAMY 3333 SILAS CREEK PKWY

WINSTON SALEM, North Carolina 27103-3013 United States

Tel: 336-718-8280 Fax: 336-718-9257

Email: lkumaraswamy@novanthealth.org

#### VMS Inc, Oncology Systems

Jeff Boone Sales Representative Work from home Charlottesville.VA 30327 US

Tel: 434-270-2144

Email: alexis.irizarry@varian.com

\*\*\* Confidential - Proposal is intended for Recipient and Recipient's Site Representatives Only \*\*\*

#### **Quote Information**

Quotation Number: 2021-308712

Quotation Valid Until: September 30, 2021 Sales PO Required: No April 09, 2021 **Customer Procurement Contact** Needed Customer Requested Delivery Date: Name:

Quotation Date: April 19, 2021

#### Sales

Incoterms: **DPU Site Insured** Payment Terms: 40 days net Shipment: 80.00% 20.00% Acceptance: For orders equal or less than \$100k, 100% upon shipment, net 30.

#### **Terms and Conditions**

Products and Services: Customer's access to and use of the Products, Support Services and Services (except Software-as-a-Service or Subscription Services) as indicated in this Quotation are subject to and governed by: (a) the Varian Terms and Conditions of Sale (Form RAD 1652) at: https://www.varian.com/1652V\_OCT\_2018 and (b) any Schedules, Exhibits and/or additional terms (including third party terms) contained, attached, referenced or otherwise indicated in this Quotation. All terms and conditions provided in the website link listed in item (a) above are incorporated by reference and form part of the contract between Varian and Customer.

If there is a separate written agreement (e.g. master agreement) in effect between the parties that expressly provides for and governs the purchase and sale of the specific Products, Support Services, Services, Software-as-a-Service and/or Subscription Service set forth in this Quotation, such written agreement shall govern. Hard copies of the referenced terms and conditions and any additional terms indicated will be provided to Customer upon request.

#### For and on behalf of Customer

Authorized Representative : LALITH KUMARASWAMY

Title: Chief of Physics Date: April 19, 2021

/arian Medical Systems, Inc.

Authorized Representative : Jeff Boone

Title: Sales Representative Date: April 19, 2021

## **Quotation Summary**



#### Offered Products (Sales)

TrueBeam to Replace VersaHD

Removal/Disposal and Trade-In VersaHD

Commissioning Services

Tx Planning Optimization Efficiency Implementation Services





1

1

Item Description Qty Section 1 TrueBeam to Replace VersaHD 11 TrueBeam Base System 120 MLC 1 Treatment delivery system supporting X-Ray treatment delivery. Includes 120 leaf MLC with dual independent jaws, enhanced dynamic wedge, 6 MV X-ray treatment energy, 43 cm x 43 cm MV imager for radiographic, cine, and integrated imaging, Motion View CCTV camera system, treatment console with integrated audio and video systems, back pointer lasers, front pointer set and upper port film graticule to support basic quality assurance. Features: Basic X-Ray treatment delivery technique package, including Static Photon, Photon Arc, and Dynamic Conformal Arc treatment delivery techniques Intensity Modulated RadioTherapy (IMRT) treatment technique, including large field IMRT Total Body Treatment technique package 2D MV Radiographic and Cine Image Acquisition, 2D/2D Radiographic Image Review and match, Cine image review Relative Portal Dosimetry Image and Integrated Image Acquisition Matching of 2D radiographs to 3D reference images Online addition of kV and MV imaging protocols to treatment fields, with automated generation of reference Online Physician Approval of Images at Treatment Console (compatible with ARIA® only) Automated Machine Performance Check Testing, Online Machine Performance Check Review Offline Machine Performance Check Review Access to online marketing kit that contains a broad range of advertising, educational, promotional, and public relations materials targeted to referring physicians, patients, and the media, contact Marcom@varian.com for access Prerequisites: ARIA® oncology information system for radiation oncology v11 MR4.1 or higher or compatible third-party oncology information system Eclipse™ treatment planning system v11 MR3 or higher or compatible third-party treatment planning system Compatible server hardware and operating system. For detailed specifications, visit: www.varian.com/ hardwarespecs Customer Responsibilities: Verify compatibility with third-party oncology information systems Verify compatibility with third-party treatment planning systems If using a scale other than IEC 60601 or IEC 61217 in the rest of the department, it may be necessary to change scales on all other machines. This may require additional purchases. 12 TrueBeam Version 2.7 1 New Universal Baseframe 52" Fixed Floor 1.3 15/16 MV (BJR 11/17) 1.4 40 cm x 40 cm maximum field size, dose rate range 0-600 MU/Min. 1.5 10/10 MV (BJR 11/17) 1 40 cm x 40 cm maximum field size, dose rate range 0-600 MU/Min. 1.6 6/6 MV (BJR 11/17) 1 40 cm x 40 cm maximum field size, dose rate range 0-600 MU/Min.

17

1.8

16 MeV, 0-1000 MU/Min

12 MeV. 0-1000 MU/Min

25 cm x 25 cm maximum field size, dose rate range 0-1000 MU/Min.

25 cm x 25 cm maximum field size, dose rate range 0-1000 MU/Min.



Item	Description	Qty
1.9	9 MeV, 0-1000 MU/Min	1
	25 cm x 25 cm maximum field size, dose rate range 0-1000 MU/Min.	
1.10	6 MeV, 0-1000 MU/Min	1
	25 cm x 25 cm maximum field size, dose rate range 0-1000 MU/Min.	
1.11	10X High Intensity Mode	1
	40 cm x 40 cm maximum field size, dose rate range 400-2400 MU/min in 400 MU/min steps.	
1.12	6X High Intensity Mode	1
	40 cm x 40 cm maximum field size, dose rate range 400-1400 MU/Min in 200 MU/min steps.	
1.13	Low-X Imaging Energy	1
	Low-X imaging energy configuration, providing high soft tissue contrast when imaging in-line with the treatment beam.	
1.14	RapidArc Treatment Delivery	1
1.15	<ul> <li>RapidArc® Treatment Delivery is a volumetric modulated arc treatment delivery technique.         Features:         <ul> <li>Simultaneous modulation of MLC aperture shape, beam dose rate, and gantry angle and rotation speed during beam delivery</li> <li>Supports dynamic jaw tracking and collimator rotation with supporting treatment planning system Prerequisites:</li></ul></li></ul>	1
	kV Imaging system, providing 2D radiographic and fluoroscopic and 3D CBCT imaging capability.  Features:  kV CBCT image acquisition, review, and match to 3D reference image  Radiographic image acquisition, with 2D/2D and 2D/3D image matching to reference image  Fluoroscopic image acquisition, with structure overlay on fluoroscopic images.  kV CBCT image acquisition with a long field of view, provided by merging multiple indexed CBCT images. Online data acquisition and viewing only.	
1.16	Advanced Resp Motion Management System	1
	Stereoscopic optical system for managing patient respiration motion during treatment delivery and imaging.	
	<ul> <li>Features:         <ul> <li>Stereoscopic optical imager, including marker block for tracking patient respiration motion</li> <li>Respiratory gated treatment delivery</li> </ul> </li> <li>Respiratory gated MV image acquisition and online review, respiration synchronized cine image acquisition and online review</li> <li>Respiratory gated kV image acquisition and online review, respiration synchronized fluoroscopic image acquisition and online review</li> </ul>	
1.17	VCD Option, couch mounted	1
	Couch-mounted display system provides visual feedback to the patient for respiration stabilization or breath hold position during respiratory gated image acquisition or treatment delivery.	



Item Description Qty Features: 2 rechargeable batteries and charging system Video interface for optional use of customer-provided video goggles Wireless display system with adjustable count mount Prerequisites: TrueBeam® v2.7 or higher One of the following: Advanced Respiratory Motion Management System Basic Respiratory Motion Management System Respiratory Motion Management System Optical Imager 1.18 **Gated CBCT** 1 Provides the ability to acquire CBCT images synchronized with patient respiration (free-breathing or breath hold). Features: Gated CBCT Imaging License: CBCT image acquisition, image review, and image match to respiratory gated reference image. Short Arc CBCT Imaging License: CBCT image acquisition using a 120-150 degree arc, image review, and image match to respiratory gated reference image. Short arc CBCT is an option for single breath hold CBCT data acquisition. Prerequisites: One of the following:, Advanced Respiratory Motion Management System Basic Respiratory Motion Management System Respiratory Motion Management System Optical Imager kV Imaging System 1 19 **Iterative CBCT** Iterative CBCT provides improved detectability of stationary or gating-immobilized soft tissue anatomy. Features: Iterative CBCT license Reconstruction computer with GPU hardware 1.20 Additional MotionView CCTV Camera System Additional set of two Motion View CCTV cameras and displays. Camera placement is at customer discretion. Features: Two pan, tilt, zoom CCTV cameras Two desktopLCD displays with built in camera controls Adjustable viewing angle for patient privacy Push button pan, tilt, zoom, and home position control Prerequisites: Motion View camera system, provided with linac system. 1.21 1 Main Circuit Breaker Panel Main circuit breaker panel, interfacing to a single power input feed from the facility Mains. Circuit breakers provide independent over-current protection for equipment at the console and in the treatment room. UL and IEC/CE certified. 1.22 1 SuperFAST Installation - Existing Basefr

• Completion of installation of all features required for commissioning readiness Prerequisites:

- Recently ordered new system that has not yet been installed
- Eclipse™ Treatment Planning System

prior system rigging and network availability.

Features:

Accelerated 12-day installation of TrueBeam®, TrueBeam STx, VitalBeam™, or Edge® on existing base frame with



Item Description Qty

- 24/7 access to the facility
- All items on pre-installation checklist complete
- Customer agreement to scope of work

#### Notes:

- Varian will complete installation to a minimum of beam, collimator, and MV imaging system readiness for commissioning activities.
- Varian will return within 30 days from completion of customer commissioning to complete installation and acceptance of all remaining items that were not required for system commissioning, including kV imaging, Rapid Arc, respiratory motion management system.
- This service does not include additional construction or commissioning support.

#### 1.23 CatPhan Phantom

1

Phantom for measuring CBCT image contrast, spatial resolution, and uniformity.

- Modules for measuring CBCT image contrast, spatial resolution, and uniformity Prerequisites:
- kV Imaging system with CBCT

#### 1.24 Supp. Phantom Kit

1

Supplemental imaging phantom kit for measuring resolution and contrast of kV and MV imaging systems. Features:

- Leeds TOR 18FG phantom for measuring spatial resolution and contrast of kV imaging system
- MV contrast phantom for measuring contrast performance of MV imaging system
- Geometric phantom, mounted on IGRT couch top-compatible lock bar. Can be used for quality assurance of image guidance workflow.

#### Prerequisites:

MV imaging system

#### 1.25 Motion Management Interface

1

Motion management interface is an integrated interface for validated external devices that provide patient positioning, patient and target motion monitoring, and/or respiratory gating. The Motion management interface supports connection of up to four external devices, two of which may be used for respiratory motion management or high speed beam hold. Features:

- 4-DoF or 6-DoF patient positioning capability for compatible validated devices and couch configurations
- Integrated external device beam hold and image-based patient repositioning workflow
- Patient-specific external device activation and patient plan verification

#### 1.26 STD TRNG: TB Platform On-Site

1

The on-site review of the TrueBeam/Edge/VitalBeam components includes imaging and use cases for support of patient treatment for therapists. This support is to ensure that personnel who attended the classroom training are able to operate the TrueBeam Platform machine in a safe and effective manner in the clinical environment.

#### Features

- Includes support for TrueBeam/Edge/VitalBeam
- Offer is valid for 18 months after installation of product

#### Prerequisites:

TrueBeam Platform classroom trainings

#### Notes:

Training is non-refundable and non-transferable

#### 1.27 INCL ED: TB201 TB Platform Physicists

1

TrueBeam Physics and Administration: TrueBeam Physics and Administration course is designed for personnel (primarily Medical Physicists) responsible for the acceptance, commissioning, and QA program development of the TrueBeam in the clinical environment. It is recommended that the student attend the TrueBeam Physics and Administration course shortly before the installation of the TrueBeam. The course provides instruction of the basic delivery components, basic imaging components, and a general overview of the motion management system components. Machine commissioning, calibration, and QA of the machine are included. The course subject matter is presented from a clinical use perspective. Primary emphasis is on the overall commissioning, calibration, and QA of the TrueBeam and its components. Extensive hands-on laboratory exercises are included.



Description Qty Item Features Includes support for TrueBeam/Edge/VitalBeam Includes Tuition and Materials for ONE person Length: 4.5 days Offer is valid for 18 months after installation of product Customer Responsibilities: Customer is responsible for all travel expenses (airfare, hotel, rental car, meals and travel incidentals) Notes: Training is non-refundable and non-transferable 1.28 1 **INCL ED: TB101 TB Platform Operations** TrueBeam Operations is a course designed for personnel (primarily Radiation Therapists) responsible for the routine operation and clinical use of the TrueBeam. It is recommended that students attend the TrueBeam Operations course shortly before clinical use and the commencement of patient treatments. The course provides instruction of the basic delivery components, basic imaging components, and a general overview of the motion management system components. The course subject matter is presented from a clinical use perspective. Primary emphasis is on the overall understanding of the TrueBeam function and operation to include imaging and respiratory gating. Extensive hands-on laboratory exercises are included. The attendees of this class will be provided tools to allow them to instruct other clinical staff upon their return. Features: Includes support for TrueBeam/Edge/VitalBeam Includes Tuition and Materials for ONE person Length: 4 days Offer is valid for 18 months after installation of product Customer Responsibilities: Customer is responsible for all travel expenses (airfare, hotel, rental car, meals and travel incidentals) Notes: Training is non-refundable and non-transferable 1.29 **INCL ED: CL222 Respiratory Gating** 1 The Respiratory Gating course provides training for physicists and therapists, to obtain knowledge of principles and practices of respiratory gating in radiation oncology for clinical implementation. Features: Includes support for TrueBeam Platform Includes Tuition and Materials for ONE person Length: 2 days Offer is valid for 18 months after installation of product Customer Responsibilities: Customer is responsible for all travel expenses (airfare, hotel, rental car, meals and travel incidentals) Training is non-refundable and non-transferable 1.30 NLS: English 1 20 MeV, 0-1000 MU/Min 1.31 25 cm x 25 cm maximum field size, dose rate range 0-1000 MU/Min. 1 32 Additional In-Room Monitor System 1 Additional in-room monitors that can be placed at customer discretion. 1.33 Power Cond., 3phase 50KVA 1 Transtector 50KVA, 3-phase power conditioning unit, providing transient protection, line power regulation, and Input

Supports voltage configurations from 208 to 600 VAC and in 50 or 60 Hz for US and ROW applications.

and Output circuit breakers for over-current protection. UL and IEC/CE certified.

Notes

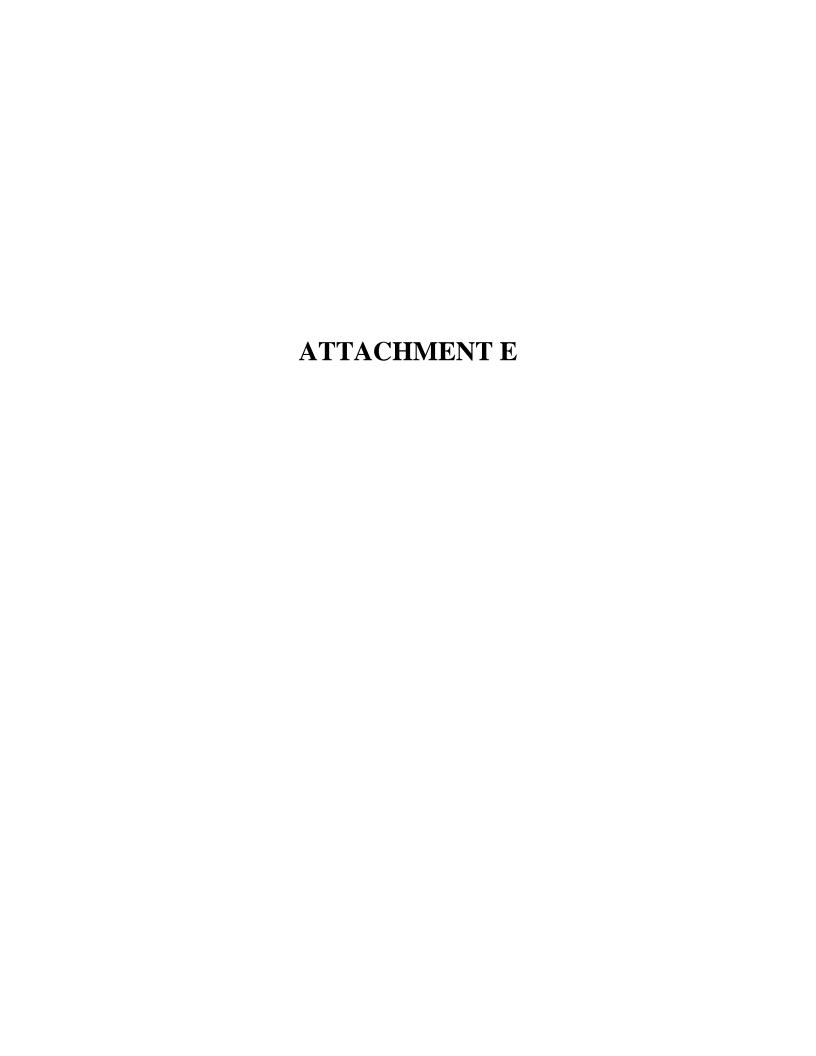


Qty Item Description 1.34 1 **IGRT Couch Top** Image Guided RadioTherapy (IGRT) carbon fiber treatment couch top, free of metal or other radiation-opaque materials. Features: Indexed Immobilization® for compatible accessories Couch top interface for mounting patient immobilization and quality assurance devices at the head of the couch Lock bar for indexed positioning of equipment or immobilization devices on the couch top Handrail for couch positioning, with hooks for temporary pendant placement during patient set up 1.35 VCD w/Couch Mount - IGRT 1 1.36 **4D CBCT Imaging Package** 4D Cone-Beam Computed Tomography (CBCT) Package. Provides the ability to acquire an 4D CBCT images for patient positioning and review target motion analysis at the time of treatment delivery or review target motion analysis post treatment delivery. Features: 4D kV CBCT Image Match Review License: 4D CBCT image acquisition, image review, and image match to structure or Maximum Intensity Projection (MIP) at the time of treatment delivery 4D CBCT Image Acquisition License: 4D kV CBCT image acquisition in Advanced Reconstructor Mode for posttreatment image reconstruction, viewing, and offline analysis Prerequisites: TrueBeam® v2.7 One of the following: Advanced Respiratory Motion Management System Basic Respiratory Motion Management System Respiratory Motion Management System Optical Imager kV Imaging System ARIA® oncology information system v11.1 MR1 (11.0.55) or higher or compatible third-party oncology information system ARIA oncology information system for radiation oncology or Eclipse™ treatment planning system v11 MR3 (11.0.47) or higher ARIA oncology information system v15.1 or higher is required for review of 4D kV CBCT images in ARIA Offline Compatible server hardware and operating system. For detailed specifications, visit: www.varian.com/ hardwarespecs Customer Responsibilities: Verify compatibly third-party oncology information system Initiate Smart Connect application to allow remote monitoring 1 37 PerfectPitch 6DoF Couch 1 The PerfectPitchTM 6-Degrees of Freedom couch system Features Image-based 6DoF patient positioning Prerequisites: TrueBeam® v2.5 MR2 or higher ARIA® oncology information system v11.1 MR1 (11.0.55) and ARIA radiation therapy management v11 MR3 (11.0.47) or higher or compatible third-party oncology information system Customer Responsibilities: Verify compatibly of third-party oncology information system 1.38 1 **HyperArc Treatment Delivery Capability** Frameless, MLC-based technique for multiple intracranial SRS targets. Automated non-coplanar treatment delivery with integral intrafraction imaging at specified couch angles. Features: HyperArc™ Delivery License Prerequisites:

TrueBeam™ or Edge® system v2.7 or higher



Qty Item Description RapidArc® delivery license PerfectPitch™ 6-Degrees of Freedom (6DoF) couch Varian IGRT couch top or QFix KVue™ or KVue Calypso® couch top Encompass™ SRS Immobilization System by Qfix® Eclipse™ treatment planning system v15.5 or higher HyperArc treatment planning license Eclipse RapidArc® planning license ARIA® oncology information system for radiation oncology v15.1 or higher Notes: Use of external devices connected to Motion Management or ADI interfaces with HyperArc are not validated or supported by Varian. It is recommended that the patient CT scan used for treatment planning be acquired at a slice thickness of 1.25 mm or better 1.39 1 Gammex Micro+ Fixed Laser System (Green) The MICRO+TM Fixed Laser System (Green) is comprised of three crosshair lasers, one sagittal laser and one remote control. Features: One (1) MICRO+ Green Remote-Controlled Ceiling Crosshair Laser Two (2) MICRO+ Green Remote-Controlled Lateral Crosshair Lasers One (1) MICRO+ Green Remote-Controlled Sagittal Line Laser Prerequisites: TrueBeam®Â v2.5 MR2 or higher 1.40 **SRS Encompass IMB IGRT Couchtop** The SRS Encompass™ Immobilization package from Qfix™ is a dedicated SRS immobilization package specifically tailored for use with the IGRT couch top. Features: Encompass Intracranial Standalone Device (quantity: 2) Encompass mask system (quantity: 10) Direct Indexing™ Adapter for Varian IGRT couch top (quantity: 1) Locating bar (quantity: 1) Prerequisites: IGRT couch top TrueBeam® v2.0 and higher VitalBeam® v2.5 (China only) and higher Notes: Training will be provided by Qfix Section 2 Removal/Disposal and Trade-In VersaHD 2.1 Remove/Dispose Existing Equipment 1 Remove/Dispose Existing Equipment 2.2 1 **Trade-In Discount** Trade-In Discount



## Projected Capital Cost Form NH Forsyth Medical Center Linear Accelerator V1

Building Purchase Price	\$ -
Purchase Price of Land	\$ -
Closing Costs	\$ -
Moblie Site Preparation	\$ -
Construction/Renovation Contract(s)	\$ 684,585
Cost of Tempatory Moblie CT	\$ -
Architect / Engineering / DHSR Fees	\$ 105,597
Medical Equipment	\$ 2,400,000
Non-Medical Equipment	\$ 6,590
Furniture	\$ -
DPS/IT Systems	\$ 26,180
Financing Costs	\$ -
Interest during Construction	\$ -
Other: Contingency	\$ 183,730
Total Capital Cost	\$ 3,406,682

#### **CERTIFICATION BY A LICENSED ARCHITECT OR ENGINEER**

I certify that, to the best of my knowledge, the projected construction costs for the proposed project is complete and correct.

71 Connars, AIA - NC License No. 8017

Date Signed:

08/04/2021 | 8:44:25 EDT

Signature of Licensed Architect or Engineer

TJ Connors, HDR Inc.

#### CERTIFICATION BY AN OFFICER OR AGENT FOR THE PROPONENT

I certify that, to the best of my knowledge, the projected total capital cost for the proposed project is complete and correct and that is our intent to carry out the proposed project as described.

DocuSigned by:

Matthew Stieve

Date Signed: 08/04/2021 | 8:12:05 EDT

Signature of Officer/Agent

Senior Vice President, Construction & Facilities Svcs, Novant Health

Title of Officer/Agent

From: Inman, Celia C
To: Waller, Martha K
Cc: Hale, Gloria

Subject: FW: [External] NH FMC Linac Replacement Equipment Exemption Letter

**Date:** Friday, August 13, 2021 3:16:34 PM

**Attachments:** FMC Linac V1 REER Letter to Agency 8.13.21.pdf

Martha,

Please log and place this request on S-drive.

#### Celia C. Inman

Project Analyst, Certificate of Need

<u>Division of Health Service Regulation</u>, Healthcare Planning and Certificate of Need Section NC Department of Health and Human Services

Help protect your family and neighbors from COVID-19.

Know the 3 Ws. Wear. Wait. Wash.

#StayStrongNC and get the latest at <a href="nc.gov/covid19">nc.gov/covid19</a>.

Office: 919-855-3873 celia.inman@dhhs.nc.gov

809 Ruggles Drive, Edgerton 2704 Mail Service Center Raleigh, NC 27603

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**From:** Griffin, Lisa L < llgriffin@novanthealth.org>

**Sent:** Friday, August 13, 2021 2:46 PM

**To:** Inman, Celia C <celia.inman@dhhs.nc.gov> **Cc:** Hale, Gloria <gloria.hale@dhhs.nc.gov>

Subject: [External] NH FMC Linac Replacement Equipment Exemption Letter

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Good afternoon -

Attached is an exemption letter related to the replacement of a linear accelerator at NH Forsyth Medical Center.

Please let me know if you have any questions.

Have a great weekend,

#### Lisa Griffin

Manager, Operational Planning Novant Health, Inc. (704) 351 – 1132

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