

Massachusetts Department of Public Health Determination of Need Affiliated Parties

ersion: DRAF1 3-15-17

DRAFT

Applic	ation Date:	06/11/2018	Applica	ition Numi	per: [1806061.	3-A3								
App	licant In	formatio	n											
Applio	ant Name:	Medford Sur	gery Center, LLC											
Applicant In Applicant Name: Contact Person: Phone: Affiliated Parallel List all officers Add/Del Rows H - Carbone H - Newman H - Cassidy H - Ferrari		Sarah Modine Title: Vice President, Corporate								pment - Ambı	ulatory Sui	gery		
Phone	2:	6173767435		Ext:	E-mail:	sarahm@	shield	ds.com						
Affil	iated Pa	rties												
			the board of directors, trustees,	stockholde	ers, partners, an	d other Per	rsons	who have an equity or ot	herwise controlling interes	st in the applic	ation.			
Del		Name (First)	Mailing Address		City	5	State	Affiliation	Position with affiliated entity (or with Applicant)	Stock, shares, or partnership	Percent Equity (numbers only)	Convictions or violations	List other health care facilities affiliated with	Business relationship with Applicant
+ -	Carbone	Karen	1 Burlington Mall Road	[Burlington		MA	MelroseWakefield Healthcare	Interim President and CEO, MelroseWakefield Healthcare			No	MelroseWakefield Healthcare	No
+ -	Newman	Michael	247 Webster Woods Lane	1	North Andover		MA	MelroseWakefield Healthcare	Executive Vice President			No	MelroseWakefield Healthcare	No
+ -	Cassidy	Charles	15 Valley Road	1	Natick		MA	Tufts Medical Center	Chair, Orthopedics			No	Tufts Medical Center	No
+-	Ferrari	Peter	3 Flintock Drive	I	Bedford		MA	Shields Healthcare Group	Manager			No	Healthcare Enterprises, LLC; Radiation Therapy of Winchester, LLC; PET/CT Services by Tufts Medical Center and Shields, LLC; Shields Imaging of Lowell General Hospital, LLC; Shields Signature Imaging, LLC; Shields Sturdy PET-CT, LLC; Shields PET-CT at Cooley Dickonson Hospital, LLC; Shields Imaging at Anna Jaques Hospital, LLC; Shields PET/CT at CMMC, LLC; Shields Imaging at York Hospital, LLC; Shields and Sports Medicine Atlantic Imaging Management Company, LLC; Winchester Hospital/Shields MRI, LLC	No

	.dd/ Del ows	Name (Last)	Name (First)	Mailing Address	City	State	Affiliation	Position with affiliated entity (or with Applicant)	Stock, shares, or partnership	Percent Equity (numbers only)	Convictions or violations	List other health care facilities affiliated with	Business relationship with Applicant
		Shields	Thomas	45 Satuit Meadow Lane	Norwell	MA	Shields Healthcare Group	Manager				Baystate MRI and Imaging Center, LLC; Cape Cod PET/CT Services, LLC, Fontaine Medical Center; Cape Cod Radiation Therapy Services, LLC; Fall River/New Bedford Regional MRI, LP; Franklin MRI Center, LLC; Massachusetts Bay Regional MRI, LP; PET/CT Services by Tufts Medical Center and Shields, LLC; Radiation Therapy of Winchester, LLC; Shields Healthcare of Cambridge, Inc.; Shields MRI and Imaging Center of Cape Cod, LLC; Shields Imaging of Eastern Massachusetts, LLC; Shields Imaging of Lowell General Hospital, LLC; Shields Imaging of Massachusetts, LLC; Shields Imaging of Massachusetts III, LLC; Shields Imaging HealthAlliance MRI Center, LLC; UMass Memorial MRI and Imaging Center, LLC; UMass Memorial MRI — Marlborough, LLC; Shields Signature Imaging LLC; Shields Sturdy PET-CT, LLC; Shields Sturdy PET-CT at Cooley Dickinson Hospital, LLC; Shields PET-CT at Berkshire Medical Center, LLC; Healthcare Enterprises, LLC; Shields Imaging at York Hospital, LLC; Shields and Sports Medicine Atlantic Imaging Management Company, LLC; Winchester Hospital/Shields MRI, LLC	No
+						MA							

Affiliated Parties Medford Surgery Center, LLC 06/11/2018 11:04 am Page 2 of 3

+-		MA			
+ -		MA			
+-		MA			
+ -		MA			
+ -		MA			
+ -		MA			

Document Ready for Filing

When document is complete click on "document is ready to file". This will lock in the responses and date and time stamp the form. To make changes to the document un-check the "document is ready to file" box. Edit document then lock file and submit Keep a copy for your records. Click on the "Save" button at the bottom of the page.

To submit the application electronically, click on the "E-mail submission to Determination of Need" button.

This document is ready to file:

 \boxtimes

Date/time Stamp: 06/11/2018 11:04 am

E-mail submission to Determination of Need

Affiliated Parties Medford Surgery Center, LLC 06/11/2018 11:04 am Page 3 of 3