**AMENDMENT QUESTIONS #2**

*Responses should be sent to DoN staff at* [DPH.DON@State.MA.US](mailto:DPH.DON@State.MA.US)

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| While you may submit each answer as available, please   * List question number and question for each answer you provide * Submit responses as a separate word document, using the above application title and number as a running header and page numbers in the footer * When providing the answer to the final question, submit all questions and answers in one final document * Submit responses in WORD or EXCEL; only use PDF’s if absolutely necessary. If “cutting and pasting” charts, provide them in a PDF so they can be clearly seen * **Whenever possible, include a table with the response** * **For HIPAA compliance Do not include numbers <11.** |

1. In responses to DoN Questions #1 the Holder states, Shields Signature Imaging received DPH approval to temporarily relocate the PETCT service from the hospital campus to another location in Brockton during the hospital’s closure (pg.2).
   1. What is the timeline for relocation of the PET/CT unit back to Brockton Hospital?

It is expected that PETCT will return to Brockton hospital in the second quarter of 2025. The Applicant will work to operationalize the additional day of service upon receipt of regulatory approval.

1. In responses to DoN Questions #1, the Holder states, it is projected that 7- 10 percent of total volume going forward will be attributable to amyloid and FDG PET cases (pg.3).
   1. By how much does the Holder expect the other sources of increasing demand for PET/CT services to contribute to the increase in projected volume?

Typically FDG tumor imaging grows between 5 and 7% annually and reflects the tumor registry of the cancer center, this figure is separate from the subset of FDG brain scans specifically referenced in association with amyloid brain scans.

Prostate PSMA imaging will continue to grow in the 7 to 10 % range annually with broader adoption.