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Who's Driving?

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When it comes to mobile units, manufacturer certification and customer preference usually steer the decision of what scanner goes in the back of the truck.

By the time healthcare facilities start pursuing mobile radiology solutions, they've already performed some preliminary research. They've conducted an assessment of their market, know how many exams they currently perform, projected how many they may perform and what they'll cost, and considered how imaging trends may affect their operations.

At this point, management understands the bottom line: Turning away patients is bad for business and patient care. But when it comes down to actually choosing a specific mobile radiology option, uncertainties often arise.

As facilities prepare to move forward, their next step may be restricted by a misperception. Some assume that mobile unit manufacturers have exclusive ties to a specific radiology modality manufacturer, and this perceived linkage must drive their decisions. According to their reasoning, if they already use equipment from a particular vendor, then they have to go with a certain mobile unit manufacturer.

But that's not quite how it works. Michael Hardesty, medical imaging sales manager for Calutech Mobile Solutions, a Hammond, Ind.-based mobile unit manufacturer, is quick to point out that no collusion is involved. Relationships between equipment vendors and mobile unit manufacturers are determined by a more objective force: certification. "Mobile companies need to acquire certification from the vendor to provide their products," he explains. "And they have to go through the necessary procedures to achieve that certification."

Nonexclusive Relationships

Typically, mobile unit manufacturers—such as Calutech, Medical Coaches Inc., Genesis Medical Imaging Inc., and Oshkosh Specialty Vehicles—are certified to work with two or more radiology equipment manufacturers. Companies from the two factions aren't inextricably tied together in an exclusive relationship.

"We have done a great deal of work with Siemens since the 1980s," says Geoffrey Smith, president of Oneonta, N.Y.-based Medical Coaches. "Looking at sheer volume, we've done more with Siemens than with any other vendor. But that doesn't mean that we can't or won't work with GE. In fact, we do quite a bit of PET/CT work with GE."

Currently, Calutech, which provides units that support customers' MRI, PET, PET/CT, and nuclear medicine needs, is certified with Siemens Medical Solutions and Philips Medical Systems to install their imaging systems on its mobile units. It's pursuing certification from GE Healthcare to provide MRI technology. "If a customer wants a GE trailer, they wouldn't be able to order one from us yet," he says. "Before we could build such a unit, we'd have to go through the certification process. That's how it is with any equipment vendor."

Moreover, radiology equipment vendors and mobile unit manufacturers are careful about not slanting a potential customer's decision in any direction. "A company like GE is not going to recommend the mobile company they consider to be the best or the company they do the most business with," says Smith. "It doesn't work that way."

Rather, vendors will usually offer information about three or four qualified mobile companies and then let the customer make the choice. "No vendor is going to tie itself down to any one mobile manufacturer," says Smith.

Ketan Shah, senior manager of mobile enterprise for Philips Medical Systems, backs up that point. "Philips works with all certified mobile manufacturers," he says, adding that the reason for the certification process is to provide a sense of product credibility and choice to the purchaser. "If the purchaser requests input from Philips on which mobile manufacturer to go with, then certainly our sales and service teams could provide a recommendation based on their experience."

Specifically, Philips will provide the mobile system purchaser with a list of certified and preferred mobile manufacturers. The company also has a process to handle situations where a customer wants to choose a manufacturer not on that list. "But that could add incremental costs to the overall purchase price," says Shah.

Similarly, a mobile manufacturer will not recommend one particular equipment vendor if a customer asks who makes the best CT or MRI system, says Smith. "We could give them the characteristics of mobilizing the equipment, but we won't say that one company has the superior product," he says. "To tell the truth, we just aren't qualified to make a presentation to a radiologist about what's best. We only deal with the mobile side of the business."

From a market-share standpoint, the nonexclusive approach works better for both the radiology equipment vendors and the mobile manufacturers. The more companies each works with, the better the market share. "Working with all of the big three—GE, Siemens, and Philips—will allow us more flexibility," says Hardesty.

However, exceptions to the exclusivity rule do arise in unique and imaging-specific situations, such as the current Siemens/Medical Coaches collaboration involving PET/CT.

"We have a new, dedicated mobile PET/CT, and we decided to partner with Medical Coaches in developing the scanner," says Barry Scott, Siemens' marketing manager for PET/CT. "We've always worked with other companies and, in the future, we'll work with them again. However, at this point, we decided to pick one company and work with them exclusively to provide our customers with the best quality possible. This way, we can put the new PET/CT system through the many hours of rigorous testing to get it validated."

Gaining Certification

The certification process begins when the mobile unit manufacturer contacts the vendor and indicates it would like to handle their equipment, Hardesty says. From there, certain criteria must be met. For instance, Philips requires that mobile manufacturers follow a specific certification process, ensuring compliance with manufacturer and FDA guidelines for diagnostic imaging systems such as MR, CT, PET/CT, and cardiovascular, says Shah. "In addition, mobile manufacturers must adhere to Department of Transportation guidelines," he adds.

Further, when seeking certification with Philips, mobile manufacturers need to contact the respective Philips Product Management Group to obtain the mobile product requirements. "Our product management groups provide the guidelines, and if the mobile manufacturer meets them, Philips can then provide the certification," explains Shah.

Client List Profile

As far as customers, mobile manufacturers often work directly with the larger healthcare facilities that need to supply services to their satellite locations. "We recently built a PET/CT unit for the Cleveland Clinic so that it could meet the needs of its outlying clinics," says Smith.

But the largest customer group includes the shared service providers—companies such as Alliance Imaging, Insight Health Corporation, and Shared PET Imaging—who purchase a mobile unit and then contract with their own customers to provide interim mobile services. "That's why we only sell and don't lease," says Smith. "We made a conscious decision never to directly compete with our largest customer group. If we leased, we'd be providing the same service they offer."

Typically, facilities leasing equipment through these shared-service providers seek to address interim imaging needs. Such customers include the

following:

- hospitals, clinics, and physicians groups that don't have enough volume to support fixed equipment.
- hospitals and clinics with a capacity exceeding existing equipment but unable to justify the additional fixed equipment purchase. "They have a mobile service come in to pick up the excess," says Smith.
- facilities that bought new equipment and need short-term mobile services during the downtime.
- facilities undergoing construction.

"They could be building a new radiology department, and they don't want to be without service," says Smith. A mobile service can cover the period that involves the decommissioning and deinstallation of existing equipment, room reconfiguration, and installation of the new unit.

What to Ask

Beyond the certification issue, questions that potential customers (whether they're purchasing or leasing equipment) need to ask involve elements such as service and warranties.

One of the biggest issues Hardesty knows of involves the quality and frequency of service the equipment vendor is capable of providing. "I know of cases where customers were so displeased with service that they actually changed brands," he says.

Customers should also seek a satisfactory preventive maintenance schedule and warranty arrangement. In addition, facilities should ask themselves if it would be more cost-effective to purchase or lease. If they opt to lease, they need to ask the following:

- Does the mobile service provider have credentialed, qualified staffing?
- Does the mobile service provider have appropriate accreditation?
- What is the range of services provided?

In addition, whether a facility decides to purchase or lease, they should ask about the mobile equipment manufacturers' experience. "Ask how long a company has been in the high-tech mobile manufacturing field," says Smith. "Some have been in the field for many years, so experience is extremely important."

Medical Coaches, for instance, is a family-owned business with more than 50 years of experience. Founded in 1949, the company initially provided the Cuban government with 40 medical coaches, specifically for tuberculosis screening. Since then, the company has evolved into one of the larger international mobile medical unit manufacturers. "In the mid-1970s, we built the first mobile CT brain scanners," says Smith, whose father, Ian Smith, established the company. "Since then, we've kept our foot deep in the water with high-tech radiologic technology."

The company has manufactured more than 10,000 highly specialized mobile units located in more than 100 countries, including PET/CT, MRI, PET, CT, and cardiac catheterization labs.

Innovative Designs

In developing its mobile units, Medical Coaches first designs the units using computer-aided design (CAD) stations and 3-D solid modeling. Following that, the company constructs an actual unit in one to two months. Units are built from the ground up with input from customers and radiology equipment manufacturers. "We consult with both users and vendors to make sure our products are friendly to both," says Smith. "We spend a great deal of time in advance consultation with equipment manufacturers, especially their service people, asking them what is most difficult to service about the product."

The company constructs the unit framework with aluminum C-section wall panels that are more durable and lightweight than typical trailer panels. To increase flexibility and strength, the panels are bonded, not welded, increasing resistance to outside forces such as rust and vibrations. This framework is then filled with technology supplied from the equipment vendors or the healthcare facility. Once this installation is

accomplished, equipment vendor representatives perform the follow-up steps, including calibration.

Calutech offers customized designs, as well as advanced features such as heating, ventilation, air conditioning, and chiller systems, nonhydroscopic wall paneling, chassis designed with both steel and aluminum, all-aluminum welded lower bay construction on steel chassis units, and low-noise, all-aluminum generator housing.

In addition, it provides advanced radio frequency (RF) shielding for MRI units, which minimizes the effects of road travel. "It's a new way that we've developed to put up shielding and the MRI room together," explains Hardesty. "Basically, it's a seamless shield that has no overlapping of plates. There is no RF leakage, even after a couple of years of use."

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