Careful planning helps avoid pitfalls in equipment purchases

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Physicians often have mixed emotions about the prospect of purchasing a new piece of imaging equipment. On the one hand, they are intensely curious about the capabilities of a new device and excited about how it might improve patient care. On the other hand, they will probably experience fear and anxiety about the acquisition process itself, and particularly the bureaucracy, politics, and budget involved.

Given that large price tags are usually attached, the risks can be substantial. As bad purchasing decisions may have serious long-term implications for an entire hospital or clinic, careful planning, thorough research, and widespread consultation are essential. For those within the European Union, it is important to have some knowledge of the regulatory requirements. All capital investments exceeding €250,000 have to go out to tender, and the purchaser must allow any company in Europe to offer its products. The institution must announce its intention to replace a scanner, and companies have up to 40 days to request precise specifications. The purchaser then sends out detailed specifications and describes the criteria on which bids will be evaluated. The process must be transparent, and no price negotiations are permitted. Because of their technical know-how, medical physicists tend to play a central role in writing a tender and ensuring that the most appropriate equipment is selected. They may also act as the main contact, helping to balance the diverse needs and goals of administrators and physicians. The Big Picture column in this issue of DI Europe provides practical guidance about how to argue for and buy new equipment. If you have any observations or want to share your own experiences, please contact me at di.europe@btinternet.com. We are keen to keep the debate flowing. The complex issue of purchasing a PACS was addressed during September's EuroPACS/Management in Radiology meeting, held in Trieste, Italy. The discussion indicated that PACS is no longer a stand-alone purchase and that integration with national-level healthcare record summaries is required in many cases.

Dr. Hanna Pohjonen, a consultant with Rosalieco Oy in Espoo, Finland, described some innovative procurement approaches: consolidating into regional or national IT projects, rather than hospital-wide projects; pursuing projects driven by high-level governmental decision makers; and purchasing entire imaging solutions and services rather than software and hardware components. For further coverage of the Trieste congress, please turn to the conference reporter distributed with this edition. We hope you find this supplement useful and interesting. As always, we welcome your feedback and comments.

Disclosures:

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