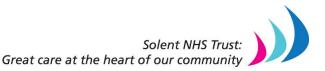


## FOI\_0376\_22/22 – FOI request concerning – Imaging

## Equipment

- 1. Please can you provide the following information for each piece of MRI scanners within the Trust or associated sites? (Please complete the attached spreadsheet)
  - a) Manufacturer
  - b) Model
  - c) Tesla 0.5 to 1.4, 1.5, 3.0, 3.0 +
  - d) Location Hospital Name or Site Name
  - e) Mobile / Static
  - f) Department equipment is primarily used in
  - g) Method of Finance at Procurement Trust/Lease/MES/Charity/PFI
  - h) Initial cost of Equipment
  - i) Annual Maintenance cost
  - j) Acquisition Date
  - k) Planned Replacement Date
  - N/A we do not have MRI scanners.
- 2. Please can you provide the following information for each CT scanners within the Trust or associated sites? (Please complete the attached spreadsheet)
  - a) Manufacturer
  - b) Model
  - c) Slices 8, 16, 64, 128, 264
  - d) Location Hospital Name or Site Name
  - e) Mobile / Static
  - f) Department equipment is primarily used in
  - g) Method of Finance at Procurement Trust/Lease/MES/Charity/PFI
  - h) Initial cost of Equipment
  - i) Annual Maintenance cost
  - j) Acquisition Date
  - k) Planned Replacement Date
  - N/A we do not have CT scanners.



- 3. Please can you provide the following information for each Ultrasound scanner within the Trust or associated sites? (Please complete the attached spreadsheet)
  - a) Manufacturer
  - b) Model
  - c) Location Hospital Name or Site Name
  - d) Department equipment is primarily used in
  - e) Method of Finance at Procurement Trust/Lease/MES/Charity/PFI
  - f) Initial cost of Equipment
  - g) Annual Maintenance cost
  - h) Acquisition Date
  - i) Planned Replacement Date

Please see spreadsheet below

