



Oregon Health Authority

## Capitol Project Reporting Form (CPR-1)

### Reporting Entity Identification and Contact

#### Facility

**Name:** Oregon Health & Science University  
**Federal Tax ID#:** 93-1176109  
**Address:** 3181 SW Sam Jackson Park Rd  
**City:** Portland **State:** OR **Zip Code:** 97239

#### Individual completing form

**Name:** [REDACTED]  
**Title:** [REDACTED]  
**Email:** [REDACTED]  
**Phone:** [REDACTED]  
**Fax #:** N/A

*If address is different than facility listed above, please provide:*

**Address:**  
**City:** **State:** **Zip Code:**

### Capital Project Qualitative Information

**1. Provide a brief description of the project.**

Replacement of the end-of life Elekta Synergy Platform Linear Accelerator System that will enhance capabilities and expand services to our patients.

**2. Proposed start date:** 07/01/2022

**3. Date of approval by board:** 06/24/2022

**4. Expected completion date:** 06/30/2023

**5. What is the expected project cost?** \$3,221,200

**6. Describe the expected benefits to the community that your facility serves. Include both direct financial benefits such as charity care as well as qualitative benefits such as access to care and quality improvements. Attach additional pages if needed.**

The new Varian TrueBeam linear accelerator (replacement) will enhance both quality and safety. The imaging features are designed to improve visualization of patient anatomy, both prior to and during treatment delivery. Additionally, the Varian platform minimizes the patient's time on table and provides a more accurate/precise delivery of dose. Each of these factors contribute to our team's ability to treat a greater number of patients in our surrounding community as well as across the region. This increase in clinical throughput has been consistently demonstrated when comparing the Varian TrueBeam to the Elekta linear accelerator(s) on Marquam Hill. Consequently, we expect to increase our charity care offerings. Effectively, one of our major charity care limitations is the number of patients we can see on any given day, and this new linear accelerator will create more patient visit/treatment openings. We anticipate a 20% increase in clinical throughput as a result of this replacement purchase.

7. **In what ways may this project negatively impact the community that your facility serves? Include direct cost such as bonds as well as indirect impacts such as service interruptions. Attach additional pages if needed.**

No negative impacts are anticipated, and this project will not be funded with bond proceeds.

8. **How has your facility evaluated the need for this project within the community that you serve?**

This is the replacement of end-of-life equipment. Current volume supports replacement of this equipment.

9. **Are the medical services created by this project already available in the community that your facility serves?**

This project is a replacement of an existing Elekta linear accelerator that is end-of-life. No new medical services are being introduced by this replacement.

## Public Notice and Comment

1. **Provide a link to the webpage where public notice of the capital project was posted. If your facility does not maintain a webpage provide the name of the newspaper where the public notice was made and date of publication. Attach additional pages if needed.**

<https://www.ohsu.edu/about/capital-reporting>

2. **Describe your facility's method of collecting and reviewing public comments on the capital project. Attach additional pages if needed.**

OHSU is governed by a Board of Directors who considers community comments in their decisions.

<b>*Signature:</b>	Mike Olson, CPA
<b>Date:</b>	7/14/2023

*\*Entry of name connotes signature*

Please **email** the completed form to: [HDD.Admin@dhsoha.state.or.us](mailto:HDD.Admin@dhsoha.state.or.us)

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