

reach; and the addition of a fluorescent imaging system, which enables real-time visualization and assessment of vessels, bile ducts and tissue perfusion.

Elective replacement of major medical equipment follows an industry-standard replacement schedule of seven years. This is consistent with UVM Medical Center's strategic plan, which calls for the timely replacement of major capital equipment before it becomes obsolete and can no longer function adequately for patient care. Failure to replace the aging equipment would inevitably lead to the demise of UVM Medical Center's surgical robotics program. As the only academic institution in the state of Vermont, loss of the surgical robotics program would have significant negative impacts on the mission of UVM Medical Center to provide high-quality academic healthcare for a rural region, and the ability to recruit and retain the best and brightest students and faculty.

UVM Medical Center currently offers state of the art cancer care to patients in Vermont, northern New York, and New Hampshire. After the robotics program was introduced in 2008, the surgical oncologic treatment options offered at UVM Medical Center became comparable to those offered in major urban cancer centers. Prior to the introduction of the surgical robotics program, patients diagnosed with cancer or other complex surgical conditions who had financial means, would travel to Boston or New York City to have robotic surgery to avoid more invasive alternatives. However, since the inception of the surgical robotics program, all appropriate patients, regardless of insurance or personal finances, have had the opportunity to receive the benefits of this treatment technology. If the current da Vinci system fails and is not replaced, oncological surgical treatment options for urologic and gynecologic patients will regress to only those options offered a decade earlier. Patients would be forced to go elsewhere for treatment, and UVM Medical Center would no longer be able to offer comprehensive cancer care for the rural population of Vermont.

All major academic medical centers are utilizing robotic assisted surgery. All major surgical training programs are also teaching their residents and fellows to perform surgery using the robotic system. If UVM Medical Center does not have a functional robotic surgery system, it will be difficult to recruit and retain young and/or established faculty to the institution. Recruiting the best and brightest physicians is critical to treating patients, but also to teaching the next generation of physicians.

SECTION III DESCRIPTION OF PROJECT COMPONENTS

As indicated above, the Project includes the purchase of a replacement surgical robotic system, as well as a skills simulator to support training and credentialing. This is described directly below.

A. Equipment

UVM Medical Center plans to purchase a da Vinci Xi Dual Console System from Intuitive Surgical for \$2,260,000, which includes freight charges. The surgical system is stand-alone and