



THE ROUNDTABLE CARDIOLOGY EQUIPMENT

INDUSTRY EXPERTS SPEAK UP

THIS MONTH, *TECHNATION* ASKS THE EXPERTS ABOUT SERVICING cardiology equipment in 2010 and beyond. Luke Mayo, Siemens Healthcare's director of service support for vascular imaging systems; Jennifer Esposito, GE Healthcare's interventional service director; and Michael Moore, director of sales at Nasiff Associates, Inc., all lend their insight.



JENNIFER ESPOSITO, GE HEALTHCARE'S INTERVENTIONAL SERVICE DIRECTOR



LUKE MAYO, SIEMENS HEALTHCARE'S DIRECTOR OF SERVICE SUPPORT FOR VASCULAR IMAGING SYSTEMS



MICHAEL MOORE, DIRECTOR OF SALES AT NASIFF ASSOCIATES, INC.

What are the biggest trends currently affecting the servicing of cardiology equipment?

Jennifer Esposito: Customers are expecting increasingly more value from their service providers, especially when considering a service contract. This means remote and proactive service, as well as additional offerings that are not necessarily related to “break/fix.” We are developing offerings around clinical informatics and clinical excellence. Additionally, increasingly more customers are looking for help with building operational excellence and with compliance and reporting needs. Customers may also be considering keeping their equipment longer and, therefore, want to be sure service providers can continue to maintain their systems well into the future.

Luke Mayo: The biggest trend in cardiology service today is to become more predictive and, therefore, proactive in detecting equipment failures. Customers are becoming less concerned about equipment downtime statistics and far more concerned with the effect on workflow and the impact on patient care. Remote repair and troubleshooting, real-time system monitoring services, and after-hour, onsite support are the future of interventional equipment service offerings.

Michael Moore: There has been an increase of cardiology equipment in the physician's office and a growing demand for bundling solutions, eliminating the need to acquire standalone solutions. The implementation of electronic medical record systems will also continue to contribute to growth.

What are some of the biggest challenges of servicing cardiology equipment?

Esposito: Cardiology departments are busy; customers expect us to be able to work around their schedules and to respond quickly to their needs. This means standard coverage hours that are more in line with the department, immediate technical support, and fast, onsite response times.

Mayo: The biggest challenges are keeping up with the latest technology. The high technology used today in cardiology equipment necessitates higher proficiencies and educational needs of the service team. The technology changes quickly, and we need to stay ahead of it. We need to be looking for new tools to maintain the technology – and new breakthroughs that can improve patient care and customer workflow.

Moore: Getting parts for older systems can be challenging. Repairs are getting more costly, and the technology for managing reports just isn't there. Calibrating older, standalone, resting ECG and stress ECG equipment is necessary each year.

How has the servicing of cardiology equipment evolved in recent years? How do you think it will change in the future?

Esposito: As technology continues to evolve, especially with more digital products, service has needed to follow suit. This means maintaining remote connectivity to our systems and being able to provide remote service, including proactive and remote fixes. Our customers don't want to be impacted by any unplanned downtime or even the briefest interruption during a patient exam. This means robust and reliable systems as well as technology tools that enable remote service experts to be alerted of potential issues before they become visible to our customers.

Mayo: In the past, the industry service model was totally reactive: Wait until the system had a failure and the customer contacted the vendor. Then, the system was typically unusable until a customer service engineer arrived onsite to troubleshoot and repair the system. As a result, a system could sometimes be down for a day or more.

Today, the equipment is far more sophisticated and complex, as are the procedures being performed on the patient. A failure of the system during a stent procedure, for example, brings far higher risk to the patient than the relatively simple percutaneous transluminal coronary angioplasty procedures that were more common in the past. When the system is not available for cases, there is a strong impact on revenue. Long periods can create backlogs of cases, or patients may be sent elsewhere for procedures, both of which have an impact on the reputation of a hospital.

Another thing to consider is that today's interventional systems are far more software-dependent and have a greater role in patient therapy than in the past. These computer-based systems have inherent obsolescence issues to contend with and the interconnections with HIS/RIS solutions, PACS, etc.

Both patient care and increased equipment technology are driving an evolution in service to predictive and remote models. We are also responding by improving diagnostic and repair speed through the transition to proactive service offerings. To counter the issue of obsolescence, equipment manufacturers are developing service programs to protect the customers' investment by updating the technology of the system and extending its service life.

The future will see an increase in the remote model for service, plus a greater emphasis on professional services to help customers optimize their workflow.

Moore: By migrating from standalone cardiology equipment to PC-based cardiology equipment, servicing will become much more cost effective. With PC-based cardiology equipment, an office can use existing equipment if they already have a computer or printer. If there is a problem, each component is separate and can be replaced with off-the-shelf computer or printer equipment. Digital technology is the future of cardiology equipment.

Do you have any insider tips for biomed servicing cardiology equipment?

Mayo: Biomed today need to stay on top of their training. After all, the complexities of today's equipment demand it. Biomed should also partner with vendors, by taking advantage of training opportunities they offer in order to stay current, and by leveraging a close relationship with technical support engineers.

Moore: Update as much equipment as you can to PC-based equipment. That way, when you need parts for repair, you can visit your local computer store.

What else do you want *TechNation* readers to know about the cardiology equipment industry?

Mayo: The cardiology equipment industry today is working to improve system throughput by improving workflow and system availability. Using new technologies, we are able to expand the functionality and capabilities of the equipment into new areas of patient care. Meanwhile, service is evolving to improve the system availability, while protecting patient and operator safety, through innovations, such as lower dose rates, while maintaining image quality and decreasing the lifecycle costs of the equipment. ✨