

August 6, 2008

Ms. Carol Potter
 NC Division of Health Service Regulation
 Medical Facilities Planning Section
 2714 Mail Service Center
 Raleigh, NC 27699-2714

DFS Health Planning
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Medical Facilities
 PLANNING SECTION

RE: Petition from Parkway Urology, P.A., d/b/a Cary Urology

Dear Ms. Potter,

We are writing to express our strong opposition to the petition from Parkway Urology, P.A. for the inclusion of a "special need for a multidisciplinary prostate health center in Service Area 20" including the need for an additional IMRT/IGRT capable linac in this Service Area. We believe that the proposed change in methodology for assigning linear accelerator need is both unnecessary for appropriate patient care, and has the potential to completely undermine the foundation of the CON system by misallocating these expensive resources and encouraging unnecessarily expensive care.

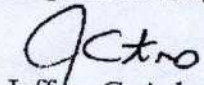
Wake county is already served appropriately by four Linacs with IMRT/IGRT capability, including one in Cary just a short distance from the petitioner's practice. These existing facilities already engage in multidisciplinary prostate cancer care, which does not require that all of the involved specialties/treatments be housed under one roof.

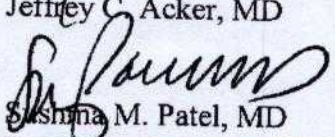
Furthermore, the existing facilities in Wake County, as well as other regional facilities at Duke, UNC, and at our facilities in Pinehurst, care for indigent patients regularly and without limitation. The premise that there is an "underserved" population of patients that could be served by the addition of a prostate specific linear accelerator in Cary is fallacious and disingenuous.

Finally, awarding a linac CON to a urology group creates a perverse incentive for self referral and can potentially result in overutilization or inappropriate utilization of expensive radiation therapy services.

Thank you for your consideration of these issues.


 Stephen C. King, MD


 Jeffrey C. Acker, MD


 Sushma M. Patel, MD

Radiation Oncology- Firsthealth of the Carolinas