OECD Health Statistics 2025

Definitions, Sources and Methods

Mammographs

Number of dedicated mammography machines (those designed exclusively for taking mammograms). The code is CIM-9 87.37.

Sources and Methods

Australia

Source of data: **Department of Health**. Unpublished data from Location Specific Practice Number register.
Reference period: Years reported are financial years 1st July to 31st June (e.g. data for 2012 are as at 30th June 2012).
Coverage:
- Data from 2005 onwards represent the number of units approved for billing to Medicare only. Units may be removed from one location and re-registered in another location.
Note: During the first wave of COVID-19 in Australia at the beginning of 2020, diagnostic imaging services decreased significantly. Existing imaging practices have chosen to consolidate their existing practices and services, resulting in a halt in the expansion of diagnostic imaging practices in Australia. In addition, there have been significant delays in the global supply chain for the replacement and upgrade of machines. All of these issues have combined to result in the observed changes to the number of machines that are being reported for 2020 and 2021.

Austria

Source of data: **Austrian Federal Ministry of Social Affairs, Health, Care and Consumer Protection** (Gesundheit Österreich GmbH, Austrian Breast Cancer Screening Program).
Reference period: 31st December.
Coverage: The number of units (number of sites) where mammograms are performed as part of the breast cancer screening programme (which started in January 2014) using equipment certified for the breast cancer screening programme is reported. Although this figure essentially covers the number of existing mammography devices, it must be assumed that some non-certified (secondary) devices or devices in sites not participating in the breast cancer screening programme are not included. Included are:

- Mammograph units in hospitals as defined by the Austrian Hospital Act (KAKuG) and classified as HP.1 (HP.1. to HP.1.3) according to the System of Health Accounts (OECD, 2011 Edition)
- Mammograph units in the ambulatory sector (HP.3)

Deviation from the definition:
Estimation method:
Break in time series:

Belgium

Source of data:
Hospital (HP.1): **Federal Service of Public Health**, DGGS "Organisation of health provisions"; Ministry of the Flemish community and Ministry of the French community.
Ambulatory care providers (HP.3): **Federal Agency for Nuclear Control (FANC)**.
Reference period:

Coverage:
- *Ambulatory care providers (HP.3)*: FANC: number of devices approved for medical use. In principle, heavy medical machinery exams are not reimbursed in the ambulatory care sector. *From 2023 onwards, data include equipment in policlinics*
Deviation from the definition:
Estimation method:
Break in time series: 2023: the data on HP3 include equipment in policlinics (69 in 2023)

Canada

Source of data:
- 1997: Canadian Association of Radiologists (CAR) Council meeting, Ottawa June 14, 1997.
- 1999: Mammography accreditation growing trend, CMAJ • MAR. 9, 1999; 160 (5).
- 2002: **Health Canada**, Medical X-ray and Mammography Division.
- 2005: **L. Priest, The Globe and Mail**, "Machines That Detect Cancer Need Check-up, Groups Say," May 2, 2005.
- 2010-2023: **Canadian Association of Radiologists**.
Coverage:
- 1997 estimate of all units installed based on information from CAR on the number and percentage of units accredited (the 238 units accredited were said to represent 36% of all units).
- 1999 estimate of all units installed based on information from CAR on the number and percentage of units accredited ((the 297 units accredited were said to represent 46% of all units).
- 2002 and 2005 data: According to Health Canada, there were about 600 mammography machines in about 400 facilities in Canada in 2002. According to an investigation by the newspaper The Globe and Mail, there were 688 machines for breast cancer screening in Canada in May 2005. Of the 688 machines for breast cancer screening in Canada in May 2005, 492 were accredited by a voluntary accreditation program administered by the Canadian Association of Radiologists, while accreditation was actively sought for 48 machines. Number of mammographs accredited by the Canadian Association of Radiologists: 1993: 12; 1994: 65; 1995: 147; 1996: 188; 1997: 238; 1998: 269; 1999: 366; 2000: 400; 2001: 426; 2002: 449; 2003: 452; 2004: 467; 2005: 492.
- Data from 2010 onwards: Starting in 2010, only mammographs accredited by the Canadian Association of Radiologists are shown.
- Starting in 2013, the number of mammographs accredited by the Canadian Association of Radiologists is broken down between "hospital" and "ambulatory sector". For 2014 to 2016, while the total counts are revised figures, the breakdown between "hospital" and "ambulatory sector" was estimated from preliminary figures.
Break in time series: 2010.

Chile

Source of data: **Ministry of Health**, **Investment Division**.
- The data collection was conducted through an annual survey from the Ministry of Health to all Country Health Services (by the office of Secretary for Care Networks, addressed to the Directors of Health and Experimental Centres, and Chief of the local Imaging Departments).
Methodology: The methodology used was to ask providers of this type of equipment their installed base of equipment in operation, for both public and private area. Private doctors' practice are not considered.
Coverage:
- The information submitted considers the capacity up to 31st December, available in both public and private sectors of Health.
- Hospitalisation (Hospitals and Clinics) and ambulatory care (Medical Offices and clinics of specialties). Some equipment may be used for both hospital and outpatient care (they are shared equipment).

Colombia

Source of data: Hospital Information System (SIHO), **Ministry of Health and Social Protection**.
Coverage: Data cover only equipment installed in hospitals.

Costa Rica

Source of data:
- *From 2022*: **Ministry of Health through reports given by public and private hospitals** Sistema Contable de Bienes Muebles de la **Caja Costarricense de Seguro Social** (Accounting System of Personal Property of the National Social Security Fund) and Annual Report from Private hospitals.
- *Till 2021*: Sistema Contable de Bienes Muebles de la **Caja Costarricense de Seguro Social** (Accounting System of Personal Property of the National Social Security Fund).
Coverage:
- Provisional data for 2023: Only includes data for public hospitals.

- *From 2022*: All public hospitals and some private hospitals.
- *Till 2021*: Data correspond only to public hospitals belonging to the Social Insurance.
Break in time series: 2022 (inclusion of some private hospitals), 2023 Only includes data for public hospitals.
Deviation from the definition: 2023: Only includes data for public hospitals.

Czechia

Source of data: **Institute of Health Information and Statistics of the Czech Republic**; Survey on medical apparatus in health establishments.
Reference period: 31st December.
Coverage:
- Until 1999, only establishments of health sector covered. From the year 2000, data cover all sectors.
- Data under HP.1 encompass all bed care health establishments and HP.3 all other health establishments.
- From year 2014 data do not cover mammography machines in separate ambulatory gynaecology establishments (out of hospital).
Deviation from the definition:
Estimation method:
Break in time series: 2000, 2014.

Denmark

Source of data: **Danish Health Authority, Radiation Protection**. National database of radiation sources (for all years). Registration of equipment is mandatory.
Reference period: 31st of December.
Coverage:
Deviation from the definition:
Estimation method:
Break in time series:

Estonia

Source of data: **National Institute for Health Development**, Department of Health Statistics. (since 2013)
Reference period: 31st of December.
Coverage:
- All providers. Since 2013 data have been included in the annual reports ("Health Care Provider").
- Data on equipment were not collected routinely before 2013. Since 2013 data have been included in the annual reports of health care providers.
- Data are collected from hospitals and ambulatory care providers.
Deviation from the definition: Due to the changes in the HP coding in 2014 according to the SHA2011 some providers, previously classified under HP3, were classified under HP4. To avoid data loss since 2014 also HP4 providers are included under category "ambulatory care".
Estimation method:
Break in time series:

Finland

Source of data: **Radiation and Nuclear Safety Authority Finland**.
Reference period:
Coverage: All hospitals.
Deviation from the definition:
Estimation method:
Break in time series:

France

Source of data: **Ministère des Solidarités et de la Santé - Direction de la Recherche, des Études, de l'Évaluation et des Statistiques** (DREES), Sous-Direction de l'Observation de la Santé et de l'Assurance maladie, Bureau des Établissements de santé. Data are from the "**Statistique Annuelle des Établissements de santé (SAE)**".
Data from 2013 has been revised in January 2023, to ensure comparability over time from 2013 onwards.
Reference period: Equipment in service during the year (not necessarily during the whole year).
Coverage: Data refer to metropolitan France and D.R.O.M. (overseas departments). Only "hospitals" mammographs are recorded.
Deviation from the definition:
Estimation method:
Break in time series:

Germany

Source of data: **Federal Statistical Office**, Hospital statistics 2023 (basic data of hospitals and prevention or rehabilitation facilities); Statistisches Bundesamt 2024, *Statistischer Bericht: Grunddaten der Krankenhäuser*, table 23111-28 and Statistisches Bundesamt 2024, *Statistischer Bericht: Grunddaten der Vorsorge- oder Rehabiltationseinrichtungen*, table 23112-17; http://www.destatis.de or http://www.gbe-bund.de.
Reference period: 31st December.
Coverage:
- Data on medical technology include equipment installed in all types of hospitals (HP.1) in all sectors (public, not-for-profit and private).
- Additional equipment in the ambulatory sector is not counted in official statistics.
Data before 2018 not available.
Deviation from the definition:
Estimation method:
Break in time series:

Greece

Source of data: **The Greek Atomic Energy Commission (**for HP1 & HP3) and **the Hospital Census of ELSTAT** (HP1).
Reference period: 31st December.
Coverage: Country Total.
Deviation from the definition:
Estimation method:
Break in time series:

Hungary

Source of data:
- Until 2007: **Hungarian National Institute for Hospital and Medical Engineering** (ORKI in Hungarian). www.orki.hu.

- From 2008 until 2011: **Healthcare Quality Improvement and Hospital Engineering** (EMKI in Hungarian). www.emki.hu.
- From 2012 until 2013: **National Institute for Quality- and Organizational Development in Healthcare and Medicines** (GYEMSZI in Hungarian), www.gyemszi.hu.
- From 2014: **National Healthcare Service Center** (ÁEEK in Hungarian), www.aeek.hu.

Reference period: 31st December.
Coverage:
- The number includes only those units that are owned by health care institutions contracted by the health insurance company.
- In 2014, a new institution, the National Center for Health Care (ÁEEK), started collecting data, and unfortunately not all data providers responded to their request. Therefore, between 2014 and 2017, we were only able to provide estimates.

Deviation from the definition:
Estimation method:
Break in time series:

Iceland

Source of data: Until 2022: **Icelandic Radiation Safety Authority**. As of 2023: The Directorate of Health in Iceland.
Reference period: 31st December.
Coverage: All mammographs registered in Iceland.
Deviation from the definition:
Estimation method:
Break in time series:

Ireland

Source of data: **Environmental Protection Agency** (https://www.epa.ie/).
Reference period: Figures as at end of December.
Coverage:
- All figures are taken from the EPA's licensing database and were calculated at the end of each calendar year.
- Figures reflect the number of machines licensed by the EPA in Ireland. Under the licensing system used, the EPA assigns purposes to each item of equipment which indicates the clinical use of that item e.g., mammography, fluoroscopy, CT etc. This designation is based upon data supplied from equipment users. Therefore, the figures reflect how they describe the equipment.

Deviation from the definition:
Estimation method:
Break in time series:
- Data is not available from 2019 onwards.

Israel

Source of data: The data are based on the Medical Institutions License Registry maintained by the Department of Medical Facilities and Equipment Licensing and the Health Information Division in the **Ministry of Health**.
Reference period: End of the year.
Coverage: Includes all licensed mammographs since 2013.
Note: The statistical data for Israel are supplied by and under the responsibility of the relevant Israeli authorities. The use of such data by the OECD is without prejudice to the status of the Golan Heights, East Jerusalem and Israeli settlements in the West Bank under the terms of international law.

Italy

Source of data: **Ministry of Health -** General Directorate of digitalisation, health information system and statistics **- Office of Statistics**. www.salute.gov.it/statistiche.
Reference period: 1st January.
Coverage:
- Data on DSA, PET and mammography units were available for the first time in 2007.
- Available equipment both in hospital and territorial facilities is counted. Territory private facilities not accredited by the National Health Service are not covered. However, data on equipment in hospitals refer to both public and private hospitals, including private hospitals not accredited by the National Health Service.
Deviation from the definition: Territory private facilities not accredited by the National Health Service are not covered.
Estimation method: None.
Break in time series: None.

Japan

Source of data: **Ministry of Health, Labour and Welfare**, Survey of Medical Institutions.
Coverage:
- Figures are for the number of mammographs in hospitals and medical clinics.
- Figures of 2011 exclude data of Ishinomaki medical area and Kesennuma medical area of Miyagi Prefecture, and Fukushima Prefecture.

Korea

Source of data: **Health Insurance Review & Assessment Service**, Health care resources by provider.
Note:
2023- In Korea, ambulatory care is primarily provided by specialists who open their own clinics. The statistics show a steady increase in the number of cases where these clinics acquire equipment such as MRI machines and mammographs. Since health checkups are covered by the National Health Insurance in Korea, institutions providing ambulatory care tend to purchase diagnostic equipment in order to generate revenue through related reimbursements.

Latvia

Source of data: **Centre for Disease Prevention and Control**; Statistical Report.
Reference period: 31 December.
Coverage:
Coverage:
Deviation from the definition:
- The number of mammographs in HP.3 institutions also include mammographs in HP.4.2 institutions.
Estimation method:
Break in time series:

Lithuania

Source of data: **Radiation Protection Centre**. Report “Health Statistics of Lithuania” available from https://www.hi.lt/sveikatos-statistikos-leidiniai/#--lietuvos-sveikatos-statistika. Available on Official Statistics Portal of Statistics Lithuania http://osp.stat.gov.lt/en.
Reference period: 31st December.
Coverage: The number of licensed equipment. Since 2007 – the number of functioning equipment.
Deviation from the definition:
Estimation method:
Break in time series: 2007.

Luxembourg

Source of data: **Direction de la Santé**, Division de la Radioprotection.

Reference period: data as of December 31.
Coverage: Includes all equipment in use.
Deviation from the definition:
Estimation method:
Break in time series:

Mexico

Source of data:
- From 1990 to 2002: **Ministry of Health**. Bulletin of Health Information and Statistics. National Health System, Vol. 1, "Human and material health resources", 1990 to 2002.
- From 2003 to 2023: Data are taken from the National Health Information System (SINAIS). The data source for private providers is **National Institute of Statistics and Geography** (INEGI). National Survey on Medical units with Inpatient Hospital Services.
Coverage:
- Includes information from public institutions (MOH, IMSS-Bienestar, Services of the Federal District, IMSS, ISSSTE, PEMEX, SEDENA, SEMAR, state health hospitals, university hospitals) and private providers.
- The observed increase probably is due to improvements in reporting and not to a real increase in equipment.
- From 2004 onwards, the equipment was identified by type of provider, using the same source, associating the unique ID included in the catalog of health establishments of health facilities (CLUES) by medical unit to confirm whether it is a hospital or ambulatory unit.

Netherlands

Source of data: One-time survey.
- 2006 onwards: Data not available.
Reference period:
Coverage:
Deviation from the definition:
Estimation method:
Break in time series:

New Zealand

Source of data: **Office of Radiation Safety, Ministry of Health**.
Coverage:
- The figures provided include all health care facilities, both public and private providers.
- The NZ Radiation Protection Act requires the Office of Radiation Safety to be notified of any sale or disposal of an irradiating apparatus.
- The database does not distinguish between hospital and ambulatory care settings.

Norway

Source of data: **The Norwegian Radiation and Nuclear Safety Authority (DSA).** Undertakings that expect to acquire, lease, use or handle radiation sources that are subject to registration shall register their activities and each radiation source to DSA via DSA's radiation source registration system (https://ems.dsa.no/). Equipment that is no longer in use is also reported through the same registration system.
Reference period: The reported data include registrations of equipment that have been registered and processed by DSA as of December 31 each year. Due to delays in the processing of registrations the actual number of equipment might be slightly higher or lower than reported on this date.
Coverage:
- Equipment is reported for HP.1 and HP.3 together (hospital and ambulatory sector). It is not possible to differentiate between HP.1 and HP.3 in the source data.

- The reported data is limited to equipment that is subject to authorization from DSA according to the Radiation Protection Regulations (see "Strålevernforskriften på engelsk" here: https://dsa.no/regelverk). DSA's radiation source registration system was updated in 2016, and data before this is therefore not easily accessible.
Deviation from the definition:
Estimation method:
Break in time series:

Poland

Source of data:
In year 2013 and earlier:
Ministry of Health:
- MZ-12 - report on activity and workers in outpatient specialised health care.
- MZ-29 - report on activity of general hospital.
Ministry of Interior and Administration:
- MSW-33 Report on nursing and residential care facilities. Data are collected on an annual basis.
From 2014 to 2018:
Ministry of Health:
- MZ-11 - report on activity and workers in outpatient health care.
- MZ-29 - report on activity of general hospital.
Ministry of Interior and Administration:
- MSW-33 - report on nursing and residential care facilities. Data are collected on an annual basis.
Since 2019:
Ministry of Health:
- MZ-11 - report on activity and workers in outpatient health care.
- MZ-29 - report on activity of general hospital.
Ministry of Interior and Administration:
- MSWiA-32 - report on the outpatient activities of independent public health care units.
- MSWiA-43 - report on activities of general hospital and specialised hospital.
Reference period: Data as at 31st December.
Coverage:
Deviation from the definition:
Estimation method:
Break in time series:
- 2014: change in data source as described above.
- 2019: change in data source as described above.

Portugal

Source of data:
- For all sectors (inpatient and outpatient facilities) of public hospitals in the mainland: **Ministry of Health**
- Survey of High-tech Facilities.
Reference period: Annual.
Coverage:
- Data include the total installed equipment.
- Since 2011, data are only available for mammographs in hospitals.
Deviation from the definition:
Estimation method:
Break in time series:

Slovak Republic

Source of data: **National Health Information Center**.
Reference period: 31st December.
Coverage: Medical technologies available regardless of frequency of use.

Type of health care facilities:
- HP.1 (hospital) - Institutional care including out-patient units included in general hospital, specialised hospital and sanatorium.
- HP.3 (ambulatory sector) - Out-patient healthcare included in general out-patient care unit, specialised out-patient care unit, emergency out-patient unit, facility providing day care, residential healthcare unit, healthcare centre, nursing care service, facility for common.
Deviation from the definition:
Estimation method:
Break in time series:
- Data for Mammographs up to the year 2003 are inconsistent, and their numbers were not submitted.
- The increase in the availability of medical equipment in ambulatory setting in year 2014 is caused by purchase of new equipment and the expansion of the number of reports from statistical units which have been sent to National Health Information Center.

Slovenia

Source of data: **Slovenian Radiation Protection Administration**, registry of radiation sources in medicine and veterinary medicine.
Reference period: 31st December.
Coverage: Refers to all institutions in Slovenia.
Deviation from the definition:
Estimation method:
Break in time series:

Spain

Source of data:
- 2003 and 2004: **Ministerio de Economía y Hacienda – Ministerio de Sanidad**. Figures from "Informe del Grupo de Trabajo del Gasto Sanitario Público 2005".
http://www.msc.es/estadEstudios/estadisticas/sisInfSanSNS/pdf/IGTGS2005.pdf.
- From 2006 to 2009: **Ministry of Health** from **National Catalogue of Hospitals** (several issues).
- Since 2010: **Ministry of Health** from **Specialised Care Information System** (Sistema de Información de Atención Especializada - SIAE).
http://www.sanidad.gob.es/estadEstudios/estadisticas/estHospiInternado/inforAnual/homeESCRI.htm.
Reference period: 31st December.
Coverage:
- Until 2009, data relate only to devices available in hospitals; they do not include equipment in other health care facilities.
- Since 2010, data are available for equipment in hospitals and ambulatory sector.
Deviation from the definition:
Estimation method:
Break in time series: 2006, 2010.
- Change in data source.
- Information about medical technology and diagnostic activity for centers HP.3 included since 2010.

Sweden

Source of data:
- Swedish Association of Local Authorities and Regions (earlier Federation of Swedish County Councils). Statistics collected mainly from health care Regions and The Swedish Radiation Safety Authority.
Reference period:
- 2015-2021: December.
- From 2022: January the year after.
Coverage:
- Most of the health care givers from local regions are included. Some non-radiation equipment owned by private health care providers may be excluded.

- Three regions, Blekinge, Värmland and Jämtland, have no reported data for 2022 and 2023. And for 2024 two regions, Blekinge and Kronoberg, have no reported data. For these regions imputation has been done using their data from past years.
Deviation from the definition:
Estimation method: For regions missing data for some years imputation has been done using their data from past years.
Break in time series:

Switzerland

Source of data: **Federal Office of Public Health (FOPH)**, Bern, Division of Radiological Protection, full administrative data.
Reference period:
Coverage:
Deviation from the definition:
Estimation method:
- Time series are not complete. Some data are available at irregular dates. To estimate data with consistent time periods, interpolation is therefore operated on punctual data from permanent administrative registers.
- Missing 2022 Data have been estimated using linear extrapolation between 2021 and 2023.
Break in time series:

Türkiye

Source of data: **General Directorate for Health Services, Ministry of Health**.
Reference period: It is the number of mammographs belonging to the institutions serving during the year. If the institution closed during the year, the data belongs to the date of closing. If not, the data dated 31 December is used.
Coverage:
- Data cover the number of devices in the MoH, university hospitals, private and other sector (other public establishments, local administrations, and MoND-affiliated facilities) in addition to those used by outsourcing in Türkiye.
- The strong increase in 2012 is mainly due to improvements in data reporting and not to a real increase in the capacity.
Deviation from the definition:
Estimation method:
Break in time series:

United Kingdom

Source of data:
- **NHS Cancer Screening Programme taken from the NCCPM equipment reports** (until 2011).
- 2019 onwards: **NHS** Improvement Annual Census.
-**England** 2023 onwards: NHS England. National Imaging Data Collection (https://www.england.nhs.uk/statistics/statistical-work-areas/diagnostics-waiting-times-and-activity/national-imaging-data-collection/)
Reference period: Data are for the year ending October until 2001, year ending November in 2002 and 2003, year ending December in 2004, year ending June in 2005, year ending September in 2006-2009, and year ending October in 2010. Position at end of financial year (31st March 2023, and 31st March 2024 for 2023 and 2024 data respectively).
Coverage:
- England NHS HP.1 Hospitals.
-2023 onwards: Covers assets in acute or specialist NHS trusts, including independent sector assets based on NHS sites and CDC assets. Does not include mammography machines used exclusively in the NHS Screening Programme Six NHS trusts reported fewer mammography machines in 2023/24 compared to 2022/23. Due to discrepancies in 2022/23 data, likely caused by over-reporting accessory equipment for mammography. It may also reflect the removal of older equipment, or the implementation of more accurate

reporting in 2023/24. As a result, comparing the 2023/24 data to 2022/23 data may give the impression that the number of ultrasound and mammography machines has decreased, when in fact it has increased or remained unchanged
Estimation method:
- 2019 onwards England only census is adjusted (grossed up) to represent a UK value based upon a pro-rate population using the official Mid Year Population Estimates of UK Nations and the UK as a whole.
Break in time series:
- 2010. Pre-2010 is England only. 2010 onwards is based on a UK estimate.
- 2019 onwards data represent a break in any previous time series. From 2019, data is available for hospitals (HP.1) only.
- 2023 onwards data represent a break in previous time series. From 2023, the England data source is the National Imaging Data Collection.

United States

Source of data: **American College of Radiology (ACR).** Website: http://www.acr.org/~/media/ACR/Documents/Accreditation/Mammography/MammoUnitChart.pdf.
Coverage: Nationwide. Mammography units that are certified under the Mammography Quality Standards Act of 1992 (MQSA).
Deviation from the definition: Data match the OECD definition.
- ACR do not provide breakdown of mammography units by hospital and non-hospitals sites.
Estimation method: Further information on the estimation method can be found at The American College of Radiology Mammography Accreditation Program: Frequently Asked Questions: http://www.acr.org/~/media/ACR/Documents/Accreditation/Mammography/MammoFAQ.pdf
Break in time series: No breaks in time series.

NON-OECD ECONOMIES

Bulgaria

Source of data: **National Centre for Public Health and Analyses at the Ministry of Health.**
Reference period: 31st of December.
Coverage: The study is with annual periodicity. All types of health establishments except hospices are included.
Deviation from the definition:
Estimation method:
Break in time series:

Croatia

Source of data: Croatian Institute of Public Health, Medical Equipment Database.
Reference period: Status on December 31st.
Coverage: Data includes mammographs in all public and private hospitals and other health care providers in Croatia, except prison hospital.
Deviation from the definition:
Estimation method:
Break in time series:

Cyprus

Source of data: **Ministry of Labour and Social Insurance**, Department of Labour Inspection, Radiation Inspections and Control Service.
Reference period: 31st December.
Coverage: Complete coverage, all the equipment for which license has been issued from the Department of Labour Inspection.

Deviation from the definition: No deviation.
Estimation method:
- As regards years 2000-2004 the numbers are not actual, they have been estimated from the Department of Labour Inspection.
- Number of mammography equipment refers to number of dedicated mammography equipment (those designed exclusively for taking mammograms). The code is: CIM-9 87.37.
Break in time series: The disaggregation between HP.1 and HP.3 is feasible only from year 2021 onwards.

Romania

Source of data: **National Institute of Statistics**, The activity of the sanitary and health care network – annual survey performed by NIS.
Reference period: data as of 31st December.
Coverage: All hospitals and ambulatory care units from public sector. The indicator for mammographs was included in data collection starting with 2008.
Deviation from the definition:
Estimation method: