OECD Health Statistics 2025

Definitions, Sources and Methods

Radiation therapy equipment

Number of machines used for treatment with x-rays or radionuclide.

They include linear accelerators, Cobalt-60 units, Caesium-137 therapy units, low to orthovoltage x-ray units, high dose and low dose rate brachytherapy units and conventional brachytherapy units.

Sources and Methods

Australia

Source of data:
- **Department of Health**. Unpublished data from Location Specific Practice Number register.
- **Australian Department of Health and Ageing**. A vision for radiotherapy. Report of the Radiation Oncology Inquiry. Canberra: 2002 (also at http://www.health.gov.au/internet/main/publishing.nsf/Content/health-roi-inquiry-report.htm).
- **Wigg DR & Morgan GW** 2001. Radiation oncology in Australia: workforce, workloads and equipment 1986-1999. Australasian Radiology 45:146-69.

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 to 2002 represent the number of linear accelerators only.
Break in time series: Data from 2005 onwards represents 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.

Austria

Source of data: **Austrian Federal Ministry of Social Affairs, Health, Care and Consumer Protection** (Gesundheit Österreich GmbH, Monitoring of Medical Technology Development).
Reference period: 31st December.
Coverage: Included is:

- Radiation therapy equipment 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).
- Radiation therapy equipment in the ambulatory sector (HP.3).

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

Belgium

Source of data: **Federal Service of Public Health**, **DGGS** "Organisation of health provisions"; Ministry of the Flemish community and Ministry of the French community.
Reference period: 31st December.
Coverage:
- Data include simulator units, accelerator units, cobalt units, contact therapy and stereotactic radiotherapy.
- From 2013: Radiation therapy equipment = linear accelerator, cobalt units, units for rotation therapy, surface and contact therapy equipment, stereotactic radiotherapy equipment, intraoperative radiotherapy.
- Data correspond to the number of hospitals with this technology.
- Data on high-tech equipment in cabinets of ambulatory care providers are not available.
Deviation from definition: Data correspond to the number of hospitals with radiation therapy equipment (rather than the number of machines).
Estimation method:
Break in time series:

Canada

Source of data:
- 1993-1997: **Canadian Coordinating Office for Health Technology Assessment** (CCOHTA), renamed the Canadian Agency for Drugs and Technology in Health (CADTH) in April 2006.
- Starting in 2016: **Canadian Nuclear Safety Commission** (Certification of Class II Prescribed Equipment). http://www.nuclearsafety.gc.ca/eng/nuclear-substances/certification-prescribed-equipment-class2.cfm.
Coverage:
- 1993-1997: Includes Cobalt-60 units (47 in 1997), linear accelerator units (112 in 1997), and brachytherapy units (52 in 1997).
- Starting in 2016: High dose rate afterloader, Intravascular brachytherapy, Irradiator Class II, Teletherapy machine,Teletherapy irradiator, Medical accelerator, Linear accelerator and Betatron accelerator.
Note: In all years, radiation therapy equipment was found only in hospitals.

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).
- It is not possible to collect data before 2011. The information is reliable and available about the installed capacity up to 31st December.
Coverage:
- The information submitted considers the capacity up at 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).
Break in time series: in 2013, there was a change in the methodology of the survey.

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**
- *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.
- Until 1999, data relate only to number of linear accelerators, Cobalt-60 units, Caesium-137 therapy units, circular accelerators (betatrons). Since 2000, data match the definition (Radioisotope irradiators AFL brachytherapeutic with LDR/MDR, Radioisotope irradiators AFL brachytherapeutic with HDR and Radioisotope irradiators not specified also included).
Deviation from the definition:
Estimation method:
Break in time series: 2000.

Denmark

Source of data: **Danish Health Authority, Radiation Protection**. National database of radiation sources (for all years), except for brachytherapy, where data is from Annual survey of equipment with radioactive sources. Registration of equipment (accelerators and x-ray) is mandatory. It is required for departments to submit data in survey.
Reference period: 31st of December.
Coverage:
Deviation from the definition:
Estimation method:
Break in time series: Data until 2007 for RAD units include only linear accelerators. From 2008, all types are included.

Estonia

Source of data: **National Institute for Health Development**, Department of Health Statistics. (since 2005)
Reference period: 31st of December.
Coverage:
- All providers. Since 2006 data have been included in the annual reports ("Health Care Provider").
- Data on equipment were not collected routinely before 2005. Since 2006 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:
Estimation method:
Break in time series:

Finland

Source of data: **Radiation and Nuclear Safety Authority**.
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" equipment are recorded.
Deviation from the definition:
Estimation method:
Break in time series: 2013. This survey has been recasted in 2014 for the data concerning 2013 onwards (review and update of the questionnaire, change of the unit surveyed [from legal entity to geographical establishment], improvement of the consistency between the survey and an administrative source of data on the activity of hospitals). Though the principles of the survey remain the same, some concepts and some questions have changed: this can lead to break in series for the year 2013. Before the SAE survey was recasted, adding the number of hospitals equipped with accelerators or brachytherapy units could result in double counting, so it was tried to correct the double counting: the result of this work was considered as an estimation. Since 2013, the risk of double counting is very limited, that is why it was decided to add the two types of equipment, and to indicate a break in 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.
- The figures comprise linear accelerators and Tele-Cobalt units.
- Caesium-137 therapy units, low to orthovoltage x-ray units, high dose and low dose rate brachytherapy units and conventional brachytherapy units are excluded.

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 radiation therapy equipment 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.
- Radiation therapy equipment includes linear accelerators, brachytherapy units and low/ortho voltage units.

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

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 radiation therapy equipment units.
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:
- For RAD units, only linear accelerator accounting is available.
- 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 (several issues).
Coverage:
- In all hospitals; excludes medical clinics. The quantity of this equipment was surveyed in 2002 for the first time.
- Data do not include brachytherapy units.

Korea

Source of data: **Health Insurance Review & Assessment Service**, Health care resources by provider.

Latvia

Source of data: **Centre for Disease Prevention and Control**; Statistical Report.
Reference period: 31 December.
Coverage:
Deviation from the definition:
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: **Nationaal Ziekenhuis instituut; Ministry of Health, Welfare and Sports**: Topklinische zorg in getallen: 1992-1994. Bijzondere medische verrichtingen in getallen: 1993-1997.
- 1998 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 database does not distinguish between hospital and ambulatory care settings.
Break in time series: 2016. There are 11 radiation planning CTs in the New Zealand. Such units are not included in radiation therapy equipment as of 2016.

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:
- Brachytherapy with eye applicators is counted with the number of 2, since this is done in two hospitals in Norway. The number of sources/seeds are not counted, which would be a larger amount. The Gammaknife is also counted as one unit, and not the number of sources within the equipment.
- 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 English translation of the Norwegian radiation protection regulations: https://dsa.no/en/legislation/Regulations on Radiation Protection and Use of Radiation -

2020.pdf). 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:
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.
- 2017: Data from **Ministry of Health** - Radiation therapy equipment have changed (from cobalt-60 and caesium-137 to linear accelerator).
- 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 radiation therapy equipment 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:
- A revision of data within the register of medical technology was made in SR in 2004; therefore, data for CT scanners, radiation therapy units and lithotriptors were submitted only from 2003. Data for CT scanners, radiation therapy units and Lithotriptors up to the year 2003 are inconsistent, and their numbers were not submitted for the table "Medical technology available in HP1 + HP3 together".

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.
- Number of units of radiation therapy equipment (RAD units): four accelerators, two Co-60 radiotherapy units, two low energy x-ray units and one brachytherapy unit.
Deviation from the definition:
Estimation method:
Break in time series:

Spain

Source of data:
- 1984 and 1988: Pablo Lázaro y de Mercado. "Evaluación de Servicios Sanitarios: La Alta Tecnología en España". **Fondo de Investigaciones Sanitarias de la Seguridad Social** (F.I.S).
- From 1992 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 from National Catalogue of Hospitals 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.
- Since 2021 the Specialised Care Information System (Sistema de Información de Atención Especializada – SIAE) collects information on the number of Brachytherapy units in HP.1 facilities. These were not collected until 2021.
- There was an increase in Radiation therapy equipment by 37% in 2021 in hospital sector as well as a decrease by 38% in 2022 in ambulatory sector, due to the improvement of the register, as it was a recently added variable (in 2021, a new provision related to this activity in hospitals was included; on the other hand, the provision in outpatient centres was residual).
Deviation from the definition:
Estimation method:
Break in time series:
1992 and 2010:
- Change in data source.
- Information about medical technology and diagnostic activity for centers HP.3 included since 2010.
2021: the number of Brachytherapy units in HP.1 facilities is included.

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:
- HP.1+HP.3 together: **Federal Office of Public Health (FOPH)**, Bern, Division of Radiological Protection, full administrative data.
- HP.1: **Federal Statistical Office (FSO)**, Neuchâtel, Hospitals statistics; yearly census.
Reference period: Data as of December 31.
Coverage:
- Since 2007, the data represent the number of apparatuses in use.
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.
- HP.3 is the result of the difference between total (Source: FOPH) and hospitals' resources (source: FSO).
- 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 radiation therapy equipment 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.
- Linear accelerators, Cobalt-60 units and brachytherapy units are included in radiation therapy equipment.
Deviation from the definition:
Estimation method:
Break in time series:

United Kingdom

Source of data:
- **England**: NHS, Public Health England.
- **Wales**: Welsh Health Estates.
- No source of England, Wales, Northern Ireland and/or Scotland data for 2019 and 2020.

Coverage:
- Does not include private sector.
- 2002, 2003, 2005: England and Wales. 2004: England, Wales and Northern Ireland. 2008: England only. 2010 onwards (for years provided) is based on data for England and Wales.
- 2010, 2011 and 2014 figures only include Linacs.
Estimation method:
- Raw numbers for England and Wales have been increased pro-rata by the OECD Secretariat to provide appropriate numbers for the UK, enabling the correct computation of rates using the UK population data stored within the database.
- 2017 data: At the time of calculation, the 2017 population data was not available. Therefore, the UK level estimation has been calculated using the 2016 population data.
Break in time series: 2016. Change in data collection methodology. Since 2016, data include Brachytherapy Treatment Machines, Kilovoltage Treatment Machines and Other Treatment Machines (Cyberknife, GammaKnife and Adrienne Systems) in addition to Linacs.

United States

Source of data:
- IMV Medical Information Division: *Benchmark Reports*, Radiation Therapy, selected years: 2020, 2019, 2018/2017, 2015/2016, 2012/13, 2011, http://www.imvinfo.com.
Coverage:
- US radiation therapy facilities performing external beam radiation therapy including linear accelerators and cobalt units.
- Candidates sites were identified from IMV's Radiation Therapy Census Databases, supplemented by the American Hospital Association's Guide to the Health Care Field and site lists identified through secondary research.
- A source of error in the sample is the possible omission of sites from the universe of all sites, which have thus far still escaped identification, particularly non-hospital sites.
- US territories are not included.
Deviation from the definition: US data do not include the number of brach/therapy units.
Estimation method: Further information on the estimation method for the selected IMV Benchmark Reports can be found at http://www.imvinfo.com.
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.
Note: 2014: The increase of the number of these devices is related to the process of modernization of equipment of these health care facilities.
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 radiation therapy equipment 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: Until 2012, included only linear accelerators and brachytherapy systems (Cobalt-60 units, Caesium-137 units and x-ray units were **not included**). Since 2013 includes also Cobalt-60 units, Caesium-137 units and x-ray units.

Cyprus

Source of data:
Up to 2004: **Nicosia General Hospital**, Medical Physics Department.
From 2005: **Ministry of Labour and Social Insurance**, Department of Labour Inspection, Radiation Inspections and Control Service (actual data).
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:
Break in time series: No break in series.

Romania

Source of data: Source of data: **National Institute of Statistics**, The activity of the sanitary and health care network – annual survey performed by INS.
Reference period: data as of 31st December.
Coverage: For 2006 year the data covers all hospitals from public sector, starting with 2007 data was collected also for ambulatory sector and refers to hospitals and ambulatory care units of public and private sector.
Deviation from the definition:
Estimation method:

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https://www.oecd.org/en/data/datasets/oecd-health-statistics.html