

Vivid S70N



Product Description

The Vivid™S70N combines the proven breadth and performance of the Vivid product line with the innovative software image processing platform: cSound.™ The Vivid S70N is GE cardiovascular ultrasound's high-end scanner.

The cSound architecture benefits all Vivid S70N probes and applications. The Vivid S70N supports the following clinical applications: Adult cardiac (2D and 4D transesophageal), coronary, pediatric, fetal heart, obstetrics, gynecology, abdominal, small parts, thyroid, adult and neonatal cephalic, peripheral vascular, musculoskeletal conventional, nerves and urology.

System Architecture

GE's innovative, programmable and flexible software beamforming technology, cSound, provides exceptional image quality and power compared to conventional GE hardware-based beam forming technology. In 4D, cSound delivers volume sizes suited for full volume single-beat and multi-beat 4D acquisition (option). Using both coherent and harmonic image processing, the system provides computational power, ease of imaging, workflow flexibility and product upgradeability.

The Vivid S70N excels in the following areas:

Exceptional image quality on the Vivid S70N is created through the use of Ultra Definition Clarity filtering, elevation compound imaging (considering a wider slice for 2D imaging) with the 6VT probe, HD Imaging (balanced resolution, penetration and image uniformity), virtual convex (wider field-of-view in the far field) for the linear probes and virtual apex (larger field-of-view) for the FPA probes.

Probe Technology – The XDclear™ series of probes are designed to help deliver powerful and efficient sound waves, with high bandwidth and efficiency. XDclear probe technology provides impressive deep penetration and high sensitivity while maintaining high spatial resolution. The combination of Single Crystal, Acoustic Amplifier and Cool Stack technologies is the core technology of the XDclear series of probes.

Ease of use features make Vivid S70N an extremely productive 2D and 4D cardiovascular ultrasound system.

The combination of the touch screen control with conventional (tactile) buttons provide intuitive controls, helping the operator maintain focus on the patient and the ultrasound images during the exam. The touch screen can also provide alpha-numeric (A/N) keyboard entry or a dedicated A/N keyboard option can be purchased.

Ease of use for the operator in 2D imaging is provided by the cSound technology delivering auto optimized excellent image quality with little manipulation along with automated tools like 2D Auto EF, AFI Productivity Package, Cardiac Auto Doppler and Scan Assist Pro.

Ease of use in 4D imaging is accomplished with a number of GEHC innovations, including Single Beat 4D, 4D Views, Advanced 4D User Toolbox including FlexiSlice, Advanced 4D User Quantification Package, 4D Auto LVQ, 4D Auto MVQ, 4D Auto AVQ, FlexiViews and View-X.

Ergonomic features include the "FlexFit" mechanism enabling continuous pivoting height adjustment of the control panel, allowing the user to adjust distance to the control panel while providing the adequate legroom for standing or sitting positions. In addition, the articulating monitor arm (horizontal and vertical), and lightweight transducers combine to make the Vivid S70N an extremely ergonomic-friendly cardiovascular ultrasound system.

Portability – The Vivid S70N's compact size and light weight, combined with a fold-down monitor, enables easy transportation and promotes scanning at the patient site. The battery provides a transportation mode that keeps the system ready to scan within a few seconds of being connected to a power outlet.

The cSound platform takes GE's Raw Data to a new level. For image processing and reconstruction, the Vivid S70N utilizes more than 100 times the data compared to the Vivid S6.

Additionally, the Vivid S70N uses the proven Raw data format technology that allows for advanced processing on archived images by applying many of the same scan controls and **advanced quantitative tools** as are available during the original exam.

General Specifications

Dimensions and Weight

Width: 54 cm, 21.4"Depth: 76 cm, 30.2"

• Height: 132 cm – 167 cm,

52.0" – 65.7" • Minimum height with

folded screen: 118 cm, 46.5"

• Weight: <73 kg, 161 lbs

Electrical Power

 Nominal input voltage: 100-240 VAC, 50/60 Hz

• Rated power consumption: 500 VA

Operating System

• Windows® 7

Uninterruptible Power Supply

- Battery backup for standby
- In case of power failure or accidental shutdown, when power is restored within less than 20 minutes, the system automatically turns on instantly, maintaining exact system state prior to shutdown
- For longer periods of power interruptions, the system automatically saves data and changes into "Standby" state

Console Design

- Five active probe ports
- ECG port
- Integrated HDD
- Multiple USB ports (front/back)
- Integrated DVD-R multi drive (optional)
- On-board storage for B/W thermal printer
- Integrated speakers for premium sound

- Four swivel wheels three wheel brakes, one wheel direction lock
- Integrated cable management
- Easily accessible removable air filters for cleaning
- Front and rear handles
- Rear storage trays/baskets
- Hand rest

User Interface

Operator Keyboard

- Ergonomic FlexFit design with left/right swivel and up/down arm-mobility of keyboard and monitor permitting both physiological sitting or standing operation
- Touch keyboard with support for characters in 12 languages
- Drawer type A/N keyboard (option)
- Physical keyboard support for international characters in 7 languages (option)
- Ergonomic hard key layout
- Interactive back-lighting of application-specific push buttons – adjustable back-light intensity
- Integrated gel holders
- Easy-to-learn user interface with intelligent keyboard
- Dedicated rotary for overall gain for 2D-mode
- Dedicated gain rotary for M-mode, CFM or Doppler controlled by active mode
- Image manager on the touch screen for quick review of image clipboard contents

Touch Screen

- 12" ultra-high-resolution, wide screen format, color, multi-touch LCD screen
- Interactive user-configurable dynamic software menu
- Backlight adjustment automatic by light sensor or manual
- Touch-panel control of TGC sliders
- Touch-panel controls content can be set to routine or extended usage

LCD Monitor

- 21.5" wide screen High-Definition (HD) flicker-free LCD display
- 256 shades of gray and 16.7 million simultaneous colors available
- Articulated monitor arm
- LCD translation (independent of console)
 - 350 mm horizontal bidirectional
 - 150 mm vertical height adjustment
 - Swivel to any viewing direction
- Fold down and rotation lock mechanism for transportation
- Horizontal viewing angle of more than 170°
- Resolution: 1920 x 1080 pixels
- Manual backlight and digital brightness and contrast adjustment for excellent viewing in different ambient light conditions
- Tint adjustments
- Separate adjustment for external monitor brightness/contrast

System Overview

Probe Presets

- Cardiac
- Stress (optional)
- Abdominal
- Peripheral vascular
- Fetal heart
- Pediatrics
- Neonatal cephalic
- Adult cephalic
- Small parts
- Thyroid
- Musculoskeletal
- Urology
- Transesophageal
- OB/GYN
- Intracardiac
- Coronary (part of QuickApps)
- LVO Contrast (optional – accessed through QuickApps)
- Advanced vascular/abdominal contrast (optional)
- Nerves

Operating Modes

- 2D tissue
- 4D tissue (optional)
- 2D color flow
- 4D color flow (optional)
- · 2D angio flow
- Color M-mode
- Tissue velocity M-mode
- Continuous wave Doppler
- Tissue M-mode
- Pulsed wave Doppler
- Anatomical M-mode
- Curved anatomical M-mode
- Tissue velocity imaging
- Tissue tracking
- Tissue synchronization imaging (optional)
- Strain imaging (optional)
- Strain rate imaging (optional)
- Tissue velocity Doppler
- Blood flow imaging (option)
- B-flow (option)
- 2D stress (optional)
- AFI Automated Function Imaging (optional)
- Auto EF (optional)
- 2D virtual apex imaging
- Bi-plane (optional)
- Tri-plane (optional)
- Bi- and tri-plane with color (optional)
- Coded phase inversion
- Compound imaging
- Extended field-of-view (LOGIQ[™] View)
- 4D full-volume acanning single beat and multi beat (optional)

Scanning Methods

- Electronic sector
- Electronic volume (option)
- Electronic convex
- Electronic linear
- CW pencil

Transducer Types

- Sector phased array
- Convex array
- Linear array
- Single crystal matrix array
- 2D matrix array (option)
- 2D matrix array (option)

4D Features (available with 6VT-D probe and the 4D option)

- Single, dual or multiple cycle volume acquisition
- Bi-plane acquisition includes tilt and rotate
- Tri-plane acquisition
- Multi-dimensional (bi-plane/tri-plane) color acquisition
- FlexiSlice with depth mode
- QuickRotate/Rotate
- 2 Click crop
- Flip crop
- View crop
- Dynamic view crop
- FlexiZoom
- Laser lines
- Depth color render
- Automated 4D left ventricular quantification (LV volume and EF)
- FlexiViews
- Dynamic multi-slice views
- Live multi-slice views
- Dynamic crop
- Measurement on render

Optional 4D Features

- 4D Auto MVQ
- 4D Auto AVQ
- View-X

Peripheral Options Internal peripherals

 USB B/W video printer with control from system (optional)

External peripherals

- Network printers
 - Color laser printer
 - Color video printer with control from system
- 16 GB encrypted memory stick
- Three-pedal configurable footswitch

External outputs

- DVI-D
- Ethernet 10 Mbps, 100 Mbps, 1 Gbps electrically isolated
- Multiple USB 2.0 ports

Accessories (options)

- Interface cable for external ECG and external respiratory
- ECG adapter for DIN-type pediatrics electrode leads
- Cable storage box

Display Modes

- Live and stored display format:
 Full size and split screen, both
 with thumbnails, for still and cine
- Instant-review screen displays 12 simultaneous loops/images for a quick study review
- Selectable display configuration of duplex and triplex modes: Side-byside or top-bottom during live, digital replay and clipboard image recall
- Single, dual and quad-screen view
- Simultaneous capability
 - 2D + PW/CW
 - 2D + CFM/TVI + PW
 - 2D + CFM + CW
 - 2D + CFM/Angio/TVI/SRI/TT/SI/TSI
 - 2D + M/AMM/CAMM
 - 2D + CFM/Angio/TVI/SRI/TT/SI/TSI + M/AMM/CAMM
 - Real-time duplex or triplex mode
 - Compound + M/CFM/PW
 - 4D + CFM (optional with 6VT probe and 4D option)
 - 2D + Bi-plane (optional with 6VT probe and 4D option)

- 2D + Bi-plane + CFM/TVI/SRI/TT/SI/ TSI/AMM/ CAMM (optional with 6VT probe and 4D option)
- 2D + Tri-plane (optional with 6VT probe and 4D option)
- 2D + Tri-plane + FM/TVI/SRI/TT/SI/ TSI/AMM/CAMM (optional with 6VT probe and 4D option)
- 2D + color split screen (simultaneous mode)
- Selectable alternating modes
 - 2D or compound + PW
 - 2D + CW
 - 2D or compound + CFM/PW
 - 2D + CFM + CW
- Multi-image (split/quad screen)
 - Live and/or frozen
 - Independent cine playback
- Timeline display
 - Independent 2D (or compound) + PW/CW/M display
 - A choice of display formats with various sizes of 2D + PW/CW/M
- Top/bottom selectable format
- Side/side selectable format
- 4D display (optional with 6VT probe and 4D option)
 - Two + one slice and render view
 - Quad view (three slice and render)
 - Single render view
 - Slice-only view
 - Live multi-slice
 - FlexiSlice (live and replay)
 - Bi-plane side/side view
 - Tri-plane view (quad including geometry viewer)
 - Crop view (three orthogonal slice + render)
 - Apical slice view (three 60 degrees view + render)
 - Cine rotate render view
 - Bi-plane prepare (two slice + render)

Display Annotation

- Patient name: First, last and middle
- Patient ID
- Additional patient ID
- Age, sex and birth date

- Hospital name
- Date format: Two types selectable MM/DD/YY. DD/MM/YY
- Time format: Two types selectable 24 hours. 12 hours
- Gestational age from LMP/EDD/GA
- Probe name
- Map names
- Probe orientation
- Depth scale marker
- Focal zone markers
- Image depth
- · Zoom depth
- B-mode
 - Gain
 - Imaging frequency
 - Frame averaging
- M-mode
 - Gain
 - Frequency
 - Time scale
- Doppler mode
 - Gain
 - Angle
 - Sample volume size and position
 - Wall filter
 - Velocity and/or frequency scale
 - Spectrum inversion
- Time scale
 - PRF
 - Doppler frequency
- Color flow Doppler mode
 - Frame rate
 - Sample volume size
 - Color scale
 - Power
 - Color baseline
 - Color threshold marker
 - Color gain
- Spectrum inversion
- Acoustic frame rate
- CINE gauge, image number/frame number
- Bodymarks: Multiple human anatomical structures

- Application/preset name
- Measurement results
- Operator message
- Displayed acoustic output
 - TIS: Thermal Index Soft Tissue
 - TIC: Thermal Index Cranial (Bone)
 - TIB: Thermal Index Bone
- MI: Mechanical index
- Power output in dB
- Biopsy guide line and zone
- Heart rate
- Trackball-driven annotation arrows
- Active mode display
- Stress protocol parameters
- Parameter annotation follow ASE standard
- Free text with word library
- 4D slice intersection markers (with 6VT probe and 4D option)
- 4D gauge (with 6VT probe option)
- 4D viewing angle arrows (with 6VT probe and 4D option)
- 4D geometry viewer (with 6VT probe and 4D option)
- 4D number of cycles (with 6VT probe and 4D option)
- Scan plane position indicator and probe temperature are displayed with all TEE probes
- Image orientation marker

General System Parameters

System Setup

- Pre-programmable M&A and annotation categories
- Different user presets per probe/application may be stored for quick access
- User programmable preset capability with administrator preset protection
- QuickApps: Factory and user programmable sub-preset feature that keeps 2D and geometry settings while allowing different color flow or contrast parameters

- Factory default preset data, protected against modification
- User Interface languages: English, LA Spanish, French, German, Italian, Portuguese (European and Brazilian), Russian, Swedish, Norwegian, Danish, Dutch, Finnish
- User-defined annotations
- Body patterns
- Customized comment home position

Comprehensive User Manual Available on Board

Available through touch-panel utility page. User manual and service manual are included on a USB memory device with each system. A printed user manual is provided.

CINE Memory/Image Memory

- 2 GB of cine memory
- Selectable cine sequence for cine review
- Measurements/calculations and annotations on cine playback
- Scrolling timeline memory
- Dual-image cine display
- Quad-image cine display
- CINE gauge and cine image number display
- CINE review loop
- CINE review speed

Image Storage

- 4D virtual store (with 6VT probe and 4D option) for efficient 4D image management
- On-board database of patient information from past exams
- User-selectable ECG and time gated acquisition available on touch panel during live
- User-selectable prospective or retrospective capture in config

- Storage formats:
 - DICOM®-compressed or uncompressed, single/multi-frame, with/without raw data, storage via clipboard and/or seamlessly directly to destination device
 - Transfer/"Save As" JPEG, MPEG, AVI and VolDicom (with 6VT probe and 4D option) formats
- Storage devices:
 - USB memory stick: 16 GB
 - CD-RW storage: 700 MB (DVD option required)
 - DVD storage: -R (4.7 GB) (DVD option required)
 - Hard drive image storage: 0.5 TB
- Compare old images with current exam
- Reload of archived data sets
- Activation control of USB devices (for security)

Connectivity and DICOM

- Ethernet network connection
- Wireless network connection
- DICOM 3.0
- Verify (optional)
- Print (optional)
- Store (optional)
- Modality worklist (optional)
- Storage commitment (optional)
- Modality Performed Procedure Step (MPPS) (optional)
- Media exchange
- DICOM spooler (optional)
- DICOM query/retrieve (optional)
- Structured reporting compatible with adult cardiac, pediatric and vascular (optional)
- Media store of structured reporting
- InSite[™] ExC capability for remote service/access
- Support of two patients' IDs in DICOM (optional)
- Separate DICOM SR and image storage destinations (optional)

 Simultaneous transfer of DICOM to multiple destinations (optional)

Patient Archive

EchoPAC™/Patient Archive

- Integrated EchoPAC functionality adds connectivity and image analysis capability to scanner
- Data format fully compatible with offline EchoPAC review/reporting stations of same or newer vintage
- Instant access to ultrasound raw data provided by the system
- Advanced post-processing analysis
- Three user levels help organizing data security requirements
- E-signoff compatibility, with clear indications in patient management screens and report screen that a report was signed off, and by whom and at what time. The signed off report and exam cannot be changed. The "Diagnosing Physician" field is automatically assigned to the user that did the sign-off

Image and Data Management

- Exceptional workflow with instant access data management
- DICOM 3.0 support see DICOM conformance statement for details
- Support for transfer of the proprietary raw data files within the DICOM standard
- 2D, CFM or TVI data at maximum frame rate may be reviewed by scrolling or by running cine loops (can contain more than 1000 images for imaging modes)
- Image clipboard for stamp-size storage and review of stored images and loops
- Built-in patient archive with images/loops, patient information, measurements and reports
- DICOM-SR Standard structured reporting mechanism (option)

- Structured findings report tools support efficient text entries with direct editing of findings text, usability improvements, new configuration options and conclusion section
- User can enter normal values which are then compared to actual measurements
- Configurable HTML-based report function
- Report templates can be customized on board
- ASE-based default text modules (English), user-customizable
- Internal archive data can be exported to removable image storage through DICOM media
- Internal hard disk for storing programs, application defaults, ultrasound images and patient archive
- All data storage is based on ultrasound raw data, allowing to change gain, baseline, color maps, sweep speeds, etc., for recalled images and loops
- DICOM media read/write images on DICOM format
- DICOM viewer embedded on media (optional and selectable in Config)
- Alphanumeric data can be exported in XML format
- JPEG export ("Save As") for still frames
- AVI and MPEG export ("Save As") for cineloops
- Specialized file format "Save As" VolDICOM feature to allow data import into TomTec Research Arena free-standing workstation (with 6VT probe and 4D option)

Self-contained DICOM Viewer (optional)

- Exams can be transferred to CD/DVD or USB media with an integrated "EZ DICOM CD viewer™"
- Self-contained "EZ DICOM CD viewer™" allows to review exams from media on a standard PC, without installing anything on the host PC

Insite[™] Express Connection (ExC) Enables Remote Service and Training

- Easy, flexible and secure connectivity configuration. The "Contact GE" on-screen button directly generates a real-time service request to the GE online engineering or application specialist. It takes a snapshot (e.g., error logs, setup files) of the system at the time of the service request to enable analysis of problem before customer contact
- Virtual Console Observation (VCO)
 enables the customer to allow
 desktop screens to be viewed and
 controlled remotely over the encrypted
 tunnel to enable real-time training,
 device configuration and clinical
 application support
- Operation of Insite Express Connection is dependent on the infrastructure being available – check with your local GE service representative
- File transfer enables the customer (biomed or clinician) to directly transfer system information (e.g., system logs, images, parametric data) to GE product engineering teams (no patient data transferred)
- Software reload provides remote application reconstruction and recovery capabilities in the event of system corruption

Scanning Parameters

- Infinite number of effective channels
- Minimum field-of-view range (depth):
 0 2 cm (zoom) (probe dependent)
- Maximum field-of-view range (depth):
 0 36 cm (probe dependent)
- Width range: 10 120 degrees
- Continuous dynamic receive focus/ continuous dynamic receive aperture
- Adjustable dynamic range, infinite upper level
- Image reverse: Right/left
- Image rotation of 0,° 180°

Tissue Imaging

General

- Variable transmit frequencies for resolution/penetration optimization
- Display zoom with zoom area control
- High-Resolution (HR) zoom concentrates all image acquisition power into selected Region of Interest (ROI)
- Variable contour filtering for edge enhancement
- Depth range up to 36 cm probe specific
- Selectable grayscale parameters: Gain, reject, DDP, clarity, dynamic range and compress – can be adjusted in live, digital replay and image clipboard recall (probe dependent)
- Automatically calculated TGC curves reduces operator interaction
- Automatically calculated lateral gain
- Smart depth: automatically optimizing transmit pattern parameters according to scan-depth setting

2D Mode

- Sector tilt and width control
- Frame rate in excess of 1500 fps, depending on probe, settings and applications
- Coded octave imaging with coded phase inversion – 3rd generation harmonic tissue imaging providing improved lateral and contrast resolution over conventional fundamental imaging. Features help reduce noise, improve wall definition, and axial resolution, making it well suited for a wide variety of patient groups
- Confocal imaging allows for multiple transmit focal zones over range of view and a high vector density, probes dependent
- Automatic tissue optimization single keystroke optimizes immediately automatically and dynamically different grayscale settings with the goal of signal independent uniform gain and contrast distribution

- UD clarity and UD speckle reduce imaging – an advanced image processing technique to remove speckle in real-time examining the relative difference between neighboring pixel values and determining whether the grayscale variations have a sharp difference, follow a trend, or are random in nature
- HD imaging real-time simultaneous acquisition at dual frequencies compounded to help reduce speckle and noise while enhancing resolution and contrast
- Multiple-angle compound imaging multiple co-planar images from different angles combined into a single image in real-time to help enhance border definition and contrast resolution, as well as reduce angular dependence of border or edge as compared to no-compound imaging
- Elevation compounding (with 6VT probe)
- LOGIQ View: Provides the ability to construct and view a static 2D image with wider field-of-view of a given transducer. This allows viewing and measurements of anatomy that is larger than what would fit in a single image
- Virtual convex allows a wider field-of-view in the depth and aims to enhance image quality on linear probes
- Virtual apex provides a wider field-of-view with phased array probes, effective at certain imaging views where a wide near field may be preferred
- L/R and up/down invert, in live, digital replay or image clipboard recall
- Digital replay for retrospective review or automatic looping of images, allowing for adjustment of parameters such as gain, reject, anatomical M-mode, persistence and replay speed
- Data dependent processing performs temporal processing which helps reduce random noise but leaves motion of significant tissue structures largely unaffected – can be adjusted even in digital replay

- 256 shades of gray
- Colorized 2D-mode, user-selectable in real-time, digital replay

4D Mode (option)

- Flexi-volumes with customizable acquisition for volume size, volume rate or resolution
- Single-beat 4D scanning with real-time volume rendering display
- Multi-beat 4D scanning for high-resolution scanning
- Adjustable volume sizes for both single- and multi-beat scanning
- Adjustable volume shape control
- Pre-defined volume sizes for quick volume setup
- Adjustable number of cycles for multi-beat scanning
- FlexiZoom for easy 4D visualization of structures of interest
- 4D scanning supporting variable octave and fundamental frequencies
- Coherent volume processing with motion compensation for seamless and artifact-free 4D and 2D slices
- Variable frame rate settings available
- Volume optimize control for volume rendering transparency and quality setting
- Flip crop available for changing 4D view direction 180 degrees with mirrored crop volume
- Dynamic multi-slice enables positioning of the multi-slice, short-axis cut-planes at same anatomical position throughout the heart cycle
- Live multi-slice layouts available during live 4D acquisition
- FlexiSlice for interactive slicing, cropping and navigation designed to provide the user with a flexible, yet intuitive way of extracting
 2D slices from 4D data sets
- View crop setting for toggle control of view plane vs. crop plane

- 2 Click crop for quick and easy extraction of standard and nonstandard views for visualization of 4D structures seen during or after the examination
- Stereo vision in 4D
- Laser lines to help improve the visual linkage between the 4D-rendered view and the 2D slices
- Wide range of depth color rendering maps
- QuickRotate and Rotate for a flexible and easily accessible way of obtaining the desired single- or multi-plane, two-dimensional views
- FlexiViews offer instant access to predefined (factory or user created)
 4D views during live mode

4D Analysis Tools (with 6VT probe and 4D option) 4D Views

- Auto alignment to define standard orientation of acquired 4D data
- Standard views, such as 4CH, 2CH, LAX, mitral valve and aortic valve, are defined from the standard orientation
- Automatic display of volume renderings and 2D cut planes from standard views

4D Data Cropping

- Flexible tool for standard or dynamic cropping (with Advanced 4D option)
 4D data using up to six different crop planes
- Each crop plane can be moved without any restrictions
- The crop plane positions are visible in both the volume rendering and in the 2D cut plane displays

Depth Render

- Volume visualization where the color hue changes according to the distance into the image
- Wide selection of different render maps

Stereo Render

 Volume visualization by stereoscopic display necessitates the use of red/cyan stereoscopic glasses for StereoVision

MultiSlice

- Simultaneous display of 5, 6, 7, 9 or 12 slices extracted from the 4D volume data (tissue and/or color)
- Combination of short axis and long axis standard views.
- Available in live (with Advanced 4D option) and replay

FlexiSlice

 Simultaneous display of three independent random slices through the 4D volume (tissue and color)

FlexiViews

- Provides instant access to predefined (factory or user created) 4D views during live mode
- May provide more consistent data while reducing scanning time

Multi-dimensional Mode (with 6VT-D probe and 4D option)

- Bi-plane scanning: Two independent simultaneous scan planes where one of them can be rotated and tilted freely
- Bi-plane prepare mode for ease of obtaining bi-plane views from 4D render data sets
- Tri-plane: Three independent simultaneous scan planes that can be rotated freely
- Both bi-plane and tri-plane scanning is possible in all color Doppler modes

M-mode

- Trackball steers M-mode line available with all imaging probes – max steering angle is probe dependent
- Simultaneous real-time 2D- and M-mode
- M-mode PRF 1 kHz image data acquired is combined to give high-quality recording regardless of display scroll speed

- Digital replay for retrospective review of spectral data
- Several top-bottom formats, side-byside format and time-motion-only format – can be adjusted in live or digital replay
- Selectable horizontal scroll speed:
 1, 2, 3, 4, 6, 8, 12, 16 seconds
 across display
- Horizontal scroll can be adjusted in live or digital replay

Anatomical M-mode

- M-mode cursor can be adjusted at any plane
- Curved anatomical M-mode free (curved) drawing of M-mode generated from the cursor independent from the axial plane
- Can be activated from live, digital replay or image clipboard recall
- Anatomical color and tissue velocity M-mode
- M&A capability

Color Doppler Imaging General

- Steerable color Doppler available with all imaging probes – max steering angle is probe dependent
- Trackball-controlled ROI
- Removal of color map from the tissue during digital replay
- Digital replay for retrospective review of color or color M-mode data allowing for adjustment of parameters such as encoding principle, color priority and color gain even on stored data
- PRF settings user-selectable
- Advanced regression wall filter gives efficient suppression of wall clutter
- For each encoding principle, multiple color maps can be selected in live and digital replay – variance maps available
- More than 65,000 simultaneous colors processed, providing a smooth display two-dimensional color maps containing a multitude of color hues

- Simultaneous display of grayscale
 2D and 2D with color flow
- Color invert user-selectable in live and digital replay
- Variable color baseline user-selectable in live and digital replay
- Multi-variate color priority function gives delineation of disturbed flows even across bright areas of the 2D-mode image
- Color Doppler frequency can be changed independently from 2D

Color Flow Imaging

- The cSound platform with its parallel beamformer architecture allows a combination of ultra-high frame rate and increased lateral resolution compared to previous generation GE scanners
- Very high digital signal processing power, maintaining high frame rates with large ROI's even for very low PRF settings
- Frame rate in excess of 700 fps, depending on probe and settings
- Variable ROI size in width and depth
- User-selectable radial and lateral averaging to help reduce statistical uncertainty in the color velocity and variance estimates
- Data Dependent Processing (DDP) performs temporal processing and display smoothing to help reduce loss of transient events of hemodynamic significance
- Digital replay for retrospective review or automatic looping of color images, allowing for adjustment of parameters such as DDP, encoding principle, baseline shift, color maps, color priority and color gain even on frozen/recalled data
- Application-dependent, multi-variate motion discriminator helps reduce flash artifacts
- Dedicated coronary flow application
- Multiple-angle compound imaging in 2D mode is maintained while in color Doppler mode

4D Color Doppler Imaging (with 6VT-D probe and 4D option)

- Single-beat 4D color flow scanning
- Volume size control to change the size of the color ROI
- Multi-beat 4D color flow scanning using ECG stitching for increased volume rate
- Adjustable number of cycles for multi beat scanning
- Variable volume rate settings available
- Flip crop available for changing 4D view direction 180 degrees with mirrored crop volume
- View-crop setting for toggle control of view plane vs. crop plane
- Stereo vision in 4D color
- Tissue transparency control
- Flow transparency control
- Seamless transition from 2D color to 4D color keeping ROI size and position

Multi-Dimensional Color Doppler Imaging (with 6VT-D probe and 4D option)

 Bi-plane and tri-plane scanning with all color Doppler and tissue velocity modes

Color Angio

 Angle-independent mode for visualization of small vessels with increased sensitivity compared to standard color flow of previous GE products

Color M-mode

- Variable ROI length and position user-selectable
- User-selectable radial averaging to help reduce statistical uncertainty in the color velocity and variance estimates
- Selectable horizontal scroll speed:
 1, 2, 3, 4, 6, 8, 12, 16 seconds
 across display can be adjusted
 during live, digital replay or image
 clipboard recall

- Real-time 2D image while in color M-mode
- Same controls and functions available as in standard 2D color Doppler

Anatomical Color M-mode

- GE-patented, any plane color M-mode display derived from color Doppler cine loop
- Also applicable to tissue velocity Imaging
- M&A capability

B-flow

- B-flow is a digital imaging technique that provides real-time visualization of vascular hemodynamics by directly visualizing blood reflectors and presenting this information in a grayscale display
- Use of GE-patented techniques to boost blood echoes, and to help preferentially suppress non-moving tissue signals
- B-flow is available for most vascular and shared service applications

Blood Flow Imaging

- Combines color Doppler with grayscale speckle imaging
- Helps improve delineation of blood flow without bleeding into tissue or vessel wall

Blood Flow Angio Imaging

• Combines angio with grayscale speckle imaging

Tissue Velocity Imaging Tissue Velocity Imaging Mode

- Myocardial Doppler imaging with color overlay on tissue image
- Tissue Doppler data can be acquired in background during regular 2D imaging
- The velocity of myocardial segments after entire heart cycle can be displayed in one single image

- Tissue color overlay can be removed to show just the 2D image, still retaining the tissue velocity information
- Quantitative profiles for TVI, tissue tracking, strain and strain rate can be derived
- Time markers for valve events derived from any TM mode help simplify understanding of signals in velocity traces or curved anatomical M-mode

Tissue Tracking Mode

- Real-time display of the time integral of TVI for quantitative display of myocardial systolic displacement
- Myocardial displacement is calculated and displayed as a color-coded overlay on the grayscale and M-mode image – different colors represent different displacement ranges

Tissue Synchronization Imaging Mode (option, enabled by Advanced QScan)

- Parametric imaging which gives information about synchronicity of myocardial motion
- Myocardial segments colored according to time to peak velocity, green for early and red for late peak
- Waveform trace available to obtain quantitative time to peak measurement from TSI Image
- Available in live scanning, as well as an offline calculation derived from tissue Doppler data
- Additional features in combination with multi-dimensional imaging option
- Simultaneous acquisition of tri-plane TSI images covering all standard segments in apical views
- Efficient segment specific TSI time measurements
- Immediate bulls-eye report
- Automatic calculated TSI synchrony indexes
- TSI surface mapping
- LV synchronization report template
- CRT programming protocol

Strain/Strain Rate Mode (option, enabled by Advanced QScan)

- Tissue deformation (strain) and rate of deformation (strain rate) are calculated and displayed as real-time, color-coded overlay on the 2D image
- Cine compound calculates and displays cineloops generated from a temporal averaging of multiple consecutive heart cycles
- Anatomical M-mode and curved anatomical M-mode displays (SI and SRI)

Spectral Doppler

General

- Operates in PW, HPRF and CW modes
- Trackball steerable Doppler available with all imaging probes – max steering angle is probe dependent
- Selectable Doppler frequency for enhanced optimization
- High-quality, real-time duplex or triplex operation in all Doppler modes, CW and PW, and for all velocity settings
- Frame rate control for optimized use of acquisition power between spectrum, 2D and color Doppler modes in duplex or triplex modes
- Very fast and flexible spectrum analysis with an equivalent DFT rate of 0.2 ms
- Automatic Spectrum Optimization (ASO) provides a single press, automatic, real-time optimization of PW or CW spectrum scale, and baseline display
- Dynamic gain compensation for display of flows with varying signal strengths over the cardiac cycle to help improve ease of use

- Dynamic reject gives consistent suppression of background – user-selectable in real-time, digital replay or image clipboard recall
- Digital replay for retrospective review of spectral Doppler data
- Several top-bottom formats, side-by-side format and timemotion-only format – can be adjusted in live or digital replay
- Selectable horizontal scroll speed:
 1, 2, 3, 4, 6, 8, 12, 16 seconds across display – can be adjusted in live or digital replay
- Adjustable spectral Doppler display parameters: Gain, reject, compress, color maps – can be adjusted in live or digital replay
- User-adjustable baseline shift in live, digital replay and image clipboard recall
- Adjustable velocity scale
- Wall filters with range 10-2000 Hz (velocity scale dependent)
- Angle correction with automatic adjustment of velocity scale – in live, digital replay and image clipboard recall
- Auto Doppler angle
- Stereo speakers mounted in the front panel
- Display annotations of frequency, mode, scales, Nyquist limit, wall filter setting, angle correction, acoustic power indices
- Compound in duplex

PW/HPRF Doppler

 Automatic HPRF Doppler maintains its sensitivity even for shallow depths and with the highest PRF's

- Digital velocity tracking Doppler employs processing in range and time for high-quality spectral displays
- Adjustable sample volume size of 1-16 mm (probe dependent)
- Maximum sample volume depth 30 cm

CW Doppler

• Highly sensitive steerable CW available with all phased array probes

Tissue Velocity Doppler

Contrast^{1, 2}

LVO Contrast¹

(optional – accessed through QuickApps)

- Enables contrast applications intended for imaging of the left ventricle
- LV contrast (M5Sc-D, 6VT-D probes)
 enhances delineation of the LV border
 in combination with ultrasound
 contrast agents. The implementation
 of GE's Coded Phase Inversion (CPI)
 provides high-resolution detection
 of contrast in the LV cavity and
 excellent suppression of myocardial
 tissue signals
- LVO stress (M5Sc-D probe) provides enhanced delineation of the LV border when contrast is used as part of an exercise stress exam, preserving an adequately long continuous capture buffer length

Liver Contrast^{1, 2} (optional)

Imaging of the liver for characterization of focal liver lesions.

Physiological Traces

- Integrated three-lead ECG module
- Automatic ORS complex detection
- External ECG lead input
- Internally generated respiratory trace using ECG leads
- ECG lead selection
- Adjustable ECG QRS markers

Automatic Optimization

 Dynamic optimization of B-mode image to improve contrast resolution, TGC and grayscale (soft or sharp, user-selectable)

¹ Schering developed harmonic imaging for supporting contrast agent imaging.

² GE Healthcare's Vivid scanner is designed for compatibility with commercially available contrast agents. Because the availability of these agents is subject to government regulation and approval, product features intended for use with these agents may not be commercially marketed nor made available before the contrast agent is approved for use. Advanced contrast features are only enabled on systems for delivery in countries or regions where the agents are approved for use or for investigational or research use.

 Auto-spectral optimize – dynamic adjustments of baseline, and PRF (on live image) and angle correction

Measurement and Analysis (M&A)

- Personalized measurement protocols allow individual set and order of M&A items
- Measurements can be labeled seamlessly by using protocols or post assignments
- Measurements assignable to protocol capability
- Parameter annotation follow ASE standard
- Seamless data storage and report creation
- User-assignable parameters
- Comprehensive set of cardiac measurements and calculations to help assess dimensions, flow properties and other functional parameters of the heart
- Comprehensive set of shared service measurements and calculations covering vascular, abdominal, obstetrics and other application areas
- Configuration package to set up a customized set and sequence of measurements to use, defining user-defined measurements and changing settings for the factorydefined measurements
- Stress echo support allowing wall motion scoring and automatic stress level labeling of measurements
- Support for measuring on DICOM images
- Cardiac Auto Doppler automatically provides Doppler measurement results for the most common parameters, with minimal user guidance
- Automatic Doppler trace functionality for use in non-cardiac applications in both live and replay
- Worksheet for review, edit and deletion of performed measurements
- Reporting support allowing a configurable set of measurements to be shown in the exam report
- DICOM SR export of measurement data

Intima Media Thickness (IMT) Measurements (optional)

- Automatic measurements (patent pending) of carotid artery Intima-Media Thickness (IMT) on any acquired frame
- On-board IMT package facilitates non-interrupted workflow – fully integrated with M&A, worksheet, archiving and reporting functions
- Algorithm provides robust, quick, reliable measurements which can be stored to the on-board archive for review and reporting
- IMT measurement can be made from frozen images or images retrieved from archive
- IMT package supports measurements of different regions of the intima in the carotid vessel (e.g., Lt./Rt./CCA/ICA etc.)
- Frame for IMT measurement can be selected in relation to the ECG waveform

Z-Scores

 Limited implementation of z-scores for a set of predefined pediatric dimension measurements

4D Auto LVQ (included with 4D option – used with 6VT probe)

- Automated measurement of LV volume and EF from volumetric data
- Automated identification of standard views
- Validation of detected boundaries
- LV volume waveform for entire cardiac cycle
- ED and ES automatically selected from volume waveform (max/min)
- Editing by point and click
- User approval of final results
- Fully integrated into M&A system with results in worksheet

4D Auto MVQ (optional, requires 4D option to enable – used with 6VT probe)

 GE's fully integrated semiautomated mitral valve quantification package offers the ability to visualize the mitral valve and include quantitative results into the patient exam

4D Auto AVQ (optional, requires 4D option to enable – used with 6VT probe)

- Automated alignment, segmentation and measurement of aortic annulus from volumetric data sets
- Editing by point and click
- User approval of final results
- Fully integrated in M&A system with results in worksheet

View-X (optional, used with 6VT probe and 4D option)

 Interface between a cath system and the Vivid scanner, such that the cath x-ray image can be shown on the Vivid scanner screen, together with the ultrasound image (picturein-picture)

Quantitative Analysis Package (Q-Analysis) (optional)

- Traces for tissue velocity or derived parameters (strain rate, strain, displacement) inside defined regions of interest as function of time
- Contrast analysis with traces for grayscale intensity or angio power inside defined regions of interest as function of time
- Curved anatomical M-mode display allowing an M-mode along an arbitrary curve in a 2D image
- Sample-area points may be dynamically anchored to move with the tissue when running the cineloop
- Cine compound displays cineloops generated from a temporal averaging of multiple consecutive heart cycles

Automated Function Imaging (AFI) (optional)

- Parametric imaging tool which gives quantitative data for global and segmental wall motion
- Allows comprehensive assessment at a glance by combining three longitudinal views into one comprehensive bulls-eye view
- Integrated into M&A package with specialized report templates
- 2D strain based data moves into clinical practice

 Simplified workflow with fully automated ROI tracing (if configured), quick tips and combined display of traces from all seaments

Automated Ejection-Fraction Calculation (AutoEF) (optional)

- Automated EF measurement tool based on 2D-speckle tracking algorithm and on Simpson
- Integrated into M&A package with worksheet summary

Generic Measurements

- BSA (Body Surface Area)
- MaxPG (Maximum Pressure Gradient)
- MeanPG (Mean Pressure Gradient)
- % Stenosis (Stenosis Ratio)
- PI (Pulsatility Index)
- RI (Resistivity Index)
- HR (Heart Rate) beats/minute
- A/B Ratio (Velocities Ratio)
- TAMAX (Time Averaged Maximum Velocity) – Trace method is Peak or Manual
- TAMIN (Time Averaged Minimum Velocity) – Trace method is Floor
- TAMEAN (Time Averaged Mean Velocity) Trace method is Mean
- Volume

OB/GYN Application Module

- OB package for fetal growth analysis containing more than 100 biometry tables
- Dedicated OB/GYN reports
- Fetal graphical growth charts
- Growth percentiles
- Multi-gestational calculations (up to four)
- Programmable OB tables
- Expanded worksheets
- User-selectable fetal growth parameters based on European, American or Asian methods charts
- GYN package for ovary and uterus measurements and reporting

OB Measurements/Calculations

- Gestational age by:
 - GS (Gestational Sac)
 - CRL (Crown Rump Length)
 - FL (Femur Length)
 - BPD (Biparietal Diameter)
 - AC (Abdominal Circumference)
 - HC (Head Circumference)
 - APTD x TTD (Anterior/Posterior Trunk Diameter by Transverse Trunk Diameter)
 - LV (Length of Vertebra)
 - FTA (Fetal Trunk Cross-sectional Area)
 - HL (Humerus Length)
 - BD (Binocular Distance)
 - FT (Foot Length)
 - OFD (Occipital Frontal Diameter)
 - TAD (Transverse Abdominal Diameter)
 - TCD (Transverse Cerebellum Diameter)
 - THD (Thorax Transverse Diameter)
 - TIB (Tibia Length)
 - ULNA (Ulna Length)
- Estimated Fetal Weight (EFW) by:
 - AC, BPD
 - AC, BPD, FL
 - AC. BPD. FL. HC
 - AC. FL
 - AC, FL, HC
 - AC, HC
 - EFBW
- Calculations and Ratios
 - FL/BPD
 - FL/AC
 - FL/HC
 - HC/AC
 - CI (Cephalic Index)
 - AFI (Amniotic Fluid Index)
 - CTAR (Cardio-Thoracic Area Ratio)
- Measurements/calculations by: ASUM, ASUM 2001, Berkowitz, Bertagnoli, Brenner, Campbell, CFEF, Chitty, Eik-Nes, Ericksen, Goldstein, Hadlock, Hansmann, Hellman, Hill, Hohler, Jeanty, JSUM, Kurtz, Mayden, Mercer, Merz, Moore, Nelson, Osaka University, Paris, Rempen, Robinson, Shepard, Shepard/Warsoff, Tokyo University, Tokyo/Shinozuka, Yarkoni

- Fetal graphical trending
- Growth percentiles
- Multi-gestational calculations (four)
- Fetal qualitative description (anatomical survey)
- Fetal environmental description (biophysical profile)
- Programmable OB tables
- Over 20 selectable OB calculations
- Expanded worksheets

GYN Measurements/Calculations

- Right ovary length, width, height
- Left ovary length, width, height
- Uterus length, width, height
- Cervix length, trace
- Ovarian volume
- ENDO (endometrial thickness)
- Ovarian RI
- Uterine RI
- Follicular measurements
- Summary reports

Vascular Calculations

- RT ECA (Right External Carotid Artery Velocity)
- RT CCA (Right Common Carotid Artery Velocity)
- RT BIFURC (Right Carotid Bifurcation Velocity)
- RT ICA (Right Internal Carotid Artery Velocity)
- RT ICA/CCA (Right Internal Carotid Artery Velocity/Common Carotid Artery Velocity Ratio)
- LT ECA, LT CCA, LT BIFURC, LT ICA, LT ICA/CCA (same as above, for Left Carotid Artery)
- A/B Ratio (Velocities Ratio)
- % Stenosis (Stenosis Ratio)
- S/D Ratio (Systolic Velocity/Diastolic Velocities Ratio)
- PI (Pulsatility Index)
- RI (Resistivity Index)
- HR (Heart Rate) beats/minute

Cardiac Measurements

- %FS (LV Fractional Shortening)
- %IVS Thck (IVS Fractional Shortening)
- %LVPW Thck (LV Posterior Wall Fractional Shortening)
- Ao Arch Diam (Aortic Arch Diameter)
- Ao asc (Ascending Aortic Diameter)
- Ao Desc Diam (Descending Aortic Diameter)
- Ao Isthmus (Aortic Isthmus)
- Ao Root Diam (Aortic Root Diameter)
- AR ERO (PISA: Regurgitant Orifice Area)
- AR Flow (PISA: Regurgitant Flow)
- AR PHT (AV Insuf. Pressure Half Time)
- AR Rad (PISA: Radius of Aliased Point)
- AR RF (Regurgitant Fraction over the Aortic Valve)
- AR RV (PISA: Regurgitant Volume Flow)
- AR Vel (PISA: Aliased Velocity)
- AR Vmax (Aortic Insuf. Peak Velocity)
- AR VTI (Aortic Insuf. Velocity Time Integral)
- ARed max PG (Aortic Insuf. End-Diastole Pressure Gradient)
- ARed Vmax (Aortic Insuf. End-Diastolic Velocity)
- AV Acc Slope (Aortic Valve Flow Acceleration)
- AV Acc Time (Aortic Valve Acceleration Time)
- AV AccT/ET (AV Acceleration to Ejection Time Ratio)
- AV EOA I (VTI) (Aortic Valve Effective Orifice Area Index by Continuity Equation VTI)
- AV EOA I Vmax (Aortic Valve Effective Orifice Area Index by Continuity Equation Peak V)
- AV CO (Cardiac Output by Aortic Flow)
- AV Cusp (Aortic Valve Cusp Separation, 2D)
- AV Dec Time (Aortic Valve Deceleration Time)
- AV Diam (Aortic Diameter, 2D)

- AV max PG (Aortic Valve Peak Pressure Gradient)
- AV mean PG (Aortic Valve Mean Pressure Gradient)
- AV SV (Stroke Volume by Aortic Flow)
- AV Vmax (Aortic Valve Peak Velocity)
- AV Vmean (AV Mean Velocity)
- AV VTI (Aortic Valve Velocity Time Integral)
- AVA (Vmax) (AV Area by Continuity Equation by Peak V)
- AVA (VTI) (AV Area by Continuity Equation VTI)
- AVA Planimetry (Aortic Valve Area)
- AVET (Aortic Valve Ejection Time)
- CO (Teich) (Cardiac Output, M-mode, Teicholtz)
- D-E Excursion (MV Anterior Leaflet Excursion)
- E' Avg (Averaged early diastolic mitral valve annular velocity)
- E' Lat (Early diastolic mitral valve lateral annular velocity)
- E' Sept (Early diastolic mitral valve septal annular velocity)
- E/E' Avg
 (Mitral inflow E velocity to E' Avg ratio)
- E/E' Lat
 (Mitral inflow E velocity to E' Lat ratio)
- E/E' Sept
 (Mitral inflow E velocity to E' Sept ratio)
- EDV (Cube) (Left Ventricle Volume, Diastolic, 2D, Cubic)
- EF (A-L A2C) (Ejection Fraction 2CH, Single Plane, Area-Length)
- E-F Slope (Mitral Valve E-F Slope)
- EPSS (E-Point-to-Septum Separation, M-mode)
- ERO (Effective Regurgitant Orifice)
- ESV (Cube) (Left Ventricle Volume, Systolic, 2D, Cubic)
- HR (Heart Rate, 2D, Teicholtz)
- IVC (Inferior Vena Cava)
- IVCT (Isovolumic Contraction Time)
- IVRT (Isovolumic Relaxation Time)
- IVSd (Interventricular Septum Thickness, Diastolic, 2D)

- VSs (Interventricular Septum Thickness, Systolic, 2D)
- LA Diam (Left Atrium Diameter, 2D)
- LA Major (Left Atrium Major)
- LA Minor (Left Atrium Minor)
- LA/Ao (LA Diameter to AoRoot Diameter Ratio, 2D)
- LAAd (A2C) (Left Atrium Area, Apical 2C)
- LAEDV (A-L)
 (LA End Diastolic Volume, Area-Length)
- LAEDV Index (A-L) (LA End Diastolic Volume Index, Area-Length)
- LAESV (A-L) (LA End Systolic Volume, Area-Length)
- LAESV Index (A-L) (LA End Systolic Volume Index, Area-Length)
- LAEDV MOD
 (LA End Diastolic Volume MOD)
- LAESV MOD (LA End Systolic Volume MOD)
- LIMP (Left Index of Myocardial Performance)
- LVA (s) (Left Ventricular Area, Systolic, 2CH)
- LVAd (A2C) (Left Ventricular Area, Diastolic, 2CH)
- LVAd (sax) (LV area, SAX, Diastolic)
- LVAend (d) (LV Endocardial Area, SAX)
- LVAepi (d) (LV Epicardial Area, SAX)
- LVAs (A4C) (Left Ventricular Area, Systolic, 4CH)
- LVAs (sax) (LV area, SAX, Systolic)
- LVd Mass (LV Mass. Diastolic. 2D)
- LVd Mass (LV Mass, Diastolic, M-mode)
- LVd Mass Index (LV Mass Index, Diastolic, 2D)
- LVEDV (A-L A2C) (LV Volume, Diastolic, 2CH, Area-Length)
- LVESV (A-L A2C) (LV Volume, Systolic, 2CH, Area-Length)
- LVET (Left Ventricle Ejection Time)
- LVIDd (LV Internal Dimension, Diastolic, 2D)
- LVIDs (LV Internal Dimension, Systolic, 2D)

- LVLd (apical) (Left Ventricular Length, Diastolic, 2D)
- LVLs (apical) (Left Ventricular Length, Systolic, 2D)
- LVOT Area (Left Ventricle Outflow Tract Area)
- LVOT CO (Cardiac Output by Aortic Flow)
- LVOT Diam (Left Ventricular Outflow Tract Diameter)
- LVOT max PG (LVOT Peak Pressure Gradient)
- LVOT mean PG (LVOT Mean Pressure Gradient)
- LVOT SI (Stroke Volume Index by Aortic Flow)
- LVOT SV (Stroke Volume by Aortic Flow)
- LVOT Vmax (LVOT Peak Velocity)
- LVOT Vmean (LVOT Mean Velocity)
- LVOT VTI (LVOT Velocity Time Integral)
- LVPWd (Left Ventricular Posterior Wall Thickness, Diastolic, 2D)
- LVPWs (Left Ventricular Posterior Wall Thickness, Systolic, 2D)
- LVs Mass (LV Mass, Systolic, 2D)
- LVs Mass Index (LV Mass Index, Systolic, 2D)
- LAAd (A2C) (Left Atrium Area, Apical 2C)
- MCO (Mitral Valve closure to Opening)
- MP Area (Mitral Valve Prosthesis)
- MR Acc Time (MV Regurg. Flow Acceleration)
- MR ERO (PISA: Regurgitant Orifice Area)
- MR Flow (PISA: Regurgitant Flow)
- MR max PG (Mitral Regurg. Peak Pressure Gradient)
- MR Rad (PISA: Radius of Aliased Point)
- MR RF (Regurgitant fraction over the Mitral Valve)
- MR RV (PISA: Regurgitant Volume Flow)
- MR Vel (PISA: Aliased Velocity)
- MR Vmax (Mitral Regurg. Peak Velocity)
- MR Vmean (Mitral Regurg. Mean Velocity)

- MR VTI (Mitral Regurg. Velocity Time Integral)
- MV A Dur (Mitral Valve A-Wave Duration)
- MV A Velocity (MV Velocity Peak A)
- MV Acc Slope (Mitral Valve Flow Acceleration)
- MV Acc Time (Mitral Valve Acceleration Time)
- MV Acc/Dec Time (MV: Acc.Time/Decel.Time Ratio)
- MV an diam (Mitral Valve Annulus Diameter, 2D)
- MV CO (Cardiac Output by Mitral Flow)
- MV Dec Slope (Mitral Valve Flow Deceleration)
- MV Dec Time (Mitral Valve Deceleration Time)
- MV E Velocity (MV Velocity Peak E)
- MV E/A Ratio (Mitral Valve E-Peak to A-Peak Ratio)
- MV max PG (Mitral Valve Peak Pressure Gradient)
- MV mean PG (Mitral Valve Mean Pressure Gradient)
- MV PHT (Mitral Valve Pressure Half Time)
- MV Reg Frac (Mitral Valve Regurgitant Fraction)
- MV SI (Stroke Volume Index by Mitral Flow)
- MV SV (Stroke Volume by Mitral Flow)
- MV Time to Peak (Mitral Valve Time to Peak)
- MV Vmax (Mitral Valve Peak Velocity)
- MV Vmean (MV Mean Velocity)
- MV VTI (Mitral Valve Velocity Time Integral)
- MVA (Mitral Valve Area)
- MVA By PHT (Mitral Valve Area according to PHT)
- MVA by plan (Mitral Valve Area, 2D)
- MVET (Mitral Valve Ejection Time)
- P Vein A (Pulmonary Vein Velocity Peak A) – reverse
- P Vein A Dur (Pulmonary Vein A-Wave Duration)

- P Vein D (Pulmonary Vein End-Diastolic Peak Velocity)
- P Vein S (Pulmonary Vein Systolic Peak Velocity)
- PAEDP (Pulmonary Artery Diastolic Pressure)
- PE(d) (Pericard Effusion, M-mode)
- PEs (Pericard Effusion, 2D)
- PR max PG (Pulmonic Insuf. Peak Pressure Gradient)
- PR mean PG (Pulmonic Insuf. Mean Pressure Gradient)
- PR PHT (Pulmonic Insuf. Pressure Half Time)
- PR Vmax (Pulmonic Insuf. Peak Velocity)
- PR VTI (Pulmonic Insuf. Velocity Time Integral)
- PRend max PG (Pulmonic Insuf. End-Diastole Pressure Gradient)
- PRend Vmax (Pulmonic Insuf. End-Diastolic Velocity)
- Pulmonic Diam (Pulmonary Artery Diameter, 2D)
- PV Acc Slope (Pulmonic Valve Flow Acceleration)
- PV Acc Time (Pulmonic Valve Acceleration Time)
- PV Acc Time/ET Ratio (PV Acceleration to Ejection Time Ratio)
- PV an diam (Pulmonic Valve Annulus Diameter, 2D)
- PV Ann Area (Pulmonic Valve Area)
- PV CO (Cardiac Output by Pulmonic Flow)
- PV max PG (Pulmonic Valve Peak Pressure Gradient)
- PV mean PG (Pulmonic Valve Mean Pressure Gradient)
- PV SV (Stroke Volume by Pulmonic Flow)
- PV Vmax (Pulmonary Artery Peak Velocity)
- PV Vmean (PV Mean Velocity)
- PV VTI (Pulmonic Valve Velocity Time Integral)
- PVA (VTI) (Pulmonary Artery Velocity Time Integral)

- PVein S/D Ratio (Pulmonary Vein SD Ratio)
- PVET (Pulmonic Valve Ejection Time)
- PVPEP (Pulmonic Valve Pre-Ejection Period)
- PVPEP/ET Ratio (PV Pre-Ejection to Ejection Time Ratio)
- Qp/Qs (Pulmonic-to-Systemic Flow Ratio)
- RA Major (Right Atrium Major, 2D)
- RA Minor (Right Atrium Minor, 2D)
- RAA (d) (Right Atrium Area, 2D, Diastole)
- RAA (s) (Right Atrium Area, 2D, Systole)
- RAEDV A2C (Right Atrium End Diastolic Volume, Apical 2 Chamber)
- RAESV A-L (RA End Systole Volume [A-L])
- RALd (Right Atrium Length, Diastole)
- RALs (RA Length, Systole)
- RIMP (Right Index of Myocardial Performance)
- RJA (A4C) (Regurgitant Jet Area)
- RJA/LAA (Regurgitant Jet Area ratio RJA/LAA)
- RV Major (Right Ventricle Major)
- RV Minor (Right Ventricle Minor)
- RV S' (Tricuspid annulus systolic excursion velocity)
- RVAWd (Right Ventricle Wall Thickness, Diastolic, 2D)
- RVAWs (Right Ventricle Wall Thickness, Systolic, 2D)
- RVET (Right Ventricle Ejection Time)
- RVIDd (Right Ventricle Diameter, Diastolic. 2D)
- RVIDs (Right Ventricle Diameter, Systolic, 2D)
- RVOT Area
 (Right Ventricle Outflow Tract Area)
- RVOT Diam (RV Output Tract Diameter, 2D)
- RVOT Diam (RV Output Tract Diameter, M-Mode)
- RVOT max PG (RVOT Peak Pressure Gradient)
- RVOT meanPG (RVOT Mean Pressure Gradient)

- RVOT SI (LV Stroke Volume Index by Pulmonic Flow)
- RVOT SV (Stroke Volume by Pulmonic Flow)
- RVOT Vmax (RVOT Peak Velocity)
- RVOT Vmean (RVOT Mean Velocity)
- RVOT VTI (RVOT Velocity Time Integral)
- RVSP (Right Ventricle Systolic Pressure)
- RVWd (Right Ventricle Wall Thickness, Diastolic, M-mode)
- RVWs (Right Ventricle Wall Thickness, Systolic, M-mode)
- RAA (d) (Right Atrium Area, 2D, Diastole)
- RAA (s) (Right Atrium Area, 2D, Systole)
- SI (A-L A2C) (LV Stroke Index, Single Plane, 2CH, Area-Length)
- SI (A-L A4C) (LV Stroke Index, Single Plane, 4CH, Area-Length)
- SI (Bi-plane) (LV Stroke Index, Bi-plane, MOD)
- SI (bullet) (LV Stroke Index, Bi-plane, Bullet)
- SI (MOD A2C) (LV Stroke Index, Single Plane, 2CH, MOD)
- SI (MOD A4C) (LV Stroke Index, Single Plane, 4CH, MOD)
- SI (Teich) (LV Stroke Index, Teicholtz, 2D)
- SI (Teich) (LV Stroke Index, Teicholtz, M-mode)
- SV (A-L A2C) (LV Stroke Volume, Single Plane, 2CH, Area-Length)
- SV (A-L A4C) (LV Stroke Volume, Single Plane, 4CH, Area-Length)
- SV (Bi-plane) (LV Stroke Volume, Bi-plane, MOD)
- SV (bullet) (LV Stroke Volume, Bi-plane, Bullet)
- SV (MOD A2C) (LV Stroke Volume, Single-plane, 2CH, MOD) – Simpson
- SV (MOD A4C) (LV Stroke Volume, Single-plane, 4CH, MOD) – Simpson
- SV (Cube) (LV Stroke Volume, 2D, Cubic)
- SV (Cube)
 (LV Stroke Volume, M-mode, Cubic)

- SV (Teich) (LV Stroke Volume, 2D, Teicholtz)
- SV (Teich) (LV Stroke Volume, M-mode, Teicholtz)
- Systemic Diam (Systemic Vein Diameter, 2D)
- Systemic Vmax (Systemic Vein Peak Velocity)
- Systemic VTI (Systemic Vein Velocity Time Integral)
- TAPSE (Tricuspid Annular Plane Systolic Excursion)
- TCO (Tricuspid Valve Closure to Opening)
- TR max PG (Tricuspid Regurg. Peak Pressure Gradient)
- TR mean PG (Tricuspid Regurg. Mean Pressure Gradient)
- TR Vmax (Tricuspid Regurg. Peak Velocity)
- TR Vmean (Tricuspid Regurg. Mean Velocity)
- TR VTI (Tricuspid Regurgitation Velocity Time Integral)
- TV A dur (Tricuspid Valve A-Wave Duration)
- TV A Velocity (Tricuspid Valve A Velocity)
- TV Acc Time (Tricuspid Valve Time to Peak)
- TV Ann Area (Tricuspid Valve Area)
- TV ann diam (Tricuspid Valve Annulus Diameter, 2D)
- TV Area (Tricuspid Valve Area, 2D)
- TV CO (Cardiac Output by Tricuspid Flow)
- TV Dec Slope (Tricuspid Valve Flow Deceleration)
- TV E Velocity (Tricuspid Valve E Velocity)
- TV E/A Ratio (Tricuspid Valve E-Peak to A-Peak Ratio)
- TV max PG (Tricuspid Valve Peak Pressure Gradient)
- TV mean PG (Tricuspid Valve Mean Pressure Gradient)
- TV mean PG (Tricuspid Valve Mean Pressure Gradient)
- TV PHT (Tricuspid Valve Pressure Half Time)

- TV SV (Stroke Volume by Tricuspid Flow)
- TV Vmean (TV Mean Velocity)
- TV VTI (Tricuspid Valve Velocity Time Integral)
- VSD max PG (VSD Peak Pressure Gradient)
- VSD Vmax (VSD Peak Velocity)

Please refer to the Reference Manual for the full list of measurements and calculations for all applications.

Annotations

Body Marks

- Body mark icons for location and position of probe
- Easy selection of body marks from touch panel

Text Annotations

• Easy selection of text annotations from touch panel

Scan Assist Pro (optional)

- Customizable automations that assist the user through each step of the scan
- Facilitates consistency and reduce keystrokes
- Supports selection of all modes, all measurements and dual annotations
- Imaging attributes: Octave, Steer, Dual/Quad screen, Compound, LOGIQ View, Zoom, Depth, Scale and Baseline
- On-line or off-line protocol editor
- Image acquisition according to predefined protocol templates
- Various factory protocol templates
- User-configurable protocol templates

Stress Echo (optional) Supported Protocol Examinations

- 2D pharmacological stress echo
- 2D bicycle stress echo
- 2D continuous capture stress echo (treadmill stress echo)
- Cardiac resynchronization therapy programming protocols (available with the Advanced QScan option)

Protocol Examinations Features (enabled with stress option)

- Wall motion scoring: Analysis by wall motion in individual myocardial segments
- Show reference: Show a reference image from baseline or previous level during acquisition
- Smart stress: Automatically set up various scanning parameters (for instance geometry, frequency, gain, etc.) according to same projection on previous level
- Scan mode settings: Scan mode may be specified for individual views in the protocol
- Preview of store: Show running loops as preview before storing to the examination

Continuous Capture

- Continuously acquire large amounts of 2D image data, and selection of projection views for analysis afterwards
- The entire continuous capture recording may be kept in memory while it is possible to store new images outside the protocol template, or the entire recording can be stored to file
- Selection of projection views on scanner or EchoPAC when the entire recording is stored to file

Wall Motion Scoring

- As part of the measurement and analysis package one can access a wall motion assessment module, providing analysis/scoring of individual myocardial segments
- For use with all stress modalities

Cardiac Resynchronization Therapy (CRT) Programming Protocols

- CRT protocols require Stress and Advanced QScan
- Tailored acquisition protocol for data needed for programming of AV and VV delays in biventricular pacemakers
- Image acquisition of a set of projection views with various scan mode settings

- Template editor
- User-configurable protocol templates
- Configure protocol name, number of levels and views, name of level and views and several other protocol settings (smart stress, show reference, scan mode, preview of store, timer handling, etc.)

Safety Conformance

- The Vivid S70N is built to meet the requirements of:
- IEC60601-2-37
- IFC60601-1
- IEC60601-1-2
- IEC60601-1-6
- UL60601-1
- NEMA UD3
- The European Medical Devices
 Directive (MDD) 93/42/EEC (CE Mark)
- Directive 2011/65/EU on the restriction of use of certain hazardous substances
- The Vivid S70N ultrasound unit is a Class I device, with BF (probes) and CF (ECG leads) applied parts according to IEC60601-1
- The Vivid S70N ultrasound unit meets the EMC requirements in IEC/EN60601-1-2:2007 Class B

Security

Virus Protection

To reduce virus vulnerability, Vivid S70N is configured with a minimal set of open ports and with all network services not actively used by the system closed down. This helps to significantly reduce the risk of a virus attack on Vivid S70N.

GE is continuously judging the need for additional actions to reduce vulnerability of equipment; this includes vulnerability scanning of our products and evaluation of new security patches for the 3rd-party technology used. Microsoft® (and other) security patches that address serious issues with Vivid S70N will be made available to customers after GE verification of those patches.

User Policies

 Secure and advanced user password and login scheme according to user's password requirements

LDAP

 Users can log in to the system by using the same user credentials as used for domain connected computers

Disc Encryption

 Optional encryption of the scanner's E drive containing patient identifiable data

Transducers

M5Sc-D XDclear Active Matrix Single Crystal Phased Array Probe

- Probe presets: Cardiac adult, pediatric, abdomen, fetal heart, transcranial, coronary, stress, LVO contrast (optional), LVO stress, OB/GYN, vascular
- Biopsy guide: Multi-angle disposable with a reusable bracket

6S-D Phased Array Probe

 Probe presets: Pediatric, cardiac, coronary, neonatal head, fetal heart, abdominal

12S-D Phased Array Probe

 Probe presets: Pediatric, cardiac, coronary, neonatal head, vascular (incl. carotid, LEA, LEV, UEA, UEV), abdomen

9L-D Linear Array Probe

- Probe presets: Vascular (incl. carotid, LEA, LEV, UEA, UEV), musculoskeletal, nerves, small parts, thyroid contrast (optional)
- Biopsy guide: Multi-angle disposable with a reusable bracket

11L-D Linear Array Probe

- Probe presets: Vascular, small parts, breast, thyroid, scrotal, musculoskeletal, nerves
- Biopsy guide: Multi-angle disposable with reusable bracket

C1-6-D XDclear Single Crystal Curved Array Probe (Convex)

- Probe presets: Abdomen, OB/GYN, urology, vascular, fetal heart contrast (optional)
- Biopsy guide: Multi-angle, disposable with a reusable bracket

C2-9-D XDclear Single Crystal Curved Array Probe (Convex)

- Probe presets: Abdomen, OB/GYN, urology, fetal heart
- Biopsy guide: Multi-angle disposable with reusable bracket

C3-10-D XDclear

Single Crystal Curved Array Probe (Micro Convex)

 Probe presets: Neonatal head, vascular, abdomen, pediatric, musculoskeletal, nerves

IC5-9-D Convex (Endocavity) Probe

- Probe presets: OB/GYN, urology, fetal heart
- Biopsy guide: Single angle, disposable bracket

P2D Pencil Probe

• Probe preset: Cardiac

P6D Pencil Probe

• Probe preset: Vascular

6Tc-RS TEE Probe

 Probe presets: Cardiac, coronary, LVO contrast (optional)

6VT-D Active Matrix 4D Volume TEE Probe (4D and multi-plane only with 4D option)

Probe presets: Cardiac,
 LVO contrast (optional), coronary

9T-RS TEE Probe

Probe preset: Pediatric

Wideband Probes

- Electronic selection between four solid-state and one stand-alone Doppler probe connectors
- Three probe sockets are DLP type
- One RS probe socket for support of TEE and ICE probes

PROBE	FREQUENCY RANGE	CATALOG #
M5Sc-D (Sector)	1.5 – 4.6 MHz	H44901AE
6S-D (Sector)	2.4 – 8.0 MHz	H45021RR
12S-D (Sector)	4.0 - 12.0 MHz	H45021RT
9L-D (Linear)	2.4 - 10.0 MHz	H40442LM
11L-D (Linear)	4.5 – 12.0 MHz	H40432LN
C1-6-D (Convex)	1.4 – 6.0 MHz	H40472LT
C2-9-D (Convex)	2.3 – 8.4 MHZ	H40462LN
C3-10-D (Micro Convex)	3.0 – 10.0 MHz	H40482LB
IC5-9-D (Convex Endocavity) Probe	3.3 – 8.6 MHz	H40442LK
P2D (Pencil)	2.0 MHz	H4830JE
P6D (Pencil)	6.3 MHz	H4830JG
6Tc-RS (TEE)	3.0 – 8.0 MHz	H45551ZE
6VT-D (Volume TEE)1	3.0 – 8.0 MHz	H45581BJ
9T-RS (TEE)	3.0 – 10.0 MHz	H45531YM

¹ Also 6VT-D with catalog # H45561TA is supported.

Product may not be available in all countries and regions.
Full product technical specification is available upon request.
Contact a GE Healthcare Representative for more information.
Please visit www.qehealthcare.com/promotional-locations.

Data subject to change.

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GE Healthcare 9900 Innovation Drive Wauwatosa, WI 53226 U.S.A.

www.gehealthcare.com

