

SIGNATM Artist Data Sheet



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Magnet

The foundation for quality and flexibility

When it comes to image quality and applications flexibility, no other component of an MRI system has greater impact than the magnet architecture.

The SIGNA[™] Artist system features a platform wide bore magnet that delivers a large field of view. The magnet geometry has been optimized to reduce patient anxiety by providing more space in the bore and more exams with the patient's head out of the magnet. The 55 cm* field of view provides uniform image quality and may reduce exam times since fewer acquisitions may be necessary to cover large anatomy.

Magnet Specifications	
Magnet Length	179 cm
Operating field strength	1.5T (63.86 MHz)
Magnet shielding	Active
EMI shielding factor	99%
Size (W x L x H)	2.09 m x 1.79 m x 2.33 m
Magnet weight with cryogens	7,275 lbs (3,300 kg)
Magnet cooling	Cryogenic (liquid helium)
Long-term stability	<0.1 ppm/hour
Cryogen refill period	Zero boil off*
Fringe field (axial x radial)	5 Gauss = 4.0 m x 2.5 m 1 Gauss = 5.8 m x 3.2 m
Manufacturer	GE Healthcare

0.63%

Diameter Volume (x, y, z)	Typical ppm	Guaranteed ppm
10 cm DSV	0.007	0.02
20 cm DSV	0.035	0.06
30 cm DSV	0.10	0.15
40 cm DSV	0.33	0.43
45 cm DSV	0.88	1.0
48 cm DSV	1.75	2.0
50 cm DSV	2.8	3.3

Volume Root-Mean-Square (V–RMS) values are computed from 24 measurements on each of 32 planes with linear terms set to zero

Patient bore	
Patient Bore (L x W x H)	105 cm x 70 cm x 70 cm
Patient Aperture	76 cm
Patient comfort module	Head or feet first entry
	Dual-flared patient bore
	2 way in-bore intercom system
	Adjustable in-bore lighting system
	Adjustable in-bore patient ventilation system

Spatial Accuracy

Mean absolute distortion error

As measured using the Magphan phantom

Gradient

Premium clinical performance is enhanced with the SIGNA[™] Artist gradient system. Gradient speed, accuracy and reproducibility are critical for all acquisitions, but the performance is especially important in challenging acquistions, such as fMRI, diffusion, and PROPELLER.

ART (Acoustic Reduction Technology)

State-of-the-art clinical imaging demands the routine use of ultra-fast imaging techniques. At 1.5T, the strong gradients interact with the magnetic field to create mechanical forces resulting in acoustic noise. GE has implemented Quiet Technology on many components of the system to reduce acoustic noise and improve the patient environment.

Gradient Coil Isolation and Acoustic Damping

The full performance of the Extreme Gradient Driver is used while helping to maintain a safe environment for the patient. Clear separation between the gradient coil, RF body coil, and patient support structures ensures minimal component interactions. In addition, mass-damped acoustic barriers are used under the system enclosures to further reduce acoustic noise for the patient.

RF Coil Isolation

During gradient pulses, the RF body coil acts as a secondary source of noise. To further reduce the noise heard by the patient, the RF body coil mounting has been optimally designed with features to reduce acoustic noise.

Vibro-Acoustic Isolation

To isolate the magnet from the building and reduce the transmission of acoustic noise in the structure, GE has designed a vibro-acoustic dampening pad that sits under the feet of the magnet. The dampening characteristics of the pad are optimized based on the magnet geometry and weight.

Gradient Waveform Optimization

User selectable mode to further reduce acoustic noise.

Gradient Performance	
Peak amplitude	44 mT/m
Slew-rate	200 T/m/s
Maximum FOV*	55 cm
Duty Cycle	100%

Gradient subsystem fidelity, accuracy, and reproducibility parameters

Maximum integrated error*	0.48 ppmFS-s
Shot-to-shot*	0.16 ppmFS-s
Symmetry error*	0.32 ppmFS-s

Gradient amplifier (water-cooled)		
Gradient amplifier	830 Amps/1650 VoltsPeak	
Current and Voltage	Frequency dependent feed-forward model	
Control	Digital PI feedback control loop	

Peak gradient specifications determined through maximum measured gradient amplifier output and gradient coil efficiency.

Typical gradient fit expressed in terms of the absolute integrated errors in micro-Amperes-second (µAs). Gradient integral precision is the maximum integrated current error over a full-scale, echo-planar gradient waveform. Shot-to-shot repeatability is the largest difference between integrated errors across waveforms. Symmetry is the largest difference in integrated current error when comparing positive and negative gradient waveforms.

RF

The RF acquisition technology of the SIGNA[™] Artist 1.5T enables greater clinical performance and higher image quality especially for data-intensive applications and provides an improvement in SNR versus previous generation based on GE's Total Digital Imaging (TDI) RF architecture.

Direct Digital Interface (DDI) employs an independent analog-to-digital converter to digitize inputs from each of up to 128 RF channels, eleminating unnecessary noise enhancement. In other words, every element translates to a digitized signal. The result? Not only does DDI technology improve SNR of our images but it also works with legacy GE coils for unmatched flexibility.

TDI and OpTix RF Architecture	
Number of available RF Channels	128/96/64
Receiver sampling per channel	80 Mhz
Quadrature demodulation	Digital
Receiver dynamic range at 1 Hz BW	> 165 dB
Receiver resolution	Up to 32 bits
Receiver resolution	Up to 32 bi

Standard RF transmit architecture		
RF Amplifier	Water cooled, small footprint	
M	16 kW Body	
Maximum output power	2 kW Head	
Maximum RF field with integrated body coil	>20 uT	
Transmit gain	>100 dB (40 dB coarse/	
	>84 dB instantaneous)	
RF exciter frequency range	63.86 ± 0.650 MHz	
Frequency resolution	< 0.6 Hz/step	
Frequency stability	14 parts per billion (0 to 50 C)	
Phase resolution	0.005 degree/step	
Amplitude control	16 bit with 12.5 ns resolution	
Amplitude stability	<0.1 dB over one min. at rated power	
Digital RF pulse control	2 amplitude modulators,	
Digital RF pulse control	2 frequency/phase modulators	

Volume Reconstruction Engine & Host Computer

Reconstruction performance today is challenged by explosive growth in data, and increased computational complexity. The amount of data to be stored and processed continues to increase with the advances in MR system technology. The SIGNA[™] Architect meets that challenge head-on with innovations in reconstruction to take full advantage of computing power and by leveraging both hardware and software technology.

Reconstruction System Gen7		
PERFORMANCE	ADVANCED*	
Scientific Linux	Scientific Linux	
Dual Intel Xeon Gold 5118	Dual Intel Xeon Gold 6130	
2.3 GHz	2.1 GHz	
>= 94GB	>= 192GB	
1 GbE	10 GbE	
960 GB SSD	1440 GB SSD	
63,000 2D FFTs/second	81,000 2D FFTs/second	
NA	NA	
	PERFORMANCEScientific LinuxDual Intel Xeon Gold 51182.3 GHz>= 94GB1 GbE960 GB SSD63,000 2D FFTs/second	

Host Computer	
Operating system	Scientific Linux (RT)
Processor	Intel Xeon W-2123 CPU
Clock rate	3.6 GHz
Memory	64 GB
Network	Gigabit (10/100/1000) Ethernet
Hard disk storage	1024 GB SSD
Graphics subsytem	NVIDIA Quadro with minimum of 1 TFLOPS performance
Media drives	CD/DVD drive
Cabinets	Single, tower configuration

Orchestra Reconstruction Platform

Orchestra is a high performance computing software library toolbox that enables new possibilities for integration of advanced reconstruction elements. Delivering enhanced productivity gains by increased image reconstruction speed and minimizing workflow disruptions. A powerful platform not only built to support the most demanding application such as HyperSense, but also to provide our collaborators with easy access to the product reconstruction algorithms.

AIR Recon™

Reconstruction is at the heart of every scan, and reducing noise during reconstruction is critical to achieving clear images.

With AIR Recon[™], GE's smart reconstruction algorithm available on several key applications like PROPELLER, Cube, FSE and Flex, you can reduce background noise and out-of-FOV artifacts while improving SNR. The result is cleaner, crisper images without having to overcompensate in your scanning protocol.

Computing Platform

Operator Console

The SIGNA™ Artist system comes equipped with a scan control keyboard assembly that contains intercom speaker, microphone and volume controls, and an emergency stop switch. Start-scan, pause-scan, stop-scan, and table advance to isocenter hot keys are also included.

Display and DICOM Data

The SIGNA[™] Artist 1.5T system generates MR Image, Secondary Capture and Grayscale Softcopy Presentation State (GSPS) DICOM objects. The DICOM networking supports both send and query retrieve as well as send with storage commit to integrate with the site's PACS archive. DICOM filming support includes both Basic Grayscale and Basic Color Print Service Classes. Additionally, the SIGNA[™] Artist system supports the CT and PET image objects for display allowing the user to refer to cross-modality studies.

Display	
AutoView	Dedicated image review window
	6 user-programmable keys on scan control keyboard plus one key for returning to prior setting
Window/Level	6 user-programmable buttons in image viewer
(W/L)	Arrow keys on scan control keyboard
	On-image through middle mouse button
	Save State stores user-selected image orientation, user annotation and window level
	Zoom/Roam/Flip/Rotate/Scroll Explicit Magnify and Magnifying Glass
	Image Measurement Tools Grid On/Off
Image display	Cross Reference/User Annotation Exam/ Series Page
	Hide Graphics/Erase Annotation/Screen Save
- <u>-</u>	Accelerator Command Bar
	Compare Mode/Reference Image
	Minified Reference Scoutview
	Cine Paging (up to 4 windows and 128 images/window)
	Add/Subtract/Edit Patient Data

Image display performance	256 Image buffer (256 x 256) at 30 fps
	Shadowed to permit ease in reading
Image annotation	Two graphic/text planes overlay the entire screen
	Grid placement with anatomical reference on an image
	Drawing and annotation may be added to and removed from images
Filming	
	Drag and Drop filming
	One-button Print Series
	One-button Print Page
Filming	Multi-image formats – from 1 to 24 images displayed simultaneously in various layouts
	DICOM Basic Grayscale Print Service Class
	DICOM Basic Color Print Service Class
Wide-screen dis	play monitor
Display manites	24" Widescreen LCD Flat Panel
Display monitor	1920 x 1200 dot resolution

Scan Parameters

Sequences	Parameters	Matrix 64	Matrix 128	Matrix 256	Matrix 512
2D Spin Echo	Min. TR (ms)	N/A	3.0 ms	4.0 ms	3.04 ms
	Min. TE (ms)	N/A	1.576 ms	1.928 ms	2.784 ms
	Min. TR (ms)	N/A	3.0 ms	4.0 ms	6.0 ms
	Min. TE (ms)	N/A	1.608 ms	1.896 ms	2.784 ms
2D Fast Spin Echo	Min. slice thickness		0.	2 mm	
	Min. ESP (ms)	N/A	1.608 ms	1.896 ms	2.784 ms
	Max. ETL	N/A	480		
	Min. TR (ms)	N/A	45 ms	53 ms	74 ms
	Min. TE (ms)	N/A	4.0 ms	5.0 ms	7.0 ms
3D Fast Spin Echo	Min. slice thickness		0.	3 mm	
	Min. ESP (ms)	N/A	1.656 ms	2.272 ms	3.712 ms
	Max. ETL	N/A	400	400	400
	Min. TR (ms)	0.554 ms	0.682 ms	0.906 ms	1.308 ms
2D Fast Gradient Echo	Min. TE (ms)	0.184 ms	0.184 ms	0.188 ms	0.192 ms
	Min. TR (ms)	0.54 ms	0.668 ms	0.89 ms	1.25 ms
3D Fast Gradient Echo	Min. TE (ms)	0.184 ms	0.184 ms	0.18 ms	0.18 ms
	Min. slice thickness		0.	1 mm	
	Min. TR (ms)	N/A	56.8 ms	57.0 ms	59.0 ms
Inversion Recovery	Min. TE (ms)	N/A	1.608 ms	1.928 ms	2.784 ms
,	Min. TI (ms)	N/A	50.0 ms	50.0 ms	50.0 ms
	Min. TR (ms)	0.91 ms	1.23 ms	1.89 ms	3.04 ms
3D FIESTA	Min. TE (ms)	0.24 ms	0.316 ms	0.432 ms	0.628 ms
	Min. TR (ms)	4.0 ms	5.0 ms	5.0 ms	N/A
	Min. TE (ms)	1.1 ms	1.2 ms	1.6 ms	N/A
	Min. slice thickness		0.	6 mm	
	Min. FOV cm		4	4 cm	
Taha Dlanan Ingaring	ESP at 25 cm	0.452 ms	0.656 ms	1.052 ms	N/A
Echo Planar Imaging	ESP at 48 cm	0.324 ms	0.452 ms	0.656 ms	N/A
	ESP at 99 cm	0.220 ms	0.308 ms	0.564 ms	N/A
	Images per second	163	163	163	N/A
	b value	Maximum (s/r	nm²): 10.000 Max #	for ADC: 40	
	Diffusion Tensor directions	Max: 300			
	SLICE	THICKNESS and F	OV		
Minimum slice thickness	in 2D				0.1 mm
Minimum slice thickness	in 3D				0.1 mm
Min/Max FOV					10 mm/550 mm*
Min/Max Matrix					32-1024

SIGNA™Works

The latest software platform provided by GE, it includes the base pulse sequences, workflow enhancements and visualization tools to enable high productivity with exceptional quality and outcomes. SIGNA[™]Works, starting with the acquisition, provides the tools needed to enable superb results in the various clinical fields. With 6 optimized Works categories, GE delivers preset protocols for the most demanding Neuro, Muskuloskeletal, CardioVascular, Body, Oncology and Paediatric areas. In addition to enabling the routine imaging, SIGNA[™]Works provides the user with a streamlined and efficient operating environment with in-line processing through single-click outcomes for even the most demanding processes.

SIGNA[™]Works provides:

- Software platform with a wider range of assets for image acquisition, display and post processing.
- Strategically packaged to deliver speed, high quality diagnostic images and reliable post processing to each clinical area.
- An intelligent combination of MR pulse sequences and advanced techniques, designed to bring solutions for enhanced care and productivity.
- From SE, FSE, frFSE, Inversion Recovery, SSFSE, SSFSE-IR, GRE, FGRE, SPGR, FSPGR to Volumetric imaging, Motion Correction, Diffusion Weighted, Vascular imaging and beyond.



NeuroWorks

NeuroWorks includes the basic imaging acquisitions and processing to the latest in motion correction, functional and volumetrics. Supporting both simple reconstruction to real-time perfusion results with BrainSTAT Arterial Input Function (AIF).

Volumetric Imag	ing
volumetric imag	PD, T1, T2, T1 FLAIR, T2 FLAIR and STIR
3D Cube	Isotropic high resolution volumetric
3D Cube	
	One sequence, reformat in all planes DIR, typically but not limited to CSF and
3D Cube DIR	white matter suppression
BRAVO T1	< 1 mm isotropic, MP-RAGE optional sequence of choice for functional data overlay
	3D reformat MPR
Manaliantian	Volume segmentation
Visualization	Volume rendering
	Auto-contour
Motion Correction	on
	Multiple contrasts – T1, PD, T2, T1 FLAIR, T2 FLAIR and DWI
PROPELLER MB	Motion reduction
	Magnetic susceptibility effects reduction
	Registration
Visualization	Motion correction
Enhanced Diffus	ion Weighted
	Multi b-value
	3:1, Tetrahedral
	Smart NEX
eDWI	Inversion recovery for robust FatSat
	RTFA: Increases SNR by 50% and distortion reduction for accurate post processing when compared to dual spin echo
Visualization	ADC and eADC
One Touch Proto	ocol
	Automated multi-series, multi-plane prescription
READYBrain	Combine with Auto Scan for one touch protocol
	In-line for Auto Post processing

Dynamic Brain F	unction
Dynamic Dram	Blood flow
	Blood volume
BrainSTAT Perfusion and Analysis	Mean transit time
	Time to peak parametric
	Fusion
	Manage tracer arrival differences due to
BrainSTAT Arterial	patient flow dynamics
Input Function (AIF)	Automatically or manually specify the AIF to normalize maps
Visualization	Brain STAT
Spectroscopy	
	Concentrations of in-vivo metabolites evaluation
	Acquisition and display
PROBE PRESS	Reduced flip angles for lower min TE values
	Up to twice the SNR when compared to PROBE STEAM
Visualization	Brain Spectroscopy
Spine Imaging	
	High SNR T2* contrast
2D/3D MERGE	Gray/white matter differentiation
	Foraminal detail
3D COSMIC	SSFP to emphasize T2 signal for improved contrast
	Nerve root and disc detail
	3D reformat MPR
Visualization	Volume segmentation
	Volume rendering

BodyWorks

The latest in torso imaging is delivered with volumetric imaging supporting advanced parallel imaging standard. Including, Snapshot imaging with optimized Single Shot FSE, 3D isotropic imaging for MRCP, Dynamic Imaging and Routine Volumetric imaging enabled with Motion Free navigation for post-contrast uses with high temporal resolution results. Motion correction is further enhanced with both the PB navigators as well as PROPELLER including T1-weighted results. Turbo class of acquisitions, streamlines the speed and enables higher quality results. Advanced processing is made one-touch with the new READYView on Console capabilities.

Volumetric Imag	ging
3D Cube	Isotropic high resolution volumetric
3D Cube	One sequence, reformat in all planes
	In- and out-of-phase
3D Dual Echo	Used to help identifying fatty infiltration, focal fatty sparing, liver lesions, and other conditions
	High spatial resolution
	3D reformat MPR
Visualization	Volume segmentation
VISUAIIZATION	Volume rendering
	Auto-contour
Motion Correcti	
PROPELLER MB	Motion reduction
Auto Navigator	Free-breathing tracker
Respiratory Trigger	Free breathing bellows
Visualization	Registration
VISUAIIZATION	Motion correction
Enhanced Diffus	ion Imaging
Enhanced Diffus	Multi b-value,
	3:1, Tetrahedral
eDWI	Smart NEX
	Inversion recovery for robust FatSat
	RTFA: Increases SNR by 50% and distortion reduction for accurate post processing when compared to dual spin echo
Visualization	ADC and eADC
visualization	Eucion

Fusion

Dumonia Dadu In	
Dynamic Body Im	SPGR Fast Liver Acquisition
LAVA	·
	SPECIAL for robust fat suppression
LAVA Turbo	ARC acceleration for full organ coverage
	Shorter breath-holds
Multi Phase	Customizable phase delay for dynamic studies
	Series per phase
Dynaplan	Auto subtraction
	Pause after mask
Minunlingtion	MR standard
Visualization	SER
Non-Invasive No	n Contrast Biliary System – MRCP
3D frFSE MRCP	T2 Prep for background suppression
	Breath-hold and PB navigator
	T2-weighted, with sub second single slice acquisition
	High signal from fluids
	Good suppression of other tissues
2D SSFSE	Snapshot acquisition, motion artifacts virtually eliminated
	Thin slices and thick slab protocols
	Single breath-hold acquisition
	MIP post processing
2D FatSat FIESTA	Excellent contrast between ducts and gallbladder with surrounding anatomy
	FatSat for increased conspicuity
	T2-weighted
2D frFSE	High resolution
	Supplementary information for assessment of extra ductal masses
	3D Reformat MPR
Visualization	MIP & HD MIP

CVWorks

CVWorks provides GE's extensive coverage for the latest techniques enabling high performance CardioVascular imaging outcomes. Single breath-hold imaging for whole heart coverage are available from Morphology to Delayed enhancement. Enabling simplified generation of superb results including head-to-toe MRA support to single acquisition TOF and additional non-contrast imaging for flow.

Myocardium Delayed Enhancement		
MDE PLUS		
Single-Shot Myocardial Delayed Enhancement	Shorten breath-holds or free breathing for better patient tolerance	
	Potential for reduced scan time	
	Imaging arrhythmic patients	
(SSH MDE)	Snapshot imaging for motion reduction	
	Robust Myocardial Suppression	
	Fat Suppression	
Adiabatic IR Pulse	Adiabatic fat suppression pulse	
	Improved characterization of enhancing tissue	
	Inversion Recovery FGRE sequence	
	Phase-sensitive image reconstruction	
MDE Plus: Phase Sensitive MDE (PSMDE)	Consistent myocardial suppression, even with sub-optimal TI	
(Improved contrast for myocardial	
	Potential to shorten overall exam time	

Single Breath Hold Whole Heart

	Difficult patients with irregular heartbeats or limited breath-hold capacity
Black Blood	Potential to shorten exam times
SSFSE	Shorten breath-holds for better patient tolerance
	Whole chest survey

 Viability Imaging

 Multiphase FGRE Cine acquisition...quick assessment of optimal TI time for MDE

 Captures image contrast evolution at different TI times

 Adiabatic Inversion Recovery for uniform myocardial suppression

 Support both 1 RR and 2 RR mode

Function	
FIESTA	Fast Cine with retrospective gating
FIESTA	Fast Card with prospective gating

T2* Mapping	
StarMap	T2* mapping compatible with gating for cardiac evaluation
	Non-invasive evaluation of the entire organ
READYView	R2 Star
Navigator Free-b	reathingAcquisition
	Used with 3D IR Prepared FGRE or 3D FatSat FIESTA
Auto Navigator	Free-breathing navigator diaphragm tracking
Flow Imaging	
	Flow velocity and volume flow quantification
	Peak and average flow charts and graphics
Flow Analysis*	Automated contour detection
	Brain, chest and abdominal clinical
	applications
Contract Enhance	amont Tracking
Contrast Enhance SmartPrep	Automated bolus tracking
Fluoro triggered	Real Time bolus tracking
Visualization	MIP & HD MIP
VISUdIIZdtiOII	ראור א הט אור
Peripheral Vascul	ar Runoff
Peripheral Vascul	ar Runoff Multi-station, multi phase acquisition
Peripheral Vascul	Multi-station, multi phase acquisition Automatically prescribes, acquires, and
	Multi-station, multi phase acquisition Automatically prescribes, acquires, and combines images from multiple stations Entire exam complete with no user
QuickStep	Multi-station, multi phase acquisition Automatically prescribes, acquires, and combines images from multiple stations Entire exam complete with no user intervention in as little as 7 minutes Auto subtraction
QuickStep Non-contrast Vas	Multi-station, multi phase acquisition Automatically prescribes, acquires, and combines images from multiple stations Entire exam complete with no user intervention in as little as 7 minutes Auto subtraction
QuickStep	Multi-station, multi phase acquisition Automatically prescribes, acquires, and combines images from multiple stations Entire exam complete with no user intervention in as little as 7 minutes Auto subtraction
QuickStep Non-contrast Vas 2D Time of Flight	Multi-station, multi phase acquisition Automatically prescribes, acquires, and combines images from multiple stations Entire exam complete with no user intervention in as little as 7 minutes Auto subtraction
QuickStep Non-contrast Vas 2D Time of Flight (TOF)	Multi-station, multi phase acquisition Automatically prescribes, acquires, and combines images from multiple stations Entire exam complete with no user intervention in as little as 7 minutes Auto subtraction scular Imaging Carotid bifurcation, venous anatomy, aortic arch, peripheral vessels Circle of willis, intracranial vasculature,
QuickStep Non-contrast Vas 2D Time of Flight (TOF) 3D TOF	Multi-station, multi phase acquisition Automatically prescribes, acquires, and combines images from multiple stations Entire exam complete with no user intervention in as little as 7 minutes Auto subtraction Scular Imaging Carotid bifurcation, venous anatomy, aortic arch, peripheral vessels Circle of willis, intracranial vasculature, abdominal vasculature Intracranial vasculature, carotid bifurcation, aortic arch, peripheral vessels, venous
QuickStep Non-contrast Vas 2D Time of Flight (TOF) 3D TOF 3D TOF 3D TOF Multi Slab 2D Phase	Multi-station, multi phase acquisition Automatically prescribes, acquires, and combines images from multiple stations Entire exam complete with no user intervention in as little as 7 minutes Auto subtraction Carotid bifurcation, venous anatomy, aortic arch, peripheral vessels Circle of willis, intracranial vasculature, abdominal vasculature Intracranial vasculature, carotid bifurcation, aortic arch, peripheral vessels, venous anatomy Localizer, flow direction and velocity for intracranial and extracranial vasculature, portal or hepatic vein, quantitative
QuickStep Non-contrast Vas 2D Time of Flight (TOF) 3D TOF 3D TOF 3D TOF Multi Slab 2D Phase Contrast 3D Phase	Multi-station, multi phase acquisition Automatically prescribes, acquires, and combines images from multiple stations Entire exam complete with no user intervention in as little as 7 minutes Auto subtraction Carotid bifurcation, venous anatomy, aortic arch, peripheral vessels Circle of willis, intracranial vasculature, abdominal vasculature Intracranial vasculature Intracranial vasculature, carotid bifurcation, aortic arch, peripheral vessels, venous anatomy Localizer, flow direction and velocity for intracranial and extracranial vasculature, portal or hepatic vein, quantitative measurement of flow velocity

OrthoWorks

Visualization

OrthoWorks delivers routine imaging that is not always a given. From motion correction to advanced volumetric imaging, GE's latest MSK techniques provide you with the contrasts you need for the basic imaging to enhanced cartilage imaging. And with multiple tissue suppression methods available, OrthoWorks enables the best of what can be achieved in a standard configuration.

High Resolution	Imaging
	Intermediate PD, T1, T2-weighted imaging
FSE & frFSE	Compatible with FatSat, ASPIR, STIR and SPECIAL
	Gold standard for articular cartilage, cartilage ligaments, menisci and subcondral bone
	:
Volumetric Imag	ging
	PD, T1, T2, STIR
3D Cube	Isotropic high resolution volumetric
	One sequence, reformat in all planes
	3D reformat MPR
Visualization	Volume segmentation
	Volume rendering
Motion Correcti	on
PROPELLER MB	Multiple contrasts – T1, PD, T2, STIR
PROPELLER MB	Motion reduction
Vieweliestiew	Registration

Motion correction

T2*-weighted Im	aging
	High SNR T2* contrast
3D MERGE	Visualization of ligaments while adding soft tissue contrast
	Reduced chemical shift
3D COSMIC	Fast, high resolution volumetric imaging
	SSFP to emphasize T2 signal for improved contrast
	3D reformat MPR
Visualization	Volume segmentation
	Volume rendering
Artifact Reduction	on Standard Sequence
MADE	FSE High bandwidth protocols
MARS	
	High resolution, small FOV imaging
	High resolution, small FOV imaging
Fat Supression	
Fat Supression Chemical FatSat	Frequency selective fat saturation
Fat Supression	Frequency selective fat saturation Inversion recovery fat null point method
Fat Supression Chemical FatSat	Frequency selective fat saturation
Fat Supression Chemical FatSat STIR	Frequency selective fat saturation Inversion recovery fat null point method Solution for poor fat suppression due to B ₁

OncoWorks

OncoWorks delivers a complete platform for your needs in prostate, breast and radiation therapy planning. From the basic routine acquisitions to whole body imaging including volumetric and enhanced diffusion capabilities, GE enables superb linearity from the gradient platform and hardware performance. GE provides the necessary preset protocols to supply you with optimal imaging for your oncology needs that is further enhanced visualization capabilities so that your results can be a single click away.

Volumetric Imaging		
	PD, T1, T2, T1 FLAIR, T2 FLAIR and STIR	
3D Cube	Isotropic high resolution volumetric	
	One sequence, reformat in all planes	
3D Cube DIR	DIR, typically but not limited to CSF and white matter suppression	
BRAVO T1	< 1 mm isotropic, MP-RAGE optional sequence of choice for functional data overlay	

Volumetric Imag	ing
	3D reformat MPR
Visualization	Volume segmentation
VISUAIIZALIOII	Volume rendering
	Auto-contour
Enhanced Diffusi	ion Weighted
	Multi b-value
	3:1, Tetrahedral
	Smart NEX
eDWI	Inversion recovery for robust FatSat
	RTFA: Increases SNR by 50% and distortion reduction for accurate post processing when compared to dual spin echo
Visualization	ADC and eADC
Dynamic Imaging	
	SPGR dynamic fast acquisition
Multi-phase SPGR	SPECIAL for robust fat suppression
Visualization	MR standard
VISUdIIZdLIUII	SER

PaedWorks

PaedWorks is the GE solution to address your specific needs in paediatric imaging, from standard sequences supported with the latest in motion control for brain to toes. GE delivers standard acoustic reduction technologies and further addresses clinical needs for volumetric imaging, whole body imaging and enhanced diffusion results. The streamlined processing enables simplified one-click processing and visualization of complex results. PaedWorks covers your needs for all anatomies and provides optimized protocols and preset procedures.

Volumetric Imag	Volumetric Imaging		
	PD, T1, T2, T1 FLAIR, T2 FLAIR and STIR		
3D Cube	Isotropic high resolution volumetric		
	One sequence, reformat in all planes		
3D Cube DIR	DIR, typically but not limited to CSF and white matter suppression		
BRAVO T1	< 1 mm isotropic, MP-RAGE optional sequence of choice for functional data overlay		
3D Dual Echo	In- and out-of-phase used to help identifying fatty infiltration, focal fatty sparing, liver lesions, and other conditions		
	High spatial resolution		
	3D reformat MPR		
Visualization	Volume segmentation		
	Volume rendering		
Motion Correction	on		
PROPELLER MB	Motion reduction		
Auto Navigator	Free-breathing tracker		
Respiratory Trigger	Free breathing bellows		
Visualization	Registration		
VISUdIIZdtIOII	Motion correction		

Dynamic Brain F	unction
	Blood flow
BrainSTAT	Blood volume
Perfusion and	Mean transit time
Analysis	Time to peak parametric
	Fusion
BrainSTAT	Manage tracer arrival differences due to patient flow dynamics
Arterial Input Function (AIF)	Automatically or manually specify the AIF to normalize maps
Visualization	BrainSTAT
Spectroscopy	
Spectroscopy	Concentrations of in-vivo metabolites
	evaluation
PROBE PRESS	Acquisition and display
TRODE TRESS	Reduced flip angles for lower min TE values
	Up to Twice the SNR when compared to PROBE STEAM
Visualization	Brain spectroscopy
Spine Imaging	
Spille imaging	High SNR T2* contrast
2D/3D MERGE	Gray/white matter differentiation
LUIJU MERCE	Foraminal detail
	SSFP to emphasize T2 signal for improved
3D COSMIC	contrast
	Nerve root and disc detail
	3D reformat MPR
Visualization	Volume segmentation
	Volume rendering

One Touch Protocol

READYBrain	Automated multi series, multi plane prescription
(Not recommended for under 1 year of	Combine with auto scan for one touch protocol
age)	In-line for auto post processing

SIGNA[™]Works Features

HyperSense*

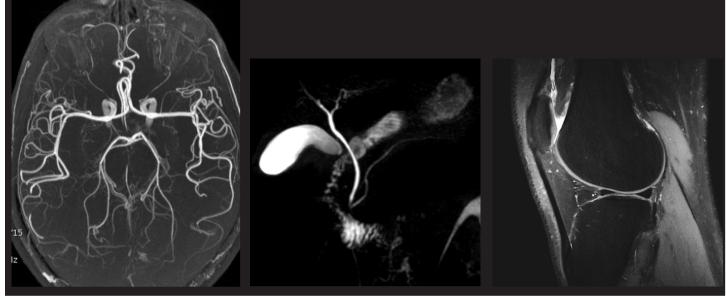
Going further than common sense

HyperSense is an acceleration technique based on sparse data sampling enabling faster imaging without the penalties commonly found with conventional parallel imaging.

HyperSense is intended to be used with volumetric acquisitions, it is combined with (ARC) parallel imaging delivering optimal signal to noise ratio with shorter acquisition times.

Benefits

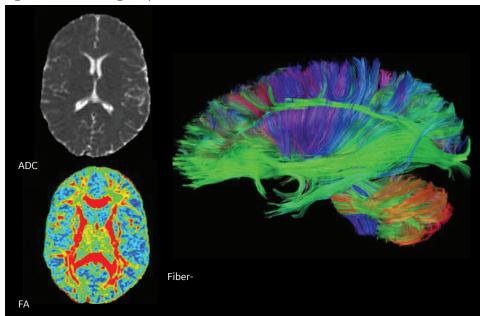
- Increase productivity by reduced scan times
- Faster 3D imaging acquisitions
- Combined with ARC for higher acceleration factors



HyperBand for EPI*

Quality and Speed Synchronized

HyperBand provides a reduction in scan time by simultaneously exciting multiple slices at multiple locations. It can lead to higher acceleration reduction factors when combined to other methods of parallel imaging. The benefits of HyperBand acceleration include enhancements on productivity and patient experience, increased anatomy coverage and higher resolution image acquisition.

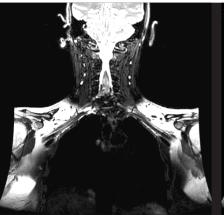


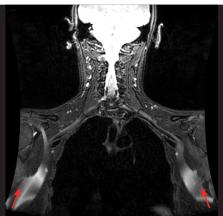
- Simultaneous excitation: multiple slices at multiple locations
- Acquisition time reduction without compromising post processing metrics
- More diffusion directions, number of slices or higher temporal resolution without extra scan time
- Shorter breath-holds
- Combine with ARC for higher acceleration factor
- Used for DWI, DTI, Gradient Echo EPI & fMRI imaging

HyperCube*

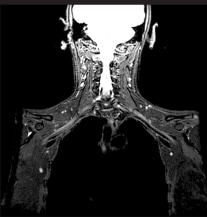
Tailored 3D imaging that fits to perfection

Delivers small field of view organ specific volumetric imaging acquisition that can reduce artifacts originating from outside of the prescribed FOV. HyperCube can be applied with or without fat suppression using Flex or chemical saturation methods. Provides significant savings of imaging time without sacrificing contrast quality and it can be used across the entire body.





FatSat Failure Chem FatSat



Time 3:37 HyperCube with Flex

Arm wrap causing swaps Cube with Flex



Time 2:37 HyperCube with Flex and HyperSense

- Significant scan time reduction while maintaining SNR efficiency
- High resolution small FOV isotropic volumetric imaging
- FLEX for large FOV robust fat suppression

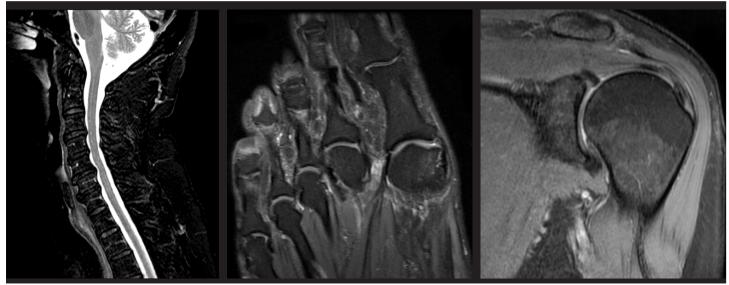
Flex for Cube and FSE*

Unlimited solutions, consistent results

Flex uses a dual echo fat-water separation technology to provide robust and homogeneous fat suppressed images. Flex is compatible with ARC acceleration and can be used with a fast triple echo selection for significant scan time reduction. Enhanced uniformity and control of fat water swaps allow large field of view and off-center imaging where uniformity is a challenge. Delivering fast 2D and 3D acquisitions with reconstructed in-phase, out-of-phase, water and fat images, Flex represents productivity gains in all

Benefits

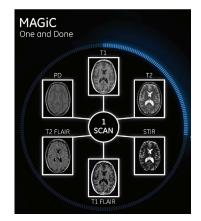
- 2D and 3D dual echo fat-water separation technique
- Uniform fat suppression for large FOV challenging offcenter anatomies
- Dixon-based, less sensitive to B_{0} inhomogeneity
- Choice of single pass acquisition for significant scan time reduction
- Water, Fat, in-phase and out-of-phase images



MAGiC*

MAGiC (MAGnetic resonance image Compilation), enables one and done imaging capability by delivering multiple contrasts in a single scan. MAGiC utilizes a multidelay, multi-echo acquisition. The data acquired is processed using a technique to generate T1, T2, PD and Inversion Recovery (IR) weighted images (including: T1 FLAIR, T2 FLAIR, STIR, Dual IR and PSIR weighted images), all at once, reducing scan time by up to 50% compared to acquiring all contrasts separately.** MAGiC generates all the different contrasts from the same acquisition, leading to enhanced image slice registration, owing to the absence of inter-acquisition patient movement. Because of the efficiency of MAGiC, the user has the flexibility to explore more advanced imaging, such as Spectroscopy***, Susceptibility Weighted Imaging*** etc., in the same time required to perform the routine exam without MAGiC. MAGiC

provides the user the ability to change the contrast of the images after acquisition. This is performed by adjusting the TR, TE, and/or TI parameters post-acquisition, to generate the specific contrast desired. MAGiC also enables users to generate parametric T1, T2, R1, R2, PD maps for further analysis of MRI acquisition data.



One MAGiC scan defivers six

Benefits

- Multiple contrasts a single scan
- Up to 50% faster than acquiring all contrasts separately*
- Ability to change the contrast after acquisition by modifying TR, TE and/ or TI
- Enhanced image slice registration owing to the absence of inter-acquisition patient motion
- Parametric Maps: T1, T2, R1, R2, PD

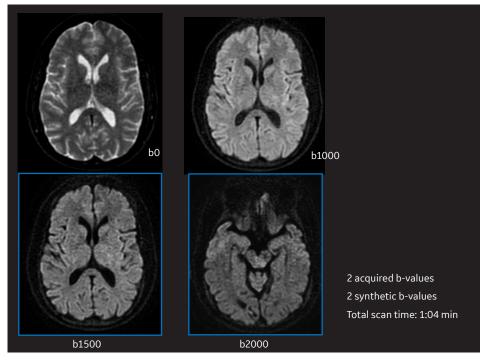
*Optional

^{**}Based on MAGiC clinical study of 109 patients from 6 separate institutions.

^{***}Optional package (MAGiC in itself does not deliver advanced imaging) It is recommended to acquire conventional T2 FLAIR images in addition to MAGiC

MAGIC DWI*

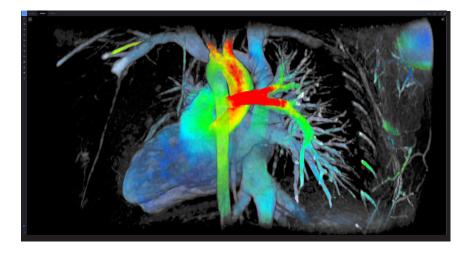
MAGiC DWI generates multiple synthetic b-values from a single DWI scanned series allowing the user to view diffusion contrasts changes in real time after the acquisition. It delivers high b-values without stressing protocol parameters and resulting in shorter scan times without sacrificing contrast or anatomy coverage. Synthetic Diffusion is not limited to diffusion directionality or coil type.



ViosWorks*

Confident Functional Accuracy

ViosWorks is a 3D cine-based acquisition that can be planned in any dimension and allows for velocity encoding in all directions to assess vascular flow. The acquisition delivers fast imaging with the use of Hyperkat acceleration including both, single and view sharing frames for higher temporal results. Provides high spatial resolution to enable visualization of flow through complex structures.



Benefits

- Multiple synthetic b-values from a single DWI scan
- High b-values in shorter scan times
- Compatible with FOCUS Diffusion

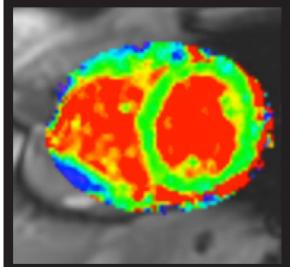
- 3D cine acquisition in any dimension
- Free breathing whole chest coverage
- Allows velocity encoding in all directions
- Single and view sharing frames for higher temporal resolution
- Effortless workflow

CardioMaps*

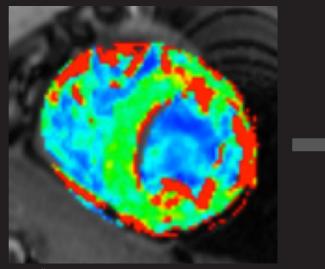
Achieving measurable benefits

CardioMaps is a powerful diagnostic technique that supports detection of cardiac pathologies by quantitative measurement of T1 and T2 relaxation times. The T1 Mapping acquisition includes automatic motion correction that compensates for cardiac and/ or respiratory motion, providing reliable results. T1 Mapping offers two methods of acquisition: Inversion-recovery Look-Locker with FIESTA readout (MOLLI) for apparent T1 (T1*) measurements or saturation-recovery SMART1Map for true T1 measurements.

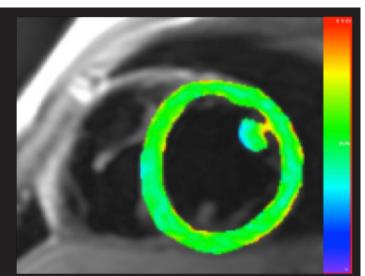
- Quantitative measurement of T1 and T2 relaxation times
- Automatic motion correction for T1 Mapping
- Two methods of acquisition for T1* or true T1 measurements
- R² T1 mapping: R-squared to visualize a good fitting of the T1 mapping curve



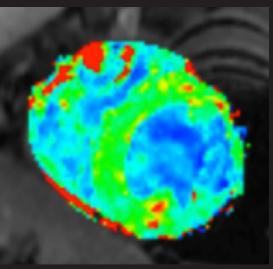
T1 CardioMap



T1 CardioMap Without Motion Correction



T2 CardioMap



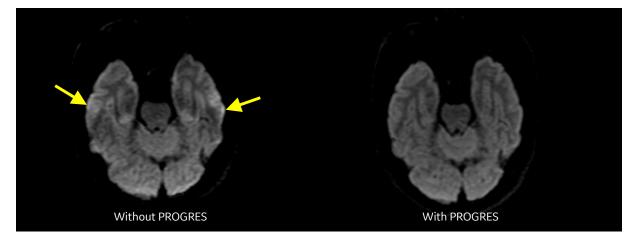
T1 CardioMap With Motion Correction

PROGRES*

Resolving the limits of diffusion distortion

PROGRES is a series of optimizations that enhance the performance of diffusion imaging. It delivers:

- An automated distortion, motion and eddy current correction technique, based on an integrated reversed polarity gradient acquisition. Using a rigid affine registration, the technique outputs images with reduced susceptibility artifacts at no significant impact in overall scan time.
- Extended DTI capabilities allowing the selection and customization of up to 300 diffusion-encoding directions, resulting in more accurate diffusion tensor estimations.



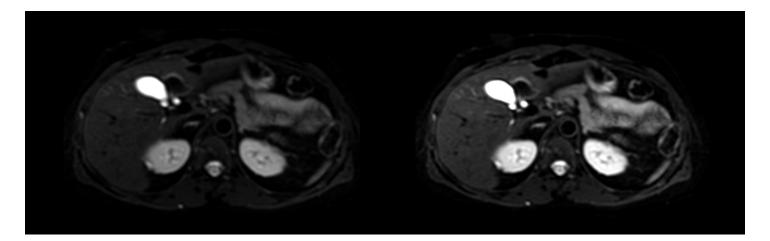
MUSE*

Resolving the limits of diffusion resolution

MUSE is a diffusion weighted and diffusion tensor technique that allows higher spatial resolution with reduced EPI-based distortions. MUSE implements a segmented readout approach along the phase encoding direction and utilizes a dedicated image reconstruction algorithm to mitigate shot-to-shot motion-induced phase errors inherent to multi-shot diffusion. The technique is compatible with Auto Navigators, cardiac and respiratory gating, as well as inplane parallel imaging acceleration.

Benefits

- High resolution diffusion imaging
- Reduced blurring and susceptibility artifacts
- Compatible with parallel imaging acceleration



- Distortion and motion correction
- Up to 300 diffusion directions
- Improved image fusion

Image Acquisition

Pulse Sequences

SPIN Echo	
SE FSE frFSE	Standard pulse sequences that are used to generate T1, Proton Density and T2 contrasts. The FSE technique enables long TR and long TE choices in reduced scan times. frFSE produces images with more T2 contribution allowing shorter TR values and resulting in shorter scan times when compared to FSE.
IR FSE-IR	IR techniques provide uniform suppression of tissues by applying an inversion pulse to null signal. FSE-IR reduces scan time while still achieving efficient tissue suppression.
3D FSE 3D frFSE	Three-dimensional imaging acquisitions mostly used for T2-weighted contrast.
T1 FLAIR T2 FLAIR	T1 and T2 Fluid Attenuated Inversion Recovery (FLAIR) pulse sequences allow the suppression of signal from cerebrospinal fluid (CSF). This sequence provides contrast to differentiate white and gray matter to T1- and T2-weighted brain and spine imaging.
Double IR/Triple IR (Black Blood)	These pulse sequences are included to allow Black Blood imaging for studies of cardiac morphology. Triple IR adds fat suppression to Black Blood imaging. It also can be combined with Single Shot.
Double IR/Triple IR Single Shot	Single Shot Black Blood acquisitions allow larger volume acquisitions in fewer breath-holds.
SSFSE SSFSE-IR	Single Shot Fast Spin Echo is a technique that permits single slice data acquisition in less than one second. It is frequently used for MRCP studies in a single breath-hold and myelograms.
3D MRCP	3D frFSE sequence that combined with the T2 Prep option provides improved background tissue suppression for MRCP exams.
T2 MAP*	T2 MAP is a multiple acquisition; multiple echoes FSE based method to obtain images that represent different T2 weighting values. The acquired data is processed to produce T2 color maps that are used for cartilage evaluation.
Cube FLAIR	3D FSE technique that applies modified refocusing pulses for increased SNR. It is used to acquire isotropic data that can be reformatted in any plane.
Cube DIR	Cube DIR, double inversion recovery, is designed to achieve signal suppression from either gray or white matter and CSF.
Cube PROMO*	Prospective Motion correction is a real time 3D navigator based motion correction technique compatible with Cube T2, Cube DIR and Cube T2 FLAIR.
2D IDEAL [*]	2D FSE 3-point Dixon Water Fat Separation method that acquires 4 contrasts in one acquisition: Water, Fat, in-phase and out-of phase.
MAVRIC SL* HyperMAVRIC SL*	Multi-Spectral imaging technique is designed to reduce metal artifact near MR conditional implants. Improvements have been made to the MAVRIC SL feature to reduce scan time through a patient-specific metal analysis scan and allow functionalities, such as Variable flip angles, flow compensation, and No Phase Wrap. In addition to the T1, PD, and STIR contrasts, the sequence now also provides T2 weighting, and a B1-optimized STIR pulse.
3D ASL*	3D FSE based technique that uses a "labeling" pulse to quantify cerebral blood flow.

Gradient Echo

2D and 3D GRE/SPGR3D GRE Dual EchoGradient echo basic techniques offer a variety of possibilities to support imaging of all anatomies and can2D and 3D FGRE/FSPGRbe acquired in 2D, 3D and Cine modes. The sequences generate T1 or T2 contrasts and support single, dual2D MFGRE (Multi Echo)and multi echo acquisitions.2D CINE GRE/SPGRSequences generate T1 or T2 contrasts and support single, dual

Gradient Echo	
2D and 3D MDE	Myocardial delayed enhancement is a technique used for tissue characterization to provide the assessment of myocardial perfusion.
PSMDE	Phase sensitive MDE increases the contrast between enhanced and normal tissue even with non-optimal inversion delay times.
SSMDE and SSPSMDE	MDE and PSMDE single shot based sequence that provides multi slice coverage with reduced breath-hold times.
2D and 3D FIESTA 2D FIESTA CINE 2D FatSat FIESTA 3D FIESTA-C	Fast imaging employing steady-state acquisition generates great contrast differentiation between tissues of low T2/T1 ratios and high T2/T1 ratios. Provides high SNR images in short acquisition times. FIESTA sequences offer benefits for Neuro, Cardiac and Abdominal imaging.
2D and 3D MERGE FGRE	T2* contrast technique that acquires multiple echoes at several different TE values.
2D Fastcard GRE/SPGR	Prospective gating sequence designed for breath-hold, aortic arch gated imaging.
2D FastCINE GRE/SPGR	Retrospective gating sequence, beneficial to cardiac wall motion studies, assessment of valve function and visualization of regurgitation and stenosis.
2D FGRE-ET* 2D FGRE-ET Real-time*	Fast gradient echo sequence combined with an EPI echo train for acquiring multiple phase encoding steps per TR. Used for first pass myocardial perfusion studies. Compatible with real time for cardiac planning and imaging uncooperative patients.
2D FGRE TC*	Fast Gradient Time Course used for myocardium tissue evaluation on first pass studies. Allows multiple planes radial acquisitions.
2D Fast Spoiled Gradient Echo TC*	Fast Spoiled Gradient Echo Time Course used for myocardium tissue evaluation on first pass studies. Allows multiple planes radial acquisitions.
2D CINE-IR	FAST-CINE GRE IR Prep sequence is designed for myocardial viability studies. Supports TI time selection for consistent results.
2D Real-time FGRE/FIESTA	Free-breathing, Real-time planning sequence for whole heart coverage.
2D FIESTA TC*	2D FIESTA TC is used for myocardium tissue evaluation on first pass studies.
2D Tagging*	Fast Cine GRE based sequence for visualization of cardiac contractile function.
3D Heart*	3D FGRE/FIESTA navigated sequence for free breathing coronary artery imaging.
3D COSMIC	Coherent oscillatory state acquisition for the manipulation of imaging contrast is a modified FGRE sequence with steady-state free precession segmented acquisition for high SNR, high contrast spine imaging.
3D LAVA	Liver Acquisition with Volume Acceleration is a 3D SPGR technique designed to image the liver. SPECIAL is the fat suppression method applied and parallel imaging provides shorter scan times.
3D LAVA Flex*	3D FSPGR technique that acquires in-phase, out-of-phase, water only and fat only images in one acquisition. LAVA Flex uses ARC; a self calibrated 2D parallel imaging technique that allows acceleration in phase and slice direction.
3D Turbo LAVA 3D Turbo LAVA Flex*	LAVA Turbo provides a reduction of breath-hold timing for both LAVA and LAVA Flex acquisitions by as much as 20% reduction compared to conventional LAVA and LAVAFlex acquisitions. Available with respiratory triggering.
3D VIBRANT*	Simultaneous bilateral breast imaging technique in the Axial and Sagittal plane. SPECIAL and dual-shim volume capabilities provide homogeneous fat suppression.

Gradient Echo	
3D VIBRANT Flex*	Acquires in-phase, out-of-phase, water only and fat only images in a single scan. It provides robust fat saturation and applies ARC, 2D self calibrated acceleration method for high spatial and temporal resolution images.
3D QuickSTEP	QuickStep is an automated multi-station run-off acquisition. This application automatically prescribes, acquires, and combines images from multiple stations for fast acquisition and simplified workflow.
3D TRICKS*	The time resolved imaging of Contrast KineticS (TRICKS) is a fast 3D dynamic acquisition for high temporal and spatial resolution MR angiography imaging. Combined with elliptical-centric data sampling for consistent results.
3D SWAN*	High-resolution susceptibility weighting 3D multi echo gradient acquisition designed for small vessels visualization, as well as large vascular structures and iron or calcium deposits in the brain.
3D IDEAL*	IDEAL is a 3-point dixon water fat separation method that generates in-phase, out-of-phase, water images and fat images in one single scan. Provides homogeneous fat saturation for imaging for challenging anatomies as such as neck and spine.
3D IDEAL-IQ*	Whole liver 3D coverage in a single breath-hold, IDEAL IQ provides a non-invasive, quantitative assessment of triglyceride fat content in the liver that can aid in diagnosing steatosis.
StarMap*	StarMap is an acquisition and post processing technique that helps evaluate iron content in the heart and liver. Multiple echoes are acquired at different TE times for each pixel resulting in images that represent variations of T2* weighting. After the acquisition the images are post processed to generate color and grayscale T2* and R2* Maps.
DISCO* DISCO with FatSat	Differential sub-sampling with cartesian ordering, combine TRICKS and LAVA Flex technologies to acquire high temporal resolution 3D dynamic images with robust fat suppression and without compromising spatial resolution.
MR Touch*	MR Touch is software and hardware application designed to measure relative tissue stiffness with MR. The acquisition uses a GRE based sequence that synchronizes induced vibrations to acquire a series of phase-contrast images over time.
MP-RAGE	MP-RAGE is a (3D) magnetization-prepared, rapid gradient-echo (MP-RAGE) sequence for structural brain imaging. The sequence captures high tissue contrast and provides high spatial resolution with whole brain coverage in short scan times.
Vascular	
Inhance Inflow IR*	3D FIESTA based non-contrast-enhanced MR angiography technique that provides static background tissue and venous flow suppression for imaging arteries. It uses SPECIAL for uniform fat suppression and respiratory gating compatibility reduces respiratory motion artifacts during free-breathing renal exams.
Inhance 3D Velocity*	3D Phase Contrast based technique designed to acquire angiographic images in brain and renal arteries with robust background suppression in a short scan time. Respiratory triggering compatibility enabling abdominal angiography.
Inhance 2D Inflow*	Designed for imaging arteries that follow almost a straight path (i.e. femoral, popliteal, and carotid arteries) Inhance 2D Inflow acquires data during the systolic phase only. Compatible with Peripheral or Cardiac Gating and ASSET.
Inhance 3D Delta Flow*	3D FSE cardiac gated based non-contrast-enhanced MRA application designed for peripheral arterial imaging. This technique uses the differences between systolic and diastolic flow to help generate arterial signal contrast with robust background and venous suppression. ASSET compatibility provides shorter scan times.

EPI	
fMRI – BrainWave*	Real time acquisition, processing and display of functional imaging.
GRE-EPI SE-EPI FLAIR-EPI DW-EPI	Standard on all systems are gradient echo, spin echo, FLAIR, and diffusion weighted echo planar imaging. The EPI sequence supports single and multishot imaging, multi-phase imaging, as well as cardiac gating. Diffusion EPI produces images that can detect acute and hyper-acute stroke with b-value up to 10,000 s/ mm2, multi-NEX compatibility and the ability to generate ADC and T2-weighted TRACE images. The FLAIR option suppresses the CSF signal.
DTI*	DTI (Diffusion Tensor Imaging) is an EPI technique that acquires diffusion information in up to 300 different directions. The image contrast is based on the degree of diffusion anisotropy in the tissues. Post processing include Fractional Anisotropy (FA), Apparent Diffusion Coefficient (ADC), 2D directional maps and 3D fiber track models.
eDWI	Enhanced DWI (eDWI) provides high SNR diffusion images with short acquisition times. Supports Multi b-values with SMART NEX for variable NEX selection per B-value, "3 in 1" diffusion weighting to all three gradients simultaneously, tetrahedral selection with four different diffusion weighting combinations for shorter TE values and Inversion recovery for fat signal reduction.
RTFA	The RTFA algorithm leads to a reduction in distortion of the diffusion image per diffusion axis. RTFA is designed to reduce image blurring and distortions typically associated with diffusion imaging throughout the body. RTFA also allows for increased utilization of single spin echo DWI which results in an increase in SNR by up to 50% compared to dual spin echo and, when combined with the improved resolution leads to an increase in image quality that can be utilized for image presentation, fusion and ADC map outputs.
RTCF	Real-Time Center Frequency (RTCF) option can be applied to DWI & DTI to enable using the optimal center frequency for each slice. This is intended to help improve fat suppression and signal drop off at areas of high B ₀ inhomogeneity (off-isocenter, or area with high tissue susceptibility). It is also intended to reduce station-to-station misalignment in whole body diffusion imaging.
FOCUS DWI*	FOV Optimized & Constrained Undistorted Single-shot (FOCUS) DWI utilizes 2D selective excitation pulses to limit the prescribed phase encode FOV eliminating artifacts from motion, imaging back folding or unsuppressed tissue.
Spectroscopy	
PROBE-PRESS PROBE-STEAM*	PROBE Single-Voxel spectroscopy allows non-invasive evaluation of the relative concentrations of in- vivo metabolites. The sequence provides acquisition and display of volume localized, water-suppressed H1 spectra in single-voxel mode. The sequence consists of three slice selective RF pulses with crusher gradients. PRESS provides up to twice the SNR over STEAM.
PROBE-PRESS CSI (2D & 3D*)	PROBE 2D and 3D CSI enable simultaneous multi-voxel spectroscopic acquisitions in the brain. It is available with PRESS excitation to maximize SNR. Post processing includes automatically generated metabolic maps.
BREASE*	A TE-averaged PRESS (Point RESolved Spectroscopy) acquisition that provides the necessary biochemical information to help characterize breast tissue by assessing the presence of choline.
TEA-PRESS*	TEA PRESS is a TE-Averaged variant of the PRESS CSI pulse sequence. It collects spectra across a range of TE values and averages the results together to reduce the appearance of signals whose intensity varies as function of TE. This allows signals whose intensity does not vary with TE to be accentuated in comparison. This is the underlying pulse sequence behind the BREASE application.

PROPELLER MB	
Silent T1, PD, T2, DWI, T1 FLAIR and T2 FLAIR PROPELLER MB*	
T1, PD and T2 PROPELLER MB	PROPELLER MB is a multi-shot per blade sequence that uses a radial k-space filling pattern acquisition and a post processing correction algorithm to significantly reduce the effects of motion artifacts. PROPELLER MB is compatible with spatial and chemical Sat, ASPIR, STIR T1, PD and T2 Auto TI/TR and Navigator.
T2 FLAIR PROPELLER MB	
T1 FLAIR PROPELLER MB	
DWI PROPELLER MB	
PROPELLER DUO	PROPELLER DUO is a FSE based technique that is less prone to distortions caused by field inhomogeneities. PROPELLER DUO has a comparable scan time when compared to conventional PROPELLER DWI, and has spatial sat and shim volume capability to further reduce distortions and reduce artifacts and improve image quality.
Silenz*	
Silenz T1 Silenz PD	Silenz is a 3D Zero-TE sequence comprising high bandwidth excitation and reduced gradient-switching radial acquisition that results in sound levels near ambient. Silenz has added flexibility in sequence prescription for anisotropic resolution enabling faster scan times and includes axial as well as oblique geometries.
Fat Suppression Technolog	39
FatSat	Applies a frequency selective saturation pulse at the frequency of fat before the imaging excitation pulse with the result being a signal measurement primarily from water.
STIR	STIR is an inversion recovery method that takes advantage of the T1 difference between water and fat to allow selection of the signal to suppress. In order to eliminate the signal from tissues, the TI time must match exactly the null point of the tissue that needs to be suppressed.
SPECIAL	Hybrid fat suppression technique that incorporates features from both the frequency selective FatSat and the STIR techniques by using a spectrally selective inversion pulse that inverts only the fat magnetization and leaves the only the water peak available for excitation.
Spectral Spatial	Method that applies selective pulses for water excitation only, while fat is left untouched, thereby producing no signal.
ASPIR	ASPIR method is a solution for poor fat suppression due to B_1 inhomogeneity. It is based on the frequency and the relaxation fat behaviors. Applies a spectrally selective adiabatic inversion pulse to excite the fat spins, imaging pulses are then applied after TI null time when longitudinal magnetization of fat crosses zero. The disadvantages include sensitivity to B_0 and longer scan times.
IDEAL*	IDEAL is a 3-point Dixon technique that acquires three images at slightly different echo times to generate phase shifts between water and fat. The water/fat separation method is very efficient at providing homogeneous image quality. One acquisition provides four contrasts: water, fat, in-phase and out-of-phase images.
Flex*	Flex is a 2-point dixon technique delivering faster scan times compared to IDEAL 3-point dixon. It is based on the difference between fat and water resonance frequencies using two flexible echo times for further scan time reduction. One acquisition provides four contrasts: Water, Fat, in-phase and out-of-phase images.

Motion Correction Techr	nology
PROPELLER MB	PROPELLER MB is a multi-shot per blade sequence that uses a radial <i>k</i> -space filling pattern acquisition and a post processing correction algorithm to significantly reduce the effects of motion artifacts. It is compatible with spatial and chemical Sat, ASPIR, STIR Auto TI/TR and navigator.
PROMO*	Prospective motion correction is a real time 3D navigator based motion correction technique compatible with Cube T2, Cube DIR and Cube T2 FLAIR.
PB Navigators	Pencil beam navigators allow free breathing body and cardiac imaging by tracking the motion of the diaphragm. There are two navigator modes: navigator gating, uses a predefined signal acceptable range during the expiration and navigator triggering, uses signal to trigger data collection during the expiration.
Respiratory Trigger	Reduces breathing motion artifacts by synchronizing the acquisition with the respiratory cycle.
VCG	Vector cardiac gating reduces motion artifacts by synchronizing the acquisition with the cardiac cycle.
PG	Peripheral gating reduces motion artifacts caused by pulsating blood.
Acceleration Technology	
Fractional Nex	Technique in which only partial <i>k</i> -space data is collected and the remaining data is estimated. It uses the phase conjugate symmetry reconstruction method, which only half of the phase encode steps are acquired for scan time reduction.
Fractional No Phase Wrap	Selectable on the user interface, Fractional No Phase Wrap allows you to adjust the phase FOV based upon the patient size and shape. Benefits include a physical view of NPW placement on the user interface, flexibility to manage SNR and Scan Time, and the power to scan only the area of interest within the determined FOV.
ASSET	Array spatial sensitivity encoding technique acquires under sampled multicoil data generating aliased images. These are post processed with coil sensitivity maps from the calibration scan to unfold the images
ARC	Auto-calibrating reconstruction for cartesian imaging is a highly accelerated parallel imaging auto- calibrating method that doesn't require coil sensitivity maps. It enables smaller FOV prescriptions, less sensitivity to motion and prevents artifacts caused by coil calibration inaccuracies.
HyperBand*	HyperBand enables scan time reduction by simultaneously exciting multiple slices at multiple locations. Reconstruction algorithms are then applied in order to separate the images acquired.
	High performance acceleration based on sparse or compressible images. It can be extended to include

HyperSense*	High performance acceleration based on sparse or compressible images. It can be extended to include inherent compressibility in dimensions besides <i>k</i> -space. While parallel imaging suffers from SNR loss due to scan time reduction and coil spatial encoding, with HyperSense there is no SNR loss caused by the coil geometric factor.
	HyperKat s an advanced k-t acceleration method that employs time-shifted sampling in data acquisition

and exploits both spatial and temporal correlation with motion-adaptive time window selection in image

 reconstruction.

 Small FOV organ specific volumetric imaging acquisition method that enables outside phase FOV

 HyperCube*
 HyperCube signal suppression. The technique can help to reduce artifacts originated outside of the prescribed field of view.

Hyperkat*

Uniformity Correction Te	chnology				
	SCENIC (Surface Coil ENhancement for Imaging Clarity) is an advanced image uniformity correction that				
	further improves upon the previous reFINE algorithm.				
SCENIC	By using the biased field, SCENIC utilizes B-Splines to iteratively determine the best sharpening algorithm.				
	This results in improved contrast, reduced shading, and consistent sharpening when compared to				
	conventional imaging filtering techniques				
PURE	PURE corrects the field inhomogeneity by collecting a calibration scan from the (uniform) body coil and the (non-uniform) surface coil and calculating maps that relate the intensity correction values to the images.				
deFINE	deFINE is an integrated in-line imaging processing method that provides edge enhancement and smoothing algorithms allowing the user to customize the image appearance.				
reFINE	reFINE is an advanced image uniformity correction algorithm that addresses non-uniformity due to coil sensitivity profiles and dielectric shading effects. It reduces organ-motion induced misregistration artifacts, effects of low signal in dark regions and edge effects at tissue interfaces and borders. reFINE optimizes parameter settings for each application, coil, and body anatomy maximizing image uniformity results.				
Noise Reduction Technol	logy				
ART	Acoustic Noise Reduction Technology optimizes the gradient waveform to reduce the gradient noise without compromising performance.				
Silenz*	Silenz is a 3D Zero-TE sequence comprising high bandwidth excitation and reduced gradientswitching radial acquisition that results in sound levels near ambient. Silenz has added flexibility in sequence prescription for anisotropic resolution enabling faster scan times and includes axial as well as oblique geometries.				
Silent PROPELLER*	Silent PROPELLER gradient waveform approach reduces the acoustic noise level to less than 11dB above the ambient room noise.				

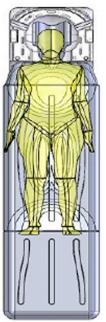
RF Coils Suite

eXpress Table & Posterior Array

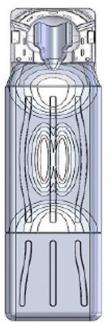
- Detachable table with embedded posterior array
- 100 cm S/I Coverage
- 40 Elements with dedicated spine configurations
- Head-first or feet-first
- Automatic coil mode selection
- Acceleration in all directions
- Patient-centric comfort pads

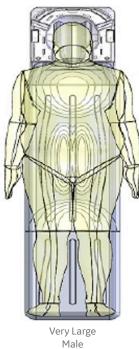


Comfort Pads



Petite Female







AIR[™] Coils

Coil combinations

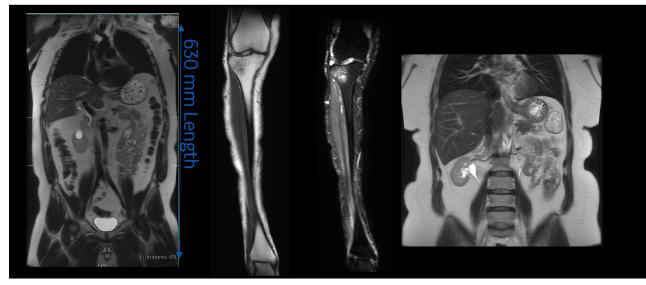
1.5T 30ch AIR[™] AA Coil*

The 30-channel AIR Anterior Array (AA) is the next generation anterior array coil that allows flexibility in any direction to conform to the patient's anatomy. Based on the innovative technologies behind the INCA conductor and the E-mode module, the 1.5T 30ch AIR AA provides superb SNR and acceleration performance, while improving the overall patient and user experience. The coil has been designed to adapt various patient shapes and sizes, with an ultra lightweight distribution of less than 0.5 grams/cm². The 1.5T 30ch AIR AA is a receive-only RF coil designed for use with GE 1.5T MRI systems to produce diagnostic images of general human anatamy, including extremities.



1.5T 30ch AIR AA	
Elements	30
Maximum number of channels in the maximum FOV	45, when combined with the Posterior Array
Maximum number of channels in head-to-thighs imaging (S/I 145cm)	121, when combined with the Head-Neck Unit, Posterior Array and 2 nd AIR Anterior Array
Weight	2 kg (5 lbs) resting on patient, 3 kg (7 lbs) with the cable
R/L Coverage	60 cm
S/I Coverage	63 cm
Dimensions (W x L x H)	66 cm x 79 cm x 1.2 cm
Patient orientation	Head-first or feet-first
	Can be combined with the following coils:
	Head-Neck Unit

- Posterior Array
- AIR MP coils
- 2nd AIR Anterior Array
- Peripheral Vascular Peripheral Vascular



*The 1.5T 30ch AIR[™] AA coil is not yet CE marked. Cannot be placed on the market or put into service until it has been made to comply with the Medical Device Directive.

Head & Neck Unit



Head and Neck NV with Comfort





Head and

Cervical Open



Head Neck Unit NV Specifications			
Length	49.5 cm (19.5 in)		
Width	38.8 cm (15.3 in)		
Height	36.8 cm (23.9 in)		
Weight of HNU base	5.0 kg (11 lbs)		
Weight of Anterior Adapter	2.6 kg (5.8 lbs)		
S/I Coverage	50 cm (19.7 in), when combined with the PA and AA		
R/L Coverage in head mode	24 cm (9.4 in)		
R/L Coverage for NV	50 cm (19.7 in), when combined with the PA and AA		
Head-first or feet-first imaging			

Up to 28 elements in the FOV, when combined with the PA and AA $\,$

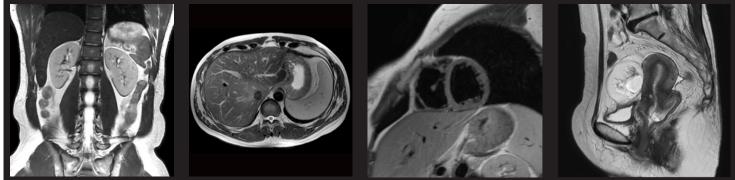
Head Neck Unit Cervical Specifications			
Length	49.5 cm (19.5 in)		
Width	38.8 cm (15.3 in)		
Height	33.6 cm (13.2 in)		
Weight of Cervical Adapter	1.7 kg (3.7 lbs)		
S/I Coverage	28 cm (11 in)		
R/L Coverage	24 cm (9.4 in)		
Head-first or feet-first imaging			

Up to 15 elements in the FOV, when combined with the PA and AA $\,$

Head Neck Unit with Open Fac	e Adapter Specifications
Length	49.5 cm (19.5 in)
Width	38.8 cm (15.3 in)
Height	25.7 cm (10.1 in)
Weight of Open Face Adapter	1.3 kg (2.8 lbs)
S/I Coverage	28 cm (11 in)

Anterior Array





Anterior Array Specifications		
Length	55.6 cm (21.9 in)	
Width	67.4 cm (26.5 in)	
Height	3.3 cm (1.3 in)	
Weight	2.8 kg (6.16 lbs) resting on patient 4.1 kg (9.0 lbs) with cable	
S/I Coverage	54 cm (21.3 in)	
R/L Coverage	Full 50 cm (19.7 in) FOV of the system	
Head-first or feet-first imaging		
Up to 36 elements in the FOV, when combined with the I	PA	

Peripheral Vascular Array*



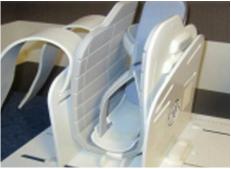
Optional Peripheral Vascular /	Lower Extremity Array
Length	105 cm (41.3 in)
Width	2 nd station: 51.6 cm (20.3 in) 3 rd station: 64.2 cm (25.3 in)
Height	24.8 cm (9.8 in)
Weight	8.4 kg (18.6 lbs)
S/I Coverage	104 cm (49.9 in) overall 2 nd station: 52 cm (20.5 in) 3 rd station: 52 cm (20.5 in)
R/L Coverage	Full 50 cm (19.7 in) FOV of the system
Head-first or feet-first imaging	

Up to 35 elements in the FOV, when combined with the PA

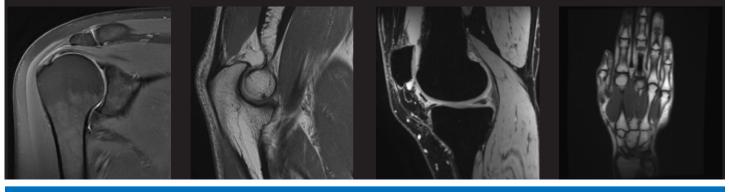


16-channel Flex Coils*





Knee and foot ankle



GEM Flex Specifications				
Coil	Dimensions (W x L)	Wrap Diameter	Elements	Weight
GEM Flex Large	23 cm x 70 cm	15.5 cm – 21.5 cm	16	1.0 kg
GEM Flex Medium	23 cm x 48 cm	11.5 cm – 15.5 cm	16	0.8 kg
GEM Flex Small	23 cm x 38 cm	9 cm – 12.5 cm	16	0.8 kg

32-channel Pediatric Coil Solution*

The 32-channel pediatric coil solution consists of a pediatric stabilizer positioner and interface that accommodates the Large Flex coil and the Medium Flex coil. Compatible with the Silent Suite.



Component	Coverage (W x L)	Wrap Diameter	Elements	Weight
GEM Flex Coil, Large	23 cm x 70 cm	15.5 cm – 21.5 cm	16	1.0 kg
GEM Flex Coil, Medium	23 cm x 48 cm	11.5 cm – 15.5 cm	16	0.8 kg

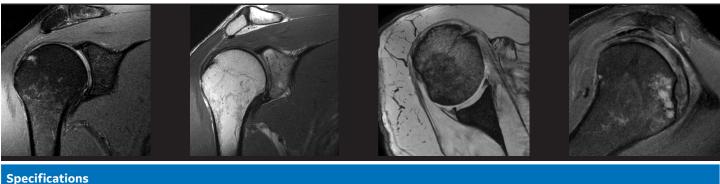
16-channel Shoulder Coil*

The Phased Array 16-channel Shoulder Coil consists of a baseplate that supports a posterior hard shell connected to an adjustable anterior plate, designed to better accommodate the patient anatomy. The baseplate and customized pad provide easy right - left adjustment for off-center positioning.



Benefits

- 16-channel phased array design
- Adjustable anterior plate for ease of positioning
- Parallel imaging compatible for speed

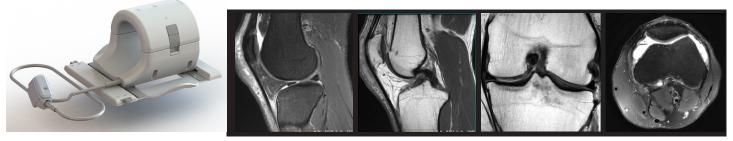


Coil	Approximate dimensions (W x L x H)	Elements	Approximate Weight
16ch Shoulder	28 cm x 28 cm x 31.1 cm	16	3.9 kg

16-channel T/R Knee Coil*

The 16-channel Transmit Receive Phased Array Knee Coil is designed to acquire high SNR images of the knee. It is generously sized to effortlessly accommodate a wide range of the patient population. The two-part design provides a quick and efficient workflow. Offset imaging is fully supported with adjustable left-right coil positioning.

- Transmit Receive 16-channel array design
- Large diameter to better ccommodate anatomy
- High SNR for unique performance
- Parallel imaging compatible for speed

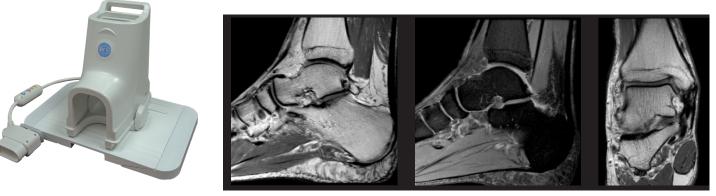


Specifications				
Coil	Approximate dimensions (W x L x H)	Approximate Diameter	Elements	Approximate Weight
16ch T/R Knee	49.2 cm x 50.0 cm x 28.4 cm	15.5 cm	16	7.5 kg

8-channel Foot/Ankle Coil*

The Phased Array 8-channel Foot/Ankle Coil consists of a baseplate and a detachable hard shell coil that is designed for fast and easy positioning, comfortably accommodating the anatomy while providing proper immobilization.

- 8-channel dedicated foot and ankle phased array coil
- Optimized design to accommodate foot and ankle anatomy
- Slide and lock mechanism for easy positioning



Specifications			
Coil	Approximate dimensions (W x L x H)	Elements	Approximate Weight
8ch Foot/Ankle	18 cm x 33.7 cm x 31.4 cm	8	3.1 kg
Baseplate	35.8 cm x 51.5 cm x 33.6 cm	-	3.8 kg

RF Coils Suite (continued)

RF Coils and Arrays*

There are many optional receiver coils available to configure a SIGNA[™] Artist 1.5T to meet specific applications requirements. The coils listed below are commercially available at the time of printing and are optional with the system. Please contact your local GE sales representative for the most current list.



Shoulder Phased Array*

- 3-channel phased-array coil
- Sleeve design
- Comprehensive shoulder imaging
- Homogeneous penetration of the humeral head and neck, rotator cuff, glenoid labrum, acromium process, and glenohumeral articular surfaces



Small Anterior Array*

- Up to 33 elements in the FOV when combined with PA for cardiac and body imaging
- Head first or feet first
- Optimized for parallel imaging
- Anterior coil dimensions (L x W x H) 45 cm x 40.5 cm x 4.5 cm (17.7 in x 15.9 in x 1.8 in)
- Anterior coil weight: 2.95 kg (6.5 lbs)



HD Breast Array*

- 8-channel 8-element phased-array design
- Optimized for uniformity, parallel imaging and VIBRANT
- Bilateral and unilateral breast imaging Biopsy plates available
- Coil dimensions: 50 cm x 54 cm x 25 cm (20 in x 21 in x 10 in)



16-channel T/R Hand Wrist Coil*

- 16-channel phased array coil, local transmit coil
- Prone or Supine positioning
- Optimized design for Fingers through wrist
- High SNR to enable high resolution images
- Parallel imaging compatible for speed
- Coil dimensions: 46 x 14 x 20 cm

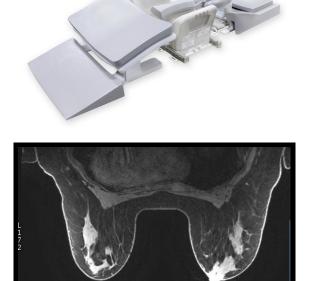
RF Coils Suite (continued)

16-channel Breast Coil with Biopsy*

The 16ch Breast Coil with Biopsy is a phased array coil for imaging structures of the breast, axilla and chest wall. The 16ch Breast Coil is a three part receive-only coil designed to provide high resolution imaging. It includes a coil support structure, patient support structure, biopsy components and comfort pads. The 16ch Breast Coil supports both diagnostic and biopsy imaging modalities while accommodating various anatomic shapes and sizes.

Benefits

- Each phased array is optimized to provide deep penetrating SNR and parallel imaging capabilities in axilla, breast and chest wall areas
- The support structures and pads are modular in nature to maximize the patient experience, giving the patient positioning support and comfort for the breast procedure



nate

MR Enabled Therapy and Accessories

Radiation Oncology Options *

Combining the SIGNA[™] Artist advanced imaging capabilities with the Radiation Oncology Options offering helps minimize potential registration errors between MR and CT within radiation treatment plans, for improved confidence in tumor targeting and preservation of healthy tissue. Additionally, seamless integration with AdvantageSim MDTM simulation software and integrated registration on the GE AW workstation allows MR images to be to easily incorporated into the Radiation Oncology workflow.

Surgical Suite*

The Surgical Suite offering is an effective solution for incorporating MR imaging into your surgery center. Through seamless integration with surgical navigation systems, surgeons can retrieve archived images and fuse them with newly acquired intra operative MR images. This advanced technology can assist in real time surgical procedures.

MR-Guided Focused Ultrasound*

Your facility can offer a completely non-invasive treatment for uterine fibroids with the addition of an Exablate MR-guided Focused Ultrasound therapy table to your MR system, which has been used in 6,500 procedures worldwide.





SIGNA[™] Flow

SIGNA[™] Flow is designed to standardize and accelerate workflow for patient setup, exam prescription, scanning and post processing. eXpress Workflow can begin before the patient enters the magnet room and exams can be completed within a few mouse clicks - delivering quality and consistency for all patients and from all technologists. At the same time, eXpress Workflow maintains the flexibility needed to rapidly adapt and optimize exams for patient specific situations.

Exam Setup

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Modality Worklist

Automated and standardized rapid set up

- Allows the MR protocol to be selected and linked to the patient record in advance of the patient's arrival
- For sites with full DICOM connectivity, select the patient from the Modality Worklist, start a new session and view the relevant exam details on the in-room operator console
- Add critical patient information such as allergies, premedication, pregnancy status and history

 Adult Pediatric 	Head Neck	Filter List by : Standard Quiet Other	Express Vascular	Advance Contrast
	Upper Extremities	Sorted by Alphabetical ▼ 21.5-Volume Imaging 21.1-Spectroscopy 21.6-Ready Brain		
	Abdomen	21.13-Express Brain 21.14-CSF Flow 21.4-Brain-Tumor 21.15-Brain-Stroke		
	Spine Pelvis	 21.18-Brain-Sella 21.2-Brain-Orbits 21.7-Brain-IAC 21.11-Brain-Hippocampus 		
(m)	Lower Extremities	 21.9-Brain-High Res. 21.20-Brain-Hemorrhage 21.10-Brain-General 21.19-Brain-Demyelinating D 	isease	
	Other	 21.17-Brain Vascular 21.12-Brain PROPELLER Series 21.3-Brain Perfusion 		
		 21.8-Brain fMRI 21.16-Brain eDWI options 		
		Protocol Description 21.6-Ready Brain Tasks :3-Plane-Loc Calibration Peorly Prain 2D Loc		

Protocol Tools

Search, select and one click to share

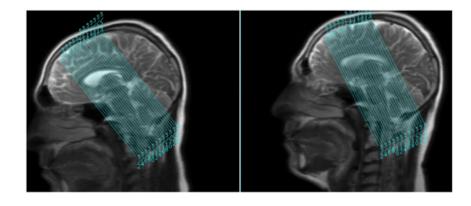
- Protocol Libraries: GE Optimized (preloaded protocols) and Site Authored (customized and saved)
- Protocols can be saved based on patient demographics, anatomy, scan type, or identification number for rapid search
- Commonly used protocols can be flagged for quick selection from the modality worklist
- One-click to share protoCopy enables a complete exam protocol to be shared with the click of a mouse and provides a process for managing protocols across multiple systems as well as saving protocols for back up

AIRx[™]

AIRx (auto graphic Rx) – contains deep learning algorithms that automatically identify anatomical structures to prescribe slices for challenging setup planes, i.e. optic nerve, pituitary, etc.

This offering enables consistency and productivity improvements for routine and follow-up examinations and extends research/clinical capabilities for longitudinal quantification studies.

- Increases productivity by simplifying workflow steps, thus reducing prescription times
- Improves consistency and reduces slice positioning variation amongst different technologists
- Automatically adapts slice prescriptions to various patient anatomies and structures



Patient Setup eXpress Patient Table

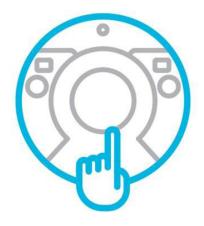
Safety, Comfort and Efficiency

- Reduce patient transfers transfer outside the magnet room directly to the eXpress table
- Accelerate emergency egress can be undocked and removed by one user in under 30 seconds typically
- Automatic coil disconnect in time sensitive situations the system coils are automatically disconnected
- Patient choice feet-first or head-first positioning for all supported exams
- Reduce in-room patient setup and address privacy by fully preparing the patient and coils for an exam outside of the magnet room
- Integrate arm-boards and IV pole to support patient for transport
- Embedded posterior array and multiple high density surface coil connectors
- IntelliTouch landmarking sensors
- Compatible second table, prepare the next patient outside the magnet room while scanning the current patient



Express Patient Table	
Configuration	Detachable and mobile
Minimum & Maximum Height	70 cm to 93 cm continuous
Table Drive	Automated power-driven vertical Automated power-driven longitudinal
Longitudinal Speed	30 cm/sec (fast) and 0.5 cm/sec (slow)
Total Cradle Length	210.8 cm
Total Scanable Range	205 cm
Maximum Patient Weight for Scanning	227 kgs (500 lbs)
Maximum Patient Weight Detached and Mobile	227 kgs (500 lbs)
Maximum Lift Capacity	227 kgs (500 lbs)
Patient Transport Accessories	Self-storing non-ferrous IV pole
	Positioning Pads
	Immobilization Straps
Landmarking	Laser alignment with S/I and R/L alignment
	IntelliTouch touch sensors
Coil Connection Ports	2 high density, auto-sensing ports

Patient Setup (continued)



AIR Touch^{™*}

Intelligent coil localization and selection

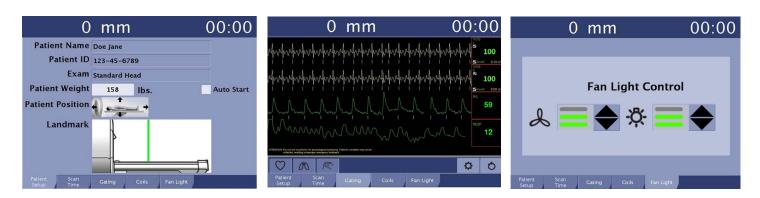
- Dynamically generated coil configurations with elements activated to optimize image quality (coverage, uniformity and parallel imaging acceleration) for every scan
- · Coil locations determined automatically
- Calibration scans seamlessly acquired without interrupting workflow
- Dramatically simplified coil selection UI;no need to touch it for most exams



IntelliTouch

Touch to Landmark

- IntelliTouch sensors for simplified non-laser patient landmarking
- With IntelliTouch technology, the user can touch to complete
 - Patient landmarking
 - Localizing to the surface coil for auto-coil selection
 - Move patient to scan
 - Start scanning (with AutoStart activated)



In-Room Operator Console and Control

Full Control from table side

From the in-room operator console and controls, the user can:

- Position the table
- Return the table to home
- Stop the table movement
- Control multiple levels of in-bore ventilation and lighting
- Display of patient name, ID, study description
- Display patient weight

- Display and entry of patient orientation and patient position
- Cardiac waveform display and ECG/EKG lead confirmation
- Gating control for trigger select, invert and reset
- Respiratory waveform display
- IntelliTouch technology landmarking
- AutoStart to initiate scanning of the selected protocol
- Display connected coils and coil status
- Display of table location and scan time remaining
- Activate Screen Saver

The in-room display also allows for the integration of third-party visualization tools.

In-line Processing & In-line Viewing

In-line Processing

Automated post processing

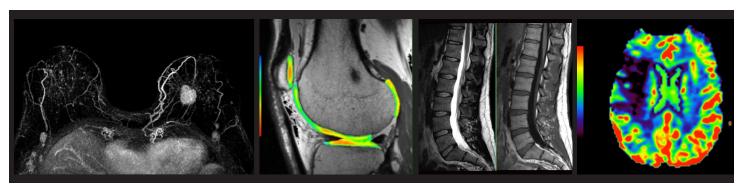
- Automated post processing of specific applications
- Automatic opening and loading to advanced visualization tools when appropriate
- Automated in-line processing can be stored within the protocol

3D ASL series*	Automatic compute and save
Diffusion Weighted series	Automatic compute and save
Diffusion tensor series*	Automatic compute and save
eDWI series	Automatic compute and save
Image filtering: A-E, deFINE	Automatic compute and save
Maximum/Minimum Intensity Projection	Automatic compute and save
Reformat to orthogonal plane	Automatic compute and save
T2 map for cartilage evaluation*	Automatic compute and save
3D Volume Viewer	Automatic load
BrainStat	Automatic load
FiberTrak*	Automatic load
Image Fusion	Automatic load
Interactive Vascular Imaging	Automatic load
Pasting	Automatic load

In-line Viewing

Enhanced Visualization

In-line viewing allows the user to seamlessly and conveniently view, compare, and analyze images (during scan progress). The user simply selects the series, or multiple series, to view from the workflow manager, and the images are displayed along with the image display



Scanning Workflow Manager

Linking and Auto Functions

AutoStart	Automatically initiates scanning of the selected protocol upon closure of the scan room door.
AutoCoil	Automatically determines the optimum coil elements to activate for scanning. If the prescribed field-of-view changes, AutoCoil automatically adjust the selection. The user has the option to review and edit the selection.
AutoScan	Automatically scans the prescribed series without user interaction. For series requiring a contrast injection, the Workflow Manager will pause and await user interaction.
Auto-calibration	For acquisitions that utilize ASSET parallel imaging or PURE surface coil intensity correction, Auto-Cal will prescribe and acquire a calibration scan based on the prescribed imaging volume.
AutoVoice	Delivers user selected, pre-recorded instructions to the patient at defined points in the acquisition to help ensure exam consistency. AutoVoice includes instructions in 14 languages and also allows the user to create and save unique instructions for specific local needs.
PB Navigators	Enable free-breathing body imaging for patients unable to breath-hold. The diaphragm tracker pulse automatically places and updates to streamline workflow and eliminate the setup time associated with respiratory triggering. Auto Navigators can be used with a broad range of imaging techniques including dynamic contrast enhanced T1-weighted imaging.
READYBrain	Automates localizer acquisition, scan plane prescription, scanning, and post processing for brain exams. READYBrain automatically calculates the mid-sagittal plane and determines the AC-PC line/OM line for 2D/3D prescription as well as corrects for extreme (>45 degree) rotation.
QuickSTEP	Automatically prescribes, acquires, and combines images from multiple stations. QuickSTEP acquires mask datasets and then secondary datasets from multiple stations (same locations), and automatically subtracts the mask datasets from the secondary datasets to create one subtracted series.
eXpress Prescan 2.0	Reduces pre-scan time for FSE-based techniques by up to 40% with a new calibration algorithm that reduces pre-scan time and consequently overall exam time.
Pause and Resume	Allows the user to pause a scan in progress, to respond to a patient need, and then resume mid-scan (without repeating scan).

Visualization

READYView on MR Operator Console

Integrated Post Processing & Advanced Visualization

READYView is an image analysis software that allows the user to process dynamic or functional volumetric data and to generate maps that display changes in image intensity over time, echo time, b-value (diffusion imaging), frequency (spectroscopy). The combination of acquired images, reconstructed images, calculated parametric images, tissue segmentation, annotations and measurement performed by the clinician allows multiparametric analysis and may provide clinically relevant information for diagnosis.

- Automatically selects the most relevant post processing protocol*
- Provides guided workflow and general assistance for the processing algorithms
- Multiparametric protocols selection for Brain, Breast, Liver, Knee and Pelvis studies when two or more functional series are present
- MR general review enables efficient reading of multi-contrast exams based on Smart Layout Technology
- One-click to select and process functional data
- One-click to save all generated parametric images
- One-click to save and restore the state of processed images at any stage
- One ROI display all multi-parametric images and get all related functional values from a single ROI
- Export display and export ROI statistics from the summary table
- Export graph values as csv files



Benefits

- 3D ROI
- 3D Reformat MPR
- Auto-contour
- Distortion Correction
- Fusion & Registration
- MIP & HD MIP
- Motion Correction
- Multiparametric protocols
- Multiple graphics display
- Ratio AB/CD
- Reformat & Graphview
- Subtraction
- Volume Rendering
- Volume segmentation ROI

* When only one protocol is compatible with the selected data, the access is made through the One-Touch mode. If more than one protocol is compatible, the Protocol page opens for user selection.

READYView

Standard Protocols

READYView One-Touch

Protocols uses display intelligence with pulse sequence, image contrast and scan plane recognition to enable direct access between a unique post processing that is associated with the series selection.

One-Touch ADC and eADC

Provide algorithms to process DWI images to generate ADC maps and eADC maps to eliminate T2 "shine through" in the isotropic (trace) DWI.

One-Touch ASL*

ASL READYView has algorithms that calculate Cerebral Blood Flow maps from a 3D ASL series. ASL acquisition is a noninvasive, one-click application that allows whole brain CBF measurements.

One-Touch Brain*

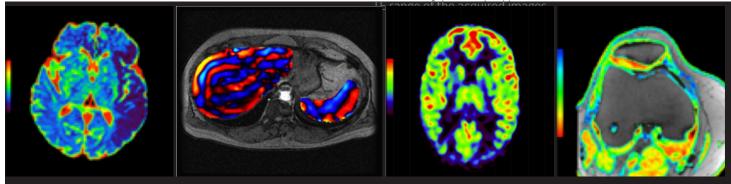
The READYView Brain protocols are used to display functional maps for metabolites and metabolite ratios in the brain.

One-Touch MR-Touch*

READYView MR-Touch is a post process of an MR-Touch acquisition, which is a Phase Contrast (PC) application that generates an image contrast related to the shear stiffness of soft tissue. An algorithm is used to derive a relative stiffness map (Elastogram) and wave images from the phase images.

One-Touch T2 MAP*

The READYView T2 Map protocol post processes data sets acquired using the T2 Map (CartiGram) application. The T2 Map acquisition is displayed in READYView, where the T2 relaxation time color map is coded to capture T2 values from the



READYView (continued)

BrainStat

BrainStat is an MR Time Course imaging READYView protocol that provides accurate spatial resolution for brain tissue viability given by hemodynamic parameters: BV, BF, TTP, MTT (SVD), BAT, Tmax. These hemodynamic parameters can provide unique information on tissue changes and improve delineation of vascular-deficient or vascular-rich regions in normal and abnormal anatomy.

MR Standard

MR Standard is a time course protocol. The READYView MR Standard is a time course protocol that can be used to create the following maps: enhancement integral (negative and positive), time to peak, mean time to enhance, maximum slope of increase, maximum slope of decrease.

SER

SER is a time course protocol for analyzing T1-contrast changes. The READYView SER protocol can be used to create the following maps: Positive enhancement integral, signal enhancement ratio and maximum slope of increase.

FiberTrak*

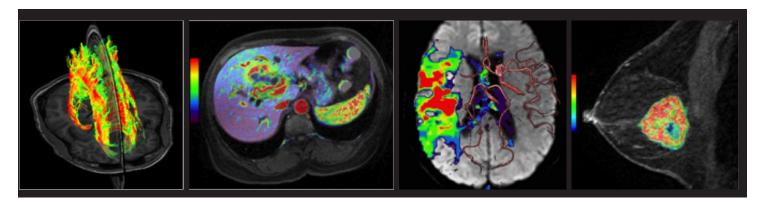
FiberTrak is designed for the advanced analysis of MR images acquired with a DTI technique. It allows for processing of isotropic, ADC and FA maps among other options. The FiberTrak option augments this functionality to allow DTI processing to create: 2D color orientation maps, 2D color eigenvector maps and 3D tractography maps.

fMRI*

Functional imaging or BOLD provides fMRI analysis using the correlation coefficient algorithm to analyze an image set. Neuronal activity of either motor or cognitive functions can be mapped by fMRI through changes in signal intensity. The resulting functional maps can be used for mapping the motor cortex and higher cognitive regions of the brain.

R2 Star*

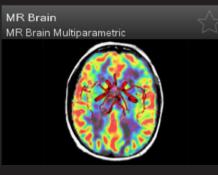
The R2 Star feature uses water proton transverse relaxation rates (R2) technique. It provides parametric maps for R2* (Hz) and T2* (ms). The R2* values vary with tissue characteristics such as iron concentration.



READYView (continued)

Multiparametric Protocols: Visualization at a Glance

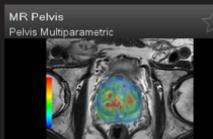
READYView multiparametric protocols provide a guided workflow to streamline post processing and analysis of multiparametric studies. All measurements can be obtained with one ROI and the user customizable workflow has the ability to display all processed maps in one screen.



MR Brain* Diffusion, Perfusion, Brain Spectroscopy, Brain SVQ DTI and ASL



Diffusion, R2 star or MR Touch



MR Pelvis* Diffusion, Perfusion, and Prostate Spectroscopy



MR Breast* Diffusion, SER and Breast SVQ



MR Knee* T2 Map

Siting

Siting and Other Specifications

Typical Room Layouts	
	System configuration minimum values
Magnet Room W x D	20.3 sq.m
Minimum Ceiling Height	2.5 m (8 ft. 2.4 in) min ceiling height
Equipment Room	7.9 sq.m
Control Room	3.2 sq. m

Fringe Field

	Axial	Radial
0.5 mT (5 Gauss)	4.0 m	2.5 m
0.1 mT (1 Gauss)	5.8 m	3.2 m

Electrical Supply Requirements

Supply system recommended configuration:

• 3-phase grounded WYE with neutral and ground (5-wire system)

Note: Neutral must be terminated inside main disconnect control

Alternate configuration:

- 3-phase DELTA with ground (4-wire)
- Recommended grounded delta configuration
- Voltage: 480/415/400/380/Vrms

Power Consumption / Water Requirements

Power consumption depends on actual usage. The following values are approximate:

Maximum continuous sustained power (> 5 secs)	99 kVA
Heat shield compressor	9 kVA
Maximum heat removal to customer-supplied water	49 kW
Water Flow	114 liters/min (30 gpm) min at max temperature of 10 °C

Workspace Monitor Positions

LCD flat panel monitor

Maximum field strength

5 mT (50 Gauss)

Temperature and Humidity Requirements					
	Magnet Room	Control Room	Equipment Room		
Temperature	15 - 21 °C	15 - 32 °C	15 - 32 °C		
Max. Temperature Change Rate	3 °C / hour	3 °C / hour	3 °C / hour		
Humidity (non-condensing)	30 - 60 %	30 - 70 %	30 - 70 %		
Max humidity change rate	5% RH/hr	5% RH/hr	5% RH/hr		
Altitudo Poquiron					

Altitude Requirements				
Upper limit	2600 m			
Lower limit	-30 m			

Miscellaneous

Alternative environments

Modular buildings may also be available (including airconditioning, heating, chiller, RF shielding, additional magnetic shielding in walls). Contact your local GE representative for GEcertified designs and vendors.

Please ask your local GE project manager for a comprehensive installation and siting manual.

Filming considerations

Filming requires the SIGNA™ Artist analog or digital filming.

Interface (purchased separately) unless DICOM Print will be used exclusively for software filming to DICOM Print peripheral devices. An Analog/VDB or Digital/LCAM Camera Interface is typically required for most installations.

Accessory Package

- SPT phantom set with storage cart
- Customer diagnostic software
- Operator manuals
- Patient log books

Emergency stop

Disconnects electrical power from RF and gradient components in the magnet room (duplicate control at the magnet).

Warranty

The published GE warranty in effect on the date of shipment shall apply. GE reserves the right to make changes.

InSite* Remote Diagnostics

GE's unique remote service and applications support including magnet monitoring. Also allows downloading of applications software such as eFlexTrials program.

Accessories package

A comprehensive suite of MR compatible accessories is available on the SIGNA[™] Artist. Please contact your GE representative for details.

GE regulatory compliance

The SIGNA[™] Artist complies with all applicable safety standards including but not limited to IEC60601-1, IEC60601-1-2 (Electromagnetic Compatibility), and IEC 60601-2-33 (MR).





Imagination at work

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