

SIGNA™ Artist

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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 short, 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 50 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	145 cm
Operating field strength	1.5T (63.86 MHz)
Magnet shielding	Active
EMI shielding factor	96%
Size (W x L x H)	2.10 m x 1.45 m x 2.36 m
Magnet weight with cryogens	8,590 lbs (3,896 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 = 5.7 m x 3.4 m
Manufacturer	GE Healthcare

Spatial Accuracy		
Mean absolute distortion error	0.63%	

As measured using the Magphan phantom

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	0.11	0.18
40 cm DSV	0.5	0.7
45 cm DSV	1.2	1.6
50 x 50 x 45 cm	2.3	3.6
50 cm DSV	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

*Under normal operating conditions 3

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 (x,y,z)	50 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	

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 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	
Simultaneous RF Receivers (A/D Converters)	Up to 128
Receiver sampling per channel	80 Mhz
Quadrature demodulation	Digital
Receiver dynamic range at 1 Hz BW	> 165 dB
Receiverresolution	Up to 32 bits

Standard RF transmit arch	nitecture
RF Amplifier	Water cooled, small footprint
Maximum output power	16 kW Body
	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,
rigital Ni puise 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 $^{\text{TM}}$ Artist 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 Gen6		
	PERFORMANCE	ADVANCED*
Operating system	Scientific Linux	Scientific Linux
Processor	Intel® Xeon® E5-2680 v3 (12 core) x 2	Intel® Xeon® E5-2967 (2 x 14 core)
Clock rate	2.5 GHz	2.6 GHz
Memory	160 GB	256 GB
Network	1 GbE	10 GbE
Hard disk storage	2 x 400 GB SSD	3 x 400 GB SSD
2D FFT/second (256 x 256 full FOV)	62,000 2D FFTs/second	75,000 2D FFTs/second
GPU	NA	NA

Host Computer	
Operating system	Scientific Linux (RT)
Processor	Intel® Xeon® E5-1620 v3 (4 core, 8 threads)
Clock rate	3.5 GHz
Memory	32 GB
Network	Gigabit (10/100/1000) Ethernet
Hard disk storage	1024 GB SSD
Graphics subsytem	PCI-Express x16 2GB Single DVI-I 3D
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.

Computing Platform

le

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, pausescan, stop-scan, and table advance to isocenter hot keys are also

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

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

orientation, user annotation and window

Image display performance	256 Image buffer (256 x 256) at 30 fps
	Shadowed to permit ease in reading
	Two graphic/text planes overlay the entire
	screen
Image annotation	Grid placement with anatomical reference on an image
	Drawing and annotation may be added to
	and removed from images

retrieve as well as send with storage commit to integrate with the Drag and Drop filming One-button Print Series One-button Print Page display allowing the user to refer to cross-modality studies. Filming Multi-image formate - from 1 to 2/1 images

displayed simultaneously in various layouts

DICOM Basic Grayscale Print Service Class

AutoView	Dedicated image review window		DICOM Basic Grayscale Plint Service Class
	keyboard plus one key for returnin	Wide-screen disp	olay monitor
	6 user-programmable buttons in image	Display monitor	24" Widescreen LCD Flat Panel
Window/Level (W/L)	viewer Arrow keys on scan control keyboard		1920 x 1200 dot resolution
	On-image through middle mouse button		
	Save State stores user-selected image		

DICOM Basic Color Print Service Class

6 user-programmable keys on scan control setting

Zoom/Roam/Flip/Rotate/Scroll Explicit Magnify and Magnifying Glass

Image Measurement Tools Grid On/Off

Cross Reference/User Annotation Exam/ Series Page

Hide Graphics/Erase Annotation/Screen

Image display

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

Scan Parameters

Sequences	Parameters	Matrix 64	Matrix 128	Matrix 256	Matrix 512
2D Chin Echo	Min. TR (ms)	N/A	3.0 ms	4.0 ms	5.0 ms
2D Spin Echo	Min. TE (ms)	N/A	1.608 ms	1.952 ms	2.792 ms
	Min. TR (ms)	N/A	3.0 ms	4.0 ms	6.0 ms
	Min. TE (ms)	N/A	1.608 ms	1.952 ms	2.792 ms
2D Fast Spin Echo	Min. slice thickness 0.2 mm				
	Min. ESP (ms)	N/A	1.608 ms	1.952 ms	2.792 ms
	Max. ETL	N/A	480		
	Min. TR (ms)	N/A	48.0 ms	53 ms	75 ms
	Min. TE (ms)	N/A	4.7 ms	6.0 ms	9.6 ms
3D Fast Spin Echo	Min. slice thickness		0.	3 mm	
ob rast spiii Eciio	Min. ESP (ms)	N/A	1.8 ms	2.4 ms	3.8 ms
	Max. ETL	N/A	399	399	399
	Min. TR (ms)	0.57 ms	0.69 ms	0.92 ms	1.332 ms
ZD Fast Gradient Ecno	Min. TE (ms)	0.184 ms	0.184 ms	0.188 ms	0.192 ms
	Min. TR (ms)	0.56 ms	0.68 ms	0.92 ms	1.30 ms
3D Fast Gradient Echo	Min. TE (ms)	0.184 ms	0.184 ms	0.18 ms	0.184 ms
	Min. slice thickness		0.	1 mm	
	Min. TR (ms)	N/A	57.0 ms	58.0 ms	59.0 ms
nversion Recovery	Min. TE (ms)	N/A	1.608 ms	1.952 ms	2.792 ms
ŕ	Min. TI (ms)	N/A	50.0 ms	50.0 ms	50.0 ms
	Min. TR (ms)	0.97 ms	1.27 ms	1.96 ms	3.360 ms
SD FIESTA	Min. TE (ms)	0.248 ms	0.324 ms	0.444 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 cm	
	ESP at 25 cm	0.456 ms	0.656 ms	1.056 ms	N/A
cno Planar Imaging	ESP at 48 cm	0.328 ms	0.460 ms	0.672 ms	N/A
	ESP at 99 cm	0.228 ms	0.320 ms	0.556 ms	N/A
	Images per second	130	60	31	N/A
	b value Maximum (s/mm²): 10.000 Max # for ADC: 40				
	Diffusion Tensor directions	Max: 150			
	SLICE	THICKNESS and F	OV		
Minimum slice thickness i	in 2D				0.1 mn
Minimum slice thickness i	in 3D				0.1 mn
Min/Max FOV					10 mm/500 mn
Min/Max Matrix					32-102

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 inline 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 Imaging		
	PD, T1, T2, T1 FLAIR and T2 FLAIR	
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	
BRAVOT1	BRAVO, 1 mm isotropic sequence of choice for functional data overlay	
	3D reformat MPR	
Visualization	Volume segmentation	
	Volumerendering	
	Auto-contour	

Dynamic Brain Fu	nction
BrainSTAT	Blood flow
	Blood volume
Perfusion and	Mean transit time
Analysis	Time to peak parametric
	Fusion
BrainSTAT Arterial	Manage tracer arrival differences due to patient flow dynamics
Input Function (AIF)	Automatically or manually specify the AIF to normalize maps
Visualization _	Brain STAT
Spectroscopy	
PROBE PRESS	Concentrations of in-vivo metabolites evaluation
	Acquisition and display
	Reduced flip angles for lower min TE values
	Up to twice the SNR when compared to PROBE STEAM
Visualization	Brain Spectroscopy

Enhanced Diffusion 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 Protocol

READYBrain	Automated multi-series, multi-plane prescription
	Combine with Auto Scan for one touch protocol
	In-line for Auto Post processing

Motion Correction	on
	Multiple contrasts – T1, PD, T2, T1 FLAIR, T2 FLAIR and DWI
PROPELLER MB	Motion reduction
	Magnetic susceptibility effects reduction
Visualization	Registration
	Motion correction

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 Imaging			
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		
	Volume rendering		
	Auto-contour		

Motion Correction	on .
PROPELLER MB	Motion reduction
Auto Navigator	Free breathing tracker
Respiratory Trigger	Free breathing bellows
Visualization	Registration
	Motion correction

Enhanced Diffusion Imaging			
	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		
	Fusion		

Dynamic Body Imaging	
LAVA	SPGR Fast Liver Acquisition
	SPECIAL for robust fat suppression
LAVA Turbo	ARC acceleration for full organ coverage
	Shorter breath-holds
Multi Phase Dynaplan	Customizable phase delay for dynamic studies
	Series per phase
	Auto subtraction
	Pause after mask
Visualization	MR standard
	SER

Non-Invasive Non	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
Visualization	3D Reformat MPR
VISUdIIZaLION	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 Time of Flight and additional non-contrast imaging for flow. With SmartPrep and Fluoro triggering enabled for first time right contrast injections.

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

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

Viability Imaging	
CINE IR	Multiphase FGRE Cine acquisitionquick 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

T2* Mapping	
StarMap	T2* mapping compatible with gating for cardiac evaluation
	Non-invasive evaluation of the entire organ
READYView	R2 Star

Navigator Free Breathing Acquisition	
PB Navigators	Used with 3D IR Prepared FGRE or 3D FatSat FIESTA
	Free breathing navigator diaphragm tracking

Flow Imaging	
Flow Analysis*	Flow velocity and volume flow quantification
	Peak and average flow charts and graphics
	Automated contour detection
	Brain, chest and abdominal clinical applications

Contrast Enhancement Tracking	
SmartPrep	Automated bolus tracking
Fluoro triggered	Real Time bolus tracking
Visualization	MIP & HD MIP

Peripheral Vascular Runoff	
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

Non Contrast Vascular Imaging	
2D TOF	Carotid bifurcation, venous anatomy, aortic arch, peripheral vessels
3D TOF	Circle of willis, intracranial vasculature, abdominal vasculature
3D TOF Multi Slab	Intracranial vasculature, carotid bifurcation, aortic arch, peripheral vessels, venous anatomy
2D Phase Contrast	Localizer, flow direction and velocity for intracranial and extracranial vasculature, portal or hepatic vein, quantitative measurement of flow velocity
3D Phase Contrast	Intracranial vasculature, renal arteries
Visualization	MIP & HD MIP

OrthoWorks

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 Imaging			
	Vol	limetric	maging
	U U	difficult ic	

PD, T1, T2

Motion Correction	
	One seguence, retormat in all planes Multiple contrasts – T1, PD, T2
PROPELLER MB	3D reformat MPR Motion reduction
Visualization	Volume segmentation Registration
Visualization	Volumerendering

T2*-weighted In	naging
3D MERGE	High SNR T2* contrast
	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
Visualization	3D reformat MPR
	Volume segmentation
	Volume rendering
Artifact Reduction Standard Sequence	
MADC	FSE High bandwidth protocols
MARS	H: 1 1: HEOV: :

	High resolution, small FOV imaging
Fat Supression	
Chemical FatSat	Frequency selective fat saturation
STIR	Inversion recovery fat null point method
ASPIR	Solution for poor fat suppression due to B_1 inhomogeneity
SPECIAL	Hybrid method between chemical FatSat and STIR
Spectral Spatial	Water excitation only

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 and T2 FLAIR
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	BRAVO, 1 mm isotropic sequence of choice for functional data overlay
Visualization	3D reformat MPR
	Volume segmentation
	Volume rendering
	Auto-contour

Enhanced Diffusion 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		
Multi phace SDGD	SPGR dynamic fast acquisition	
Multi-phase SPGR	SPECIAL for robust fat suppression	
Visualization	MR standard	
VISUAIIZALIOII	SER	
Whole Body Scanning		
FCF ID/7D CDCD/	Whole body imaging	
FSE-IR/3D SPGR/ DWI	Multiple stations with large FOV	
D v v i	Metastasis screening	

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 Imaging	
	PD, T1, T2, T1 FLAIR and T2 FLAIR
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	BRAVO, 1 mm isotropic 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	n
PROPELLER MB	Motion reduction
Auto Navigator	Free breathing tracker
Respiratory Trigger	Free breathing bellows
Visualization	Registration
	Motion correction

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

Dynamic Brain Fu	nction
	Blood flow
BrainSTAT	Blood volume
Perfusion and	Mean transit time
Analysis	Time to peak parametric
	Fusion
BrainSTAT Arterial	Manage tracer arrival differences due to patient flow dynamics
Spectroscopy	
Visualization	កូចក្រុមក្រុមក្រុមក្រុមក្រុមក្រុមក្រុមក្រុម
PROBE PRESS	Acquisition and display
	Reduced flip angles for lower min TE values
	Up to Twice the SNR when compared to PROBE STEAM
Visualization	Brain spectroscopy

Spine Imaging	
2D/3D MERGE	High SNR T2* contrast
	Gray/white matter differentiation
	Foraminal detail
3D COSMIC	SSFP to emphasize T2 signal for improved contrast
	Nerve root and disc detail
Visualization	3D reformat MPR
	Volume segmentation
	Volume rendering

SIGNA™Works Features

HyperSense*

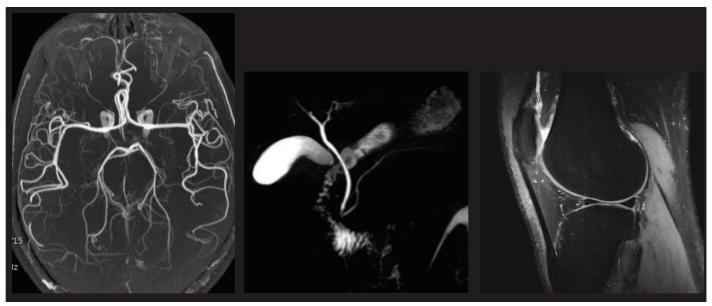
Going further than common sense

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



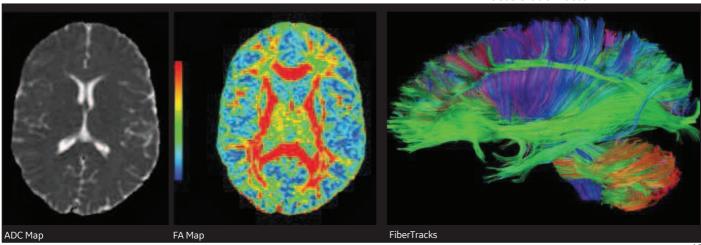
HyperBand*

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.

Benefits

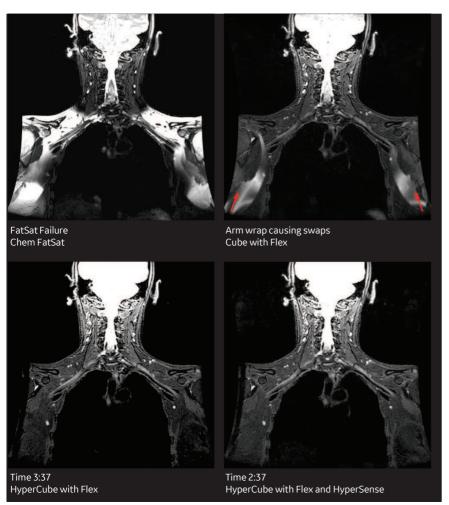
- Simultaneous excitation: multiple slices at multiple locations
- Acquisition time reduction without compromising post processing metrics
- More diffusion directions, number of slices or higher temporal resolution without extra scan time
- Shorter breath-holds
- Combine with ARC for higher acceleration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



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.



Benefits

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

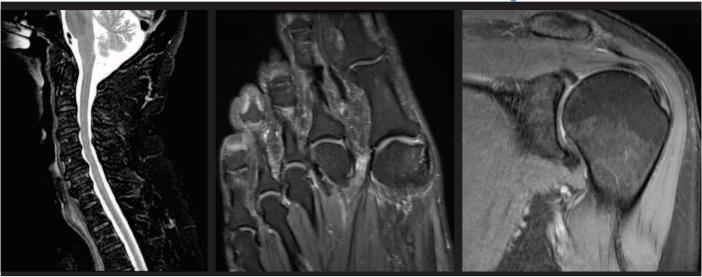
Flex for Cube and FSE*

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 clinical areas.

Benefits

- 2D and 3D dual echo fat-water separation technique
- Uniform fat suppression for large FOV challenging offcenter anatomies
- Dixon-based, less sensitive to B₀ inhomogeneity
- Choice of single pass acquisition for significant scan time reduction
- Water, Fat, in-phase and out-of-phase images

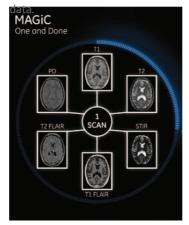


MAGiC*

One and Done

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 interacquisition 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



One MAGiC scan defivers six contrasts

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)

MAGIC DWI*

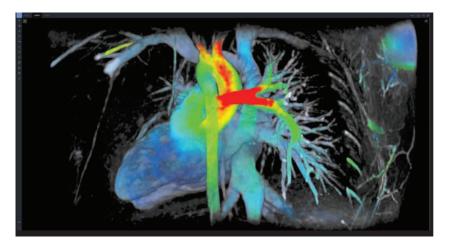
MAGIC DWI generates multiple synthetic b-values from a single DWI scanned series allowing the user to view diffusion contrasts changes in real time after the acquisition. It delivers high b-values without stressing protocol parameters and resulting in shorter scan times without sacrificing contrast or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

Synthetic b value = 1000 Synthetic b value = 1400 Synthetic b value = 2000 DWI B700 Synthetic b value = 2000 Synthetic b value = 2000

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

Benefits

- 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.

Benefits

- Quantitative measurement of T1 and T2 relaxation times
- Automatic motion correction for T1 Mapping
- Two methods of acquisition for T1* or true T1 measurements

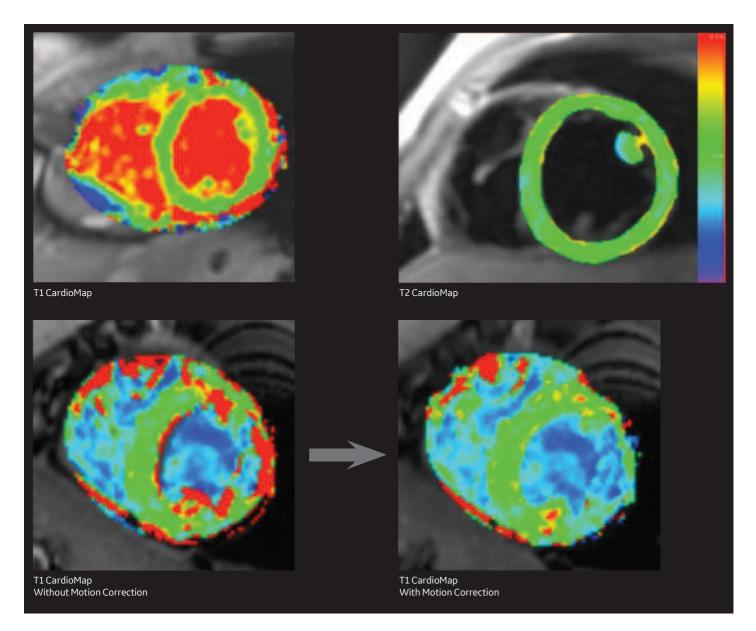


Image Acquisition

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	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*	Multi-Spectral imaging technique designed to reduce metal artifact near MR conditional implants. The sequence provides T1, PD or STIR contrast.
3D ASL*	3D FSE based technique that uses a "labeling" pulse to quantify cerebral blood flow.
Gradient Echo	
2D and 3D GRE/SPGR 3D GRE Dual Echo 2D and 3D FGRE/FSPGR 2D MFGRE (Multi Echo) 2D CINE GRE/SPGR	Gradient echo basic techniques offer a variety of possibilities to support imaging of all anatomies and can be acquired in 2D, 3D and Cine modes. The sequences generate T1 or T2 contrasts and support single, dual and multi echo acquisitions.
2D and 3D MDE	Myocardial delayed enhancement is a technique used for tissue characterization to provide the assessment of myocardial perfusion.

Gradient Echo			
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	ast imaging employing steady-state acquisition generates great contrast differentiation between tissues of bw T2/T1 ratios and high T2/T1 ratios. Provides high SNR images in short acquisition times. FIESTA sequences ffer 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 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 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.		
3D VIBRANT*	Simultaneous bilateral breast imaging technique in the Axial and Sagittal plane. SPECIAL and dual-shim volume capabilities provide homogeneous fat suppression.		
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.		

Gradient Echo				
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*	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.			
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.			
2D TOF 2D Gated TOF 2D Fast TOF FGRE/SPGR 3D TOF 3D Fast TOF FGRE/SPGR	2D TOF Imaging, 2D Gated TOF Imaging, 3D TOF Imaging and Enhanced 3D TOF Imaging are used for MR angiography imaging. Based on conventional gradient echo scanning, TOF imaging techniques rely primarily on flow-related enhancements to distinguish moving from stationary spins.			
2D CINE Phase Contrast 2D FastCINE Phase Contrast	This pulse sequence is included specifically for studies of cardiac function. Through the use of retrospective gating, it allows full R-R coverage.			
2D Phase Contrast 3D Phase Contrast	These techniques demonstrate flow velocities and directional properties in vessels and other moving fluids such as CSF and aortic flow.			

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 150 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 a 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*	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.		
Cilon=*			
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 Technology			
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 are 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 Techn	ology			
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. 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 acquired for scan time reduction.			
ASSET	Array spatial sensitivity encoding technique acquires under sampled multicoil data generating aliased image. 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-calibration 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.			
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*	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.			
HyperCube*	Small FOV organ specific volumetric imaging acquisition method that enables outside phase FOV HyperCube signal suppression. The technique can help to reduce artifacts originated outside of the prescribed field of view.			

Uniformity Correction Technology				
SCIC	SCIC is a method that uses statistics from the actual image for inhomogeneity correction. It uses an optimized set of parameters for tuning that are defined according to the different anatomies and coils.			
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.			
Noise Reduction Technolo	egy			
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.			

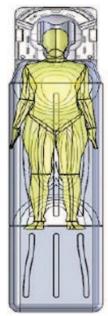
RF Coils Suite

eXpress Table & Posterior Array

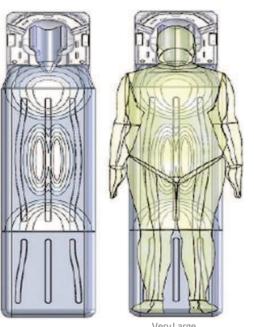
- Detachable table with embedded posterior ar
- 100 cm S/I Coverage
- 40 Elements with dedicated spine configurati c
- Head-first or feet-first
- Automatic coil mode selection
- Acceleration in all directions
- Patient-centric comfort pads



Comfort Pads



Petite Female



Male



Head & Neck Unit





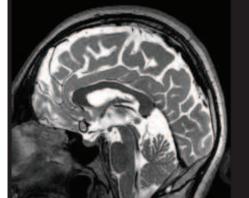


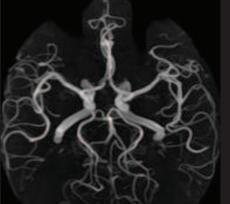


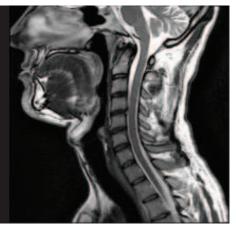
Head and Neck NV with Comfort Tilt

Head and Neck

Cervical Open Face







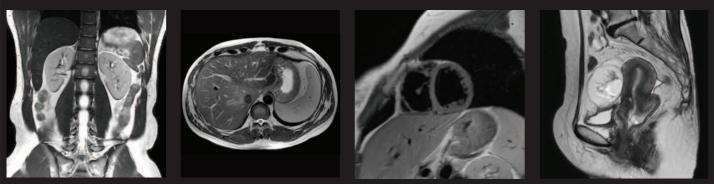
Head Neck Unit NV Specifications		
Length	49.5 cm (19.5 in)	
Width	38.8 cm (15.3 in)	
Height	36.8 cm (23.9 in)	
Weight of HNU base	5.0 kg (11 lbs)	
Weight of Anterior Adapter	2.6 kg (5.8 lbs)	
S/I Coverage	50 cm (19.7 in), when combined with the PA and AA	
R/L Coverage in head mode	24 cm (9.4 in)	
R/L 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 Face 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)		
R/L Coverage	24 cm (9.4 in)		
Head-first or feet-first imaging			
Up to 19 elements in the FOV, when combined with the PA			

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 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			

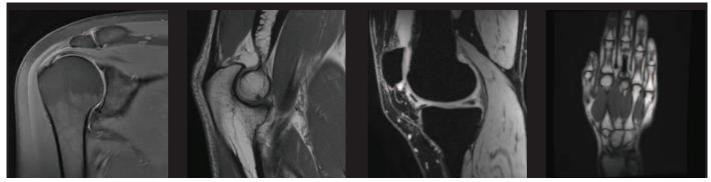


16-channel Flex Coils*





Knee and foot ankle positioner



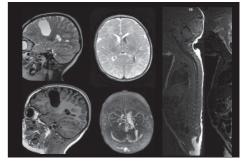
GEM Flex Specifications	;			
Coil	Dimensions (W x L)	Wrap Diameter	Elements	Weight
GEM Flex Large	23 cm x 70 cm	15.5 cm – 21.5 cm	16	1.0 kg
GEM Flex Medium	23 cm x 48 cm	11.5 cm – 15.5 cm	16	0.8 kg
GEM Flex Small	23 cm x 38 cm	9 cm – 12.5 cm	16	0.8 kg

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.







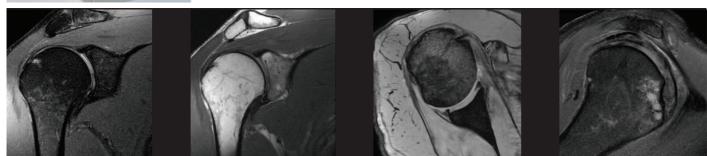
GEM Flex Specifications					
Component	Coverage (W x L)	Wrap Diameter	Elements	Weight	
GEM Flex Coil, Large	23 cm x 70 cm	15.5 cm – 21.5 cm	16	1.0 kg	
GEM Flex Coil, Medium	23 cm x 48 cm	11.5 cm – 15.5 cm	16	0.8 kg	

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



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

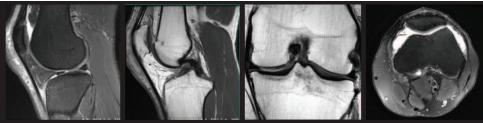
16-channel T/R Knee Coil*

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.

Benefits

- 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*

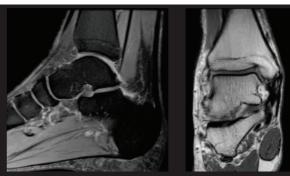
The Phased Array 8-channel Foot/Ankle Coil consists of a baseplate and a detachable hard shell coil that is designed for fast and easy positioning, comfortably accommodating the anatomy while providing proper immobilization.

Benefits

- 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 \times L \times 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

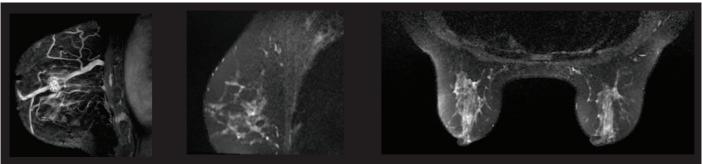
16-channel Sentinelle Breast Coil*

The 16-channel Sentinelle Breast tabletop supports different coil configurations to provide optimal performance for high resolution bilateral, unilateral and biopsy mode breast imaging.



Benefits

- Variable coil geometry optimized for parallel imaging
- Ease access for breast biopsy procedures
- Visco-elastic padding for improved patient comfort
- High SNR, lower scan time and uniform fat suppression



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

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.

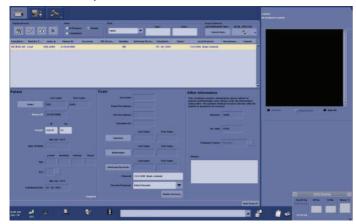




SIGNA™ Flow

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



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, pre-medication, pregnancy status and history



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

Patient Setup

eXpress Patient Table

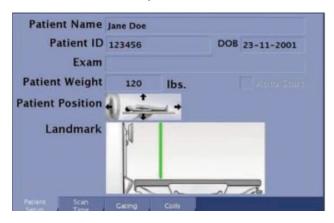
Safety, Comfort and Efficiency

- 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

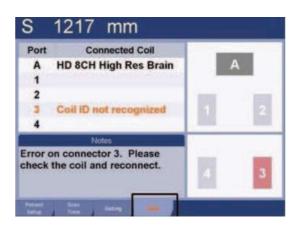
Patient Setup (continued)



RF Coil Suite

Multi-station coverage with one set-up

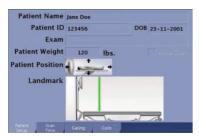
- Less coil lifting posterior array is embedded in the Comfort Plus patient table, eliminating the need to remove the coil
- Confirm coil connection automatic information when coils are properly connected
- Head first/feet first scan patients can be scanned feet-first or head-first for all supported exams

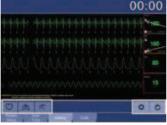


IntelliTouch

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)
 - · Acquire, process and network images









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 and entry of 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

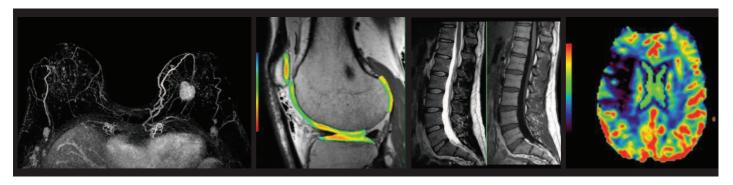
- Automated post processing of specific applications
- Automatic opening and loading to advanced visualization tools when appropriate
- Automated in-line processing can be stored within the protocol

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, SCIC, 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 tools.



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
- Customize workflows with adjustable layouts, personalized parameter settings, and custom review steps

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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 non-invasive, one-click application that allows whole brain CBF measurements.

One-Touch Brain*

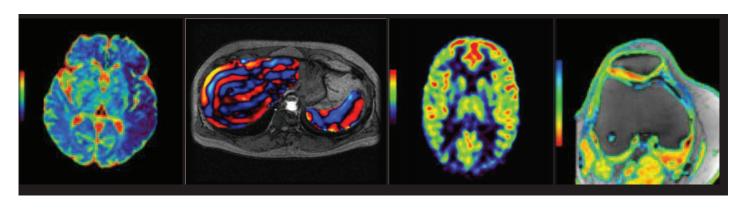
The READYView Brain protocols are used to display functional maps for metabolites and metabolite ratios in the brain.

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 TE range of the acquired images.



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*

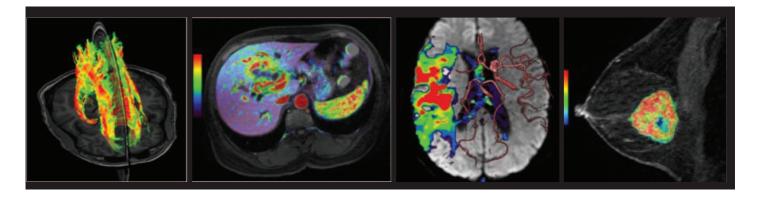
Functional imaging or BOLD provides fMRI analysis using the correlation coefficient algorithm to analyze an image set.

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*

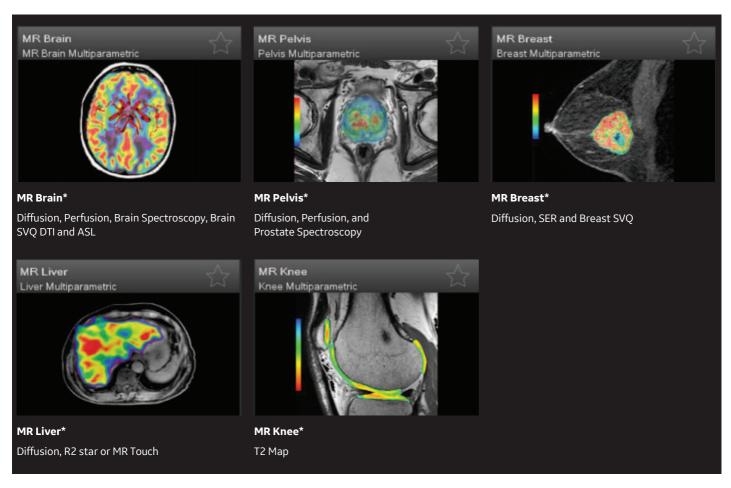
The R2 Star feature uses water proton transverse relaxation rates (R2) technique. It provides parametric maps for R2* (Hz) and T2* (ms). The R2* values vary with tissue characteristics such as iron concentration.



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.



 $^{^{\}star}$ Optional and requires two or more of the functional series selected.

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)	5.7 m	3.4 m

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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	on / Water	r Requirem	ents
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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	
	Maximum field strength
LCD flat panel monitor	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	

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 $^{\text{\tiny{TM}}}$ 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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