






Figure 3-6 Tilting the Monitor

■ To adjust the brightness and contrast

Perform the following steps:

1. Press the  button on the lower side of the monitor to enter the monitor menu.
2. Press the  button to select the brightness or contrast, and press the  button to activate the parameter.
3. Press the  button to adjust the parameter value, and press the  button to confirm the value.

NOTE:

- To avoid frequent adjustment of image gain, TGC, dynamic range, and output power during the examination, adjust the brightness and contrast of the monitor appropriately.
- You can press **Fn+↑ / ↓** on the keyboard to adjust the monitor brightness directly, or slide the rightmost side of the touch screen to the left to adjust the monitor brightness.

3.2.2 Adjusting the Control Panel

NOTE:

Lock the casters before adjusting the control panel.

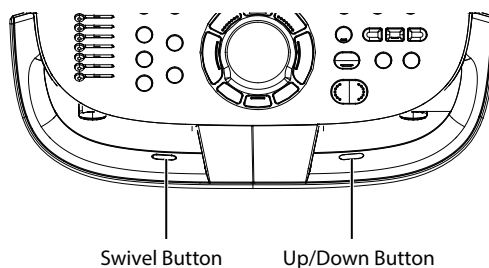


Figure 3-7 Adjusting the Control Panel

■ To adjust the horizontal position

- Hold the swivel button and rotate the control panel left or right. [3.2.Valdymo pulto pasukimas į šonus;](#)
- If the tensile assembly is optional, hold the swivel button and move the control panel forwards or backwards.

■ To adjust the height


- Hold the up/down button, and the control panel rises automatically. 3.3.Valdymo pulto aukščio reguliavimas
- Hold the up/down button and press down the control panel to lower the height.

3.3 Connecting the Probe



- Do not unplug the probe in use during the real-time scan. Otherwise, it may damage the system and probe.
- Do not pull the probe cable forcibly. Otherwise, it may damage the probe.

Perform the following steps:

1. As shown in Figure 3-8, keep the probe cable upward and rotate the locking lever on the probe connector anticlockwise to the  position to unlock the probe connector.

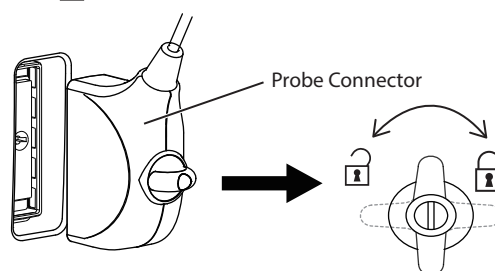




Figure 3-8 Connecting the Probe

2. Insert the probe connector into the probe port firmly.
3. Rotate the locking lever clockwise to the  position to lock the probe connector securely.

If you need to disconnect the probe, rotate the locking lever on the probe connector anticlockwise to the  position to unlock and unplug the probe connector.

NOTE:

If you need to connect the pencil probe, insert the pencil probe to the pencil probe port of the system.

3.4 Connecting and Installing Peripheral Devices

3.4.1 Connecting the Foot Switch



- To avoid damaging the foot switch, do not place the foot switch on the system.
- Use only the foot switch provided by the manufacturer. Otherwise, the system or the foot switch may malfunction.

Connect the foot switch cable to the USB port of the system as shown in Figure 3-9.

2. Click **Add Printer** in the print service area on the **System Settings > Connect > Basic** screen.
3. Enter the service name of the printer on the pop-up screen.
4. Select **USB Printer** and add the printer driver.

NOTE:

If the printer driver does not exist in the driver list of the system, insert the USB drive with the driver file into the system.

5. (Optional) Select the default image or report print service.
6. Click **OK** to complete the printer installation.

3.4.3 Connecting the Coupling Gel Heater



CAUTION Do not spill any fluid onto or into the coupling gel heater. Otherwise, it may damage the heater.

For installation and use of the coupling gel heater, refer to the user manual of the coupling gel heater.

3.5 Powering on/off the System

Two groups of built-in rechargeable batteries are only used for reserving the time for power supply connection in case of power failure, but not used for system operations. When the built-in batteries are fully charged, the reserved time for power supply connection is not less than 24 hours.



- WARNING**
- Do not install or disassemble the battery without authorization. Otherwise, there is a danger of explosion.
 - Do not insert the metal or conductive objects into the system. Otherwise, it may cause battery short circuit.
 - If the battery emits an odor or heat, is deformed or discolored, or appears abnormal during use, charging or storage, stop using the battery immediately and remove it from the system. If you have any questions about the battery, please contact the local distributor or the manufacturer.
 - Do not use a battery if it leaks. If your skin or clothing is stained with the fluid from the battery, thoroughly wash the area immediately with clean water. If the fluid comes into contact with your eyes, immediately flush your eyes with water and seek an oculist for help.
 - If the battery is found damaged, severely degraded or used for 3 years, dispose of it in accordance with the local laws or regulations.
 - To avoid system failure caused by battery damage, observe the following precautions:
 - Do not get the battery wet or immerse it in water.
 - Do not discard the battery in fire.
 - Do not expose the battery in direct sunlight or place it in the environment of temperature over 60°C.
 - Keep the battery away from fire and other heat sources during use and charge.
 - Do not pierce or hit the battery with a sharp object.
 - Do not place the battery into a microwave oven or other pressure vessels.
 - Do not hit, step on or throw the battery.

■ Image Analysis

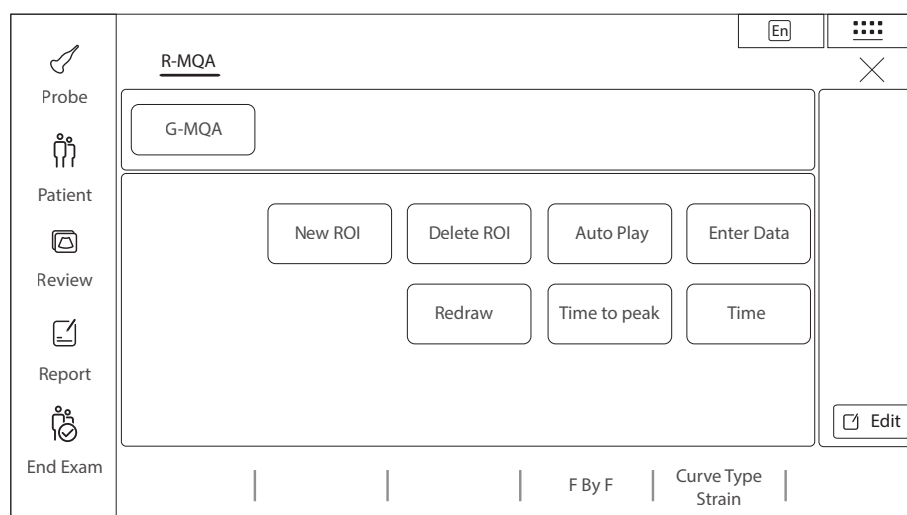


Figure 6-59 Touchscreen Display

| Item | Description |
|--------------------|--|
| New ROI | Create a region of interest (ROI). |
| Delete ROI | Delete the new ROI and the corresponding analysis result. |
| Auto Play | Play the cine automatically. |
| Enter Data | Enter the time of AVO, AVC, MVO or MVC in the pop-up dialog box. |
| Redraw | Tap it to re-trace. |
| Time to peak | Display the time to peak. |
| Time | Select two points on the curves to calculate time difference between the two points. |
| Curve Type | Change the curve type, including Strain, Strain Rate, Velocity, Displacement and Volume. |
| F By F | View the cine frame by frame. |
| Width/Height/Angle | Adjust the size and direction of the ROI. |

6.14 SonoFusion 9.vaizdų suliejimo (SonoFusion) režimas

SonoFusion completes the matching of multiple modalities and overlapping for ultrasound images and three-dimensional data of computed tomography (CT) or magnetic resonance imaging (MRI). Before using SonoFusion, ensure that the magnetic navigator, magnetic generator, and external positioning sensor are connected.



WARNING SonoFusion is contraindicated to the person wearing the internal pacemaker, cochlear implant or nerve stimulator. People wearing the implant or intra-corporeal devices should keep at least one-meter away when the magnetic generator starts working.

Table 6-1 Measurement Accuracy

| Type | Parameter | Error Range |
|-------------------------|---|-------------|
| S-Fetus adv. S-Fetus | HC, BPD, AC, FL | ≤ 10% |
| S-PF | Urethral tilt angle (UTA), Retrovesical angle (RA), Bladder neck-symphysis distance (BNP), Bladder descent max (BD max), Levator hiatus area (Lev. Hiat. A), Levator hiatus height (Lev. Hiat. H), Levator hiatus width (Lev. Hiat. W), Left levator urethra gap (Lt-LUG), and Right levator urethra gap (Rt-LUG) | ≤ 15% |
| S-Endo. | Thickness of endometrium in the longitudinal section of uterus | ≤ 10% |
| S-Follicle | Long-axis length of follicle in the longitudinal section of ovary, Short-axis length of follicle in the longitudinal section of ovary | ≤ 10% |

6.15.1 S-Fetus KK3.automatiniai akušeriniai matavimai

S-Fetus is used for second trimester, third trimester, and second trimester cardiac examinations performed with the convex array probe and abdominal volume probe. This feature is used to automatically measure the acquired sections, and the supported sections and measurement items are shown in Table 6-2. The confirmed measurement results are saved to the report.

Table 6-2 Sections and Measurement Items

| No. | Sections | Measurement Items |
|-----|--------------------------|-------------------|
| 1 | Trans. Thalamus | HC, BPD |
| 2 | Trans. LV | Vp |
| 3 | Trans. Cerebellum | Cereb. |
| 4 | Nose & Lips | / |
| 5 | Trans. Orbits | / |
| 6 | Sag. Baby Face | / |
| 7 | A4CH | CTAR |
| | | CTDR |
| | | Cardiac axis |
| 8 | LVOT | / |
| 9 | RVOT | / |
| 10 | 3VV | / |
| 11 | 3VVT | / |
| 12 | Coron. Diaphragm | / |
| 13 | Trans. Upper Abd | AC |
| 14 | Trans. Abd (Cord insert) | / |

■ S-Fetus(meas.)

Perform the following steps:

1. Tap **S-Fetus(meas.)** on the touch screen to automatically measure the current section. The measurement results are displayed on the basic screen, as shown in Figure 6-73.

NOTE:

S-Fetus(meas.) is available in real-time scan mode, in frozen mode, or when the image or cine is reviewed.

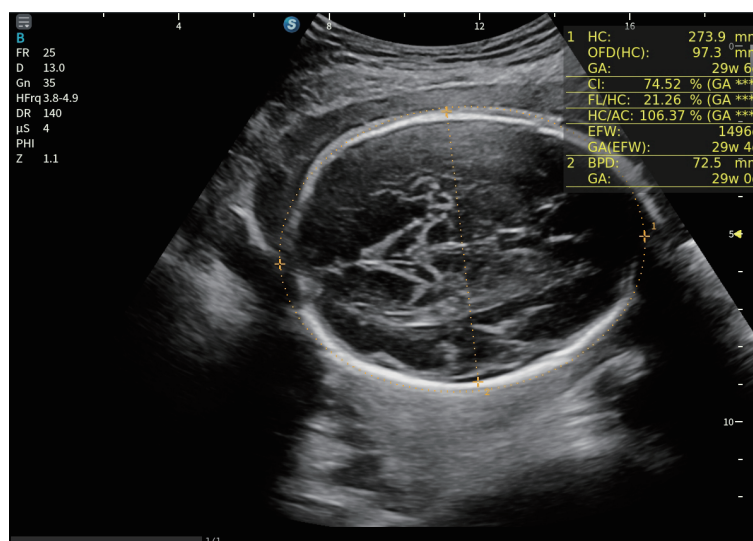


Figure 6-73 Image Display _ S-Fetus(meas.)

2. (Optional) If necessary, refer to the following operations to adjust the trace line.
 - To adjust the results of multiple measurement items, press the **Calc** key to switch the measurement item, and adjust the trace line. For example, when measuring the horizontal transverse section of thalamus, press the **Calc** key to switch between BPD and HC.
 - To switch the measurement cursors, press the **Update** key.
3. Press the Set key on the control panel to confirm the measurement results.

6.15.2 S-Thyroid KK1. automatiniai skydliaukės matavimai

S-Thyroid is used to automatically measure thyroid nodules. The measurement results are displayed on the basic screen, and the confirmed measurement results are saved to the report.

NOTE:

- *S-Thyroid should be used when the largest section of the thyroid nodule is acquired.*
- *S-Thyroid is not applicable to diffuse lesions.*
- *To ensure accuracy of automatic measurement, the part to be measured should be completely displayed on the image.*
- *If the measurement results on the standard section cannot be obtained when S-Thyroid is used, you should adjust the scanning angle and try again.*

Perform the following steps:

1. Select a probe and an exam type (Thyroid).
2. Tap **S-Thyroid** on the touch screen. The system automatically measures the nodule, as shown in Figure 6-74. The touch screen displays all the detected nodules.

To display all detected nodules on the basic screen, tap **All Trace** on the touch screen.

 - If more than one nodule exists, tap a nodule to select it for confirmation and measurement result adjustment.

3. Tap **S-Breast** on the touch screen. The system automatically measures the nodule, as shown in Figure 6-75. The touch screen displays all the detected nodules.

To display all detected nodules on the basic screen, tap **All Trace** on the touch screen.

- If more than one nodule exists, tap a nodule to select it for confirmation and measurement result adjustment.
- To delete the trace line of a nodule, tap the nodule to select it and tap **Delete**.

NOTE:

S-Breast is available in real-time scan mode, in frozen mode, or when the image or cine is reviewed.

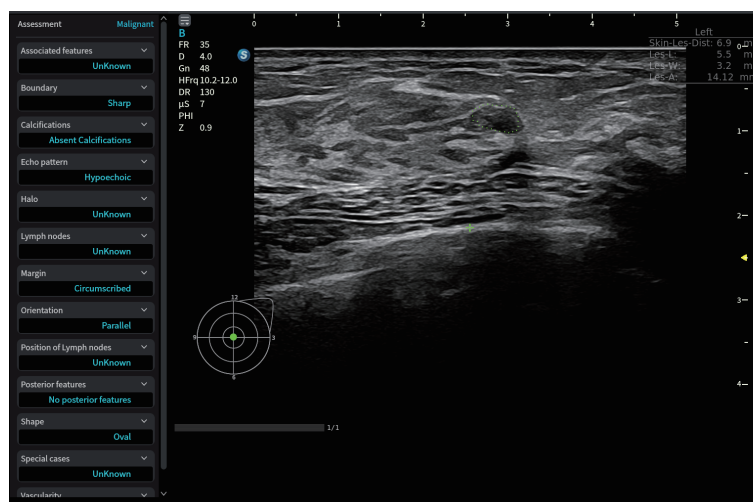


Figure 6-75 Image Display _ S-Breast

- Rotate the key located directly below **Left** or **Right** to select the left or right breast.
 - Rotate the key located directly below **Breast Radius** to adjust the breast radius.
4. (Optional) If necessary, perform the following operations.
 - To adjust the trace area, move the cursor to a desired trace point, press the Set key to select the point, move the point to a desired position, and press the Set key.
 - To adjust the analysis results, tap **Category** on the touch screen, select the analysis item, and tap **x** to exit. The analysis results are synchronously updated to the monitor screen.
 - To select the malignant assessment grade, tap the drop-down list of **Assessment**.
 5. Move the point on the phase diagram according to the actual location of the nodule. The screen displays the clock position of the nodule, and the distance between the nodule and the nipple.
 6. Tap **Accept** to confirm the results.

6.15.4 S-PF [KK2.Dirbtinio intelekto automatiniai matavimai: automatinis dubens dugno matavimas](#)

S-PF is used to evaluate the pelvic floor dysfunctions. It includes 2D anterior pelvic evaluation system and 3D levator hiatus evaluation system. In 2D mode, the standard section of anterior pelvic is automatically acquired and measured. In 3D mode, the minimum levator hiatus plane is displayed and measured automatically. The measurement results are displayed on the basic screen, and the confirmed measurement results are saved to the report.

- S-PF(2D): At rest or valsalva state, it is used to automatically measure bladder neck-symphysis distance, retrovesical angle (RA-r/RA-v), bladder descent max (BD max-r/BD max-v) and urethral tilt angle (UTA-r/UTA-v), and the system calculates the bladder neck distance (BND) and urethral rotation angle (Uret.rot).
- S-PF(3D): At rest, valsalva or contraction state, it is used to automatically measure levator hiatus area (Lev. Hiatus A-r/ Lev. Hiatus A-v/ Lev. Hiatus A-c), levator hiatus height (Lev. Hiatus H-r/ Lev. Hiatus H-v/ Lev. Hiatus H-c), levator hiatus width (Lev. Hiatus W-r/ Lev. Hiatus W-v/ Lev. Hiatus W-c), left levator urethra gap (Lt-LUG -r/ Lt-LUG -v/ Lt-LUG -c) and right levator urethra gap (Rt-LUG -r/ Rt-LUG -v/ Rt-LUG -c).