

No breath hold required with Dual Source CT

Redefining standards in pediatrics

"Children really are the ultimate test of a good CT machine. They are small...and the rapid heart rates and faster breathing in children cause motion artifacts, and older children may be uncooperative. In a child, it is not uncommon to see a heart rate of 150–180 bpm."

Catherine Owens, MD Great Ormond Street Hospital for Children (GOSH), London, UK











siemens-healthineers.us/dual-source-ct





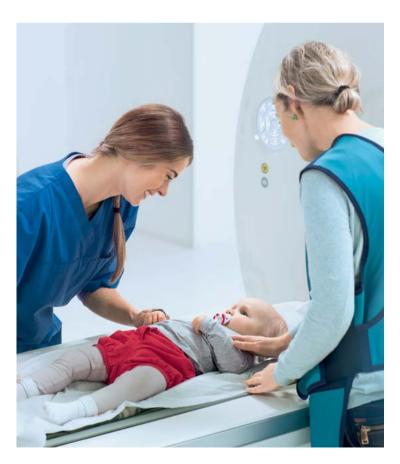
Potential for a sedation-free workflow



Dual Source CT enables Superfast (Turbo) Flash scanning







Speed up your workflow

by saving resources when no anesthesiologist is needed¹

Potentially reduce risk

Anesthesia increases risk for complications e.g., for congenital heart disease¹

Patient-friendly and increased patient comfort

When sedation is not used, parents may be able to take their child home right after the scan is finished²

Reduction of unnecessary repeat scans due to failed sedation

Inadequate sedation – rescans necessary in 29% of conventional examinations¹

¹Malviya S., et al. British Journal of Anaesthesia. 2000;84(6):743-8.

²Arlachov Y, et al. The British Journal of Radiology. 2012;85:1019.







Scan time: 0.61 s Scan length: 79 mm 70 kV @ 0.33 mSv

By combining ultra-fast scanning and the industry's unprecedented temporal resolution, the SOMATOM Force scanned the heart at 130 bpm and with a very low dose while still providing an image suitable for pediatric coronary evaluation.









 $Courtesy\ of\ A strid\ Lindgrens\ Children's\ Hospital,\ Karolinska\ University,\ Stockholm,\ Sweden$



Sub-second imaging beyond detector width

- Ultra-fast acquisition with Turbo Flash mode (737 mm/sec) for imaging covering Chest, Abdomen, Pelvis in < 1 second
- Unlimited Z-axis coverage



No exclusion cardiovascular imaging

- · Single beat, <1mSv cardiac imaging since 2008 with dual source from Siemens Healthineers
- Industry-leading 66 ms native temporal resolution to minimize motion artifacts, enabling cardiac imaging for newborns with HRs typically from 100-160 bpm
- · No heart rate exclusions including arrhythmias







Scan time: 0.46 s Scan length: 344 mm Sn100 kV @ 0.14 mSv

Low dose lung scan of a 14-year-old boy with cystic fibrosis.

Precise diagnostic support with ultra-low dose at highest image quality for monitoring chronic diseases.

Courtesy of University Hospital Tuebingen, Tuebingen, Germany



Low dose innovation

- ADMIRE* Third-generation, model-based iterative reconstruction
- **Stellar**^{Infinity} **Detector** Integrated electronics design reduces electronic noise, significantly improving SNR for optimal dose efficiency and image quality
- CARE kV automated selection of optimal kV setting



- Real-time 4D mA modulation with CARE Dose 4D
- X-CARE organ-based dose modulation
- CARE Child 70 kV for newborn- to adult-sized pediatric patient protocols
- CARE Dashboard for easy visualization of all dose reduction features active for the exam
- Tin (Sn) Filtration Acquisition of ultra-low dose non-contrast scans







^{*}In clinical practice, the use of ADMIRE may reduce CT patient dose depending on the clinical task, patient size, anatomical location, and clinical practice. A consultation with a radiologist and a physicist should be made to determine the appropriate dose to obtain diagnostic image quality for the particular clinical task.





Scan time: 5.42 s Scan length: 749 mm Sn100 kV @ 0.44 mSv

Courtesy of Astrid Lindgrens Children's Hospital, Karolinska University, Stockholm, Sweden



Tin Filter technology

- Reduced radiation dose in non-enhanced CT scans
- Ideal for ultra-low dose topogram, lung, MSK, sinus, spine, thorax, colon, skeletal survey for child abuse
- Detailed images even at extremely low dose levels
- Tin Filter allows for imaging with never-seen low dose levels



You get all the benefits of dual energy free (of additional radiation!)

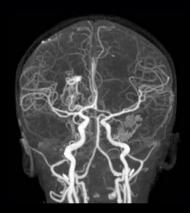




Automated bone removal with Direct Angio for easy visualization of an AVM.







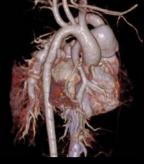


Routine Dual Energy (DE) imaging

- **Dose-Neutral Dual Energy** with real-time Dose Modulation and Tin Filtration for optimized filtration of X-ray spectrum
- Dual Energy Apps: Direct Angio, Lung Analysis, Monoenergetic+, Virtual Unenhanced, Bone Marrow, etc.



Coronary CTA
Scan time: 0.17 s
Scan length: 126 mm
70 kV @ 0.58 mSv



Dynamic Airway Scan time: 3.25 s Scan length: 56 mm 70 kV @ 1.4 mSv



CTA and dynamic airway study – pediatric patient (4 months old) with overinflated right lung and collapsed bronchus.

Courtesy of Lady Cilento Children's Hospital, Brisbane, Australia

Patient experience

- Unique interior and exterior gantry illumination lighting to enhance the pediatric/parent experience
- Open 78-cm bore with temperature independent—low noise operation due to water cooling approach





Dynamic imaging

- Adaptive 4D Spiral with up to 80 cm of dynamic CTA coverage, e.g., phase-resolved vascular mapping
- Complete visualization of dynamic 4D airway imaging
- 70 kV low dose acquisitions with variable sampling rates

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An estimated 5 million patients globally benefit every day from our innovative technologies and services in the areas of diagnostic and therapeutic imaging, laboratory diagnostics, and molecular medicine, as well as digital health and enterprise services.

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Siemens Healthineers Headquarters

Siemens Healthcare GmbH Henkestr. 127 91052 Erlangen, Germany Phone: +49 9131 84-0 siemens-healthineers.com

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Siemens Medical Solutions USA, Inc. Healthcare 40 Liberty Boulevard Malvern, PA 19355-9998, USA Phone: +1-888-826-9702