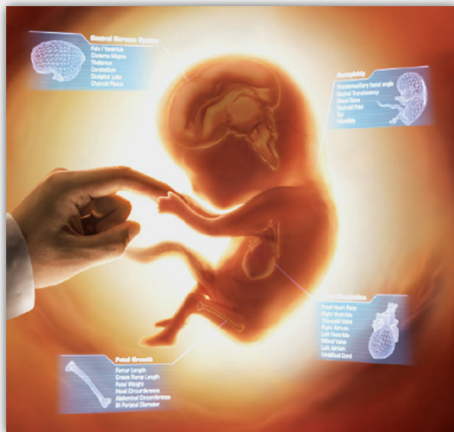


Novel Measurement of Nuchal Translucency, 5D NT

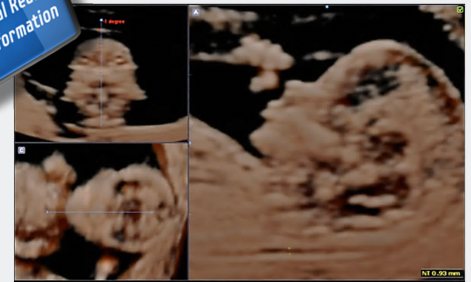
Intuitive Solution and Confirmation of Nuchal Translucency



Easy Detection
Accurate Diagnosis
Min Interpretation time
Max Throughput



5D



Key Advantages

Easy Detection

» Locate true mid-sagittal plane from volume data

Improved Accuracy

» Increase Herman Score¹ (Excellent level: up to 8)

Operator Independency

» Decrease inter-user variability

5D NT

Nuchal Translucency (NT) measurement at 11-13⁺⁶ weeks scan with maternal age is a highly sensitive means of screening for trisomy for earlier diagnosis of fetal aneuploidy.²⁻³ In order to reduce variability and maximize reliability of NT measurements, the Fetal Medicine Foundation (FMF) has provided technical guidelines.⁴ Furthermore, Herman et al. developed a novel method of image-scoring for NT measurement for the purposes of training and audit – called Herman score – which is calculated based on criteria such as section, caliper placement, skin line, image size, amnion and head position.¹ However, of the standards for measuring NT, delineation of a good fetal sagittal section, proper placement of caliper and measurement at the maximum distance of NT are difficult to perform without proper training and thus often operator-dependent.⁵ This situation led to the development of a new measurement technology, **5D NT**.

5D NT is an intuitive solution resolving operator dependency to recognize the correct mid-sagittal plane during volume data acquisition and providing improved Herman score.

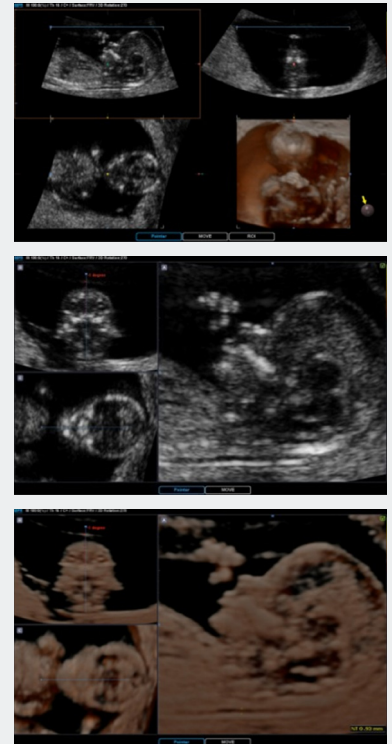
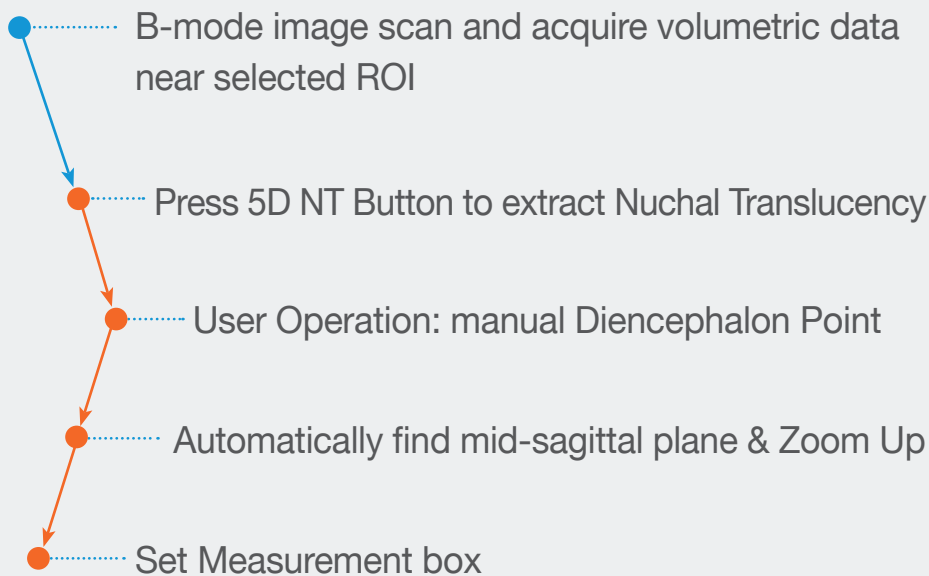
“**5D NT** is a new technology that offers reliable NT measurement with **improved visualization** by FRV™ and auto zooming for **improved Herman score.**”

By Joon SunWoo, MD

A novel technology, **5D NT**, automatically finds the mid-sagittal plane from an acquired volumetric data and measures the maximum NT distance in as few as 4 seconds upon the operator's selection of region-of-interest over the nuchal area⁶.

5D NT showed a high inter- and intra-observer reproducibility between experienced and inexperienced sonographers and could reduce the number of erroneous risk calculations by inexperienced sonographers.

Easy and Accurate operation



Reference

- (1) Herman A et al. Ultrasound Obstet Gynecol 1999;14:388–392.
- (2) Malone FD et al. N Engl J Med. 2005;353(19):2001-11.
- (3) Wald NJ et al. J Med Screen. 2003;10(2):56-104.
- (4) Snijders RJ et al. Lancet 1998;352:343-6.
- (5) Braithwaite JM et al. Ultrasound in obstetrics & gynecology 1996;8:192-5.
- (6) Cho HY et al. Ultrasound Obstet Gynecol. 2012;39(2):175-80.