

Taking a step beyond



The new standard for routine screening

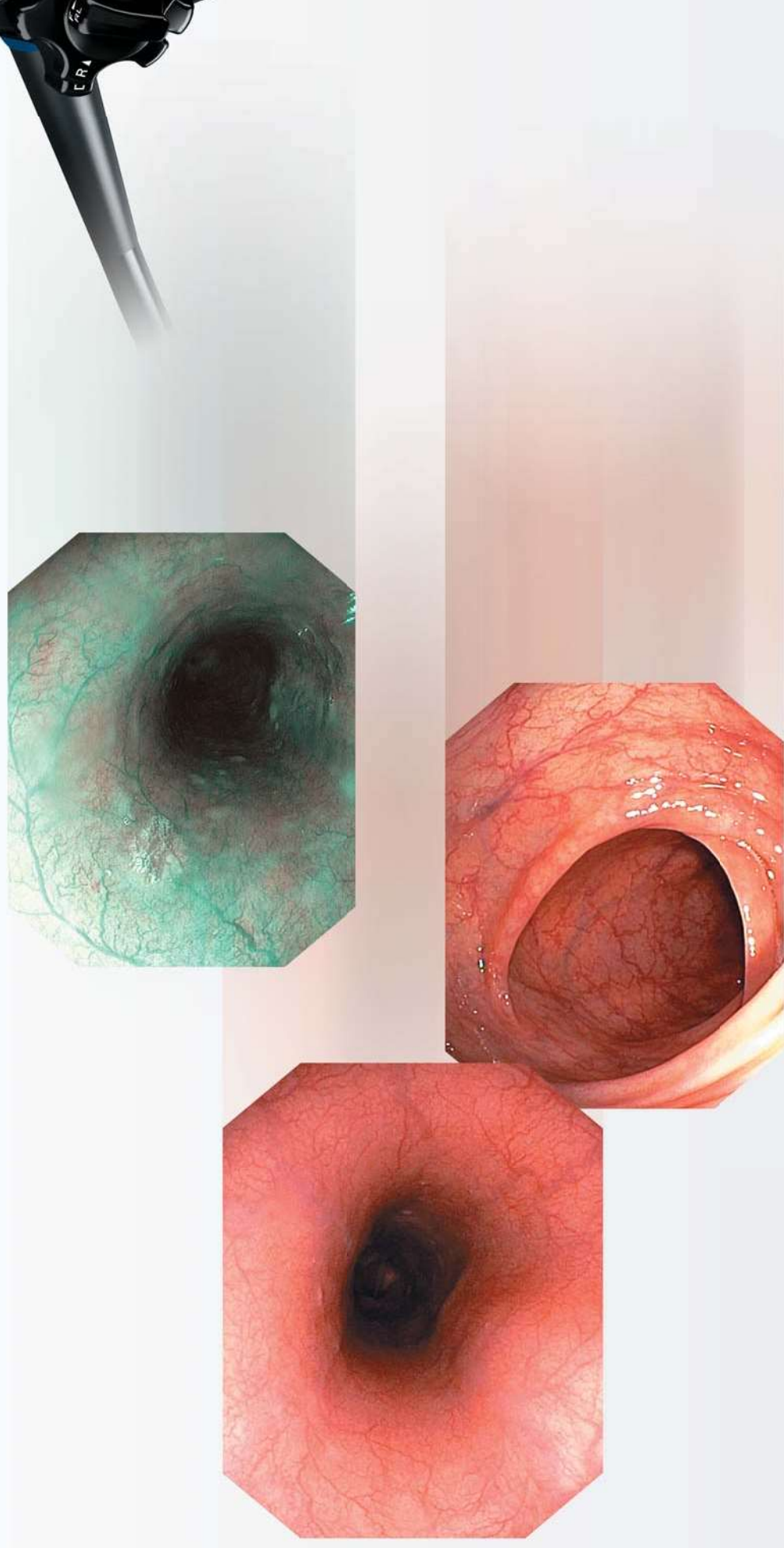
One step beyond precise imaging

One step beyond operating efficiency

One step beyond routine usability

OLYMPUS endoscopic systems set the pace around the world. Consistently, we have tried to create new values for medical professionals by making the best of our technology. And we will continue to expand the possibilities of endoscopy. Now, our technology is concentrated in an even more compact package, adding tremendous value to routine screening. The previously impossible is now the new

HDTV image capturing and processing takes routine screening one step further with advanced observation capabilities



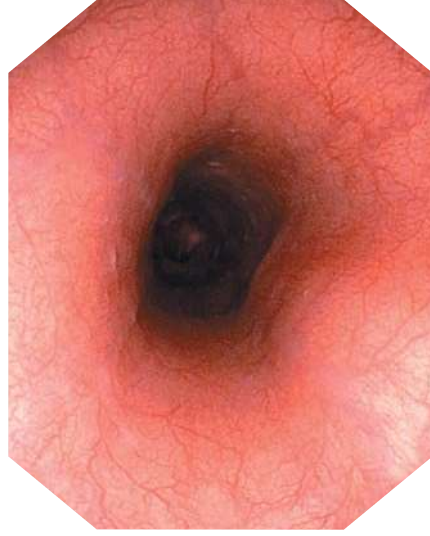
One Step Beyond

HDTV

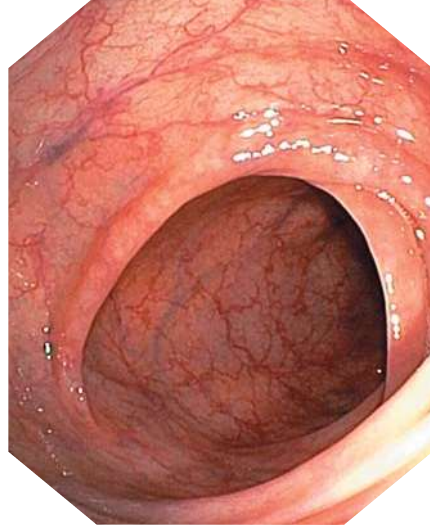
Featuring HDTV imaging capability, Optera endoscopes* deliver an edge-to-edge high-resolution image with sharp and clear details. The result is superior imaging with minimal halation and image noise. From now on, high-definition imaging will become standard.



*Except the GIF-XP170N



GIF-H170



CF-H170L/I

Close Focus

With the close focus function, lesions out of focus in conventional close-up views can be observed clearly as close as 2 mm. This allows you to observe and capture clear, large-size images of fine mucosal tissues and vascular

Pre-freeze Function

A new pre-freeze function saves time and reduces the physician's frustration when capturing high-quality images. The new CV-170 automatically buffers a rapid series of procedural images. When the physician stills the image, the pre-freeze function captures and displays and saves the image at the desired view. This function helps create a clear visual record of the procedure in the shortest possible time.

Structure Enhancement

Structure enhancement increases contrast to suppress noise. It highlights submucosal vessels in popular Type A, Type B is also popular in tissues with high contrast in the lower gastrointestinal tract and vascular tissues in the upper gastro

NBI (Narrow Band Imaging)

NBI enhances the visibility of capillaries and other structures on the mucosal surface, which minimizes invasion such as unnecessary biopsies and improves examination quality. NBI is now available in the Optera system where it can be combined with HDTV for maximum effectiveness.



This low-maintenance system is easy to use, while running costs are drastically lower than any other conventional systems, too

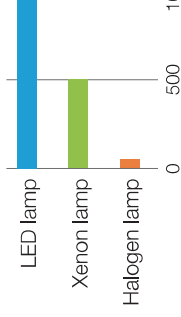


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LED Light Source

The Optera processor (CV-170) is even brighter than a 150 W halogen lamp. In addition, since it has much lower running costs are minimized.

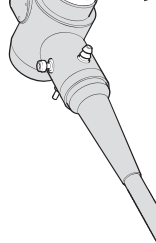
Expected Lifetime



Waterproof Connector

Unlike previous generations of endoscopes, the CV-170's waterproof connector minimizes the risk of infection and also helps extend the life of the endoscope.

Conventional scope



No one has more experience than OLYMPUS,
and that translates into greater convenience and
more user-friendly functions



Variable Stiffness

Variable stiffness allows the flexibility to be changed incrementally by manipulation. This innovative feature allows case-by-case basis, to meet the unique patient and the handling preferences realize more effective and smooth conventional colonoscopes.

Portable Memory

Portable memory (MAJ-1925) has data exchange. OLYMPUS now offers into the CV-170. A high-speed decoder compatible with PCs. The CV-170 images to the memory, allowing you a PC or recording devices. This enables settings, user preset settings and recording using the portable memory efficient data management.



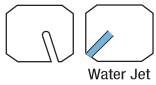


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OLYMPUS CV-170

Power Supply	Voltage	100-240 V AC (NTSC)/220-240 V AC (PAL): within $\pm 10\%$
	Frequency	50/60 Hz: within ± 1 Hz
	Rated input	200 VA
Size	Dimensions (W x H x D)	295 x 145 x 425 mm
	Weight	11.0 kg
Observation	Examination lamp	LED lamp
	Analog HDTV signal output	Either RGB (1080/60i: NTSC)/(1080/50i: PAL) or YPbPr (1080/60i: NTSC)/(1080/50i: PAL) output can be selected.
	Analog SDTV signal output	VBS composite (480/60i: NTSC)/(576/50i: PAL), Y/C (480/60i: NTSC)/(576/50i: PAL), and RGB (480/60i: NTSC)/(576/50i: PAL); simultaneous outputs possible.
	Digital signal output	HD-SDI (SMPTE 292M), SD-SDI (SMPTE 259M) and DVI (WUXGA, 1080p or SXGA) can be selected.
	White balance adjustment	White balance adjustment is possible using the white balance button on the front panel.
	Color tone adjustment	The following color tone adjustments are possible. • Red adjustment: ± 8 steps • Blue adjustment: ± 8 steps • Chroma adjustment: ± 8 steps
	Automatic gain control (AGC)	The image can be electronically amplified when the light is inadequate due to the distal end of the endoscope being too far from the object.
	Noise reduction	Noise is corrected by image processing.
	Iris	The auto iris modes can be selected using the "iris mode" switch on the front panel. • Peak: The brightness is adjusted based on the brightest part of the endoscopic image. • Average: The brightness is adjusted based on the average brightness of the endoscopic image.
	Image enhancement setting	Fine patterns or edges in the endoscopic images can be enhanced electrically to increase the image sharpness. Either the structural enhancement or edge enhancement can be selected according to the user setup. • Structural enhancement: Enhancement of contrast of the fine patterns in the image. • Edge enhancement: Enhancement of edges of the endoscopic image.
	Freeze	An endoscopic image is frozen using an endoscope or the "FREEZE" key on the keyboard.
	NBI observation	This is one of optical-digital observations using the narrow band observation light.
	Remote control	The following ancillary equipment can be controlled (specified models only). • DVR • Video printer • Image filing system • Flushing pump • Endoscopic CO ₂ regulation unit
Documentation	Patient data	The following data can be displayed in the endoscopic image screen. • Patient ID • Patient name • Sex • Age • Date of birth • Date of recording (time, stopwatch) • Comments
	Displaying the record state	The recording state of the following ancillary equipment can be displayed on the monitor. • Portable memory and internal buffer • DVR • Video printer • Image filing system
	Advance registration of patient data	Up to 50 patient's data can be registered. • Patient ID • Patient name • Sex and age • Date of birth
Portable Memory	Media	MAJ-1925 (OLYMPUS)
	Recording format	• TIFF: no compression • JPEG (1/5): approx. 1/5 compression • JPEG (1/10): approx. 1/10 compression
	Number of recording images	• TIFF: approx. 227 images • JPEG (1/5): approx. 1024 images • JPEG (1/10): approx. 2048 images

Compatible with EVIS 100/130/140 Series, Actera 150 Series, EVIS EXERA 160 Series, EVIS EXERA II 180 Series and GI/BF/VISERA Series scopes.
Please note that there are some exceptions.

		Gastrointestinal Videoscope OLYMPUS GIF-H170	Gastrointestinal Videoscope OLYMPUS GIF-XP170N	Colonovideoscope OLYMPUS CF-H170L/I
Optical System	Field of view	140°	140°	140°
	Direction of view	Forward viewing	Forward viewing	Forward viewing
	Depth of field	2-100 mm	3-100 mm	2-100 mm
Insertion Section	Distal end outer diameter	9.2 mm	5.4 mm	12.8 mm
	Insertion tube outer diameter	9.2 mm	5.8 mm	12.8 mm
	Working length	1030 mm	1100 mm	L: 1680 mm I: 1330 mm
Instrument Channel	Channel inner diameter	2.8 mm	2.2 mm	3.7 mm
	Minimum visible distance	3.0 mm from the distal end	2.0 mm from the distal end	5.0 mm from the distal end
	Direction from which endotherapy accessories enter and exit the endoscopic image			 Water Jet
	High-frequency	Cauterization treatment	Available	Available
Bending Section	Angulation range	Up 210° Down 90°	Up 210° Down 90°	Up 180° Down 180°
		Right 100° Left 100°	Right 100° Left 100°	Right 160° Left 160°
Total Length		1350 mm	1420 mm	L: 2005 mm I: 1655 mm

Specifications, design and accessories are subject to change without any notice or obligation on the part of the manufacturer.