

Allia™ IGS 3 with AutoRight™



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01 | Image Quality and Dose



X-Ray Generator

The IGS system uses a 100 kW high-frequency Jedi three-phase power unit that provides grid pulsed fluoroscopy capability.

Maximum power available	100 kW
Maximum kVp available	125 kVp
Maximum continuous input power	3200 W for the tube unit
Pulse frequency	0.5 to 50 fps
Radiographic/recording mode	50 to 125 kVp
Radiographic mA ratings	1 - 1000 mA
Max. continuous power in fluoro mode	3200 W
Fluoroscopy mode	60 - 120 kVp
Fluoroscopy mA ratings	1 – 180 mA
Fluoroscopic timer	Yes

X-Ray Tube

The IGS system is equipped with the high-performance, highly reliable Performix™ 160A metal X-ray tube, which meets requirements for all vascular applications.

Anode diameter	160 mm brazed graphite
Anode rotation	7800 rpm/ 130 HZ
Anode Target angle	11,25°
Anode heat storage capacity	2.7MJ (3.7 MHU)
Anode steady state heat dissipation	6.72 kW
Cathode	Bi-filament design
Coincident focal spot sizes	0.3, 0.6 and 1.0
Fluoroscopic power	• 3200 W (continuous) • 4500 W (peak capability for maximum of 10 minutes)
Maximum casing heat storage	5.14 MJ (6.9 MHU)
Continuous casing heat dissipation	3200 W
Maximum anode cooling rate	544 KHU/min (6.72 kW)
Total filtration (IEC 60601-1-3)	1.0 mm Al
Leakage radiation (IEC 60601-1-3)	<50mR/h measured at 3.2kW (125kv, 25.4mA)

Tube Cooling Unit		COOLIX 4100
Cooling type		Closed-loop remote water chiller
Maximum Cooling capacity		4100 W
Flow rate		12 l/min
Coolant volume		23 liters in chiller + 17 liters in pipes
Dry weight		120 kg+/- 5

Collimation	
Number of collimation blades	2 pairs
Spectral filtration	0.1, 0.2, 0.3, 0.6 and 0.9 mm of copper (20 cm detector) 0.1, 0.2, 0.3 mm of copper (30 cm detector) 1 integrated contour filter blades (20 cm detector) 3 integrated contour filter blades (30 cm detector) motorized, tapered filter blade that can be rotated 360° as well as translated in and out using a simple joystick control at tableside

Detector*

The Allia IGS 3 system comes with 2 detector configurations: 20 cm detector and 30 cm detector.

Detector manufacturer	GEHC
Size of the detector	20.5 cm x 20.5 cm (20 cm detector) 31 cm x 31 cm (30 cm detector)
Material	Amorphous silicon photodiode array on a continuous-substrate
Pixel size	200 x 200 µm
Image matrix	1024 x 1024 (20 cm detector) 1536 x 1536 (30 cm detector)
Bit acquisition	14 bit

Mode @ Dose/Fr	
DQE values	
Record, e.g. DSA 175 nGy (20 uR)	80% (20 cm detector), 84% (30 cm detector)
Fluoro 8.8 nGy (1 uR)	77% (20 cm detector), 81% (30 cm detector)
Additional DQE values at minimum fluoro dose operating point	
Fluoro 2.2 nGy (0.25 uR)	68% (20 cm detector), 73% (30 cm detector)
Note: DQE values given are typical at f = 0 cycles/mm with RQA5 conditions as defined by IEC62220-1-3 standards	
Nyquist Frequency	2.5lp/mm in ROI mode with p=0.2mm

*In clinical use, the results of dose reduction techniques will vary depending on the clinical task, patient size, anatomical location and clinical practice. Physicians assisted by a physicist as necessary have to determine the appropriate settings for each specific clinical task

Anti-scatter Grid: The system is configured with an anti-scatter grid to enhance image quality during routine imaging. Removal of the grid can improve the X-ray dose efficiency for infants (e.g. less than one-year-old) for field of view (FOV) smaller than 20 cm (7.9 in).

Grid ratio	13:1
Focal distance of the grid	100 cm (39in)
Grid Line frequency	70 LP/cm

Image acquisition

Fluoroscopy modes	Non-subtracted, subtracted, roadmap, Blended Roadmap ¹
Fluoroscopy frame rate	30 fps, 15 fps, 7.5 fps and 3.75 [*] fps
Fluorostore	450 fluoro images (up to 900)
Sub/no Sub simultaneous display ¹	Yes
Angio Acquisition Package	- DSA (digital subtracted angiography) at 0.5 - 7.5 fps including Automated Pixel Shift - Multi-segment DSA with flexible frame rate and duration and single shot capabilities
Dynamic Acquisition Package	30 fps, 15 fps and 7.5 fps
Innova Chase acquisition	5 fps
Digital output	1024 x 1024
Field-of-view adjustment from tableside with four magnification selections (records mode)	20 cm, 17 cm, 15 cm, and 12 cm (20 cm detector) 30 cm, 20 cm, 16 cm and 12 cm (30 cm detector)
Image flip capability	Horizontal and vertical image flip capability for all acquisition
Shutter	Automated electronic shutter matched to collimated portion of image
Integrated X-ray dose tracking and in-room display of air kerma and dose area product	
A configurable audible tone is activated when using the fluoro mode	

*: non-subtracted Fluoro mode only



Image Processing and Review

Immediate auto-review of acquisition
Next and prior sequences or images
Slow and fast review of sequences, forward and reverse
Pause, adjust brightness and contrast during review
Image review with or without edge enhancement filters
Mask select, pixel shift
Store/recall reference images

AutoRight™: Intelligent Image Chain Powered by Edison

AutoRight is an AI-based image chain, trained on a dataset containing more than 6,000 data, that automatically adjusts acquisition parameters, processing, and display, to ensure consistent image quality regardless of patient size, anatomy or C-arm angulations*.

Adjusts up to 7 acquisition parameters: tube voltage, tube current, pulse width, focal spot, spectral filtration, detector dose, source to image distance (InnovaSense ¹)
Retaining and enhancing processing tools and algorithms: Dynamic Range Management, Subtraction, AutoPixelShift, Edge Enhancement, Denoising Techniques
Direct access to up to 5 user selectable image-quality levels for fluoro, 4 for dynamic, 6 for 3DCT HD, 3 for DSA, 2 for Chase, 4 for Bolus.
Graphical representation of the real time air kerma rate at the patient reference point using a color-coded dose rate meter
Dose limiter button in direct access to set air kerma rate limit to either 50% or 25% of max air kerma rate
Default image-quality levels can be customized for the various clinical acquisition protocols

*Except when system limits are reached



InnovaSense¹

InnovaSense is an advanced patient contouring technology that uses an intelligent algorithm during gantry motion to select the optimal position for the image receptor relative to the patient. By reducing the distance from receptor to patient, the system optimizes imaging geometry and helps reduce radiation exposure. The user also can position both the gantry and detector with one integrated operation. Capacitive sensor technology and optimized collision avoidance software enable a speed of pivot and C-arm, of up to 20° per second.

MyIQ for interventional cardiology

With myIQ, operators can choose at tableside from 4 predefined image looks optimized for cardiology*.

Dose Awareness

Integrated dose monitoring

The user can monitor air kerma rate, integrated air kerma over the exam, and the total dose area product received by the patient during a procedure. The threshold of cumulated dose displayed on a gauge icon is customizable to warn operator when such threshold has been reached. The threshold is customizable depending on the protocol.

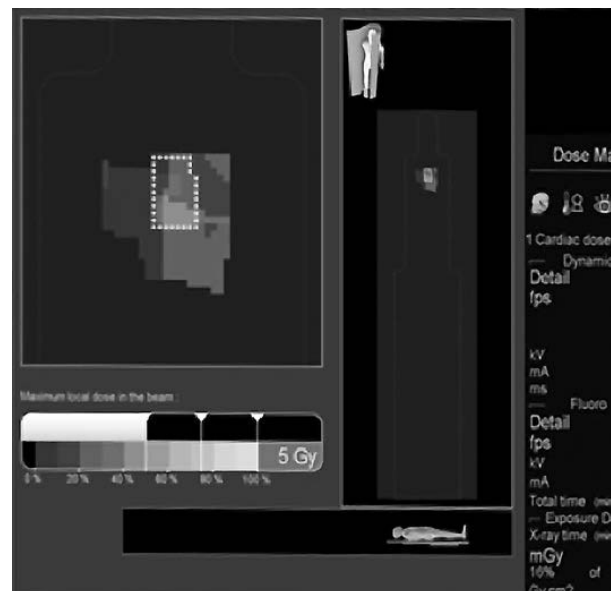
Dose reporting

The system provides DICOM** compatible Radiation Dose Structured Report allowing the export of the dose and related acquisition parameters.

Dose Map

Dose Map is a feature used to calculate, display and record an estimated local cumulated dose during procedures done on the GE X-Ray angiographic system. It is designed to provide to the user a visualization of the distribution of the local cumulated dose throughout the exam as well as the current projection of the beam.

Estimated local cumulated dose	Yes
Pediatric patient	Yes
Real-time calculation	Yes
Configurable alert	Yes



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* Not applicable with StentViz/StentVesselViz applications

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02 | Applications



2D Applications

InnovaChase™

InnovaChase™ is a dynamic, unsubtracted acquisition at a fixed frame rate of 5 fps with manual and remote panning of the table. It is optimized for visualization of a run off.

ECG acquisition package¹

With the ECG acquisition package the heart rate is displayed on the console and live monitor and signals are exported in DICOM format.

The ECG acquisition package is compatible with recording system outputs providing analog ECG signals comprised between +/-5 V. Connection cables compatible with Mac-Lab™,1,3, CardioLab™,1,3, Combolab^{1,3} and some third party recording systems are provided with this package.

Quantitative Analysis Package¹

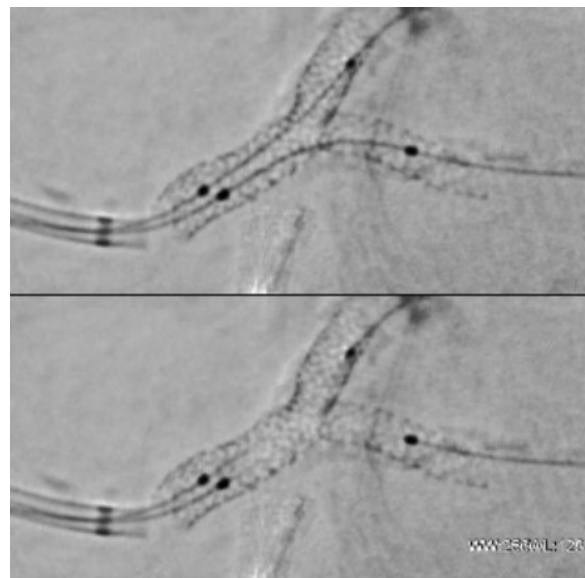
Stenosis Analysis¹ and Left Ventricle Analysis¹ allow the user to perform stenosis and left ventricle measurements and analysis. With One Touch QA¹, the user can select measurement points with a fingertip directly on the selected image frame displayed on the Central Touch Screen at tableside – no mouse or joystick is required. One Touch QA is available for stenosis analysis and distance measurements.

PCI ASSIST 2¹

PCI ASSIST 2 is an ASSIST package containing StentViz and StentVesselViz applications and including High Contrast Fluoro which decreases the pulse width by 38%. While the dose is equivalent, it is delivered in an efficient way that helps significantly reduce the blurring in the image due to organ motion. With PCI ASSIST 2 our StentViz enhancement algorithm has been improved to better operate in complex bifurcation.

StentViz¹

The StentViz option enhances visibility of the stent structure. It is particularly useful in verifying placement and deployment of stents during coronary interventions where moving arteries could make visibility challenging. StentViz processing is fully automated and can be launched at the press of a button on the Central touch screen. The result is automatically displayed on the reference monitor and shows two zoomed and enhanced images of the stent(s): One with the guidewire in view and a second one where the guidewire is subtracted out in the area between the two balloon markers (for one stent) or four balloon markers (for two stents such as in complex bifurcations) to allow better visualization of the stent(s) struts or borders.

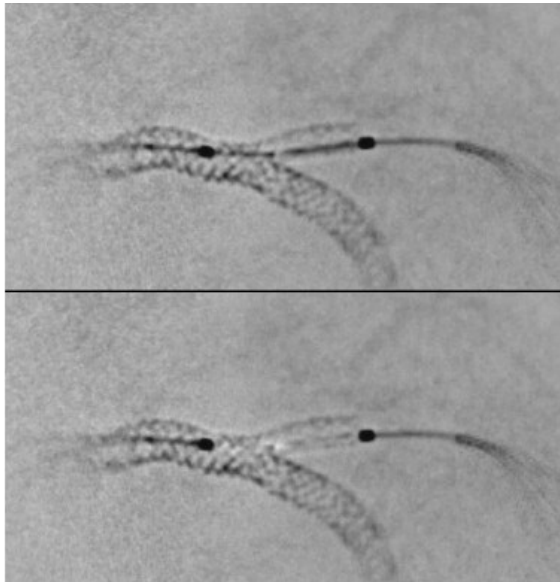


StentVesselViz¹

Being able to see the position of stent into the vessel is especially critical in cases of complex clinical situations such as bifurcations or calcified lesions. A complete apposition of stent onto vessel wall can contribute prevention of stent thrombosis & restenosis.

StentVesselViz improves the user confidence in the assessment of the position, correct deployment and shape of the stent in relation with the vessel in 2D versus cine.

Thanks to an intuitive workflow, StentVesselViz is operated smoothly and can help the user position and expand stent appropriately. The StentVesselViz option delivers from a single acquisition a StentViz image and then the fusion of this one with an image of the injected vessel. Those two images are automatically fading together for optimized and simultaneous visualization of stent into the vessel pre and post deployment.



Blended Roadmap¹

Blended Roadmap is a vascular road mapping application that superimposes a previously acquired vascular image over live fluoroscopy. This advanced application helps clinicians view the progression of guidewires and devices through the vessels.

Clinicians can select any DSA or bolus image as a reference roadmap image. By using this image multiple times, Blended Roadmap has the potential to minimize contrast media injections during road mapping.

Blended Roadmap provides additional features to enhance road mapping procedures, including:

Automated pixel shift between vessel mask and fluoroscopy to compensate for motion

Semi-automated pixel shift between fluoro mask and fluoroscopy to compensate for motion

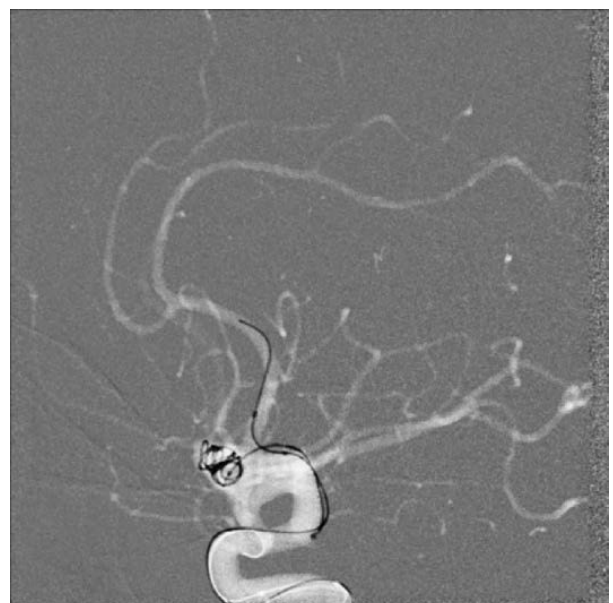
Automatic resizing of the roadmap image to adapt to the fluoroscopic field-of-view

Adjustment of vessel transparency

Adjustment of the subtraction level

Automatic system repositioning according to vessel mask location

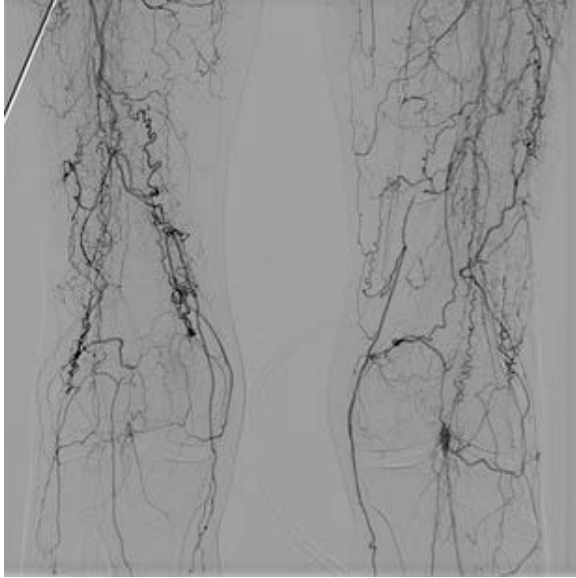
Blended Roadmap is available on systems with the Omega V table



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InnovaBreeze™ peripheral angiography¹

InnovaBreeze lets the user follow the contrast using variable panning speed control in the control room while looking at subtracted images in real time. InnovaBreeze includes Advantage Paste.



Advantage Paste^{2,3}

Advantage paste is an application running on AW3 VolumeShare Workstation that provides the ability to reconstruct and visualize the entire length of the subtracted bolus chasing acquisition on a single image.

InnovaSpin™¹

The offset C-arm permits fast-spin rotational angiography over a maximum range of 200° at variable speeds from 20° to 40°/sec (maximum speed of 30°/s from LAO to RAO) with flexible cranio/caudal oblique angulations. The enhanced InnovaSpin™ trajectories are not constrained to a single transverse plane and can be used at oblique angulations within physical constraints. A total of seven trajectories can be preset. The entire workflow for the test run and spin acquisition can take place at tableside. The spin acquisitions can either be performed in the cardiac record mode for coronaries, or in the InnovaChase™ mode for peripheral procedures.

INTERACT - ViewX¹

INTERACT View X enables display of the Live X-Ray or fusion of Pre-Op CT with Live X-Ray, on the Vivid E95 / S70N (with ViewX³) as a picture in picture. With INTERACT View X, the Echo Cardiologist is able to follow the whole workflow of the procedure from the echo display, helping facilitate communication between the Echo Cardiologist and the Interventional Cardiologist.

3D Applications

3DCT^{1,2}

3DCT is intended for imaging vessels, bone and other internal body structures. It helps physicians in diagnosis, surgical planning, interventional procedures and treatment follow-up. 3DCT performs at 40 degree/sec and can be used with 4 different field of views. It utilizes automatic exposure technique to optimize image quality and dose all along the rotational acquisition.

3DCT HD^{1,2}

3DCT HD is intended for imaging vessels, bone, soft tissues, and other internal body structures. It helps physicians in diagnosis, surgical planning, interventional procedures and treatment follow-up. 3DCT HD offers 3 rotation speeds: 16, 28 and 40 degree/sec, and 4 different field of views. It utilizes automatic exposure technique to optimize image quality and dose all along the rotational acquisition.

	3DCT	3DCT HD
Spin duration	5 sec.	5, 7, 13 sec.
Frame rate	50 fps	50 fps
Reconstructed 3D model resolution	512x512x512 256x256x256	512x512x512 256x256x256





3DStent^{1,2}

3DStent is the first cardiac application based on “CMCT imaging” (C-arm Motion compensated Computed Tomography) designed to provide an intra procedural 3D reconstruction of the coronary stent, without additional devices or added cost* and with zero additional contrast. 3DStent provides 3-Dimensional views with easy image interpretation and fast measurements on the reconstructed stent.

The reconstructed stent is displayed on the AW as a 3D object with a 3D rendering view as well as slices views, both in the stent cross-sections, allowing for stent diameter and area measurements, and also in two orthogonal longitudinal views along the stent axis.

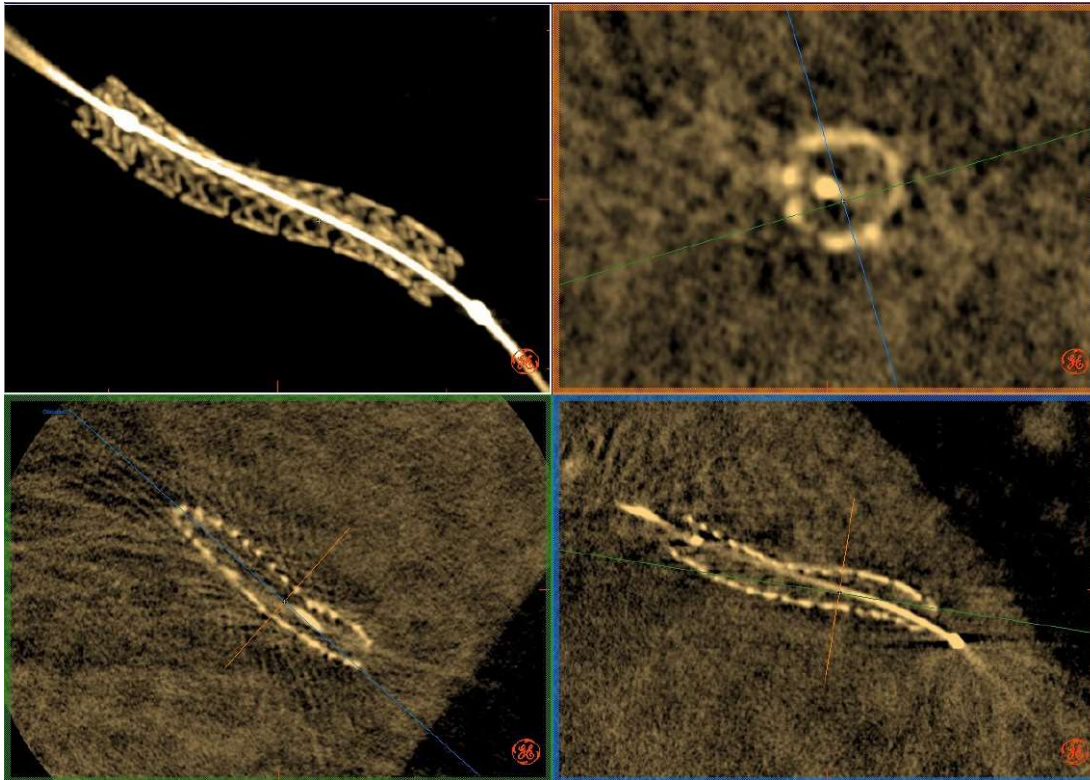
3DStent	
Spin duration	10 or 20 sec.
Frame rate	30 fps
Reconstructed 3D model resolution	512x512x512
Voxel size	0.1 mm x 0.1 mm x 0.1 mm

Transfer of the acquired data to the AW workstation is automated including image reconstruction, processing and display. The resulting 3D model can be visualized as axial slices and volume rendering.

Slice reconstruction for 3DCT / 3DCT HD can be exported as DICOM CT format.

* validated in a simulated environment with a moving coronary stent

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Subtracted 3D^{1,2}

Subtracted 3D enhances the 3DCT / 3DCT HD application by adding automated sequential mask and contrast spin acquisitions with processing protocols to produce subtracted 3D vascular images. Clinicians may use Subtracted 3D to quickly visualize vessels without the need to remove surrounding bone, tissue, and implanted devices. The output of the 3D processing provides convenient side-by-side and separate visualization of the mask series, the subtracted vascular anatomy and the standard segmented 3D vascular images.

Interventional devices such as coils, stents, glue and clips, as well as calcified plaque, are visible on the mask image and can be fused onto the subtracted image. Their transparency can be adjusted for optimal visualization of the implanted devices in relationship to the vascular anatomy.

3D presets

It is possible to recall predefined 3D CT acquisition parameters through 3D presets targeted for anatomy and particular clinical purposes such as vascular, soft tissues, bones, devices visualization, or a combination thereof.

The following 3D acquisition parameters can be customized:

Field of view
Rotation speed
Image-quality level
Subtraction
Percentage of horizontal (top-bottom) and vertical (left-right) collimation in the FOV

Workstations

Optional AW workstation³ can be connected to the system depending on site requirements.

AW is a multi-modality (CT, MR, XR, TEP, CBCT...) image review, comparison, and processing workstation. It allows the use of real-time image fusion applications through a dedicated communication interface: fastlink (1Gb/sec).



03 | Gantry

Positioner specifications	
L-arm rotation on vertical axis	±100° (±95° motorized limit set)
C-arm angulation Combination of movements of the C-arm and L-arm	50° cranial and 45° caudal Permits -/+55° cranial and caudal angulations
C-arm angulations speed	0 to 15° (Up to 20°/sec with InnovaSense)
Offset C-arm	-117°/+105° RAO/LAO rotations
offset C-arm throat depth	107 cm (42 in) with L-arm at 0° provides femoral coverage on most patients without rotating the L-arm
Fully motorized SID	8.9 cm/s (3.5 in/s)
SID range	85 cm to 119 cm (33 in to 47 in) – 20 cm detector configuration 89 cm to 119 cm (35 in to 47 in) – 30 cm detector configuration
Tube Focal Spot distance to Isocenter (SOD)	72 cm (28 in)
Isocenter to floor distance	107 cm (42 in)
Positioning modes	- Anatomical mode to hold the view while moving the L-arm to an optimum patient access position. - Mechanical angulation allows movement of any one of the three axes independently for maximum positioning flexibility and vessel profiling
Support	Floor-mounted
Weight	~ 710 kg (20 cm detector configuration) ~762 kg (30 cm detector configuration)

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04 | Patient Table

The Allia IGS 3 system comes with Omega table (Omega IV table is only available with 20cm detector configuration)

	Omega V	Omega IV
Maximum total load	304 kg (670 lbs.)	304 kg (670 lbs.)
Maximum patient weight	204 Kg (450 lbs.)	204 kg (450 lbs.)
Maximum accessories weight	100 kg (220 lbs.) while complying with the following -maximum weight requirements: • 40 kg (88lbs.) on each of the two fixed side rails • 20 kg (44 lbs.) of accessories on the table foot-end rail (option)	100 kg (220 lbs.) while complying with the following -maximum weight requirements: • 40 kg (88lbs.) on each of the two fixed side rails • 20 kg (44 lbs.) of accessories on the table foot-end rail (option)
CPR	50 kg (110 lbs.) additional maximum load	50 kg (110 lbs.) additional maximum load
Tabletop absorption	Less than 0.85mm Al Equivalence, 100KVp	Less than 0.85mm Al Equivalence, 100KVp
Tabletop Material	Radio translucent carbon fiber tabletop	Radio translucent carbon fiber tabletop
Tabletop length	333 cm (131 in)	300 cm (118 in)
Tabletop width	46 cm (18") in patient trunk area	46 cm (18") in patient trunk area
Horizontal Float Movement	8-way	8-way
Longitudinal travel	Up to 170 cm (67")	Up to 110 cm (43.3")
Longitudinal Speed	15cm/s	15cm/s
Imaging coverage with table panning	Up to 187 cm (73") – 20 cm detector Up to 195 cm (76") – 30 cm detector	Up to 187 cm (73") – 20 cm detector
Transverse Travel	± 14 cm (± 5.5")	± 14 cm (± 5.5")
Vertical travel above floor	From 78 cm (30.7") to 108 cm (42.7")	From 78 cm (30.7") to 108 cm (42.7")
Vertical Speed	2 cm/s (0.8"/s) at 50Hz. 2.5 cm/s (1"/s) at 60 Hz	2 cm/s (0.8"/s) at 50Hz. 2.5 cm/s (1"/s) at 60 Hz
Accessories rails	Available on the base section of the tabletop to mount tableside controls and IV pole	Available on the base section of the tabletop to mount tableside controls and IV pole
Table weight	~ 538 kg	~ 538 kg

05 | User interface



In the examination room

Control Panel

Gantry and table motion control, disable/enable patient contouring, system lock/unlock, emergency stop, Fields-of-view, collimator blades, contour filters
Mushroom with free floating panning
Hand detection technology using capacitive sensors to enable system motion
IPX4 certified
Size: 310 x 180 mm
Weight: Less than 2.35 kg, without rail clamp and cable
A second optional control panel can be added at tableside or in the control room

Touch Panel

The Touch Panel provides safe and simple access to key features throughout the exam, to control the system functions as well as integrated equipment.

Allows to control image acquisition, image review, dose settings, Auto Positioner, Mac-Lab™ hemodynamic recording systems ^{1,3} , CardioLab™ EP recording systems ^{1,3} , AW advanced applications ¹ , Large Display Monitor ¹ layout management
Personalization: home page content and layout, imaging protocols, large display monitor layouts, auto-positioner presets, Touch Panel theme.
Operator profiles for personalized experience
IPX4 certified
Size: 331 mm x 223 mm
Weight: 1.7 kg without rail clamp and cable
Screen size: 13.3" diagonal
Screen resolution: 1 920 x 1 080
Viewing angles: ± 80° (H & V, minimal)
Screen treatment: Mat, anti-glare
Can be mounted at tableside or on an articulated arm
A second optional Touch panel can be added at tableside.

Direct Access Panel

Controls at the detector level :

- Configurations with 30 cm detector: controls for table longitudinal motion (Omega V table configuration), gantry angulation, and detector lift
- Configurations with 20 cm detector: gantry angulation, and detector lift

Emergency detector back-out

Controls adapting to gantry position around the table

Wireless mouse

To provide more AW capabilities at tableside, the In-Room AW Mouse Interface Kit¹ enables to connect an in room wireless mouse to drive the AW from table side is available.

A mouse tray can be mounted at tableside

Footswitch

Ergonomic footswitch to control fluoroscopy, record acquisitions, as well as table longitudinal and lateral brakes

Optionally comes as wireless footswitch¹

Wireless footswitch has an autonomy of approximatively 3 months (depending on usage)

In the control room

A remote stand is provided to mount the Control Panel in the control room¹

The IGS system includes one 48 cm (19 in) LCD monitor for display of live images in the control room. Additional reference and subtracted roadmap repeater monitors¹ are available

Dedicated keypad for convenient control of commonly used review functions provides an image shuttle knob to control playback and one-touch access to image review functions

Pause, adjust brightness and contrast during review

Flat graphic display with easy point-and-click mouse control supports patient management and advanced processing and analysis features

Keyboard enables patient data entry



06 | In room display

IGS system can be installed with 48 cm (19 inch) LCD monitors as primary display or GE Large Display Monitor as primary display.

48 cm (19 in) live and reference imaging monitors

Diagonal	48 cm (19 in)
Active Display	376 x 301 mm
Display matrix	1280 x 1024
Brightness	700 cd/m ² (typical)
400 cd/m ² (calibrated)	
Viewing angles	178° (H & V, typical)
LUT	DICOM
Contrast ratio	1000:1 (typical) 690:1 (calibrated)

AW color monitor

Diagonal	48 cm (19 in)
Active Display	376 x 301 mm
Display matrix	1280 x 1024
Brightness	330 cd/m ² (typical) 200 cd/m ² (calibrated)
Viewing angles	178° (H & V, typical)
Contrast ratio	1000:1 (typical) 500:1 (calibrated)

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GE Large Display Monitor¹

The GE Large Display Monitor (LDM) is an in-room primary monitor designed to streamline procedure workflow. It includes a video server solution and is fully integrated with the Touch Panel at tableside.

GE Large Display Monitor specifications	
Diagonal	139.7 cm (55 in)
Active Display	1210 x 680 mm
Display matrix	8 megapixels 3840 x 2160-pixel array
Calibrated Brightness	400 cd/m ²
Viewing angles	178° (H & V, typical)
LUT	DICOM
Contrast ratio	At least 725:1
Video inputs	8 video inputs ¹ for Live, Reference, AW and optional subtracted Fluoro signals as well as for a wide variety of other video signals usually used in an interventional environment.
V-Point ¹	Hot-pluggable in-room connection point for the display of other modality sources on the Large Display Monitor Can be installed on a wall or on a boom Up to three connection point
Protection screen ¹	Yes
User interface	Layouts are selectable from the Touch Panel
Back-up monitors	48 cm (19 in) live and reference monitors, with a calibrated brightness of 250 cd/m ² and a calibrated contrast ratio of 640:1, attached at the back of the LDM or on another suspension ¹
Optional 2 nd identical in room 8 megapixels Large Display	
Additional video outputs for 3 rd party display* ¹	- HDMI 8 megapixels - HDMI resized based on monitor resolution (up to 8 megapixels)

An optional kit to interface a third-party suspension according to GE HealthCare specifications allows users to install another third-party suspension instead of the standard GE HealthCare monitor suspension offering.

*not primary Large Display nor optional 2nd identical Large Display



07 | Image management, connectivity and workflow

Record images stored in 8 bits, maximum 450 images per sequence. Storage capacity: 136,000 record images

DSA images with 12 bits data stored in 16 bits, maximum 450 images per sequence. Storage capacity: 68,000 DSA images

DICOM image output on 100Mbit Ethernet with Autosend and background transfer for fast transmission with minimal user interaction.

Patient Worklist capability provides a single point of entry of patient data, increasing staff productivity and eliminating clerical errors: patient information can easily be imported into the digital system from information systems that support DICOM Worklist Service Class Provider.

Multi-destination Push enables images to be sent to multiple remote DICOM destinations sequentially (one after another). Multi-destination helps to support a clinical scenario of handling post processing and archival activities in multiple destinations independently of each other (workstation, PACS). Multi-destination provides a seamless integration of the system into clinical workflow.

MPPS: Modality Performed Procedure Step allows the IGS system to share the main exam parameters with the hospital information system.

For the 3DCT / 3DCT HD option, users can direct-push the 3D acquisition directly to the pre-configured AW, even if the images of the exam are pushed to a PACS or another archiving system.

For further information about DICOM conformance statement: <https://www.gehealthcare.com/products/interoperability/dicom/xray-mammography-dicom-conformance-statements>



08 | Privacy and Security

The IGS system incorporates IGSDefense, our multi-layer approach to cybersecurity and data privacy, to help protect the IGS system operation and patient data from cyber threats and unauthorized access.

Access Controls	The provisioning of password-protected user accounts allows controlling the access to sensitive information of the clinical application and the Operating System. The clinical application can be accessed through local accounts as well as centralized enterprise accounts. Local accounts of the clinical application and the Operating System support password changes, and configuration of complex password rules and account policies.
User Authorization	The user accounts are members of role-based groups, which grants the users with the group's permissions. It allows restricting the access by unauthorized users to specific parts of the application. An unauthenticated Emergency Access mode can be configured, which makes the clinical application available for clinical procedures
Audit Trails	The audit trail capability generates and exports to a central server the audit records of events related to security and privacy: system state changes, user authentication, account management, patient data manipulation, malware detection, network communications and service operations. This provides means to remotely monitor such events, and to protect the system against individuals falsely denying having performed actions to be covered by non-repudiation.
Anti-Malware¹	A whitelisting-based malware protection contains a list of all authorized executables to create a closed protected system. It blocks any kind of modification to the whitelisted files as well as the execution of any unauthorized program. This provides a complete endpoint security against malware.
Firewall	The IGS system provides two levels of network firewall: (1) Operating System Firewall, and (2) external firewall/router device. These firewalls isolate network traffic to only those systems required for communication. The firewalls can manage inbound and outbound traffic rules to deny-all and allow-by-exception based on authorized ports and/or IP addresses.
Data Privacy	The IGS system provides de-identification and encryption capabilities to limit privacy risks to sensitive information. The patient data exported during clinical workflow may be encrypted by using the DICOM TLS protocol. The person names and patient identifying attributes that are collected for service purposes are anonymized by using FIPS 140-2 compliant one-way hashing algorithms.



09 | Room Requirements

Load distribution for the gantry	2678 kg/m ²
Load distribution for the Omega Table	3065 kg/m ²
Minimum ceiling height	2.71 m with dual arm fix point suspension or 2.74 m with rails and bridge suspension (9 ft)
Minimum Room dimensions with Omega V table (without accessories)	6.04 m (19 ft 10 in) length & 4.4 m (14 ft 5 in) width
Minimum Room dimensions with Omega IV table (without accessories)	5.47 m (17 ft 11 in) length & 4.4 m (14 ft 5 in) width
Humidity	20 to 70% in exam room
Range of temperature	15 to 32 °C in exam room
Atmospheric pressure	70 to 106 kPa

System Power

Nominal 380 to 480 Volts AC, three phase 50 or 60 Hz without neutral.

Maximum momentary power demand: 150 kVA

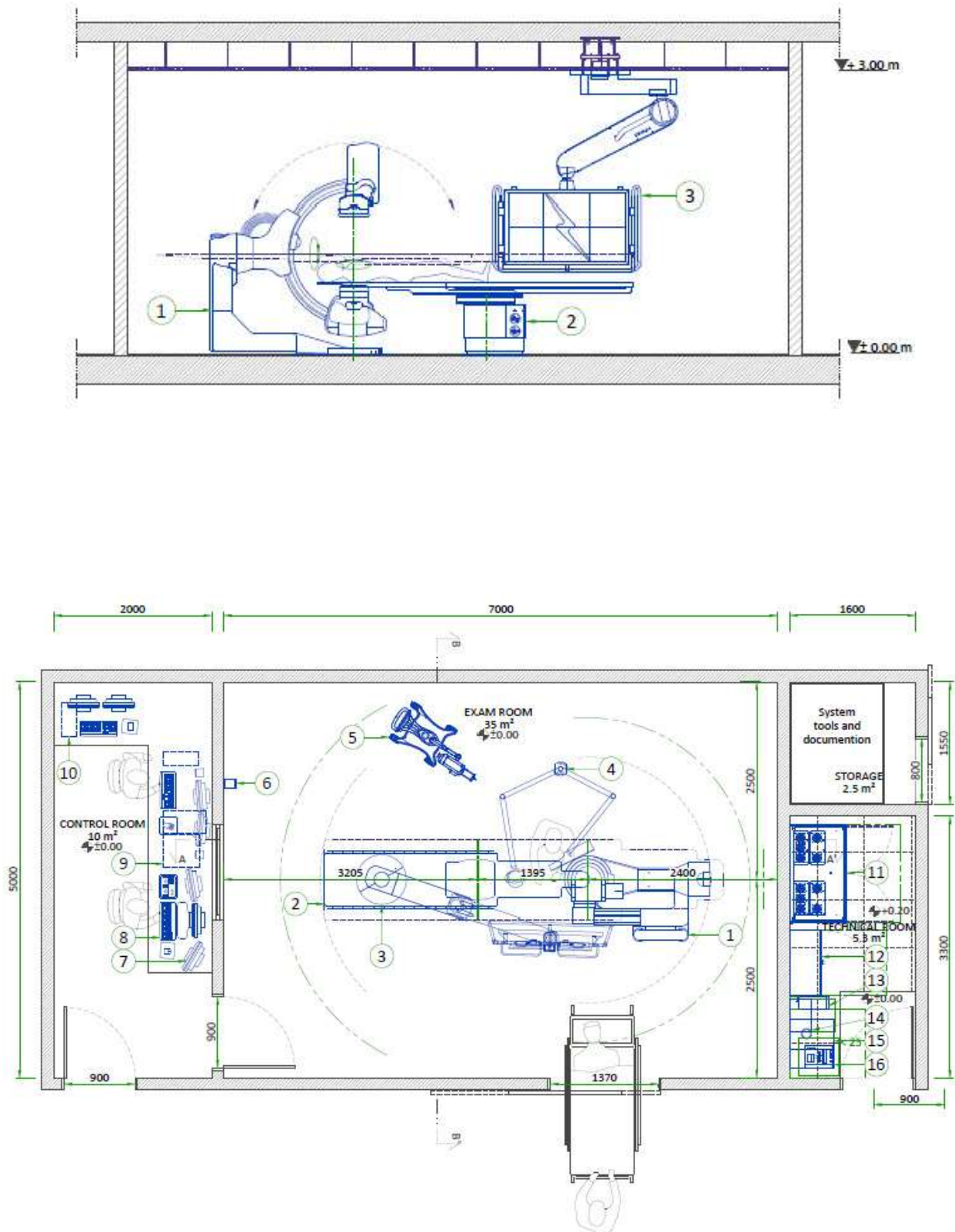
Emergency power supply

In case of power outage, an Uninterruptible Power Supply¹ (UPS) supports the system.

1kVA UPS	8kVA UPS	20kVA UPS
Only available with IGS systems with Omega table	Available with all configurations	May not be available in all countries and regions
Supports proper system shutdown in case of power outage	Supports emergency table control (required with Innova ^{IQ} table to secure CPR) and vital components (preventing to require to re-boot) until the power is restored	Supports emergency table control and fluoroscopy until the power is restored



Typical room layout



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10 | Customer service

Advanced remote connectivity allows GE to monitor systems and intervene if necessary.

Serviceability

The Digital System Manager simplifies troubleshooting and minimizes downtime with built-in equipment error logging and power-up diagnostics in real time. Resident software monitors the entire system, including peripheral hardware. The IGS system features 24-hour InSite™ remote service diagnostics and repair. InSite™ service is available to systems covered by the original warranty or by a GE service contract (broadband required).

Extended service¹

An optional full-service contract ensures uptime even after the original warranty expires and provides advanced remote diagnostics through a broadband or phone connection.

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Product or options may not be available in all countries and regions.
Allia IGS 3 Cannot be placed on the market or put into service until it has been made to comply with all required regulatory authorizations. Allia IGS 3 is CE marked.

Allia IGS 3 catalog number is 5874604
Full product technical specification is available upon request.
Contact a GE HealthCare Representative for more information.
Please visit www.gehealthcare.com/promotional-locations.
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1 Option
2 Requires AW
3 Other Device or option not covered by Allia IGS 3 regulatory authorization
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