BRAINLAB

ziehmimaging

Redefined 3D imaging and navigation with Ziehm Vision RFD 3D and Brainlab Fluoro 3D

R3DEFINED IMAGING

MOBILE C-ARM **NAVIGATION SUITE**

Image-guided surgery is gaining relevance in spine and trauma procedures. In combination with Brainlab navigation, Ziehm Vision RFD 3D enables a new level of image quality in navigated fluoro 3D surgery.

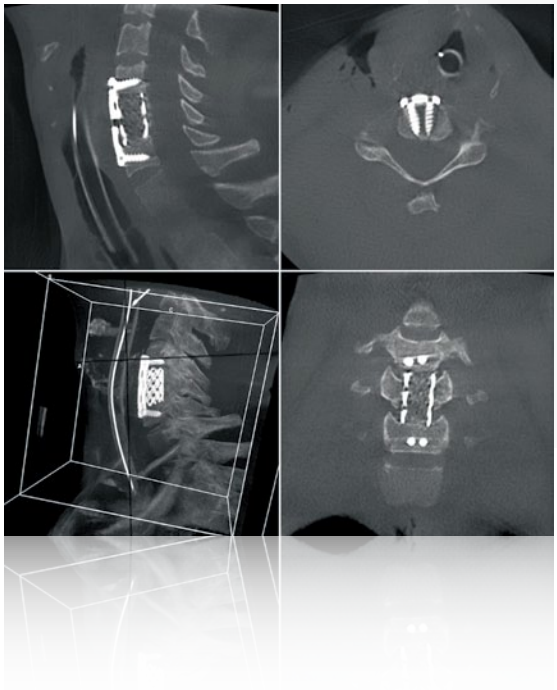
Patented SmartScan technology generates 180° image information and the Ziehm NaviPort interface automatically transfers the 3D dataset to the Brainlab navigation system.

Ziehm Vision RFD 3D is the only fully motorized mobile 3D C-arm worldwide that provides a 16 cm edge length per scan volume.

In combination, these systems allow surgeons to navigate in 3D data with excellent image quality and high precision, utilizing navigation-ready instruments from different implant companies for navigated open and minimally invasive spine and trauma procedures.

Additionally, intraoperative control scans provide quick and reliable progress checks and documentation at all times.

Commercial availability of all product components pending.

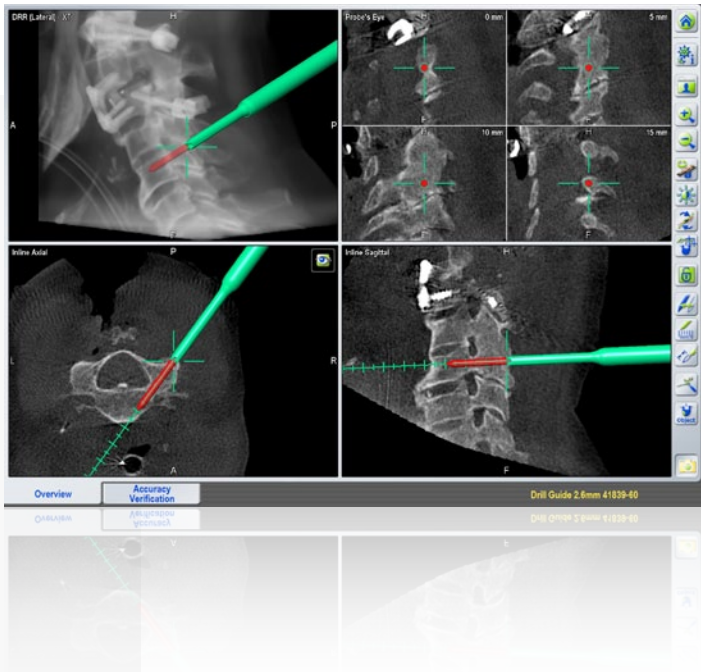


COMPLETE 3D DATASET IN JUST 3 MINUTES

Available with a 30 cm x 30 cm flat-panel, the C-arm helps gain intraoperative confidence and reduce potential revision surgeries. Ziehm Vision RFD 3D offers CT-like reconstruction with ZIR (Ziehm Iterative Reconstruction) for metal artifact reduction. Ziehm Vision RFD 3D provides a complete 3D dataset in just 5 minutes[1] and enables navigation of up to 7 cervical vertebrae in a single 3D scan volume.

ACCURATE PEDICLE SCREW PLACEMENT

Automatic registration of the dataset allows fast and reliable navigation. Brainlab Spinal Navigation delivers more accurate pedicle screw placement and enables reduction of X-ray exposure.[2,3] The indication range spans cervical, high thoracic, pelvic and routine lower lumbar surgery. Alongside a range of Brainlab instruments, cooperation with selected third-party manufacturers provides navigation-ready integrated instruments.



1) This time includes draping, the team leaving the OR, hyperoxygenation of the patient, breathing stop, image acquisition, and reconstruction.

2) Richter et. al., Cervical pedicle screws: conventional versus computer-assisted placement of cannulated screws. Spine (PhilaPa 1976). 2005 Oct 15;30(20):2280-7

3) Gebhard et al., Does computer assisted spine surgery reduce intraoperative radiation doses? Spine (PhilaPa1976). 2006 Aug 1;31(17)ß

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