



UltraScan™ Table

Ideal Platform for Vascular and General Ultrasound

The UltraScan™ Table is a multi-modality surface designed to improve general ultrasound images and enhance sonographer ergonomics. The UltraScan™ Table can accommodate a laboratory's distinct needs and gives sonographers the ability to change modalities as quickly as switching transducers. It is the ideal multipurpose exam surface for Vascular, OB/GYN, General Ultrasound and Cardiac Ultrasound.

UltraScan™ Table



A Step Above the Rest in Ultrasound Tables

Electric Foot Drop Section (0°-90°)

- Electric foot drop section makes an ideal platform for performing vein ablation procedures
- Provides unhindered access for the ultrasound probe and eliminates stress on sonographer wrist and forearm



Optional Two-way Dual Drop-Section

- By incorporating optional drop-sections, the UltraScan™ Table becomes an ideal surface for performing echocardiography studies by allowing uninhibited access to the apical window and an ergonomically-correct platform for both right and left-handed sonographers
- Two-way dual drop-section also facilitates decubitus positioning for general ultrasound procedures

Optional Sonographer Extension

- For right-handed scanners who may get squeezed off the edge of the table by larger patient



Optional 25° Reverse Trendelenburg

When performing peripheral vascular duplex imaging, optimum image quality is achieved when vessels are dilated¹

- 25° reverse Trendelenburg and footboard allow for maximum lower extremity vessel dilation

Potential Applications

- Vascular ultrasound
- Vein ablation
- Small parts ultrasound
- General ultrasound
- Routine and acute diagnostic echocardiography

Benefits

- Ideal platform for all major ultrasound procedures including OB/GYN, vascular, small parts, general ultrasound, and cardiac ultrasound^{1,2}
- Proven, reduced image-acquisition time
- Foot drop-section and pelvic cut-out allow unhindered access for ultrasound probe during endovaginal studies^{1,2}
- Available 25° reverse Trendelenburg and foot-board allow for maximum lower extremity vessel dilation¹
- Protects sonographers from career-ending injuries by improving procedure ergonomics, which is critical, since recent studies have revealed that 80% of sonographers are scanning in pain and 20% of those sonographers eventually experience a career-ending injury^{3,4,5}
- Durable stirrups maintain stable patient position
- Flexible positioning includes upright chair position

Features

- 14" x 8.5" exam drop-section including single-handed rapid release, right-side remote release, and patented non-pinch flap (select models)
- 14" x 11.5" right-side sonographer's drop-section with single-handed rapid release, and patented non-pinch flap (select models)
- 1000 lbs. load capacity
- 500 lbs. lift capacity
- Height; electrically-adjustable 24.5" to 34.5"
- Fowler positioning from 0° to 70°; electrically-adjustable
- Foot drop-section; manually-adjustable and removable or electrically-adjustable
- 15° Trendelenburg/15° reverse Trendelenburg; electrically-adjustable (select models)
- 15° Trendelenburg/25° reverse Trendelenburg; electrically-adjustable (select models)
- Foot-board (select models)
- Self-storing adjustable stirrups
- Sealed, water-resistant, low-voltage, control wand with self-retracting, coiled power cord
- Paper roll holder & cutter
- Pelvic cut-out with liquids removal tray (select models)
- Storage tray

Options & Accessories

- IV pole holder
- Padded arm-board
- Carotid head-support
- Adjustable leg-supports
- Sonographer drop-section extension (dual drop-section models)
- Foot switch
- 71 optional vinyl colors

The UltraScan™ Table is an essential component to duplex imaging and venous mapping. To learn more and receive a free SDMS CME credit, please visit MPI University™ at www.MedicalPositioning.com/cme/ to read “Diagnostic and Interpretive Challenges Encountered During Venous Duplex Studies” by Steven R. Talbot, RVT, FSVU.

Steven R. Talbot, RVT, FSVU, a recognized authority in vascular ultrasound, states:

“...one of the basic principles of duplex imaging of the lower extremity veins: having the bed tilted in a reversed Trendelenburg position. If the bed is flat, the small veins of the calf are collapsed and nearly impossible to see. Elevating the head of the bed allows the veins to fill with blood and expand so they can be seen easily.”

“Doing detailed work in the calf is extremely important and not that difficult, when the examiner...uses proper technique.”

“The technique described here is one that is done with the patient in a steep reversed Trendelenburg position and the Valsalva maneuver is used primarily to document venous reflux.”

“Specifically for the venous reflux studies, the reverse Trendelenburg angle should be at least 20° to optimize venous pooling in the lower extremities.”

References

1. Steven R. Talbot, RVT, FSVU, Diagnostic and Interpretive Challenges Encountered During Venous Duplex Studies, Vascular Ultrasound Today 9(1)1-28, 2004.
2. Industry Standards for the Prevention of Work-Related Musculoskeletal Disorders in Sonography, Developed through a consensus conference hosted by Society of Diagnostic Medical Sonography May 2003.
3. Merton, Daniel, MSIs: Addressing a Real Pain in the Neck for Today's Sonographers, ADVANCE for Radiologic Science Professionals, July, 2000.
4. Wihlidal, L.M., Kumar, S.: An Injury Profile of Practicing Diagnostic Medical Sonographers in Alberta, International Journal of Industrial Ergonomics, 1996.
5. Neslihan Zehra Gültasli, The Relation Between Pelvic Varicose Veins, Chronic Pelvic Pain and Lower Extremity Venous Insufficiency in Women, Turkish Society of Radiology 2006, Diagn Interv Radiol 2006; 12:34-38.