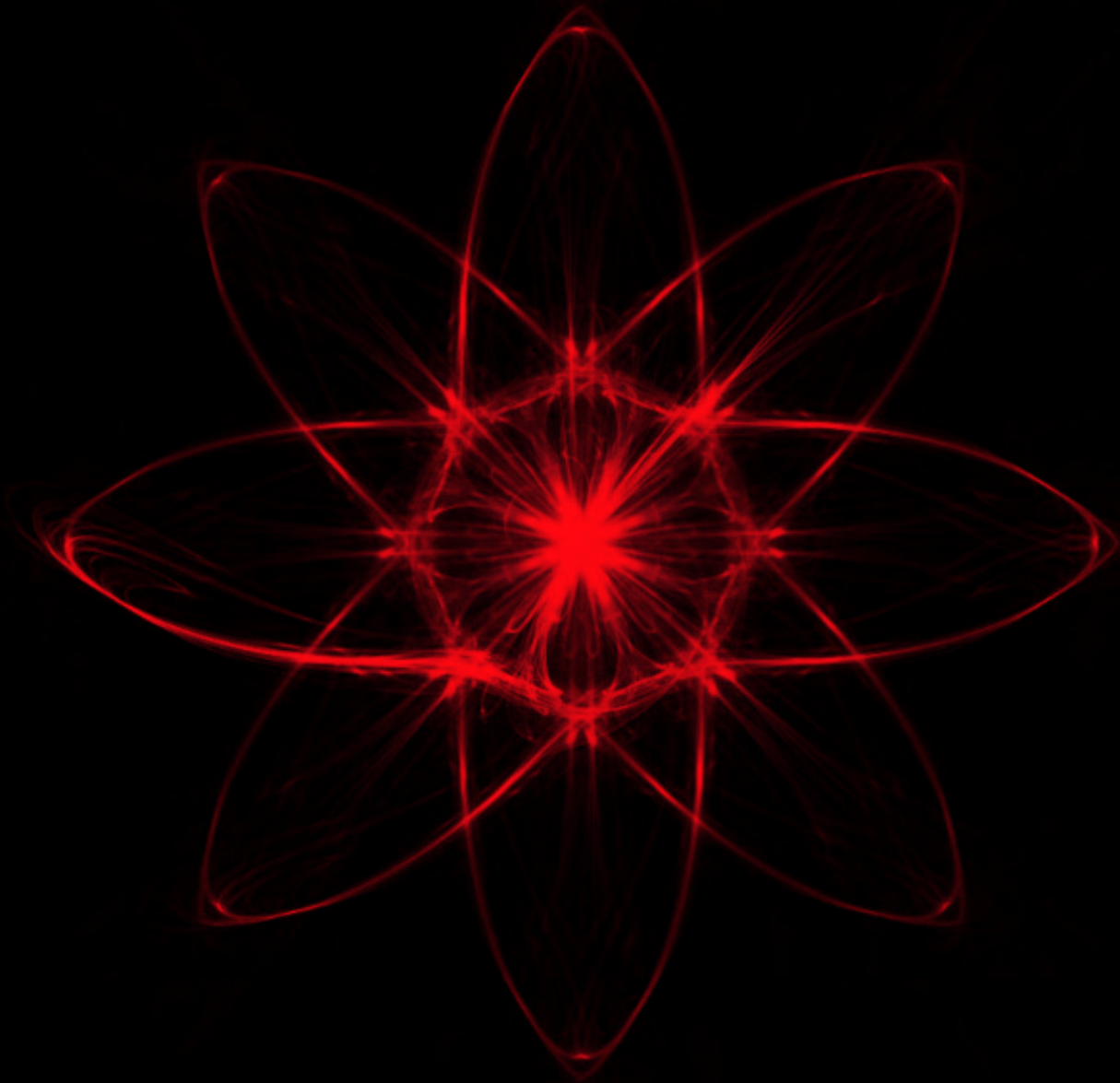


***RADIOLOGICAL
SPECIALISTS, INC.***

Imaging Systems Sales and Service

A LODOX PARTNER

A LODOX PARTNER



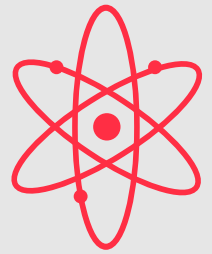
UNCOVER

FORENSIC

RADIOLOGY

exero | latin
v. to reveal; uncover
lay bare (body)

The eXero-dr aids forensic pathologists in autopsy exams by cutting down on the time it takes to examine a body.



In criminal investigations, rapid localization of foreign bodies (such as bullets) in several perspectives might be advantageous. In the case of religious organizations who need rapid burial¹ and in mass mortality scenarios, fast, high-quality imaging of all remains admitted for autopsy may be very valuable. The full-body, low-radiation format makes Radiological Specialists INC (RSI) imaging safer and simpler for personnel, and it might speed up operations in forensic pathology labs. In forensic medicine, Radiological Specialists INC has shown to be quite useful.

Introducing
rapid evident



First and only, high-speed, full-body digital radiology solution premeditated for forensic pathology

The Radiological Specialists INC's core forensic pathologists.

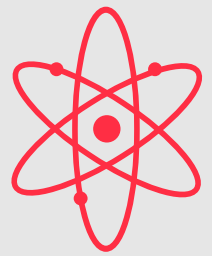
At RSI (Radiological Specialists INC), the job of a forensic pathologist has a strong resonance. "Saving lives via

inventive solutions" is our mission. We've learned that the art of medico-legal death investigations rests in the creative thinking and new procedures that must be employed in order to find answers... information that will eventually be used to prevent deaths. RSI proceeded on a joint effort based on this shared basic knowledge, which eventually allowed us to interpret and solely serve the demands of forensic pathologists all around the world.

Previous versions of the RSI technology, which were originally designed for emergency treatment, were embraced by forensic pathologists due to certain intrinsic benefits. The time has come to find a solution that combines all of the existing RSI benefits with forensic pathology requirements, and complements and integrates more easily into a forensic facility and pathology staff's everyday demands.

Forensic Pathology-driven innovation

Over 5 years of committed forensic cooperation in medico-legal death investigation institutions have resulted in eXero-dr. The user-driven developments are aimed at addressing users' daily issues and improving workflow and user-friendliness while keeping the tried-and-true RSI dependability.



These innovations include:

- Forensic-orientated user interface.
- Forensic-specific X-ray procedures to accommodate and optimally visualize:
 - Upper-Body High-Resolution Ap, - Soft Tissue/Organs,
 - Infant Size Selection (0 - 10kgs/0-22lbs),
 - Small Bone Fragments/Anthropology,
- Comprehensive waterproofing and drainage: to prevent accumulation of fluids and particles.
- Automated gurney system to allow better positioning and imaging of bodies.
- A forensic-driven design to inspire and provide a positive, elegant point of referral within the daily routine of all forensic staff. It also facilitates cleaning and disinfection.

Confidence / Peace of mind

The eXero-dr full-body scans provide a thorough clinical picture, decreasing guessing, providing peace of mind, and assisting in the determination of cause-of-death. The full-body image replaces several smaller images, making it simpler to spot injuries, foreign bodies, and distinguishing traits. The eXero-dr system augments a pathologist's clinical judgement and forensic knowledge, making it a useful resource.

Improved workflow and throughput

The whole-body image increases throughput at a facility by lowering the time necessary for a complete body inspection. 1,2 Using the RSI cuts the time it takes to cover the entire body by around 87 percent (translating to 7 RSI full-body examinations vs. 1 on conventional radiography).

The eXero-dr full-body photos optimize facility workflow even more by targeting or, in some circumstances, obviating the necessity for an autopsy.

eXero-dr is highly beneficial in mass casualty scenarios because of this.

User-friendly

Because of the significantly reduced X-ray dispersion, RSI technology is safer for both the operation and the pathology personnel. Staff can easily utilize RSI because of its simple operation, which requires no specific training or effort. Staff can manipulate bodies more easily because to the flexible scan size and autonomous rotation of the scanning arm.

REFERENCES

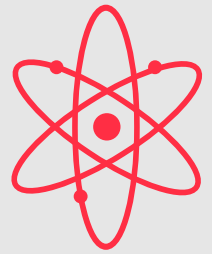
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Projectile from a Head Shot Found in the Abdomen

A case study from the Tygerberg Forensic Pathology Services Laboratory, Cape Town, South Africa

Introduction

The severity of a gunshot wound is mostly determined by the projectile's properties as well as the tissue through which the bullet passes. When a bullet hits soft tissue and crushes it, it forms a permanent cavity - the projectile's trajectory. Furthermore, a temporary cavity is created around the permanent cavity, extending the tissue radially even further. This stretching of tissue, especially in the brain and liver, can be catastrophic. In South Africa, homicide and death as a result of interpersonal violence account for 36 percent to 46 percent of unnatural deaths^{2,3}. Approximately 29% of these are connected to firearms.

Case Presentation

A 76-year old male with a single, close-range gunshot to the right side of the head was found dead on the scene.

Imaging, Diagnosis and Treatment

A single close-range gunshot entrance wound to the right temporal aspect of the skull was discovered during an external examination. On the body, there were no exit wounds. The trapped projectile was discovered in the upper left abdominal

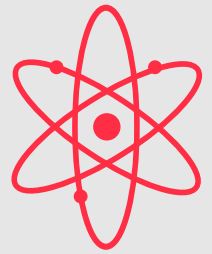
region, which corresponded to the location of the stomach, during an RSI full-body scan. The bullet wound ran from the right temporal lobe of the brain to the base of the skull, according to the autopsy. The projectile then passed via the pharynx and trachea, the pericardial sac and heart, the pericardial diaphragm, and the stomach before exiting the base of the skull and entering the chest via the right side of the neck. The projectile was recovered from the stomach lumen. The left pleural cavity contained 1600 ml of blood.

Discussion

A bullet entrance hole in the right temporal skull was discovered during the external examination. Because there was no obvious exit wound, it was assumed that the bullet was still inside the body. The most apparent location for the trapped projectile would seem to be the skull. The projectile was discovered in the stomach during an RSI full-body scan. When a projectile loses its flight stability when it enters a denser medium (soft tissue compared to air), especially when it also strikes a hard surface such as bone, it is not uncommon for it to change course, though in this case the angle of entry of the projectile may have accounted for the projectile's course.

Knowing where the projectile was located made retrieving it for additional ballistic study much easier. Because the bullet had travelled from the head to the stomach, the extent of the damage required a more concentrated examination of the tissue and organs along the projectile's path.

The bullet's damage to the brain and heart, the following exsanguination from the afflicted organs and arteries, and maybe also the haemothorax induced by the collection of blood in the pleural cavity were judged to be the cause of death.

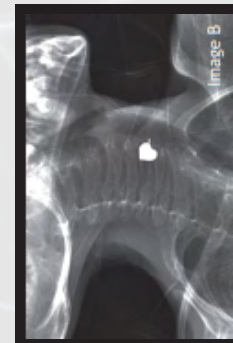


Conclusion

Knowing where the trapped bullet is might affect the autopsy's outcome, particularly in terms of extracting the projectile for additional forensic ballistic examination, but also in terms of establishing the projectile's track and tissue damage. Without a radiograph, an inordinate amount of time may have been spent hunting for the projectile that had been lodged in the brain, lengthening the time it took to complete the autopsy. The pathologists' workload is already quite heavy at a busy morgue like Tygerberg FPS. Any additional downtime has a detrimental influence on the facility's total burden. Quick access to essential information — in this example, a full-body radiograph confirming the bullet's position — is critical for efficiently managing the case load.

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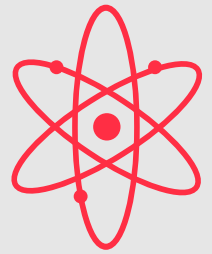


13 Second Full-body Imaging Reveals Retained Foreign Object Which Contributed to Death of Child

A case study from a United States Forensic Pathology Facility

Introduction

Cerebral palsy (CP) is a non-progressive, irreversible condition caused by a brain injury or defective brain development that occurs before, during, or shortly after birth^{1,2}. Cerebral palsy causes physical impairments ranging from minor to severe, including muscular weakness, stiffness, and the inability to eat or move independently. Concurrent medical issues, as well as variables like incapacity to feed or elevate one's head, all indicate a shorter life expectancy.



Case Presentation

The victim was a 7-year-old girl who was receiving hospice care. Cerebral palsy, polymicrogyria, epilepsy, and inflammatory bowel disease were all part of her difficult medical background. She had been unable to walk or speak since infancy. She ingested formula through a feeding tube. The decedent developed food intolerance and subsequently water intolerance toward the end of her life, and she died shortly after. There had been no abuse or neglect in the past.

Imaging, Diagnosis and Treatment

Without an autopsy, the cause and method of death may generally be identified based on the decedent's thorough medical history. However, a radiographic examination was required due to the RSI system's simplicity and rapid "Full-Body" capture. A foreign item was promptly recognised in the neck area on the RSI X-ray picture (Image A). A lateral view X-ray (Image B) was used to more precisely locate and identify the foreign item. On the exterior of the deceased or in the corpse bag, there was no jewellery or clothing item. Because of this uncommon discovery, an autopsy was ordered to rule out asphyxia as the cause of death. A heart-shaped earring was discovered inside the decedent's oesophagus, a few millimetres below the epiglottis. A necrotic cystic abscess around the earring. The cause of death was determined to be bronchopneumonia as a result of cerebral palsy complications. The esophageal abscess may have contributed to the patient's inability to consume extra food or water through the mouth.

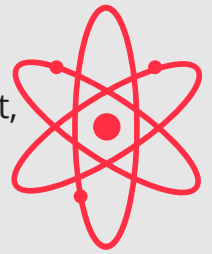
Discussion

The cause of the earring being caught in the decedent's oesophagus is unknown. Children eat foreign bodies on a regular basis, while the global prevalence is unknown. According to the Susy Safe Project, the incidence for children aged 0 to 14 years in the European Union is over 500004. Over a seven-year period, Litovitz and Schmitz (1992) documented 2382 instances of swallowed cylindrical and button batteries in a national registry. Other writers just report on the number of cases assessed in a certain hospital, but they point out that many more instances are overlooked since they are not treated in the hospital because the result is benign. 6, 7, and 8. Children between the ages of six months and three years have the highest incidence.

Children with CP are substantially more prone than children in the general community to have respiratory illnesses. According to Hutton (2008), respiratory problems, mostly pneumonia, accounted for 59 percent of documented deaths, with epilepsy and congenital deformities accounting for 9 percent and 8% of the remaining deaths, respectively.

The diagnosis of pneumonia as the cause of death is consistent with the patient's medical history and is a well-documented cause of mortality in CP patients. The autopsy found no evidence of asphyxia. The origin of the earring in the oesophagus has yet to be determined. No foul play was suspected, though Conclusion.

The A/P and lateral X-ray pictures of the deceased were taken in less than 5 minutes, revealing the presence of an unknown retained foreign item. This greatly influenced the decision to request a comprehensive autopsy. The RSI X-ray scanner's effectiveness allows this forensic pathology laboratory to obtain X-ray pictures of all patients to rule out any occult injuries, old projectiles, and retained foreign objects in situations where only an exterior examination is generally conducted (as in this case). The X-ray result had an impact on how this case was handled and, in the end, disclosed the reason and manner of death.



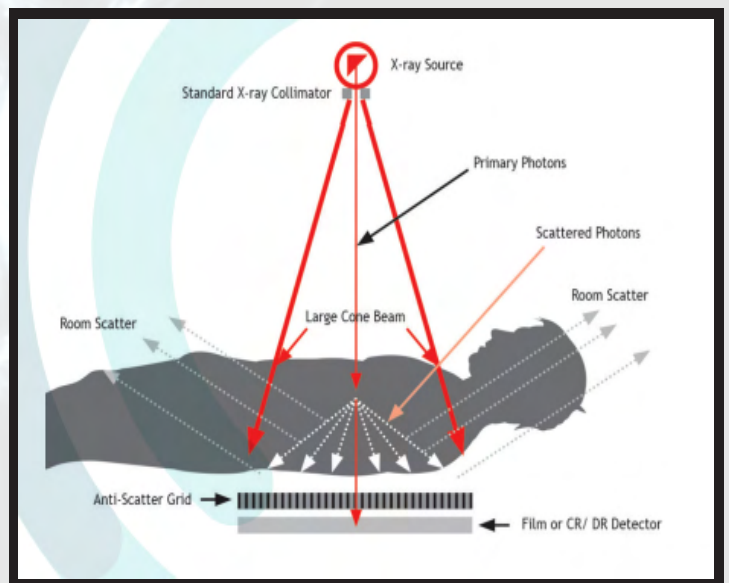
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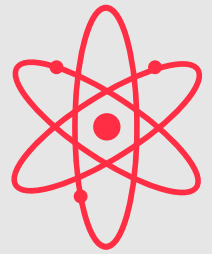
RSI X-ray Technology: An Explanation

Conventional, Computed and Digital X-ray Systems

- Traditional, CR, and flat panel detector-based DR systems employ a large cone-beam of X-rays that spread out in all directions over the required field-of-view (i.e. length and width).
- A significant number of scattered X-ray photons result from this broad beam, reducing the amount of primary X-rays that reach the detector and degrading picture quality by generating noise on the image.



- To limit the quantity of scattered X-rays that might otherwise reach the detector or film, most systems use a post-patient anti-scatter grid.
- As a result, overall patient radiation exposure is increased in order to compensate for the unfavorable effects of dispersed radiation from the cone-beam and radiation absorption by the grid.
- Because of the increased radiation exposure and the wide cone of X-rays, there is a lot of dispersed radiation in the room.
- Conventional, CR, and DR systems have a maximum field-of-view of around 400mm/16" square due to their geometric design.



The RSI Linear Slot Scanning Radiography System

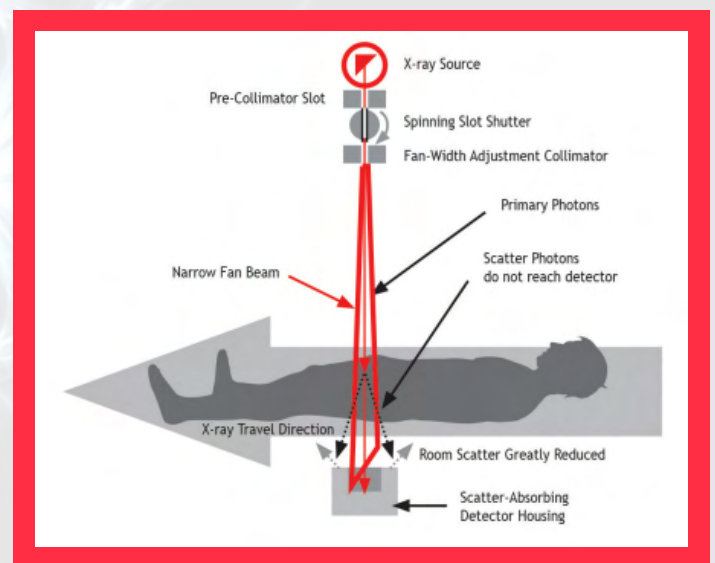
- RSI LSSR scanning system is a unique technology employing our proprietary X-ray beam controlling mechanism, and linear scanning technique.
- The narrow beam and high quality primary photons reduce the number of X-rays scattered by the body, so no postpatient anti-scatter grid is required.
- The RSI X-ray beam is highly collimated by a narrow slit and a fan-width adjustment collimator into a laser-like fan beam of primary X-ray photons which spreads out in only one direction (i.e. width).
- In addition, the detector is fitted into a scatter-absorbing housing, which is designed to eliminate almost all remaining scatter before detection, increasing the signal to noise ratio in the detected image.
- The lower exposure and collimated, narrow fan-beam also significantly reduce scattered radiation throughout the room.
- The inherently higher image quality means that a significantly lower patient exposure is required to achieve diagnostic quality images.
- The X-ray tube, X-ray fan beam, collimating slit and detector all move together along a linear scanning path, collecting X-ray information to produce X-ray images of 100mm/4" square up to 1800mm/70" x 680mm/27".

The first and only full-body, high-speed digital radiology solution premeditated for forensic pathology.

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Potgieter JH, de Villiers M, Scheelka M, de Jager G, "An explanation for the extremely low, but variable radiation dosages measured in a linear slit scanning radiography system", Medical imaging 2005:Gastrointestinal Endoscopy, vol. 41, no. 1, pp. 33 - 38, 1995.

The Physics of Medical Imaging, Proceedings of the SPIE, 2005; 5745: 1138 - 45 **eXero-dr Product Specifications**



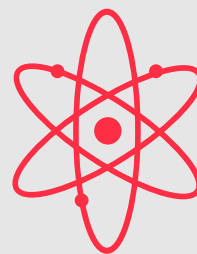


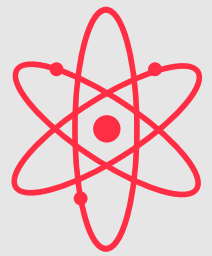
Image Quality	>16000 grey levels; 60µm fundamental pixel size; up to 5 lp/mm.
Maximum Image Size	1800mm x 680mm (70" x 26").
Throughput	35mm/s - 140mm/s; 12.98s for a full scan at normal speed.
Duration of Examination	<15 seconds from 'end of scan' until image available on screen 28 seconds between successive scans (provided X-ray tube heat <20%).
Positioning	C-arm allows imaging angles from 0° - 90° i.e. AP (or PA) to lateral. Table can be tilted from 0 to 340 mm, allowing Trendelenburg angles to 0° - 10°.
Output	Average instantaneous X-ray exposure time of 22ms.
Typical Entrance Dose	Chest AP ±0.115 mGy. Maximum scattered radiation measured 1 meter from the focal spot in any direction is 0.2 mGy per hour @ 145 kV 250 mA (worst case technique factors).
Detector	Proprietary ultra-low noise TDI CCD detector using Gadox light conversion.
Trolley / Gurney	300kg/660lbs weight capacity. Automatic shift to lateral, AP and oblique angles.
Machine Dimensions	1500kg/3306lbs; LxWxH: 2 810mm x 1 586mm x 1 227mm (111" x 63" x 89").
Digital Viewing Station	High Luminance, High Contrast, 23" Monitor; 1920 x 1 080 pixels. Imaging software allowing image recall, database access, zoom, pan, rotate, lucid™ image enhancement, anatomical measurement capability and window/level control.
Ambient Environment	10°C - 25°C, 40% - 75% relative humidity, 700hPa - 1060hPa atmospheric pressure, dust free non-corrosive atmosphere.
Compliance	US FDA Pre-Market Clearance (510k) No. K013999 Accession # 0310920. EU CE-Mark ISO 13485-2003 ISO 9001:2000.

info@RSI.com

These specs are up to date and may change. To provide a well-engineered product, RSI Systems maintains the right to change these standards.

High-end 16-slice CT with Optimal Resolution

Radiological Specialists INC (RSI) Medical Systems Co., Ltd



**World Leading
Medical Products and
Solutions Supplier**

About RSI (Radiological Specialists INC)

Radiological Specialists INC is a producer of X-ray computed tomography (CT) and Positron Emission Tomography (PET). FMI is a wholly owned subsidiary of Radiological Specialists INC and is based in Solon, Ohio, have Research & Development Centers. In partnership with the Research and Development team at RSI, FMI Operations in the United States has been focused on Research and Development

and creating high-end medical imaging equipment. We've successfully built CT and PET/CT systems together. RSI has acquired CFDA approval and is now selling CT and PET/CT systems in China. FMI has received FDA clearance for the CT Systems and aims to set up production facilities in Solon, Ohio to produce systems for the worldwide market. Our company's fundamental philosophy of "Compassion For Life" focuses on humanity, and we strive to provide superior medical imaging equipment and services to help people throughout the world improve their health and quality of life.

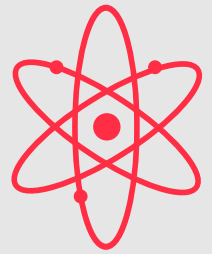


World Leading

Intelligent Medical Products and Solutions Supplier.

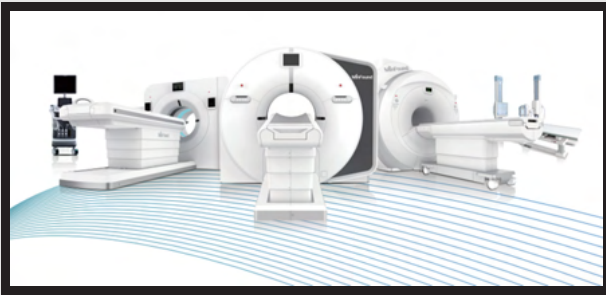
Compassion for life

- RSI is always aware of your needs and works to provide reliable and cost-effective goods and services to patients all around the world.
- RSI has been driven by innovation, with a focus on producing cutting-edge devices for obtaining exact pictures and diagnosing diseases at an early stage.



Professional & Accurate Delicate & Comprehensive

- Long Service Life
- Advanced Application
- Super-fast Workflow
- Low-Dose
- High-Definition



A high-end 16/32*-slice CT with Optimal Resolution ScintiStar® Detector

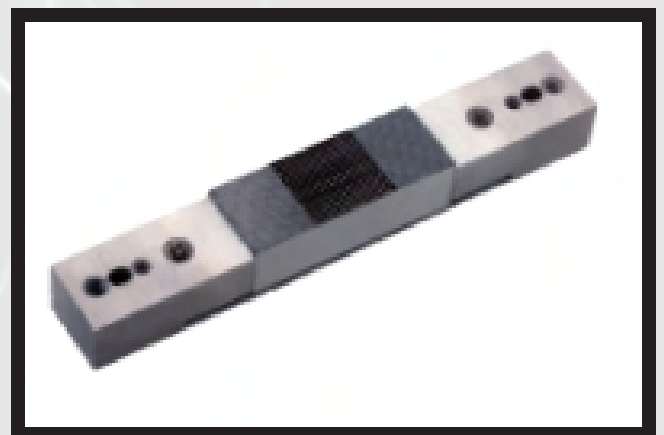
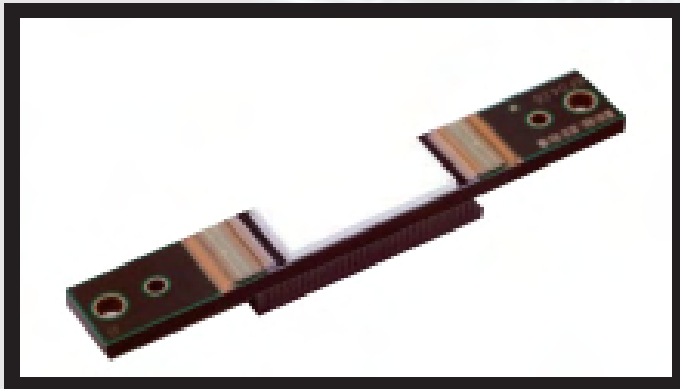
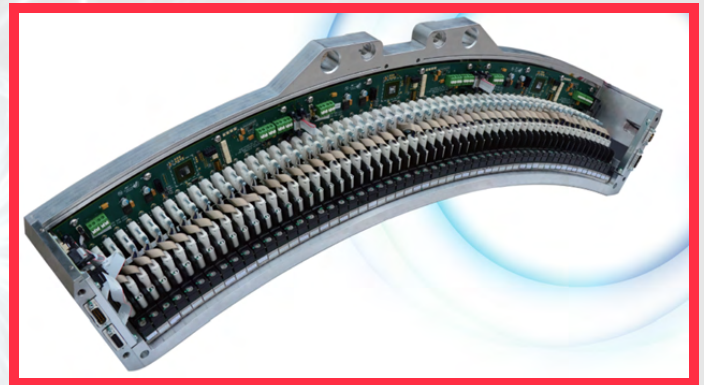
Owning the Intellectual Property Rights
New Modular Integrated Detector
High Contrast Resolution MTF0% 21.8lp/cm.

Ultra-high speed rare earth scintillator material

This material improves quantum detection efficiency and has a very short decay period, allowing it to improve spatial resolution and picture quality even at low doses.

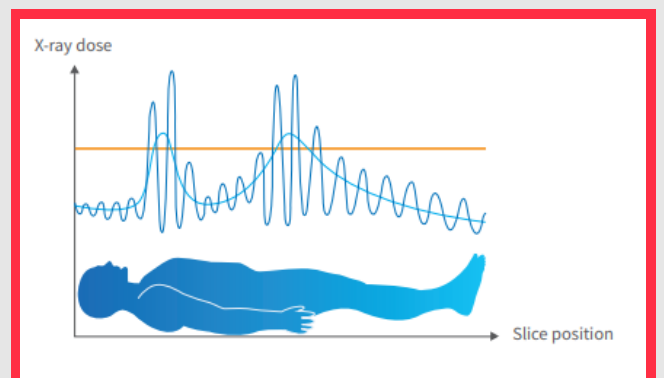
ASG + ASIC design for maximum signal-to-noise ratio

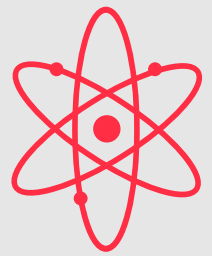
The detector module is completely integrated and downsized to achieve key performance criteria such as minimal scatter, low electrical noise, and a high signal-to-noise ratio.



Low Dose Technology imA (intelligent mA)

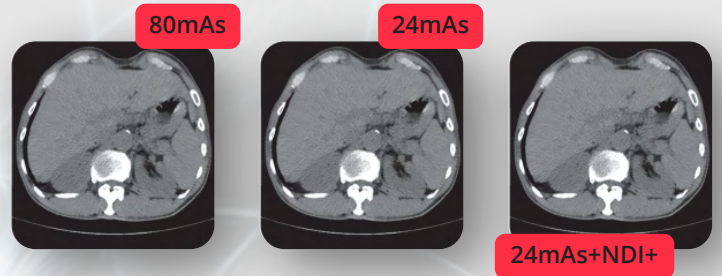
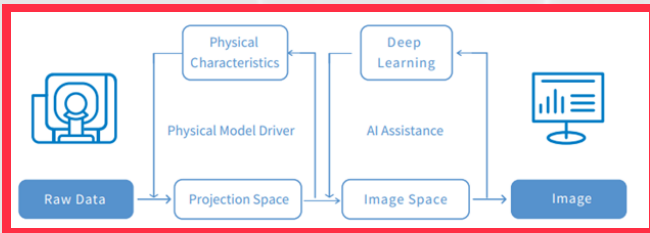
The x-output tube's milliamperes are automatically adjusted based on the size of the patient and the scanning location, resulting in a more balanced picture at each layer and a reduced radiation dosage for the patient.



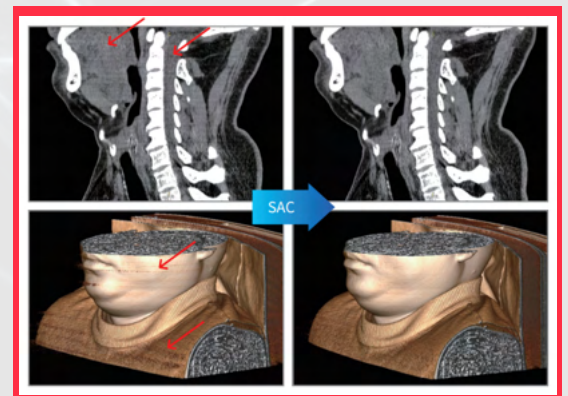
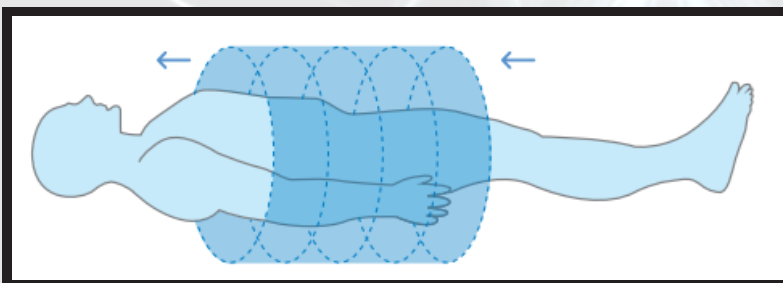


NDI (NanoDose Iterative)

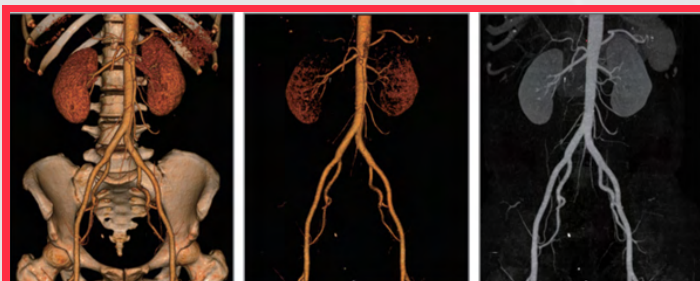
The raw data is iterated in both the projection and picture spaces at the same time. The projection space iteration method takes into account the physical properties of the X-tube and detector, while the image space iteration process is based on the anatomical structure's deep learning network. At low dosage, NDI+ ensures image quality.



Super-fast Workflow One-key Intelligent Scanning Large Pitch Spiral Scanning with SAC Technology

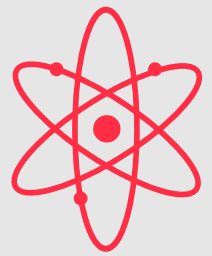


High-speed Reconstruction System



Optima Design





One Side Integrated Control

Improve the layout of the system control panel. The Flow of a Systematic Process Ensure that the product is of high quality and stable. Improve the efficiency of after-sales maintenance.



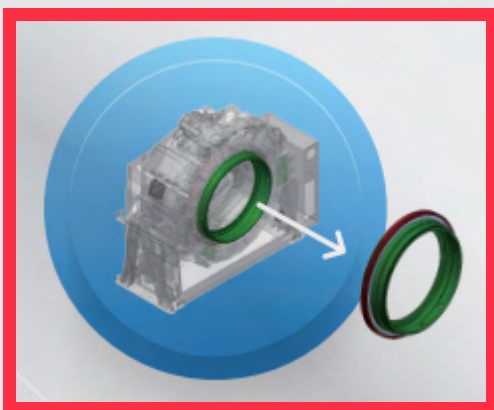
Thermal Insulation Design

Increase the efficiency of heat dissipation Extend the Detector's Life and Ensure Image Quality.



The Integrated Casting of Stator and Rotor

Minimum Vibration During Rotation
Minimum Deformation During Rotation.



High Precision Bearing

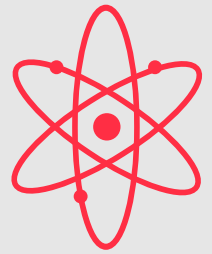
Achieve Military and Aerospace Level Requirements Long Service Life and Excellent Stability with Zero Error and Zero Runout under High Speed Rotation.



Multi-point Temperature Control Technology

Maintain System Stability by Monitoring the Temperature Automatically.

Clinical Application Image



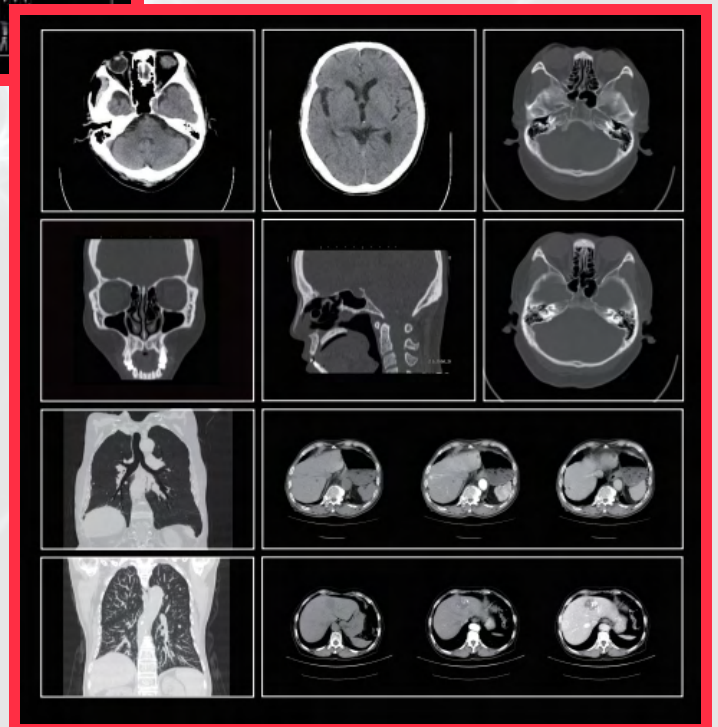
RSI Cloud Solution Cloud Diagnosis

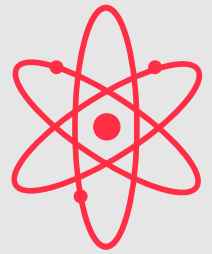
Famous radiologists diagnose using a remote image diagnostic system, which improves the capacity of primary hospitals to diagnose.

Medical Image Equipment

RSI Cloud

Cloud Diagnosis





Cloud Storage

RSI Cloud storage is secure, reliable, and cost-effective: it is pay-as-you-go, and it eliminates the need for equipment purchases and operations.

Cloud Storage

Tele-training Big Data Mining

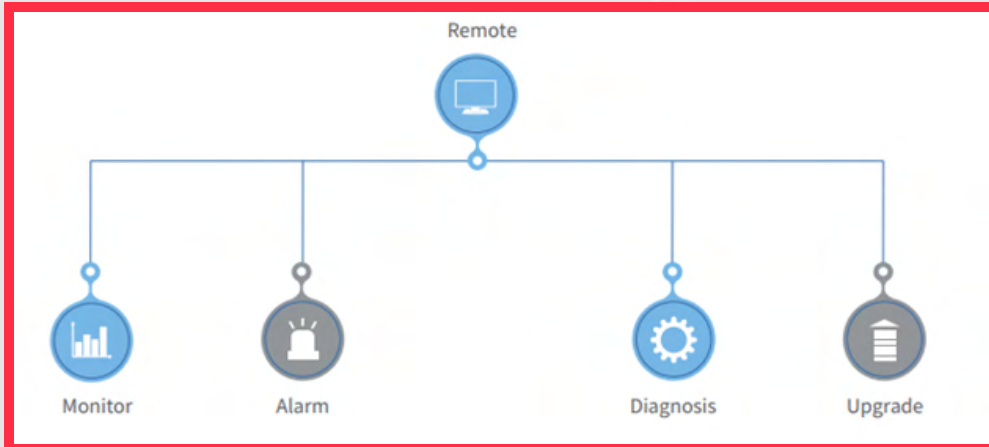
Remote Diagnosis Data Sharing

AI Assistance

Global After-sales Service

Attentive, Quick and Professional. Leave you nothing to worry about.

Automatic Fault Warning Function



Remote Service System

It remotely monitors equipment condition, diagnoses malfunctions and upgrades software.

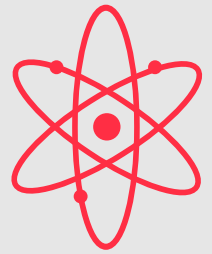
RSI has been proved as an outstanding success in global market

Global Sales Network



SCINTCARE CT 128

RSI (Radiological Specialists INC) Medical Systems Co., Ltd



**World Leading
Medical Products and
Solutions Supplier**

Compassion for life

Radiological Specialists INC is always aware of your needs and works to provide patients all around the world with reliable and economical goods and solutions. Radiological Specialists INC has been driven by innovation, with a focus on producing cutting-edge devices for obtaining exact pictures and diagnosing diseases at an early stage.

About (RSI) Radiological Specialists INC

Radiological Specialists INC is a producer of X-ray computed tomography (CT) and Positron Emission Tomography (PET). FMI is a wholly owned subsidiary of Radiological Specialists INC and is based in Solon, Ohio, have Research & Development Centers. In partnership with the Research and Development team at RSI, FMI Operations in the United States has been focused on Research and Development and creating high-end medical imaging equipment. We've successfully built CT and PET/CT systems together. Radiological Specialists INC has acquired CFDA approval and is now selling CT and PET/CT systems in China. FMI has received FDA clearance for the CT Systems and aims to set up production facilities in Solon, Ohio to produce systems for the worldwide market. Our company's fundamental philosophy of "Compassion For Life" focuses on humanity, and we strive to provide superior medical imaging equipment and services to help people throughout the world improve their health and quality of life.

RSI Patented Technology Empowers Acquiring High-Definition Images with Less Radiation Dose.

The all-level-image optimization.

Comprehensive clinical applications.

Low-dose technology

Key Features

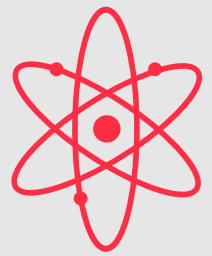
- ScintiStar Detector · NDI +
- 3D-MAT · ECG-Mod
- 1024X1024 Matrix



ScintiStar Detector

The state-of-the-art ScintiStar Detector, which is well-known as one of the essential components of a CT system, is used in the RSI ScintCare CT 128.





The features of the versatile ScintiStar detector are:

- Designed and developed by the top-notch scientist team
- 64-row and 40mm width design
- Made of rare earth ceramic scintillator



Q-Enhance Technology

Q-Enhance technology works by changing the structure of a material to fundamentally boost X-ray usage and hence improve image quality.

The high-precision cutting method reduces the distance between materials to only 85m, while the added reflecting material efficiently reflects visible light, preventing signal interference between parallel rows while simultaneously increasing the X-ray converting rate. These two characteristics increase geometrical efficiency by up to 99 percent while also displaying additional visual detail.

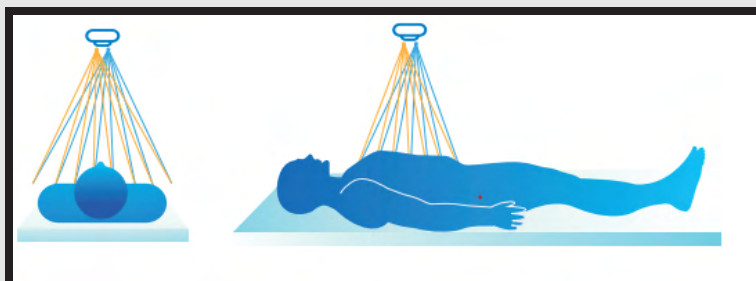
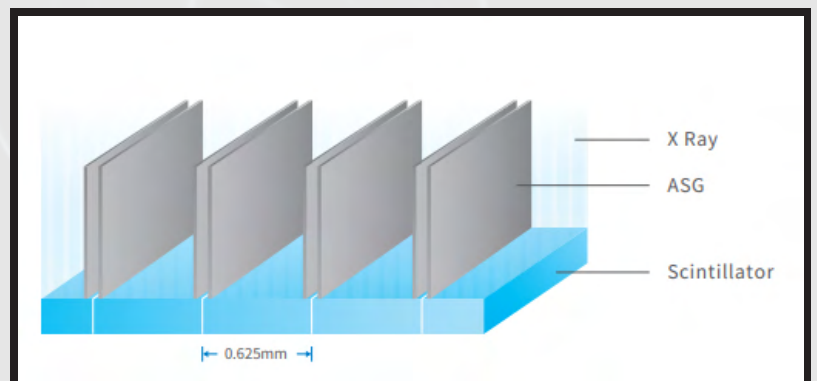


DNR Engine

ScintCare CT 128 has a 256-channel ASIC chip for signal transmission, which reduces noise and improves SNR. The 256-channel ASIC chip has a more effective data processing capability and less digital noise, allowing the signal sending path to be quicker and further, allowing fundamental anatomical information to be shown.

EAA Design

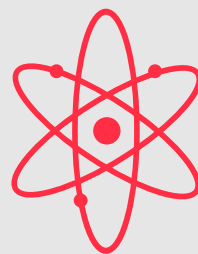
In addition to the typical ASG, each ScintCare CT 128 ASG is separated into two distinct grids, preventing the grids from slanting effectively. The slant grid is often generated by a temperature shift during operation, which eventually results in artefacts.



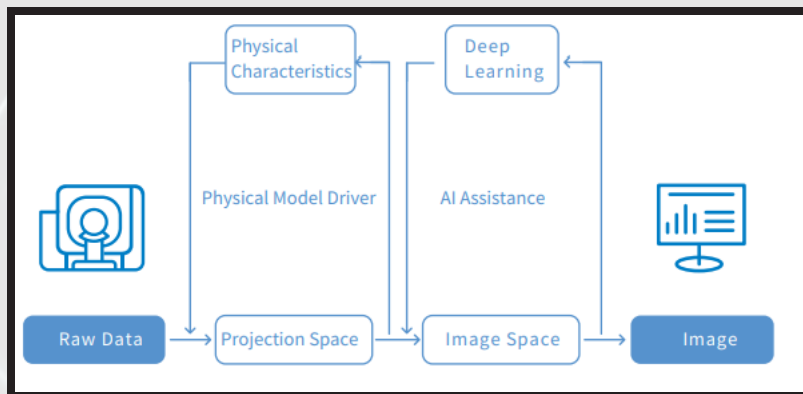
3D-MAT

The tube focal point sampling information is enabled by 3D-MAT in both the X-Y and Z dimensions. More thorough information on the perspective of anatomical structure will benefit from the technology.

Low-dose Guard Health NDI+



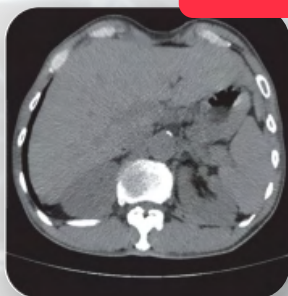
The raw data is iterated in both the projection and picture spaces at the same time. The projection space iteration method takes into account the physical properties of the X-tube and detector, while the image space iteration process is based on the anatomical structure's deep learning network. At low dosage, NDI+ ensures image quality. help people throughout the world improve their health and quality of life.



Physical Characteristics
Deep Learning
Physical Model Driver
AI Assistance
Raw Data
Projection Space
Image Space
Image

80mAs

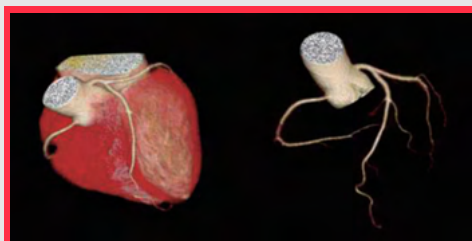
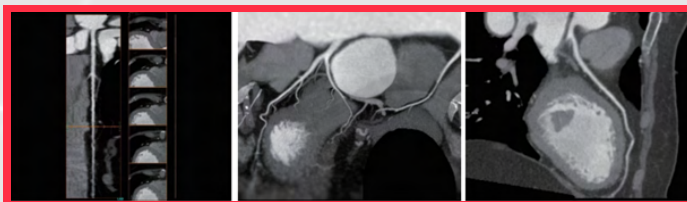
24mAs

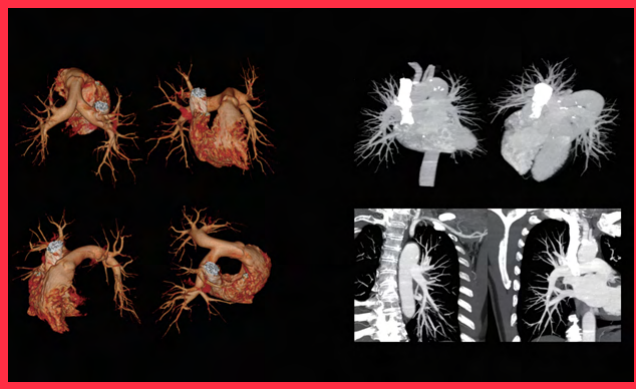
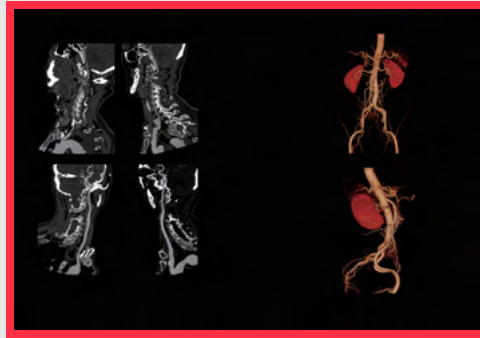
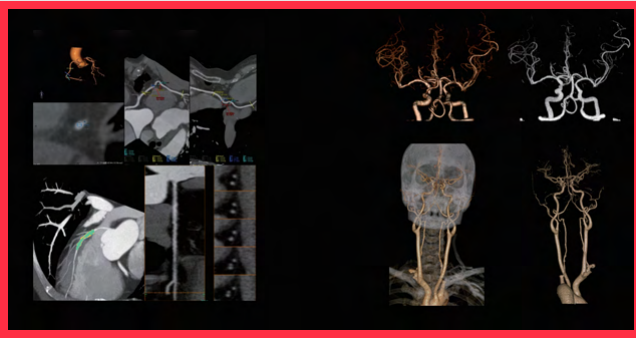
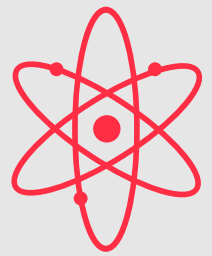


24mAs+NDI+

ECG-Mod Coronary Dose Adjustment

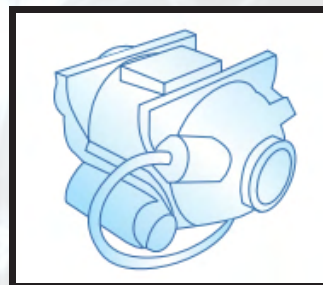
The X-tube current during cardiac scanning is adaptively controlled using retrospective ECG gating technology and intelligent mA technology, and the radiation measurement is lowered by 65 percent.



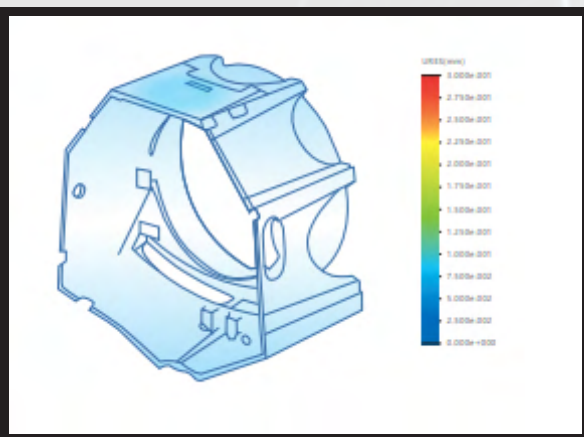


High-end Hardware System

High-end Hardware Systemogy, and the radiation measurement is lowered by 65 percent.

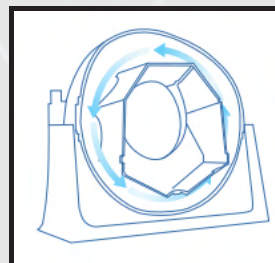


Anode Heat Storage Capacity: 5.3MHU
Meet clinical needs for fast, wide range, long time scanning
HV Generator Power Rate: 50KW



The Integrated Casting of Stator and Rotor During Rotation

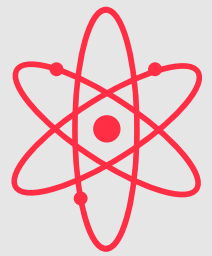
- Minimum Vibration
- Minimum Deformation



Thermal Isolation Design
The service life of the detector is greatly extended and the image quality attenuation of the equipment is reduced.

UI & Workflow

- User-focused design to operate easily
- Human-centered design for customized protocol
- The comprehensive function fit users' needs



RSI Cloud Solution Cloud Diagnosis

Famous radiologists diagnose through remote image diagnosis solution, improving primary hospital diagnosis ability.

Medical Image Equipment

RSI Cloud

Cloud Diagnosis

Cloud Storage

RSI Cloud storage is secure, reliable, and cost-effective: it is pay-as-you-go, and it eliminates the need for equipment purchases and operations.

Cloud Storage

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Automatic Fault Warning Function

Remote

Monitor

Alarm

Diagnosis

Upgrade



Remote Service System

It remotely checks the state of equipment, detects problems, and updates software.