



EARLY INTERVENTION NEEDS EARLY INFORMATION.

Know if she's at risk for
preeclampsia* in the first
trimester with ViewPoint™ 6.



Ultrasound reporting and workflow simplified

IT'S ABOUT TIME.

As you know, preeclampsia is a major contributor to **maternal and perinatal death**, most often developing late in pregnancy.

Your patients are counting on you for timely insight for a healthy outcome. Identification earlier means intervening sooner, when treatment can make the most impact. And ViewPoint™ 6 from GE Healthcare can help lead you to the information she and her baby need.



+ QUICK AND EASY ACCESS TO VITAL DATA.

Work smarter with ViewPoint 6 ultrasound reporting and image management technology.

- Minimize time on ultrasound documentation and simplify the process.
- Enhance efficiencies with technology that transfers measurements and patient ultrasound exam data directly to the software and into preeclampsia risk assessment algorithm.
- Generate custom, or standardized, comprehensive reports that outline your patients' risk of preeclampsia.
- Calculate the risk for preeclampsia while collecting similar data points for other first trimester risk assessment that are already available in ViewPoint 6.
- Store all the information electronically in one place.

ViewPoint 6 simplifies the process by building the Fetal Medicine Foundation's preeclampsia risk assessment algorithm into its First Trimester Screen.

ViewPoint 6

GE Healthcare

Date: 25/01/2019

First Trimester Ultrasound

Patient: **GE ViewPoint** DOB: 12/12/1987

Exam date: 24/01/2019

Indication First trimester screening
Method Transabdominal ultrasound examination with GE Voluson E10. View: Sufficient
Pregnancy Number of fetuses: 1
Dating LMP: 26/10/2018
Agreed dating: 02/08/2019. Gestational age: 12 w + 6 d based on the LMP

General Evaluation Placenta posterior.
Cord vessels normal insertion.

Fetal Biometry	Measurement	Value	Reference	Percentile
CRL	64.0 mm	64.0 mm	34%	
NT	1.30 mm	1.30 mm		
BPD	23.5 mm	23.5 mm	67%	

Fetal Anatomy The following structures appear normal:
Cranium, Face, Heart, Stomach, Bladder, Arms, Legs.

Risk Parameters
Maternal Characteristics and History
Age: 31 yrs. Height 165 cm, 5 ft 5 in. Weight 59.00 kg, 9 st 4 lb. Ethnic origin: White.
Smoking currently: no
Diabetes mellitus: no. History of chronic hypertension: no. Systemic lupus erythematosus: no. Antiphospholipid syndrome: no. Maternal family history of preeclampsia: no
Parity (pregnancies after 23 weeks): nulliparous
Previous pregnancy with preeclampsia: no

Biochemistry
Sample taken: 24/01/2019. Gest. age 12 w + 6 d. Weight (sample date) 59 kg
Free beta-hCG 25.100 IU/l, 0.6634 MoM, Analysing system: xxx
PAPP-A 3.400 IU/l, 1.0516 MoM, Analysing system: xxx
PIGF 13.800 pg/ml, 0.4091 MoM, Analysing system: xxx

Biophysical Markers
A. uterine mean PI 1.60, equivalent to 0.9791 MoM.
Mean MAP 114.8 mmHg, equivalent to 1.3682 MoM.

Risk Assessment
Risk for preeclampsia before 37 weeks 1 in 13.
The risk for preeclampsia is based on maternal history, mean arterial pressure, uterine artery mean-PI, PAPP-A and PIGF.

The risk assessment was performed by ViewPoint. The estimated risk is calculated by the FMF-01/07/2018 software and is based on findings from extensive research coordinated by the Fetal Medicine Foundation (UK Registered charity 1037316). The risk is only valid if the ultrasound scan was performed by a sonographer who has been accredited by the Fetal Medicine Foundation and has submitted results for regular audit (see www.fetalmedicine.com).

Impression
Normal fetal growth and anatomy.
High risk for developing preeclampsia before 37 weeks!

Page 1 of 2 for report of patient: ViewPoint GE, DOB 12/12/1987

ViewPoint 6 Sample Report

With ViewPoint 6, you can focus on early prevention—not later diagnosis. Be confident knowing the technology provides the vital information you need to make clinical decisions to help prevent preeclampsia.

+ NO TIME TO WAIT. NO ROOM FOR ERRORS.

You know how important it is to obtain, track, and accurately document fetal measurements to determine your patients' risk of preeclampsia*. ViewPoint 6 helps streamline the process—enabling you to confidently collect, process and share reliable data.

- Maximize accuracy and increase consistency with software that takes fetal measurements and auto populates the algorithm for all the calculations.
- Overcome intra-user variability.
- Reduce errors that can happen when manually entering numbers into another online risk assessment tool or algorithm.
- Provide easy-to-read, comprehensive reports that outline important findings about assessment risk.

+ START SOONER. KNOW SOONER.

You know that preeclampsia can have dire consequences. That's a big reason why ViewPoint 6 is joining other healthcare advocates around the world working to make preeclampsia part of the standard first trimester risk assessment.

Together, we can help you deliver valuable information to your patients—when they need it most.

*ViewPoint 6 preeclampsia risk assessment is not available in the USA and Japan.

For more information, please contact:
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