

TACTIC[®] Antarctic[™]

AT-2020 Fully Upgraded
「Exquisite debut Cryo-thermal Composite」



TACTIC[®] Antarctic[™]

Targeted conformal tumor interventional cryoablation system



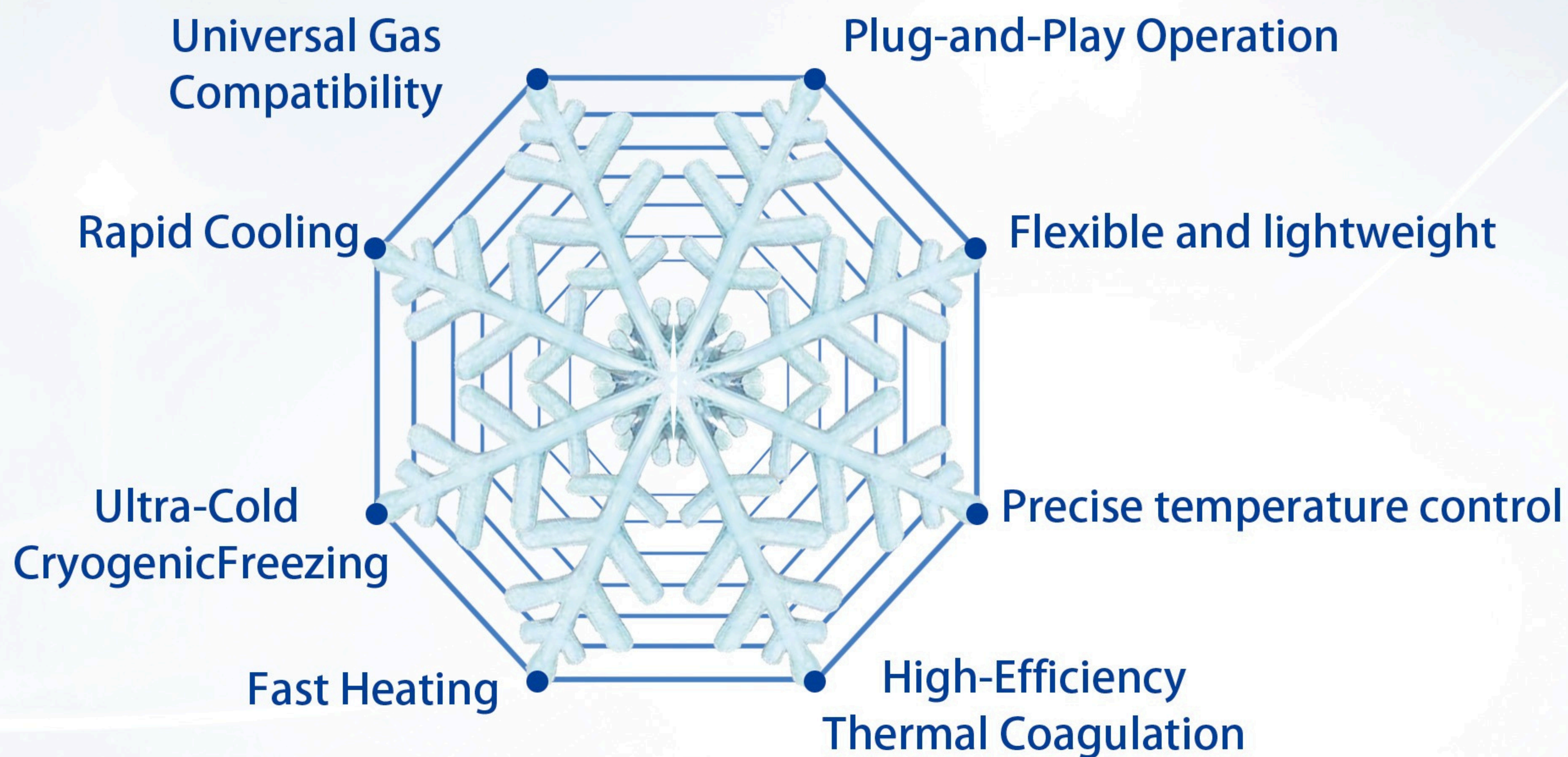
Precision Control in Eight Dimensionss>>



* Relative single-channel

Dual-Channel Design
(vs. Single Channel)

Compact Size: 30% reduction in volume Lightweight: 28% reduction in weight Low Profile: 35% reduction in height



Rapid melt 150°C

0°C

Freeze at -170°C



Nitrogen refrigeration

Electric heating for rewarming

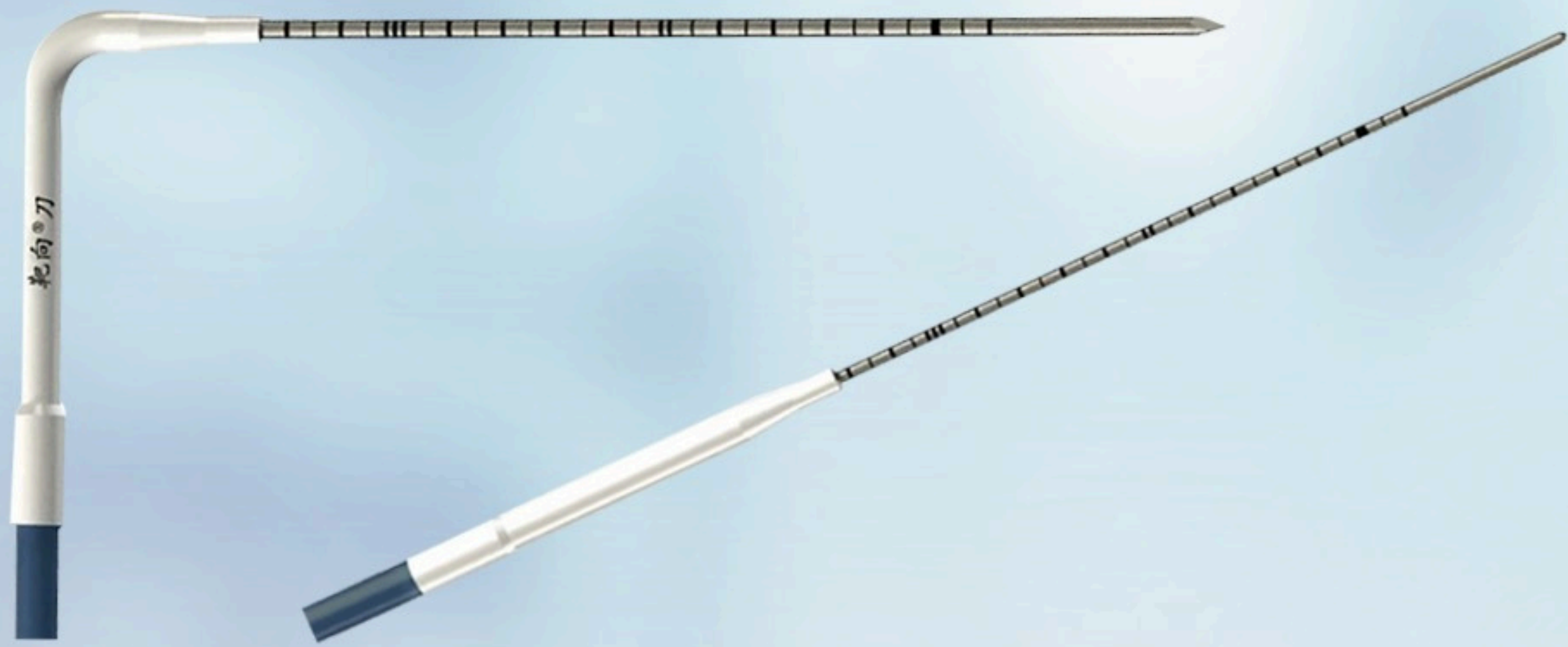
Powerful
Freezing Hybrid
Cooling &
Heating

- Ultra-low temperature refrigeration core • Lowest temp: -170° C
- rapid cooling • expansive ice coverage
- Dual-Mode Reheating/Rapid Thawing • Highest temp: 150° C
- needle-tract coagulation • quick needle removal

- Standard Industrial Nitrogen Refrigerant
- Nationwide availability
- cost-effective • lightweight & low-pressure
- Electric Reheating • "Zero-Cost" Reheating
- no additional thermal medium required

Universal re-
frigerant safe
and economical

Common specifications of ice ball size and temperature distribution >>

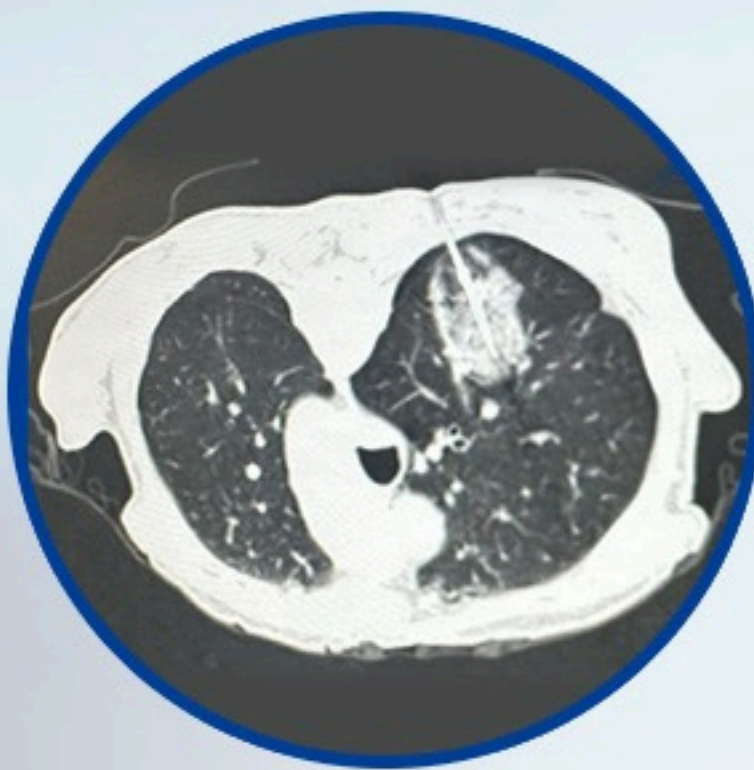


Needle Diameter: 1.5/2.5/3.5 mm
 Needle Length: 125/175/250 mm
 Target Zone Length: 5/10/15/20/25/30 mm
 Handle Shape: Straight/Curved
 Needle Tip Shape: Sharp/Blunt

Model	01JW1505S、01JZ1505S	01HW1510L、01HZ1510L	01JW1515S、01JZ1515S	01HW1520L、01HZ1520L	01JW1530S、01JZ1530S	01JW2530S、01HW2530L
Effective freezing zone length	1.5	2.3	2.8	3.5	4.5	4.5
15-minute freezing ≤-40℃ ≤-20℃ ≤-20℃						
Ice hockey puck dimensions (≤-40℃)	1.2 × 2.0	1.4 × 2.7	1.6 × 3.4	1.6 × 4.0	1.8 × 4.9	2.0 × 5.2
Ice hockey puck dimensions (≤-20℃)	1.8 × 2.4	2.0 × 3.0	2.3 × 3.8	2.4 × 4.4	2.5 × 5.2	2.9 × 5.7
Ice hockey puck dimensions (≤-0℃)	2.5 × 3.0	2.9 × 3.6	3.2 × 4.4	3.4 × 5.0	3.6 × 5.7	4.1 × 6.5

单位：cm

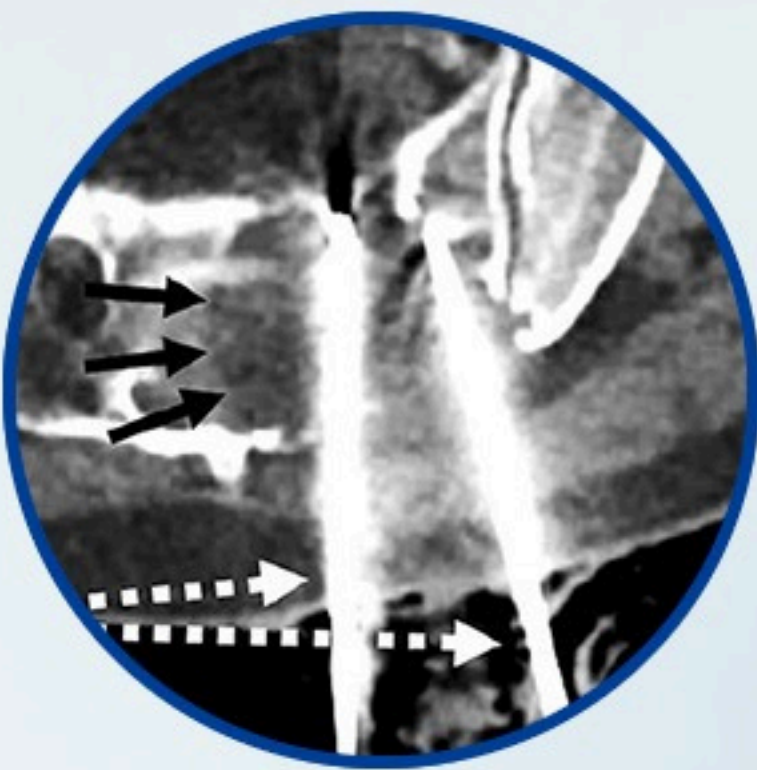
Multi-Specification Ablation Needles for Comprehensive Clinical Applications



lung



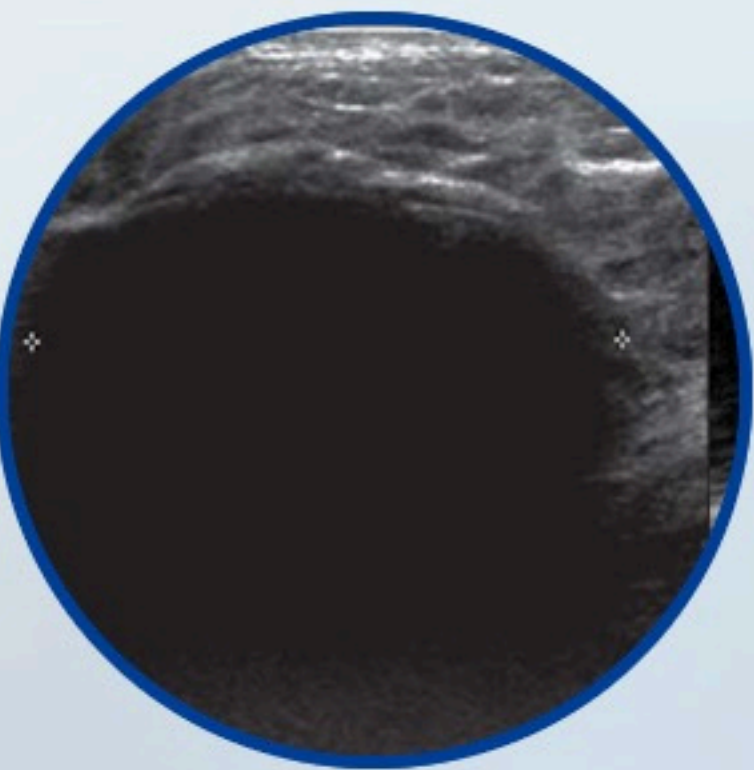
liver



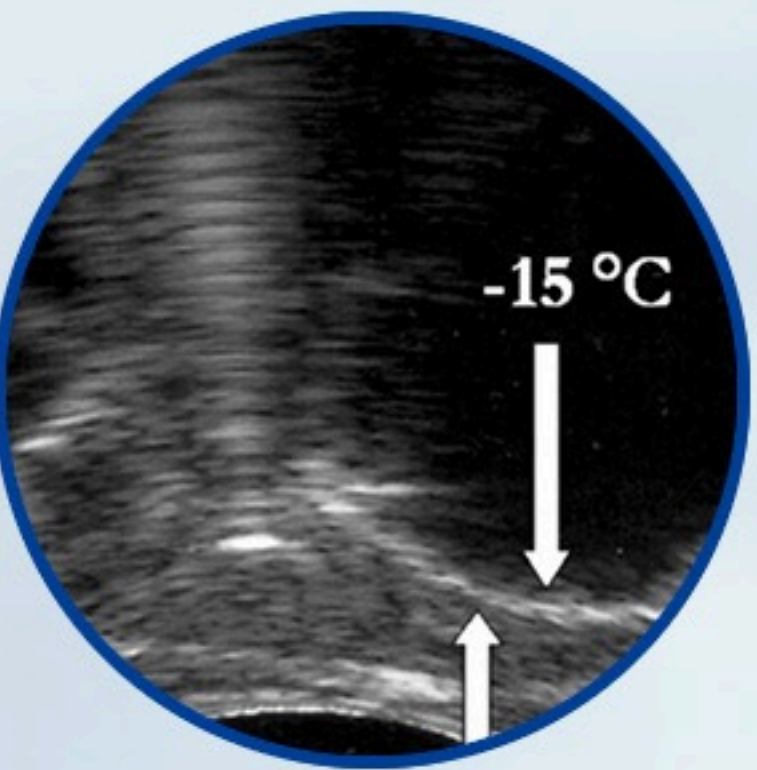
Bone and soft tissue



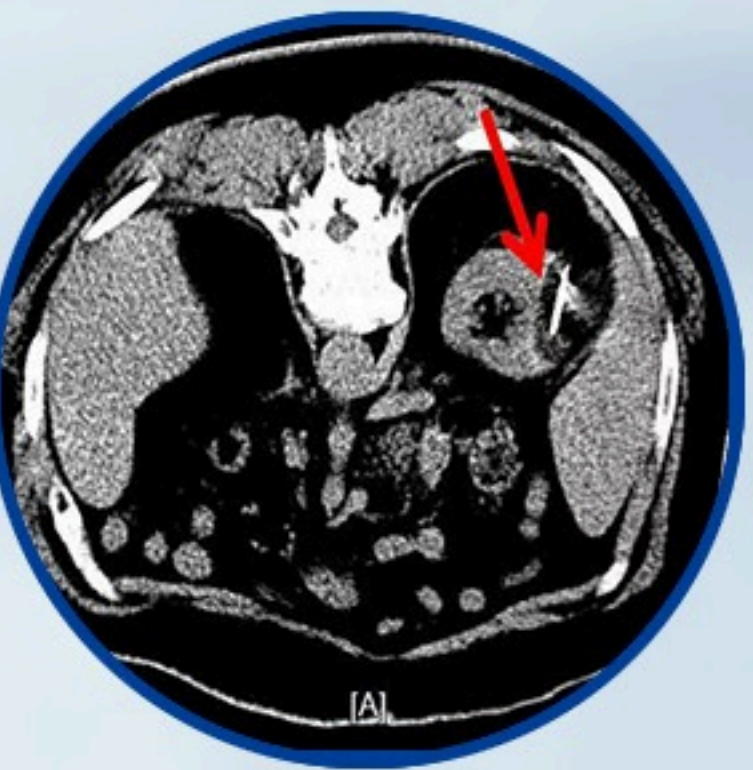
Pancreas



Breast



Prostate



renal



Pelvic cavity

Advantages of Cryoablation >>

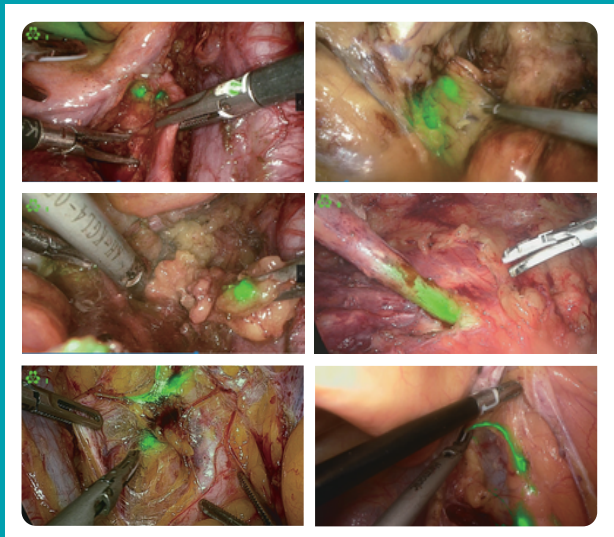


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Precision Gynecology/Urology

- Real-time imaging diagnosis during pelvic tumor surgery, such as gynecology and urology
- Intraoperative tracing of pelvic tumor sentinel lymph nodes and navigation of lymphatic drainage
- Real-time identification of ureter and urethra during surgery
- Intraoperative localization of tumors and peritoneal nodules, exploration of pelvic and abdominal cavity metastases



Lymphatic tracing

Lymphatic tracing is used for navigating lymphatic drainage during surgical procedures for early-stage cervical cancer, endometrial cancer, and vulvar cancer, as well as during pelvic lymph node dissection for bladder cancer and prostate cancer.

Visualization and identification of the ureter

Real-time in vivo visualization and identification of the ureter during surgery, allowing for

Blood supply evaluation

During penile cancer perineal urethrostomy, the evaluation of urethral and vascular anastomosis is performed in a collaborative manner. During prostatectomy for prostate cancer, real-time evaluation of the anastomosis between the blood vessels and the ureter is performed during the reconstruction. After ileal neobladder surgery, the blood supply of the intestinal anastomotic and intestinal-urinary anastomotic sites is evaluated. During ureteral reimplantation surgery, the perfusion and blood supply of the ureter are evaluated.

Research hotspots

Locating peritoneal nodules, tumor localization and margin determination, and distinguishing between polyps, myomas, and tumors in the pelvic and abdominal cavity.

4K Endoscopic Fluorescent Imaging System



Model specifications: FLI-20E

Scope of Application:

Used in conjunction with medical endoscopes and the fluorescence dye indocyanine green (ICG) to provide illumination and real-time visible light imaging and near-infrared fluorescence imaging in minimally invasive endoscopic surgery.

Product advantages:

FULL-LINK • 4K IMAGING • ULTRA-SENSITIVE • MOLECULAR FLUORESCENCE • HIGH-INTELLIGENCE • APPLICATION • EXPERIENCE.

Technical advantages:

1. The full-link provides 4K ultra-high-definition image quality, covering the entire process from acquisition to output (endoscope, camera optical path, chip registration, data transmission, display, recording registration, data transmission, display, recording system), a one-stop 4K solution;
2. Super-sensitive fluorescence realizes ultra-low concentration ICG detection of tiny tumors, clinically detecting the smallest tumor size of 0.288 mm, leading tumor resection into the submillimeter precision surgery era;
3. Multi-channel image one-button switching, wide dynamic exposure automatic adjustment, fine control of dual-spectral light source, dual-system fluorescence quantitative analysis, personalized parameter customization and matching, making surgery more precise and fascinating.



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4K FLUORESCENT AND WHITE LIGHT ENDOSCOPE SYSTEM

OFFER FLUORESCENCE IMAGING WITH A RESOLUTION OF 4K AND THE ABILITY TO RESTORE TRUE-TO-LIFE COLOR IMAGES.



4K ENDOSCOPIC FLUORESCENCE IMAGING SYSTEM

- Key Special Project of National Key Research and Development Program on Digital Diagnosis and Treatment Equipment Development
- Shortlisted Project for the Innovation Task of AI Medical Devices by the Ministry of Industry and Information Technology of China.
- Key Research and Development Project of Jiangsu Provincial Department of Science and Technology/Jiangsu Province Key Core Technology Tackling Project.
- New technologies and products that are key to the promotion and application in Jiangsu Province.
- The first set of major equipment in Jiangsu Province/Nanjing City's innovative products (the first batch).



 4CMOS CAMERA

 4K ULTRA HD

8.29 M PIXEL

4K FLUORESCENT AND WHITE LIGHT ENDOSCOPE SYSTEM

Technical theory

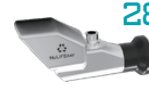
The 4K endoscopic fluorescent imaging system can not only be used as a 4K white light endoscope system to meet the clinical needs of various departments for ultra-high-definition endoscopes, but also can be used in combination with the ICG fluorescent tracer. It provides one-click selection of color images, black and white fluorescent images, color fluorescent images, and multiple images in minimally invasive endoscopic surgery. It can also switch lymphatic imaging mode, organ imaging mode, and lesion imaging mode with one click, and reserve custom modes according to the needs of the operator. The 4K endoscopic fluorescent imaging system can also be equipped with a data workstation to achieve quantitative analysis of color gamut images and fluorescence intensity. It is suitable for dynamic observation of lesions, anatomical structures, and blood flow and lymphatic flow in minimally invasive laparoscopic surgery. Its spatial resolution is significantly better than traditional imaging methods, which allows surgeons to observe lesions, blood flow (ischemic intestinal wall judgment, anastomotic blood flow), lymphatic flow (pre-tracing sentinel lymph nodes, regional lymph nodes), and anatomical structures (liver segments, gallbladder, lung segments) in real-time during minimally invasive endoscopic surgery, thus making more accurate medical judgments, optimizing surgical plans, and evaluating treatment effects.

Partial parameters

Laser source pulse width	: N/A (continuous laser emission)
Chip structure	: 4CMOS
Handle function keys	: 4 remote control buttons
Optical adapter	: Fixed focus/zoom
Monitor size	: 32 inches and above
Monitor resolution	: $\geq 3840 \times 2160\text{P}/4096 \times 2160\text{P}$
Pixels and frame rate	: ≥ 8.29 million pixels, 60 FPS
Endoscope	: 0° or 30° field of view, 5mm or 10mm



Highly sensitive and high-resolution fluorescence objective

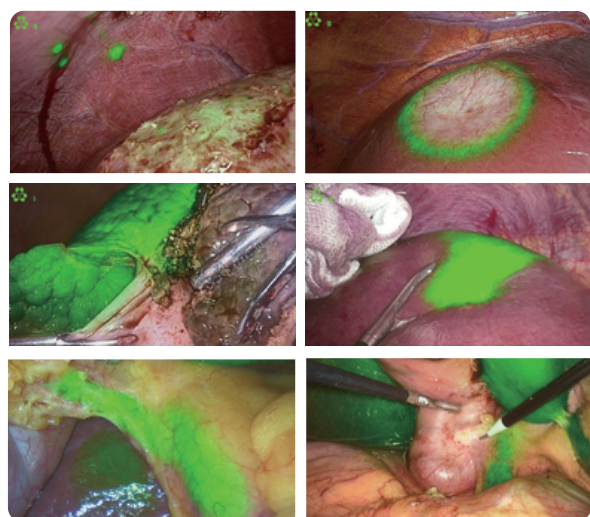


28° Highly sensitive and high-resolution fluorescence objective

Flexible working distance, Coaxial Laser View, new generation sensitivity, superior spatial resolution performance

Precision Hepatobiliary Surgery

Used for real-time imaging diagnosis during liver cancer surgery
Liver segment imaging marking during anatomical liver resection
Identification and margin evaluation of tumors during non-anatomical liver resection
Identification of complex biliary tract, bile leakage identification after liver section or biliary tract reconstruction.



Liver Segmentation

In anatomical liver resection or hepatic lobectomy, it helps determine the boundary between liver segments, pre-cutting lines, and liver parenchymal transection planes.

Tumor Identification

During non-anatomical liver resection, it assists in locating the tumor tissue in real-time, evaluating the safety margin, identifying small lesions, and determining positive margins.

Biliary Duct Imaging

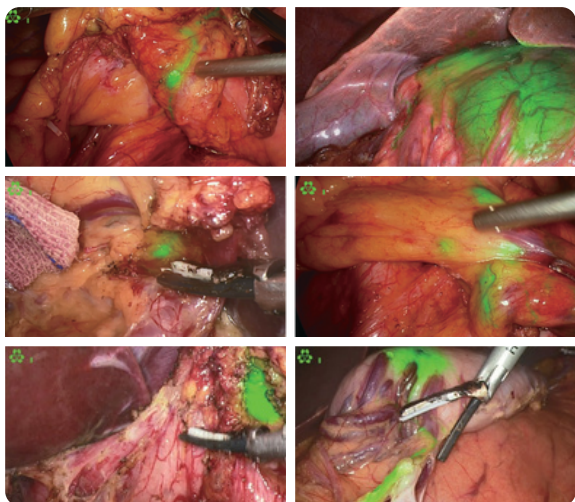
It aids in the identification of complex biliary ducts, detection of bile leakage after liver sectioning or biliary duct reconstruction, and recognition of bile leakage after biliary duct reconstruction.

Research Hotspots

The relationship between the degree of liver cirrhosis, ICG time, and dose in liver cancer. ICG imaging patterns and time-dose characteristics in metastatic liver cancer and primary liver cancer.

Precision Gastrointestinal Surgery

- Used for real-time imaging diagnosis during gastrointestinal tumor surgery
- Intraoperative localization of tumor location and evaluation of resection margin
- Intraoperative labeling of sentinel lymph nodes and navigation lymphatic drainage
- Intraoperative exploration of peritoneal nodules
- Intraoperative evaluation of residual blood supply and anastomotic blood supply.



Lymphatic Drainage

For early and some progressive gastrointestinal tumors, when sentinel lymph node biopsy is required, the sentinel lymph nodes are traced and marked to guide regional lymph node dissection. For advanced gastrointestinal tumors, when lymph node dissection is required, the lymphatic drainage guides the lymph node dissection process.

Blood supply evaluation

During reconstruction of the digestive tract after radical gastrectomy for gastric cancer, real-time evaluation of residual blood supply and anastomotic blood supply is performed. During reconstruction of the digestive tract after rectal resection, the selection of the intestinal transection point and the evaluation of the blood supply of the anastomotic site, as well as the judgment of ischemic intestinal wall, are performed.

Tumor identification

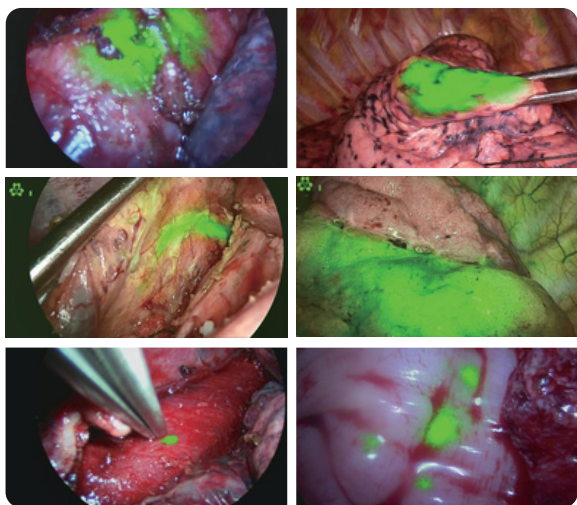
The marking of the location of gastric cancer, especially for gastric cancer that has not invaded the serosa. The planning of surgical margins and providing important references for selecting the range of gastric resection; positive margin discrimination for gastric cancer involving the pylorus and gastroesophageal junction in the gastric antrum, accurately guiding the rapid sampling of positive margins. Evaluation of recurrent lesion margins; evaluation of the safety margin for distant resection in rectal cancer; identification of small lesions around the intestine.

Nodule detection

For patients who may have metastases, real-time search for small peritoneal lesions and exploration for abdominal metastases.

Precision Thoracic Surgery

- Used for real-time imaging & diagnosis for thoracic tumor
- Locate and trace lymph nodes, identify thoracic ducts
- Mark the inter-segmental borders during anatomical pulmonary segment resection
- Evaluate blood flow before and after esophageal reconstruction
- Locate pulmonary nodules during surgery



Lymph node tracing

Trace lymph nodes around the esophagus, lymph nodes in the mediastinum, and visualization of the thoracic duct (to identify and avoid injury to the thoracic duct).

Lung segmental imaging

Pulmonary segment visualization enables quick, accurate, and clear identification of intersegmental planes, which can assist in segmentectomy. Compared to the modified inflation-deflation method, it can significantly shorten the operation time and better meet the requirements of rapid recovery.

Localization of nodules

Preoperative assistance in localizing pulmonary nodules. Precise and non-invasive intraoperative localization and identification of pulmonary nodules, thus achieving precise resection and preserving lung function to the greatest extent possible.

Research hotspots

Sympathetic nerve imaging, recurrent laryngeal nerve imaging.

Evaluation of the blood supply to the anastomosis

During esophageal cancer surgery, evaluation of the blood supply to the anastomosis is important for esophageal reconstruction after radical resection. This is particularly important for monitoring and evaluating the blood supply during procedures such as gastric or colon interposition, as well as cervical esophagogastronomy.

Margin determination

Real-time localization of tumors and real-time determination of positive margins during lung wedge resection; determination of safe margins in tracheal resection; determination of positive margins in esophagogastric junctional cancer, providing accurate guidance for rapid sampling of positive margins; real-time identification of micro-lesions during surgery.



D8

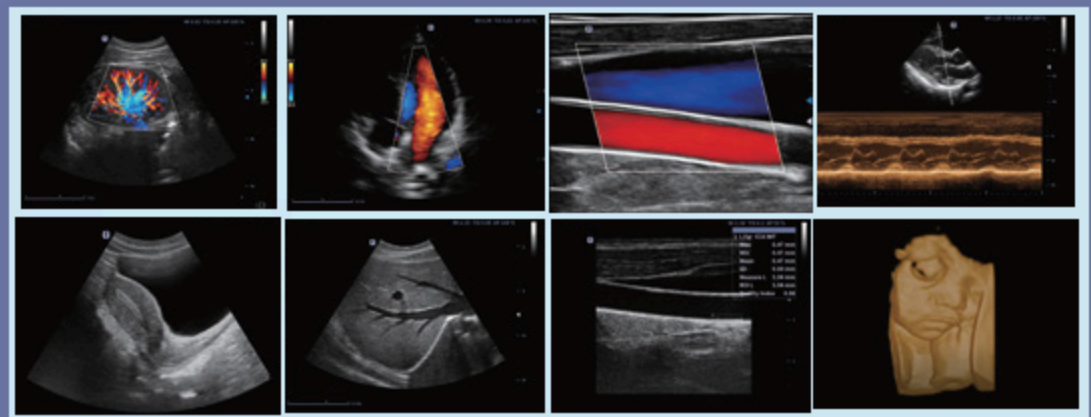
Define-Unique
Ultra-Mobile
Ultra-Simple

Powered by Hi platform, D8 keeps the high quality image performance. Besides, it breaks traditional pattern by creating something new and original, providing excellent user experience by innovation.

Smart Workflow

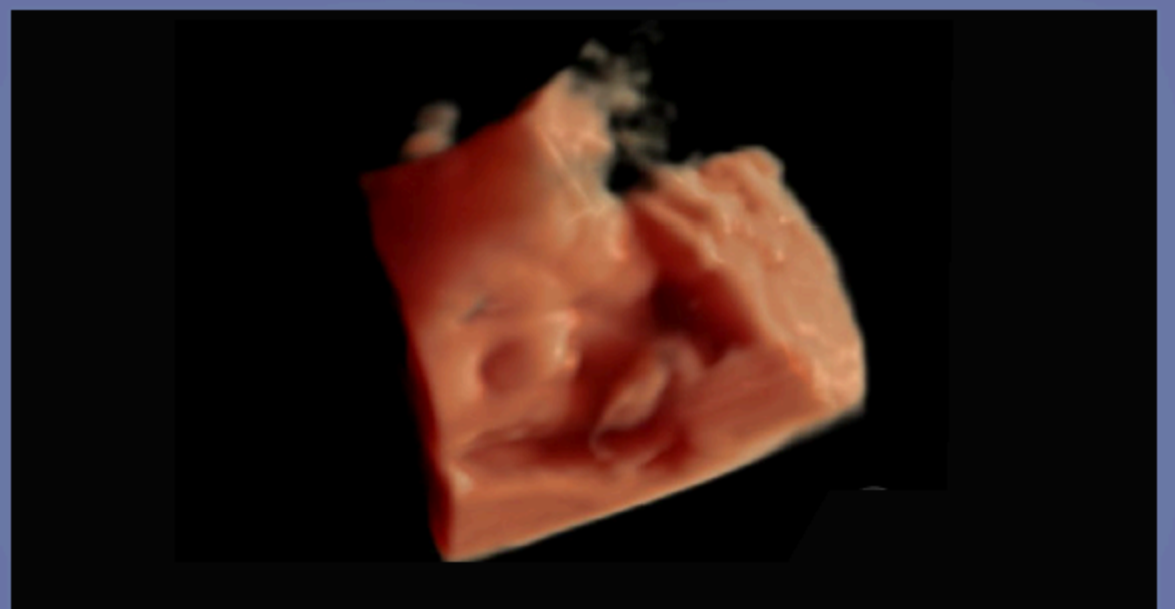
Dedicated to enhancing the scanning efficiency, D8 has delivered creative workflow, such as fIntelligent, f- Custom and various automatic calculation.

Outstanding Images



Transducers

D8 supports a wide range of transducers for different applications, including convex, linear, phased-array, intracavitary, etc. With unique BTM transducer technique, the performance goes beyond users' expectations.



Convex Volume
Applications : Abdomen,
Obstetrics, Gynecology



Micro-convex
MC10-3
Applications : Pediatrics,
Cardiology



Intracavitary
EC 9-4
Applications : Obstetrics,
Gynecology, Urology



Phased Array
P8-2
Applications : Abdomen,
Pediatric Cardiology



Linear L17-5
Applications : Small Parts,
Vascular, MSK, Breast



HD Linear L13-3
Applications : Small Parts,
Vascular, MSK, Breast



Phased
Array P5-2
Applications : Cardiology,
Abdomen, TCD



Linear L12-4
Applications : Small
Parts, Vascular, MSK



Convex C5-1
Applications : Abdomen,
Obstetrics, Gynecology



F Live Technology

Innovative Design

Sensitive Touch Screen



Can be adjusted and folded easily.

(Optional) 4 Oblique Transducer Ports



Optional 4 oblique transducer ports on the front side permit users to easily plug and unplug transducers.

21.5 inch High-definition



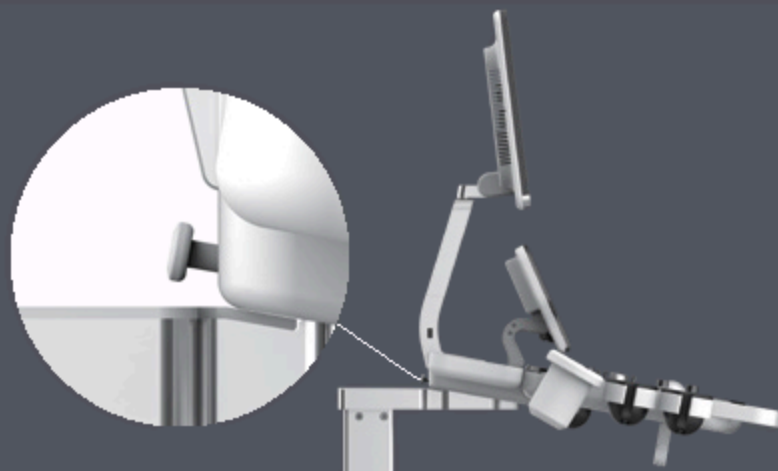
HD monitor with tilt adjustment.

Mega Battery (Optional)



Super long life battery allows up to more than 3 hours continuous ultrasound scanning.

DFS



The damping folding system allows monitor arm to be folded gently and avoids the screen's damage.

Smart Workflow



Auto IMT

Automatic identification and measurement of intima-media. Both left and right blood vessels, anterior and posterior walls can be measured.



Auto Volume Flow

Measure the blood vessel area, the blood flow velocity could be measured by spectrum automatically, then the blood flow volume results will show.



Auto Track C/D

Quickly ROI re-locating on blood vessels by one button, with automatic angle deflection. It's available in 2 modes: Color mode and PW mode.



Auto Calculation

Trace PW spectrum and get calculation results automatically and auto calculation items can be customized



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Email: info@jadimedika.com

F 45 Dedicated for Pain Management

Ultrasound Diagnostic System

Balanced and Efficient

F 45's balanced performance and efficient workflow could greatly enhance doctors' diagnosis confidence and efficiency.



High-definition Monitor

15.6 inch monitor for better visualization



Magnalium Shell

Equipped with Magnesium alloy shell for better protection



Probe Extender

Compact connectors for three active probes on trolley



Built-in Battery

Built-in battery for scanning



Storage Shelves

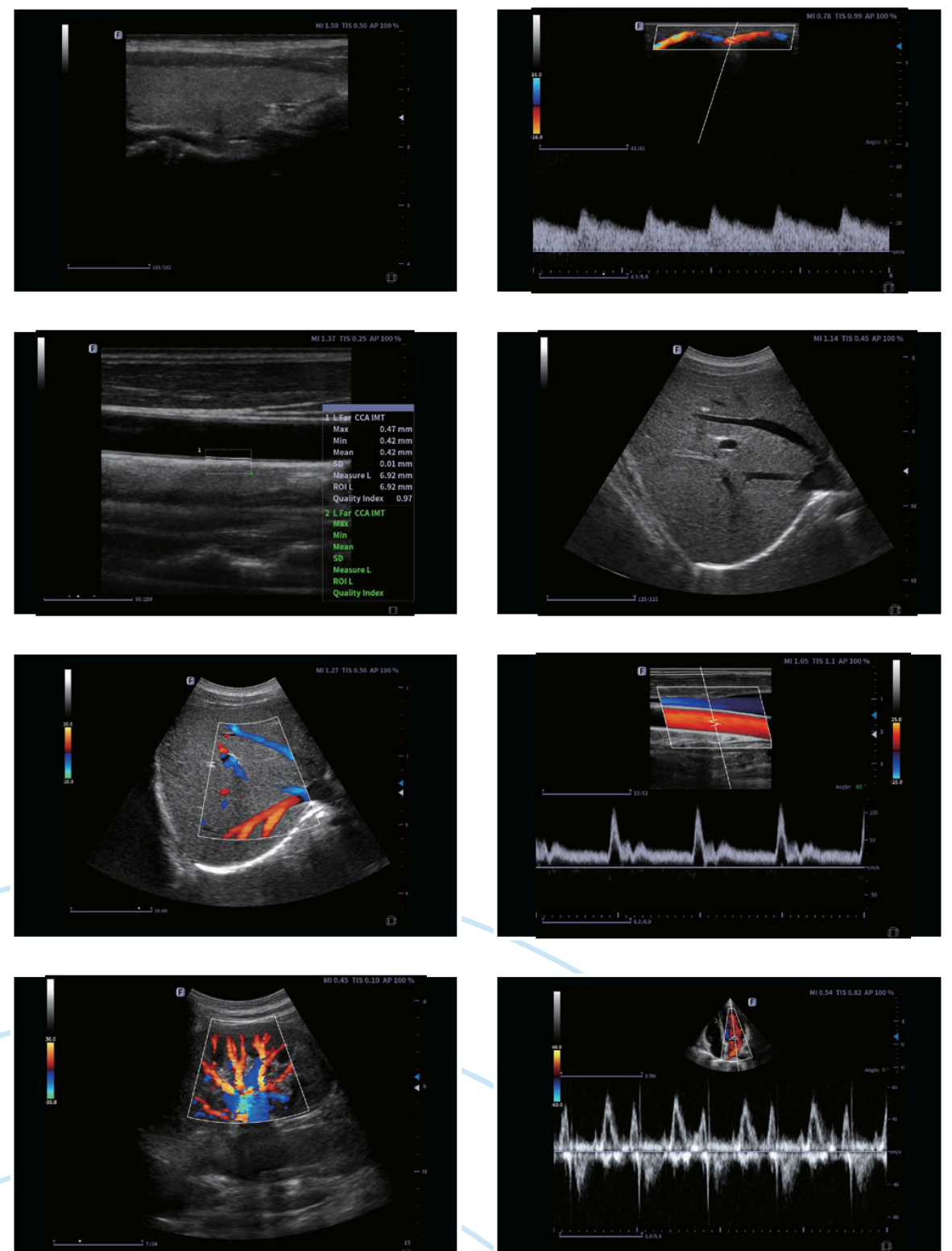
Storage shelves for users to place their daily-used objects

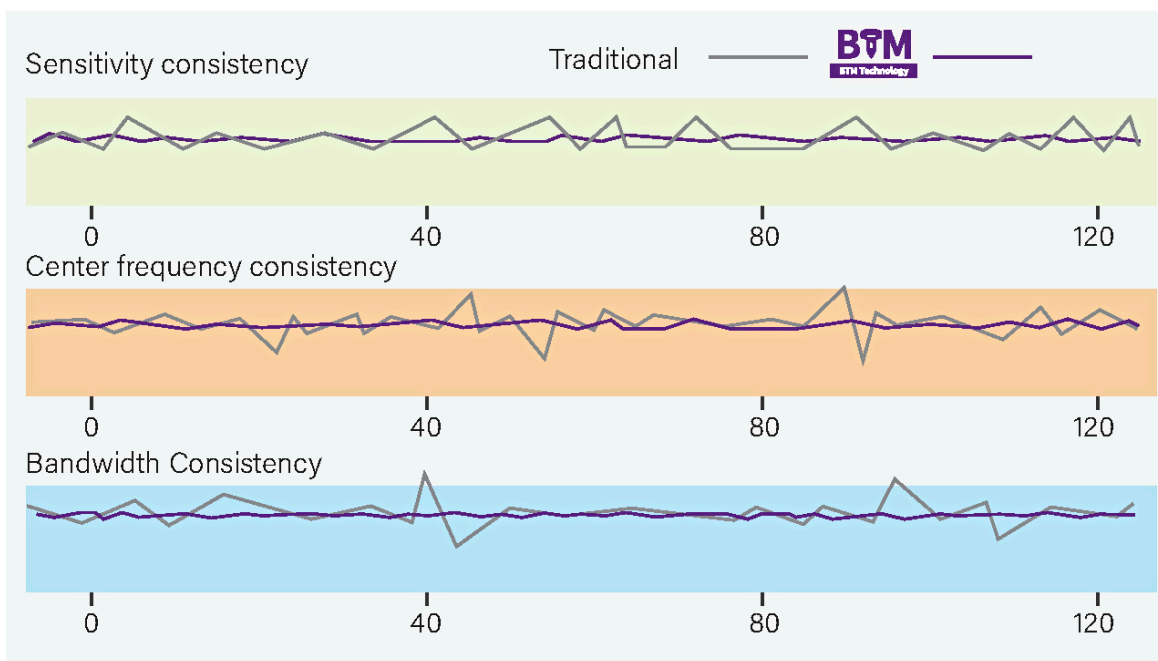


Transducers

F 45 supports a wide range of transducers for different applications, including convex, linear, phased-array, intracavitary, etc. With unique BTM transducer technique, the performance goes beyond users' expectations.

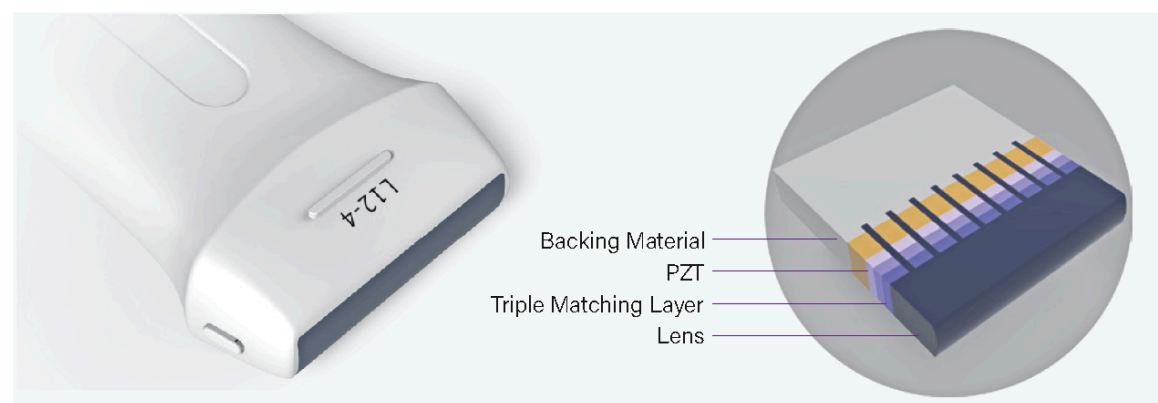
Excellent Clinical Images





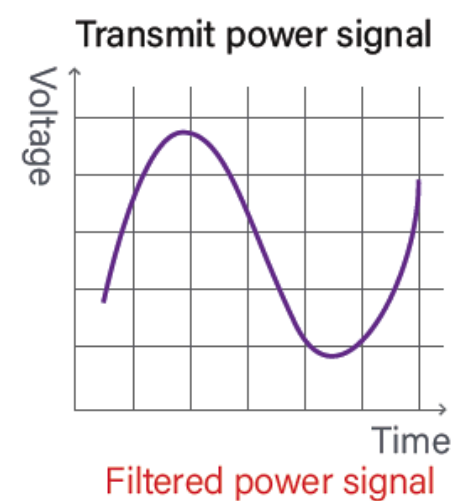
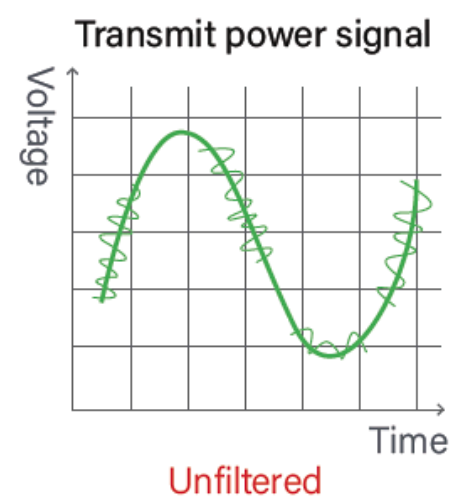
Bonding technique

By uniform bonding process, adhesive to interconnect ceramic and lead is well controlled (max thickness: 1μm) to improve performance uniformity among elements.



SNS+

Automatically detect and suppress the speckle noise based on multi-dimension algorithm. Acquire and enhance tissue details from different directions, easily capture sub-millimeter level lesion or large organ boarder.



Convex C5-1

Applications: Abdomen, Obstetrics, Gynecology



Micro-convex MC10-3

Applications: Pediatrics, Cardiology



Intracavitary EC9-4

Applications: Obstetrics, Gynecology, Urology



Linear L12-4

Applications: Small parts, Vascular, MSK



Linear L17-5

Applications: Small parts, Vascular, MSK



HD Linear L13-3

Applications: Small parts, Vascular, MSK, Breast



Phased Array P5-2

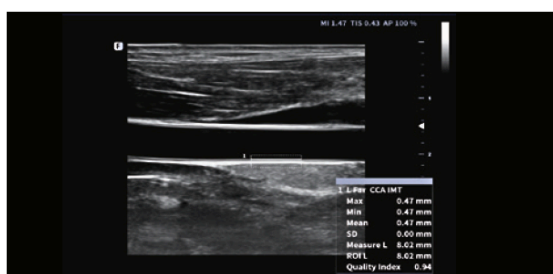
Applications: Cardiology, Abdomen, TCD



Phased Array P8-2

Applications: Abdomen, Pediatric cardiology

Versatile Function



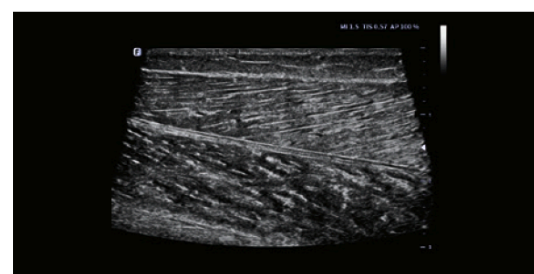
Auto IMT

Automatic identification and measurement of intima-media.



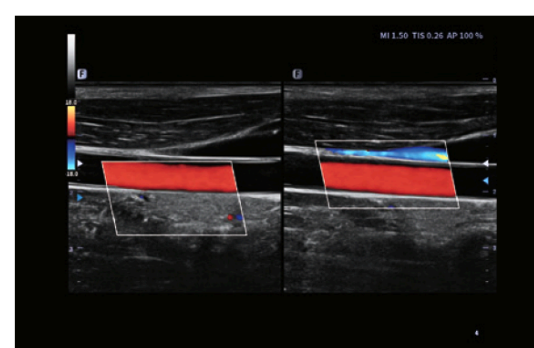
fAssist

Providing tutorial information regarding abdomen, vascular, small parts, GYN, MSK, etc., including standard ultrasound image, anatomical diagram, scanning technique and tips.



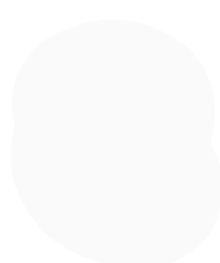
ExView

Increase scan range for probes; Get more complete information.



Auto Track

Quickly re-locating ROI box on blood vessel by one button.



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