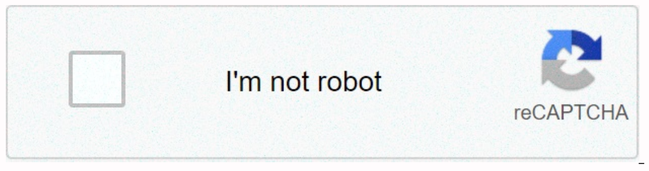

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Real body scanning app

Picture: ShutterstockI hate business cards. I like that the whole got someone's contact details a part of them, but the actual paper cards are the worst. Inevitably I always manage to lose the most important business cards handed to me a few seconds after I receive them. If I can get home with them, then they get lost in the garbage fire that's my desk so they never see me again. Before forever LinkedIn had an app called CardMunch that would rewrite cards and allow you to request a link to that person on the service. I loved it. Then they shut it down. Since then my strategy has only been to paint the card with my phone the second I get it, so there is a backup if I lose it. This week I came across an app that is remarkably similar to LinkedIn's offering from a few years ago: ClusterCards 2.The Business Card Scanner allows you to take a picture of the card and then transcribe and store this information in a virtual Rolodex on your phone. Inside the app, you can tap a person to call or send an email, and a photo of that card will remain in the app, in case the current transcription isn't perfect. G/O Media may receive commissionCubii Pro Under-Desk EllipticalBusiness cards can be kept separate from other contacts on the phone or synchronized in the Contacts section. They can also be exported to a VCF file. If you're like me, then snapping an image with the app while you're out and about can ensure that you have that information for a long haul, not just until you make it to the parking lot. My roommate found this wooden pipe a few years ago. I always thought he had great form, but he wasn't in great shape. He lives on a porch on top of a wooden box collecting spider webs, moss and considerable dry rot. I thought I'd take the time to rebuild the burl and figure out a new way to make some legs. I was fascinated by the software package 123D Autodesk and its ability to easily digitize objects for modeling and making. In this case, I used 123D Catch to scan and create 3D models of redwood burl, Meshmixer for editing and Rhino to produce table legs that wrap around the surface of the wood. Then I cut my legs out of 1/2 plywood with a 500 watt metabeam laser cutter. There are two ways to do this, using a smartphone app or taking pictures and uploading directly to the internet. I choose later for this project. To get a good scan, it is important to have an even light and make at least 20-30 photos. I exported a 3D model from 123D Catch as an .obj file. Then I edited the geometry at Meshmixer to clean and repair the model. First I used Plane Cut to cut off the soil from the wooden burl, and then I erased the extraneous geometry of the background that was picked up on the scan. Finally, I fixed geometry in analysis > inspector > Auto Repair All. This last step is especially important if you plan to 3D print a scanned object. I decided to do this to create a scale model and see if my process would work. I wanted to create seclave legs that would wrap around the inaliething contours of its edges. To do this, I brought 3D geometry from Meshmixer to Rhinoceros modeling software. I started with a grid for work and started by modeling the upper part of the legs of the table, which I used in boolean subtraction to get the contour of the edge of a wooden burl. With the dupborder command, I separated the edges and chose the outer majority to use for my cut-out file. Then I added the bottom of the legs, which are vertically intertwined for additional support. I also used a Martin compression joint in the middle of 3 legs because they had to be assembled on each side of the wooden burl because of the curves along the edge. As you can see, my leg design is not made for efficiency, but an abundance aesthetic, resembling caterpillars. I decided to make a scale model to test my design. I printed the 3D secout on a 1/6 scale with a Objet printer and laser-cut legs from plywood. I originally planned to use CNC to cut out my legs, but when I opted for Martin's wrist to connect the split legs in the middle, it made sense to use our Metabeam Laser Cutter, which has a 4'x4' bed and can easily get through 1/2 plywood. Cutting out all the legs took only about 20 minutes with some extra time to test laser speed and power. The main danger here, as you can imagine, is starting a fire. I started by grinding laser-cut leg burns plywood with an orbital grinder. Then I started to climb down the top of the wooden burl, starting at 80 gyshing and working my way up to 400 gyshing. I was happily surprised to find a beautiful pattern of growth rings beneath the dammested surface. In order to extract the wood sample and preserve the surface, I coated the top and sides of the sekvoje with the finish. I opted for oil-based water from a modified satin floor finish made by ZAR. I sponged the top surface and brushed it by the sides. Wooden burlies often get a spray finish that will create a much more even surface coating. With my hand application, some stripes from the sponge were still visible at right angles in the light. With so many legs, I decided to add rubber bumpers to the bottom so that everyone would sit evenly. To put my feet together in the correct places on the seced, I used my model scales for reference as I put my feet in each other. Split legs with compression joint Martin fit on each side, locking in the middle. Having been restored, the Redwood burl now has the dignity of showing off its growth rings and standing on its own two feet. Monday December 28, 2020 7:11 am Joe RossignolLG has begun to introduce a software update that includes AirPlay 2 and HomeKit support for selected 2018 smart TV models, according to multiple MacRumors readers, fulfilling a promise the company made earlier this year. AirPlay 2 allows users to stream video, music, podcasts, and more directly from an iPhone, iPad, or Mac to a compatible LG smart TV, without the need for an Apple TV. HomeKit ... Currently, some medical imaging facilities are promoting a new use of computerized tomography (CT), also called computerized axial tomography (CAT) scanning. This use is called full-body CT scan or full-body CT screening, and it is marketed as a preventive or proactive health measure for healthy people who have no symptoms or suspected illness. At this point, the FDA is not known about data showing that full-body CT screening is effective in detecting any particular disease early enough that the disease can be treated, treated or cured and conveniently spare a person at least some of the harms associated with a serious illness or premature death. Any such presumed benefit of full-body CT screening is currently uncertain, and such a benefit may not be large enough to compensate for the potential harms such screening could cause. Public Health Agencies and National Medical Societies-American College of Radiology, American College of Cardiology, American Association of Physicists in Medicine and American Heart Association - do not recommend CT screening. CT is a diagnostic imaging process that uses X-rays to obtain retitest images of the body. Since its introduction and rapid adoption into medicine in the mid-1970s, CT has become recognized as a valuable medical tool for diagnosing diseases, trauma or abnormalities and for planning, managing and monitoring therapies. Important information about full-body CT screening: Such screening provides an uncertain benefit with the potential for a certain risk: The most likely outcomes of CT screening of a healthy person without symptoms of the disease are: Normal findings or Suspicious findings that require subsequent tests Normal findings carry the possibility of inaccuracies and false persuasion. For suspicious findings, tracking may include simple, non-invasive testing. It may also include invasive procedures related to surgical risks of anaesthesia, bleeding, infection, scarring or may entail additional radiological examinations, associated with the risk of radiation and the potential risk of an allergic reaction to the injected contrast material. In any case, CT screening is unlikely to benefit an individual who lacks signs or symptoms of the disease by detecting a serious illness early enough to treat it and significantly change the outcome. Radiation dose: CT screening subjects individual screened for radiation exposure from X rays. Dose received by the patient during a typical CT scan generally much higher than the radiation doses associated with most conventional X-ray procedures. The main risk associated with a dose of radiation resulting in a person from a CT procedure is a small possibility of developing radiation-induced cancer some time later in that person's life. For a patient with a medical need, the benefit of a diagnostic or therapeutic CT procedure recommended by a doctor typically far exceeds the low risk of cancer associated with a CT procedure. For a person without symptoms, CT screening is unlikely to detect a serious illness, and the potential harm to an individual may outweigh the assumed benefit. Scientific Studies: There is no data showing that CT screening of individuals without symptoms throughout the body provides a greater likelihood of harm benefits. Nor is there a scientific study known to be underway to develop such data. Although several studies are under way on the effectiveness of using CT scans to review people, studies focus on high-risk groups for specific diseases (e.g. cigarette smokers for lung cancer). In such studies, only a limited part of the body is irradiated, not the whole body, and only screening for a particular type of disease is evaluated, not screening for anything that could be found anywhere in the body. No Food and Drug Administration (FDA) CT approval for screening: Statements from CT imaging facilities implying FDA approval, approval or certification of CT for screening procedures misrepresent the actual situation. The FDA has never approved or cleaned or certified any CT system specifically for use in screening (i.e., individuals without symptoms), because no manufacturer has ever shown the FDA that their CT scanner is effective for screening for any disease or condition. No indication of screening has been approved: CT systems were manufactured and marketed for diagnostic use prior to modifications and additions to medical devices from 1976 and placed in Grade II based on the level of risk they pose. These devices continue to be cleaned for marketing for general imaging purposes. They did not provide the FDA with any data to show that these devices are effective for screening or testing individuals without symptoms. Before the FDA would allow such a claim or indication for use by the manufacturer, the manufacturer should provide valid scientific data for such new use by applying for a prior trading authorisation for this new indication. This means that CT imaging system manufacturers cannot claim that the products are intended for screening non-symptomatic people. Nevertheless, individual physicians may decide that a patient without symptoms can benefit from CT screening even though the data supporting such use has not been provided to the agency. Such use the device is called off-label use and the judgment is left to the doctors. Sometimes insurance companies do not pay such an out-of-label use. However, statements that say or imply that the FDA has approved CT scans for the use of full-body screening are incorrect. Sources: IMAGES PROVIDED: REFERENCES: Medically Reviewed by John A. Daller, MD; American Board of Surgery with subspecialty certification in surgical critical care July 14, 2017 This information has received a kind fda (www.fda.gov) license. (www.fda.gov).

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