

RTVUE[®]

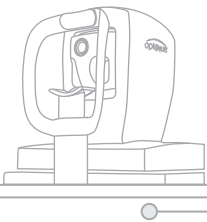
Power for
your practice.



Tracking



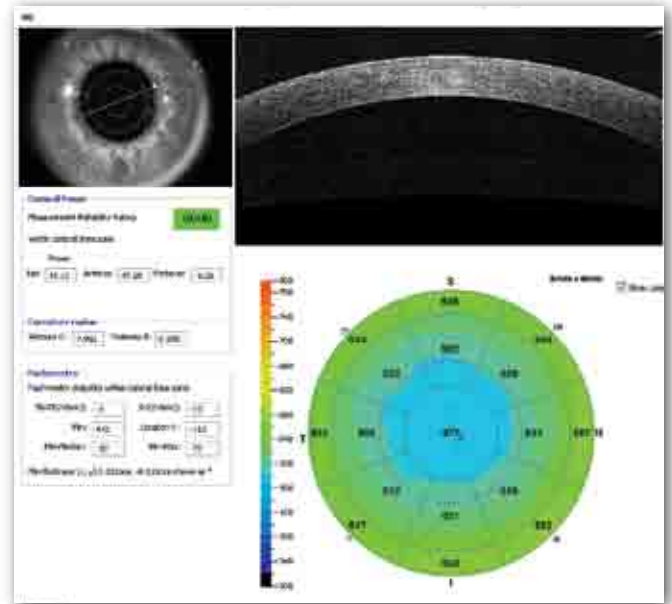
Corneal Power



Cornea / Anterior Segment for non-contact Anterior Segment Assessment

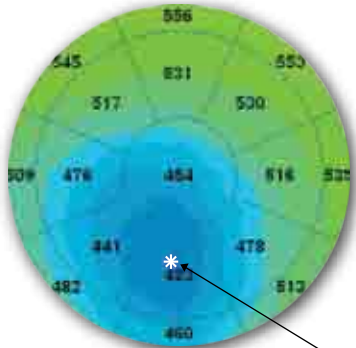
Cornea Power

The Cornea Power Upgrade allows evaluation of patients with prior refractive procedures. Standard topography only calculates the front curvature and then extrapolates posterior curvature. Using the Cornea Power Upgrade, both the anterior and posterior curvatures are measured directly to obtain cornea powers.



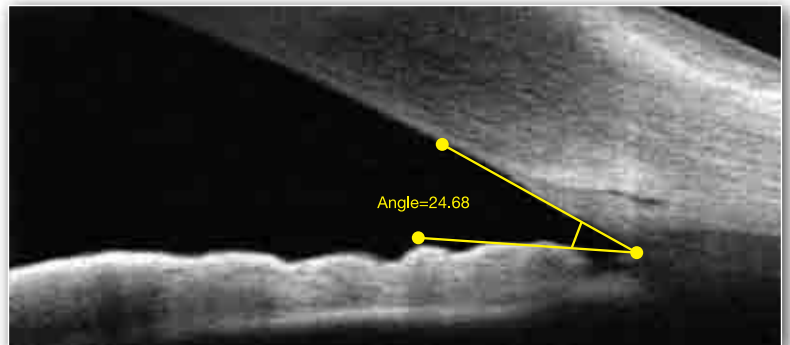
Corneal Power Report

Pachymetry



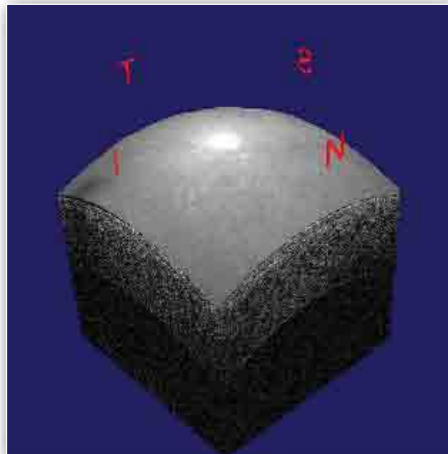
Pachymetry - Full 6mm diameter corneal thickness mapping with minimum thickness indicator (example of Keratoconus)

Angles



Angle Visualization with FDA Cleared Measurement

3D Cornea



Lasik Flap



Tear Film

Contact Lens Fitting





Retina

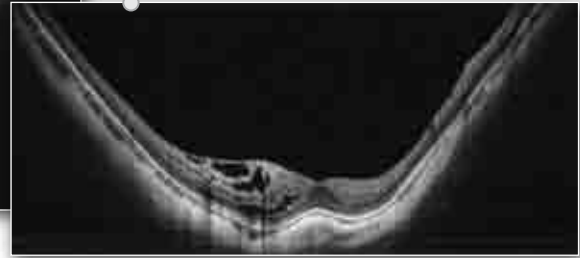
for detecting & tracking disease progression

Tracking

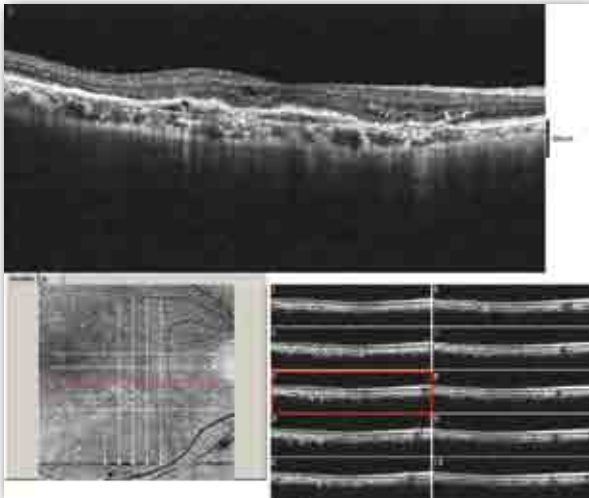


Tracked B-scan with Choroidal Measurements

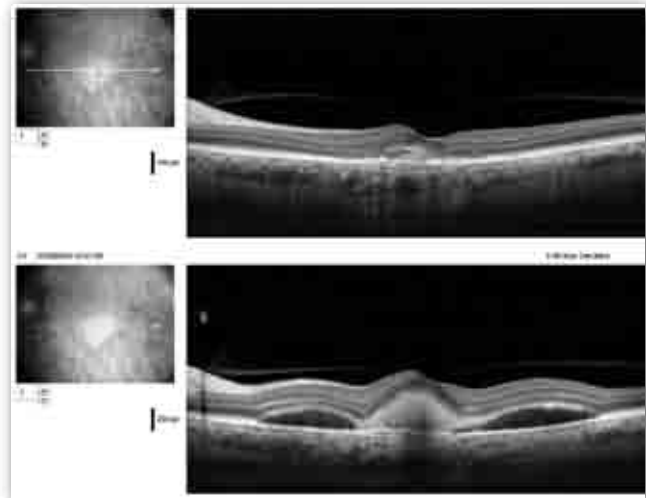
-18D Myope



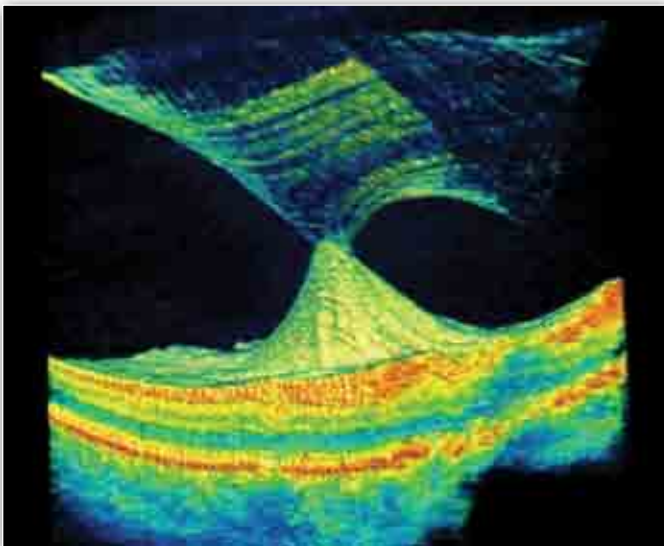
Scroll Through Hi-Resolution Raster B-scans



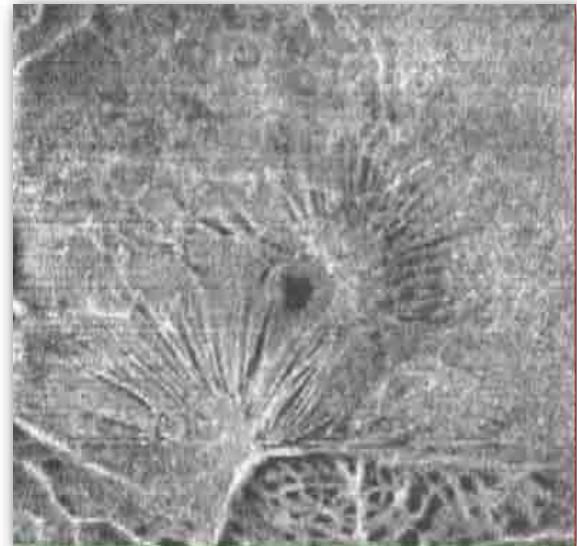
Compare Hi-Resolution B-scans for Change



3D Retina Volume



Epiretinal Membrane from En Face Analysis



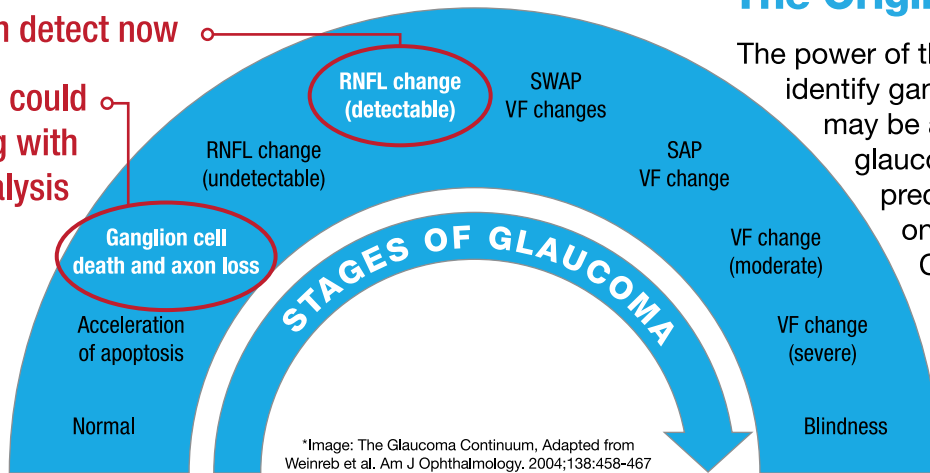


Glaucoma

for early detection and management

What you can detect now

What you could be detecting with GCC[®] Analysis



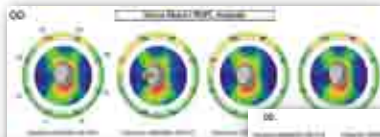
*Image: The Glaucoma Continuum, Adapted from Weinreb et al. Am J Ophthalmology. 2004;138:458-467

The Original GCC[®]

The power of the GCC Scan can identify ganglion cell loss which may be an early indication of glaucoma. GCC loss precedes RNFL loss based on The Glaucoma Continuum.*

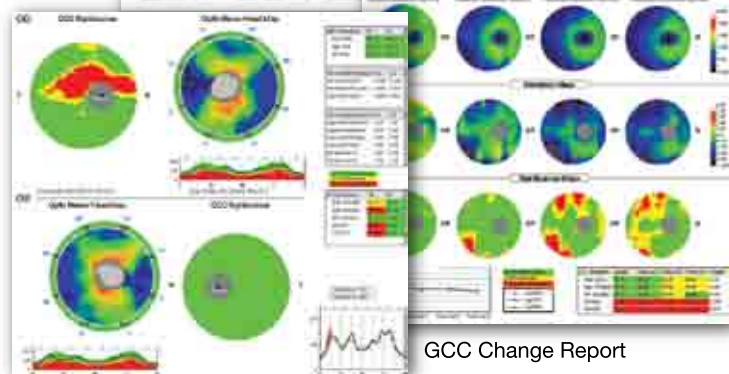
Sym-matrix[™] & Change

ONH Change Report



GCC { Global Loss Volume (GLV)
Focal Loss Volume (FLV)

GLV and FLV metrics are designed to detect patterns of loss. GLV detects diffuse (global) loss and FLV detects localized (focal) loss over the **Ganglion Cell Complex** map with color-coding based on the comparison to the Normative Database.

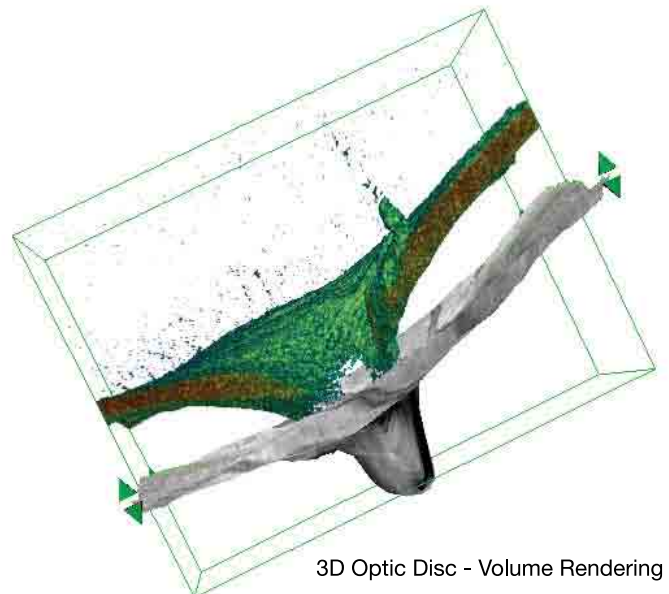


GCC Change Report

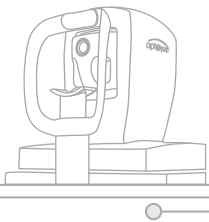
Comprehensive OU Glaucoma Report

The Consummate Glaucoma Package

- GCC with FLV/GLV & Normative Database comparison
- RNFL with Normative Database comparison
- Normative Database with 1,083 eyes. Adjusts for:
 - Age
 - Optic Disc Size (for ONH scan) – only Optovue does this to date
 - Scan Signal Strength – only Optovue does this to date
 - Ethnicity
- Optic Disc Metrics
- Angle Measurement
- Full Pachymetry Mapping – 6mm diameter, color coded
- 3D Optic Disc

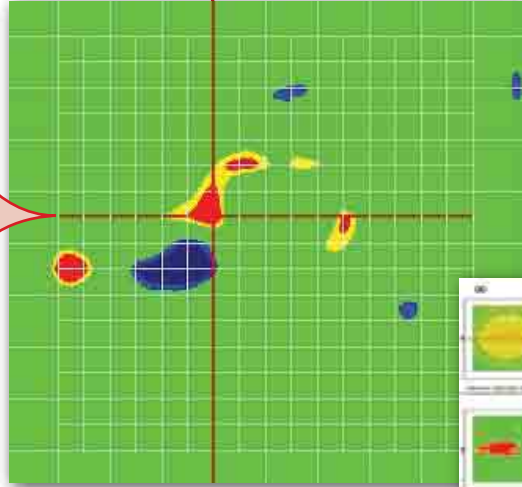
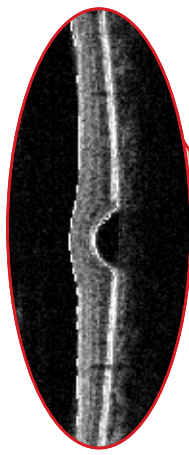
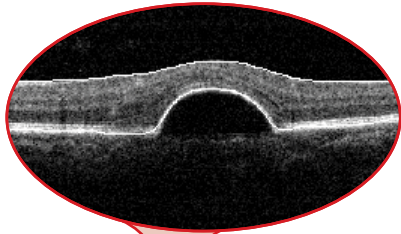


3D Optic Disc - Volume Rendering

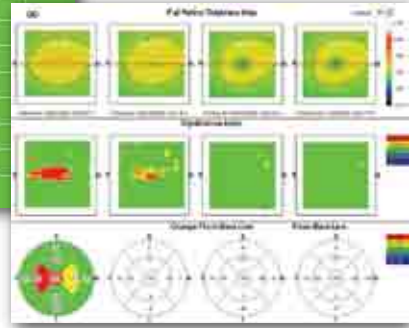


Retina

for detecting & tracking disease progression



EMM5 Macular Significance Map
1.3 second capture time



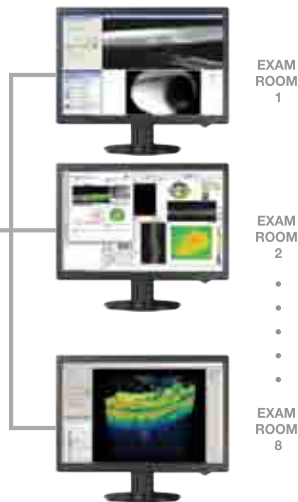
EMM5 Change Report

Intelligent Macular Mapping

- Full Retina Thickness comparison to the Normative Database
- Localization of abnormalities (i.e. Pigment Epithelial Detachment on left)
- Click on location to present vertical and horizontal B-scans
- Select Full, Inner, Outer and RPE layer mapping
- Change Analysis to monitor retinal disease such as Diabetic Retinopathy, Macular Degeneration, etc.
- Volumetric Analysis



Networking



With Optovue's networking software, you will be able to:

- **Enhance practice efficiency**
- **Provide patient education**
- **Integrate with EMR software**
- **Eliminate printing costs**

RTVUE®

Specifications:

RTVue Scanner:

OCT Image: 26,000 A-scan/second
Frame Rate: 256 to 1024 A-scan/Frame
Depth Resolution (in tissue) : 5.0 μm
Transverse Resolution: 8 μm (nominal)

Scan Range:

Depth: 2 - 2.3mm (retina)

Scan Beam Wavelength:

$\lambda=840\pm 10\text{nm}$

Exposure Power at pupil:

750 μW

OCT Fundus Image (En Face):

FOV: 32° (H) x 22° (V)

Minimum Pupil diameter: 2.5mm

External Image (Live IR)

FOV: 13mm x 9mm

Patient Interface:

Working Distance: 22mm

Motorized Focus Range: -15D to +20D

Computer:

CPU: 2.66 GHz Quad-Core Processor

RAM: 4GB

Hard Disk: 1 TB

Back Up Hard Disk: 1 TB



optovue

DEFINING THE OCT REVOLUTION

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