Anterior Segment Premier Module Quick Reference Guide

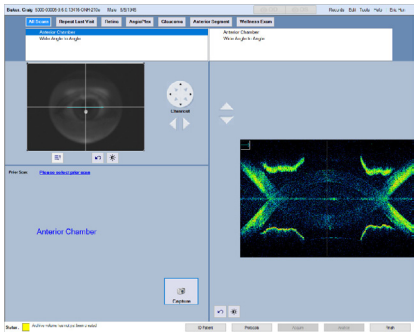
ZEISS CIRRUS OCT

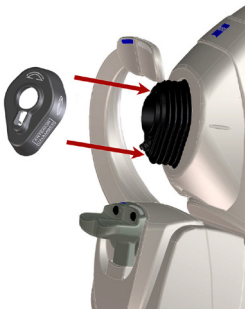
This guide is an overview of scan acquisition for anterior segment scans available* with CIRRUS® OCT from ZEISS. The guide outlines acquisition steps common to all ZEISS CIRRUS OCT devices. For purposes of illustration, the guide uses screens from the model 5000 device. Screen appearance may differ depending on model, licensed features, and type of scan acquired. See the ZEISS *CIRRUS OCT Instructions for Use* for safe and effective operation.

Overview

The anterior segment HD scan guidelines apply to the following scans: Anterior Chamber, Wide Angle-to-Angle, HD Angle, HD Cornea, and Pachymetry. The workflow for acquiring anterior segment HD scans is similar to that for acquiring posterior segment scans, with the following exceptions:

- No fundus image, **Auto Focus** button, or left-right **Focus** arrows
- No FastTrac® or FastTrac buttons
- No **Optimize** button
- No **Auto-Enhance, AutoCenter** buttons, or manual center controls



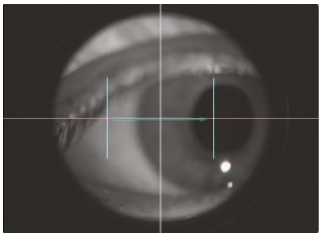


Workflow for Anterior Segment Scans

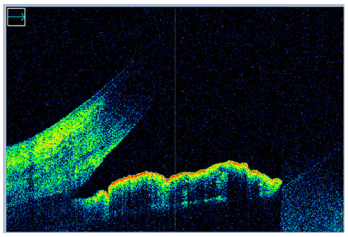
If applicable, attach the appropriate external lens to the instrument lens mount.

Note: For ZEISS CIRRUS OCT model 500/5000 devices, if a scan requires an external lens, it does not appear in the scan list until the lens is mounted. For model 400/4000 devices, it does not appear in the scan list until the lens is selected from the Lens menu.

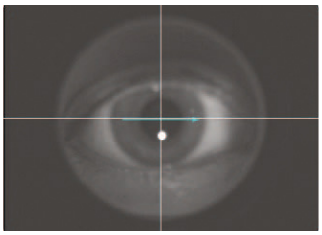
- In the scan list for the eye you want to scan, click the **Scan type**.
- Instruct the patient to fixate on the center of the **Fixation target**. *Note: For anterior scans that require an external lens, the fixation target is blurry.*
- Align the scan according to the guidelines that follow for each scan using the screen X-Y and Z controls, keyboard arrow keys, or mouse scroll wheel.
- Instruct patient to open eyes wide just before capture to minimize eyelash interference.
- On the **Acquire screen**, click **Capture**, and on the **Review screen**, if scan quality is good, click **Save**.



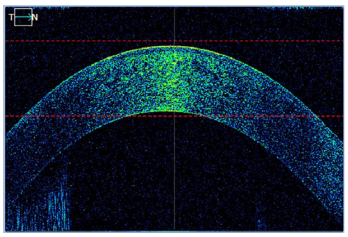
HD Angle iris viewport: Correctly aligned eye between on-screen guides



Correctly aligned left HD Angle scan



HD Cornea iris viewport: Correctly centered eye



Correctly aligned HD Cornea scan between the red lines

Guideliens for Anterior Segment Scans

HD Angle (does not require an external lens)

Center and focus the pupil in the iris viewport. Then make adjustments until the corneoscleral junction is in view and the angle is **centered in a lower quadrant** of the B-scan window. For angles opening towards the right, position the angle in the lower left quadrant and vice versa for angles opening towards the left.

Note: For the HD Angle scan, the internal fixation target is not visible when the scan is correctly aligned. If the patient has difficulty fixating without the internal target, you may need to use the external fixation target.

If the angle recess in the B-scan appears shadowed by the sclera, move the scan slightly along the limbus to minimize the effect, or instruct the patient to fixate further away from the center.

HD Cornea (requires Cornea external lens)

Center and focus the pupil in the iris viewport. Then make adjustments to center the scan in the B-scan viewport until the cornea fits between the two red lines. When the scan is centered on the corneal vertex, you will see a strong vertical reflex.

*Anterior Segment Premier Module is a licensed option that includes the HD Cornea, Anterior Chamber, Wide Angle to Angle, and Pachymetry scans. This module may not be available in all markets and, when available, may not be on all site instruments. If you do not have this option and want to purchase it, contact ZEISS. In the U.S.A., call 1-877-486-7473; outside the U.S.A., contact your local ZEISS distributor.

Wide Angle-to-Angle (requires Anterior Chamber external lens)

Center and focus the pupil in the iris viewport. Then make adjustments to center the scan in the B-scan viewport until the anterior portion of the cornea extends slightly out of the field of view and you see both iridocorneal angles, iris, and pupil. The scan is optimally placed when the scan line passes through the center of the pupil in the iris viewport.

To ensure that the image is not tilted, you may need to instruct the patient to look slightly to the left or right of the blurry fixation target until the B-scan appears horizontal.

Note: For the Wide Angle to Wide Angle scan, the iris viewport image will be slightly out of focus even when correctly aligned.

Anterior Chamber (requires Anterior Chamber external lens)

Center and focus the pupil in the iris viewport. Then make adjustments to center the scan in the B-scan viewport until you see the lens of the eye, the anterior chamber angles, and a strong vertical central reflex line indicating the scan is centered on the corneal vertex.

To ensure that the image is not tilted, you may need to instruct the patient to look slightly to the left or right of the blurry fixation target until the B-scan appears horizontal.

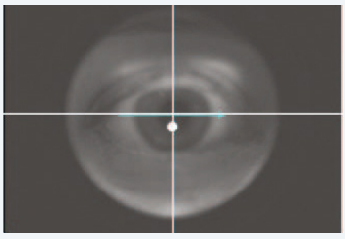
Separate the real and mirror images of the cornea as much as possible without letting each one touch the images of either the lens or the iris.

Pachymetry (requires Cornea external lens)

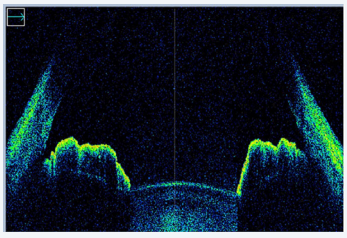
The Pachymetry scan is similar to the HD Cornea scan, but you must align two scans, at 0˚ and 90˚.

Center the iris in the iris viewport. Then center the image in the bottom viewport. Make further adjustments until the upper image fits between the two red lines and you see a strong vertical reflex in both viewports, indicating the scan is centered on the corneal vertex.

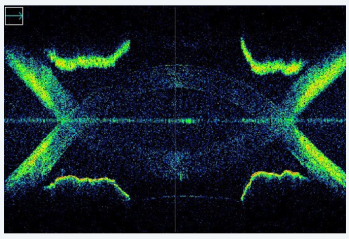
Correctly aligned images for Wide Angle-to-Angle and Anterior Chamber scans



Centered pupil in iris viewport

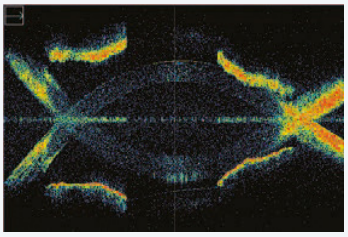


Wide Angle-to-Angle scan

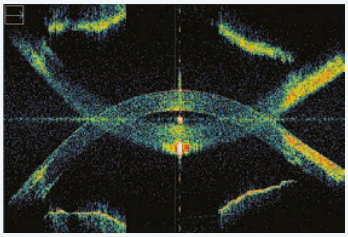


Anterior Chamber scan

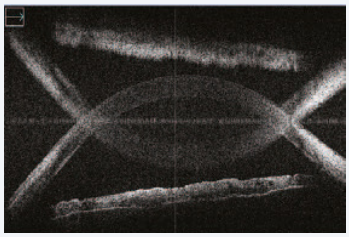
Samples of incorrectly aligned images



Iris touching cornea/lens

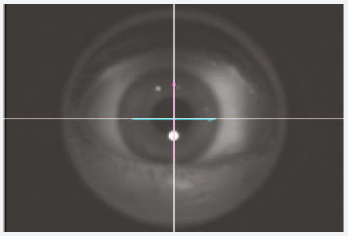


Corneas too close

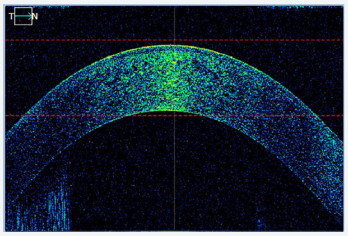


Not centered

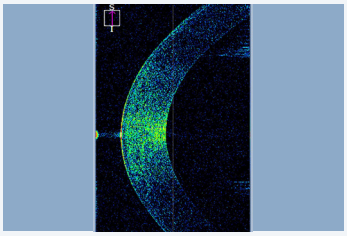
Correctly aligned images for Pachymetry scans



Iris centered in the iris viewport



Upper scan is between the two red lines



Lower scan centered within the bottom viewport

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