

# Interpretation Guide

## OCT Angiography and integrated diagnostic imaging



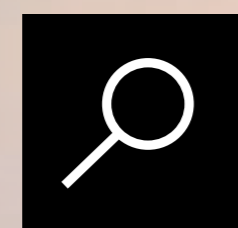


## Helpful Hints

[More »](#) Click to advance



Click on the number icons to reveal more information.



Click on the magnifying glass symbol to see an enlarged version of the image.

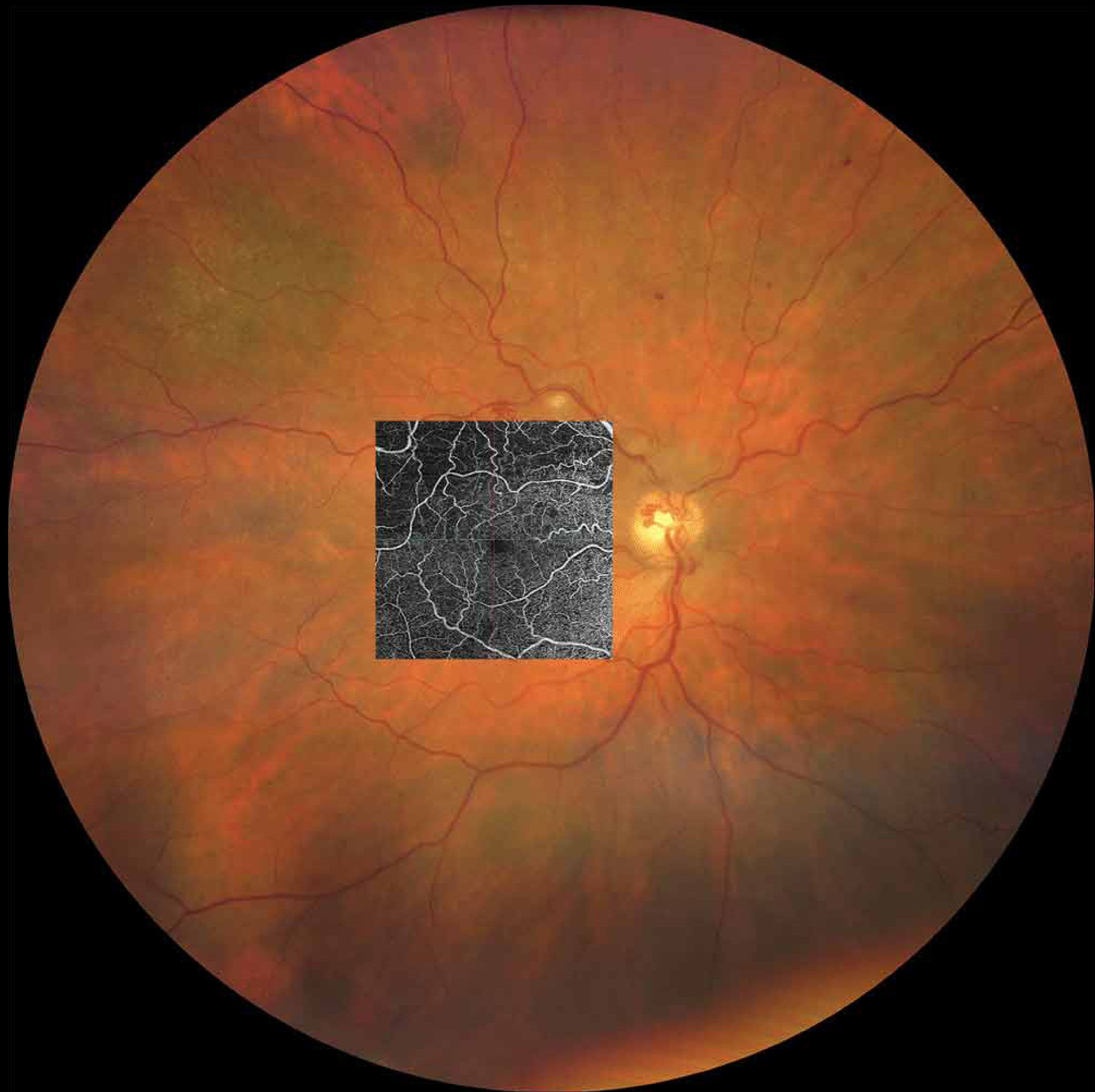


Click to close.



Click to return to Table of Contents.



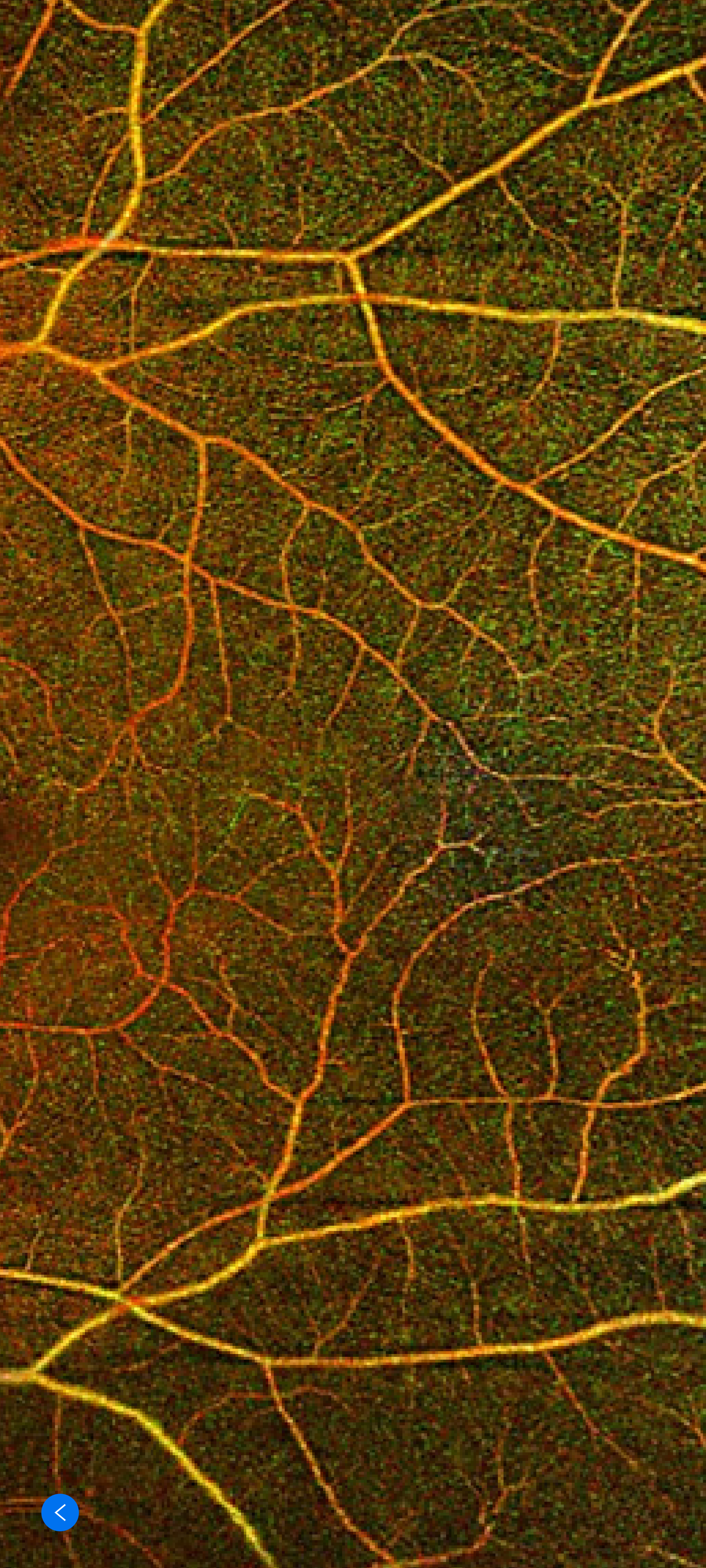


Multi-modality retinal imaging with OCT Angiography (OCTA) enables you to capture ultra-clear images of retinal and choroidal microvasculature in seconds.

As a clinician, this allows you to have a new level of confidence when suggesting a treatment regimen that is customized to your patient's individual needs.

In eye clinics worldwide, multi-modality in diagnostics and imaging is fast becoming the standard of care.





# Table of Contents

Branch Retinal Vein Occlusion (BRVO) .....	5
Neovascular AMD .....	6-9
Central Serous Chorioretinopathy (CSC) .....	10-12
Ischemic diabetic maculopathy .....	13-14
Non-proliferative DR .....	15-16
Exudative CNV .....	17-18

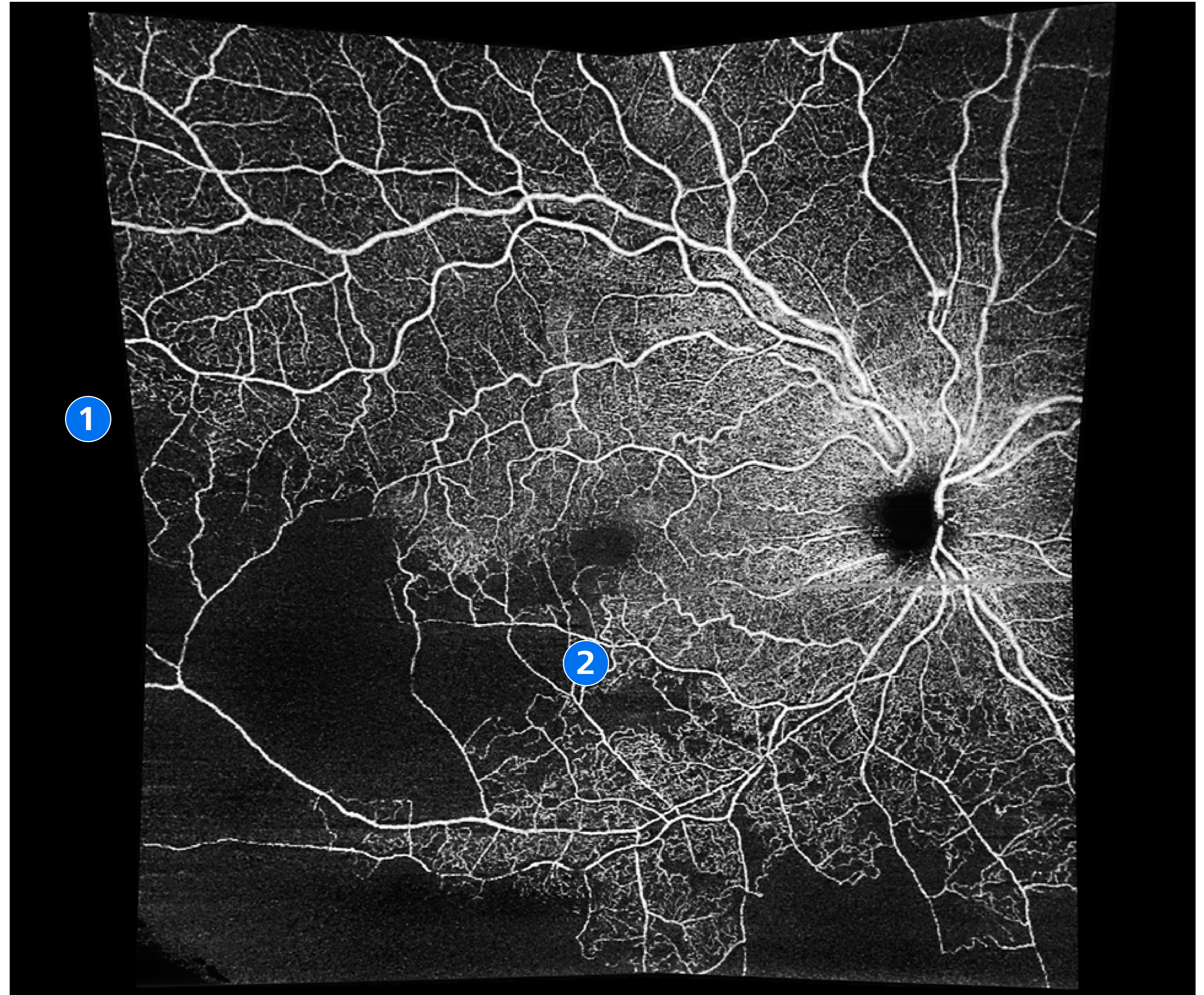
# Branch Retinal Vein Occlusion (BRVO)

## Patient History

53-year-old female

## Summary

In contrast to a single 6x6 mm or 8x8 mm scan, the AngioPlex<sup>®</sup> Montage—with up to a 50-degree field of view—is able to reveal the extent of ischemia, providing a more complete clinical picture.



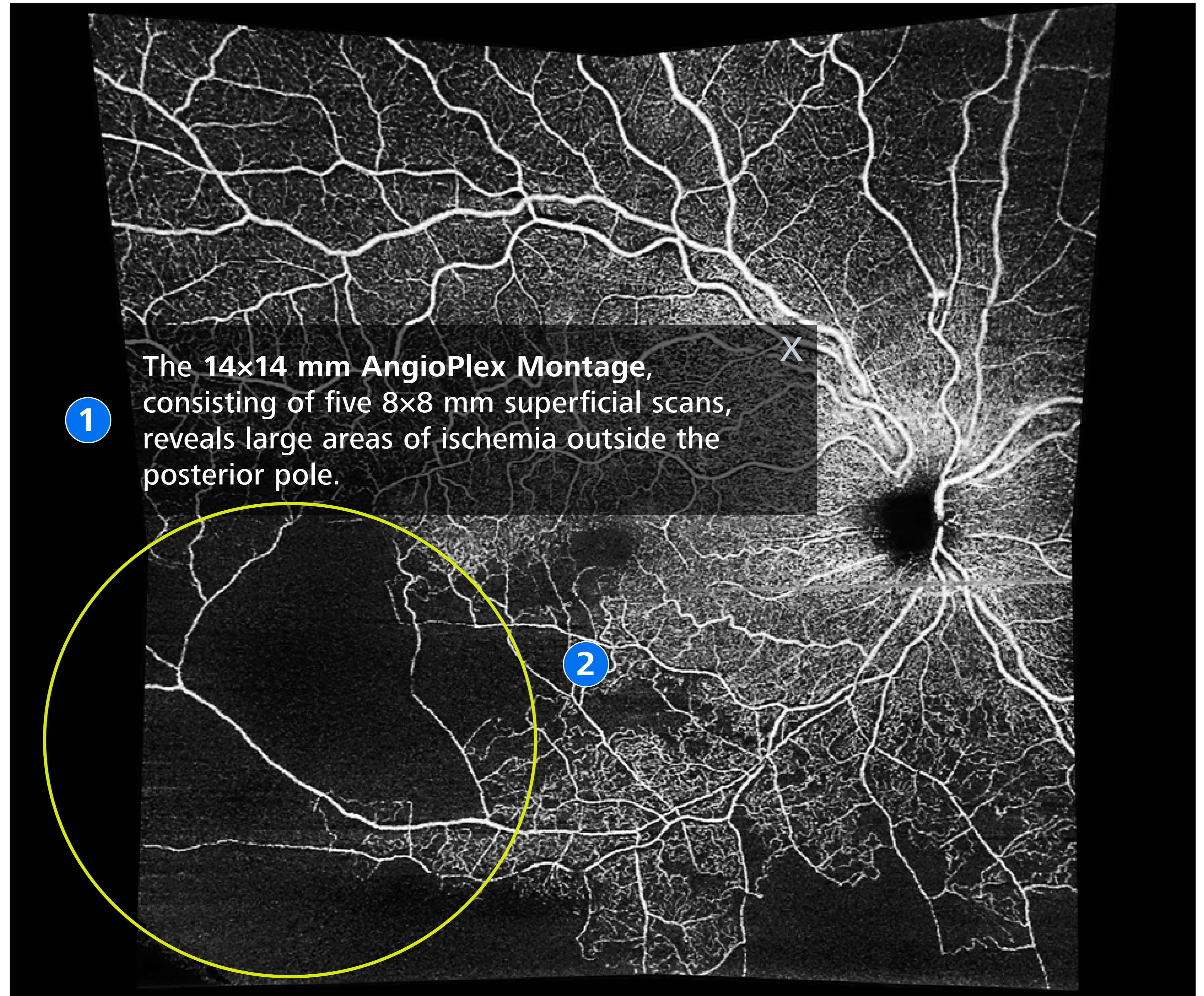
# Branch Retinal Vein Occlusion (BRVO)

## Patient History

53-year-old female

## Summary

In contrast to a single 6x6 mm or 8x8 mm scan, the AngioPlex<sup>®</sup> Montage—with up to a 50-degree field of view—is able to reveal the extent of ischemia, providing a more complete clinical picture.



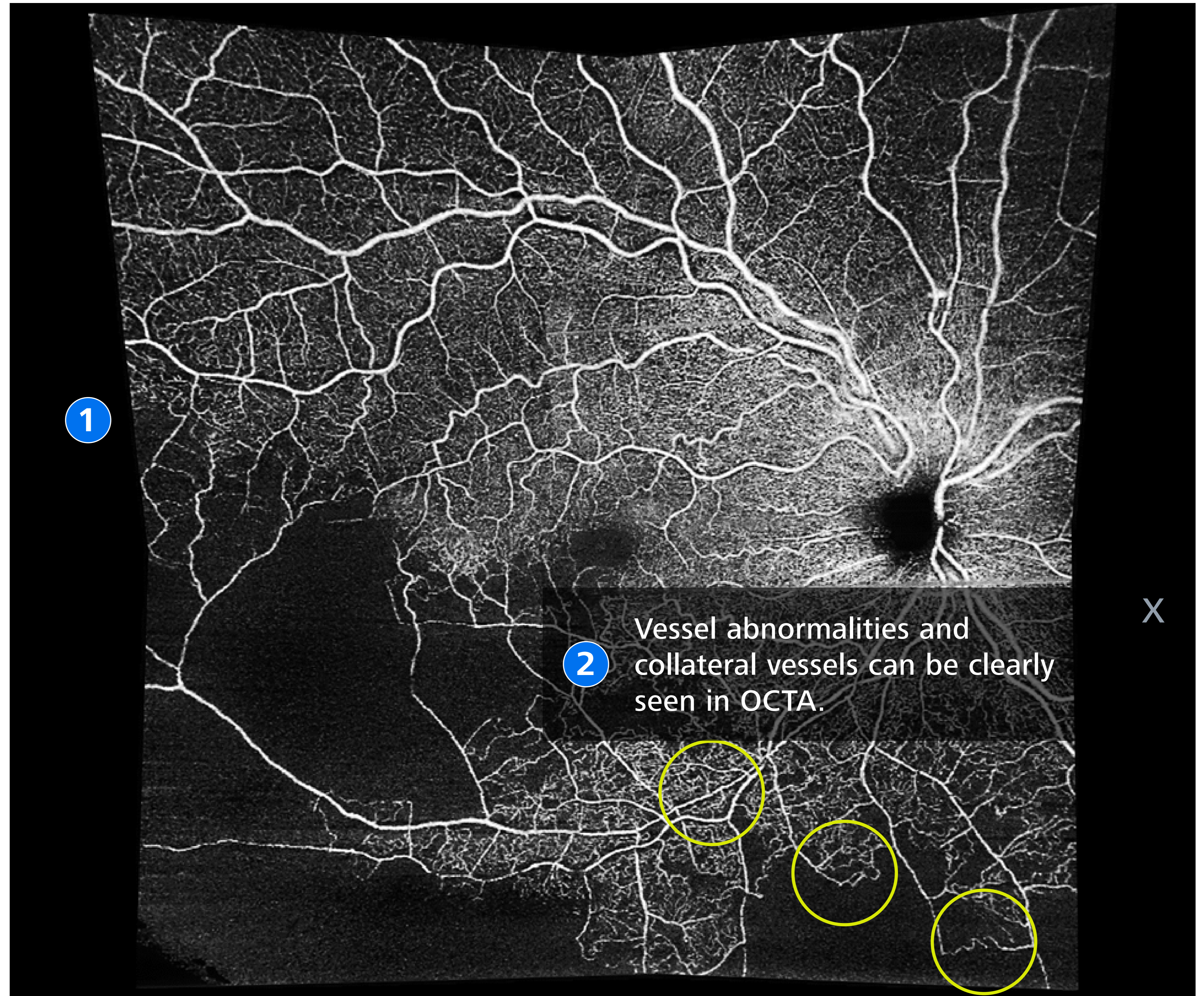
# Branch Retinal Vein Occlusion (BRVO)

## Patient History

53-year-old female

## Summary

In contrast to a single 6x6 mm or 8x8 mm scan, the AngioPlex<sup>®</sup> Montage—with up to a 50-degree field of view—is able to reveal the extent of ischemia, providing a more complete clinical picture.



# Neovascular Age-related Macular Degeneration (AMD)

## Patient History

Patient presented with a history of neovascular AMD in the right eye, which has been treated with anti-VEGF.

[More »](#)

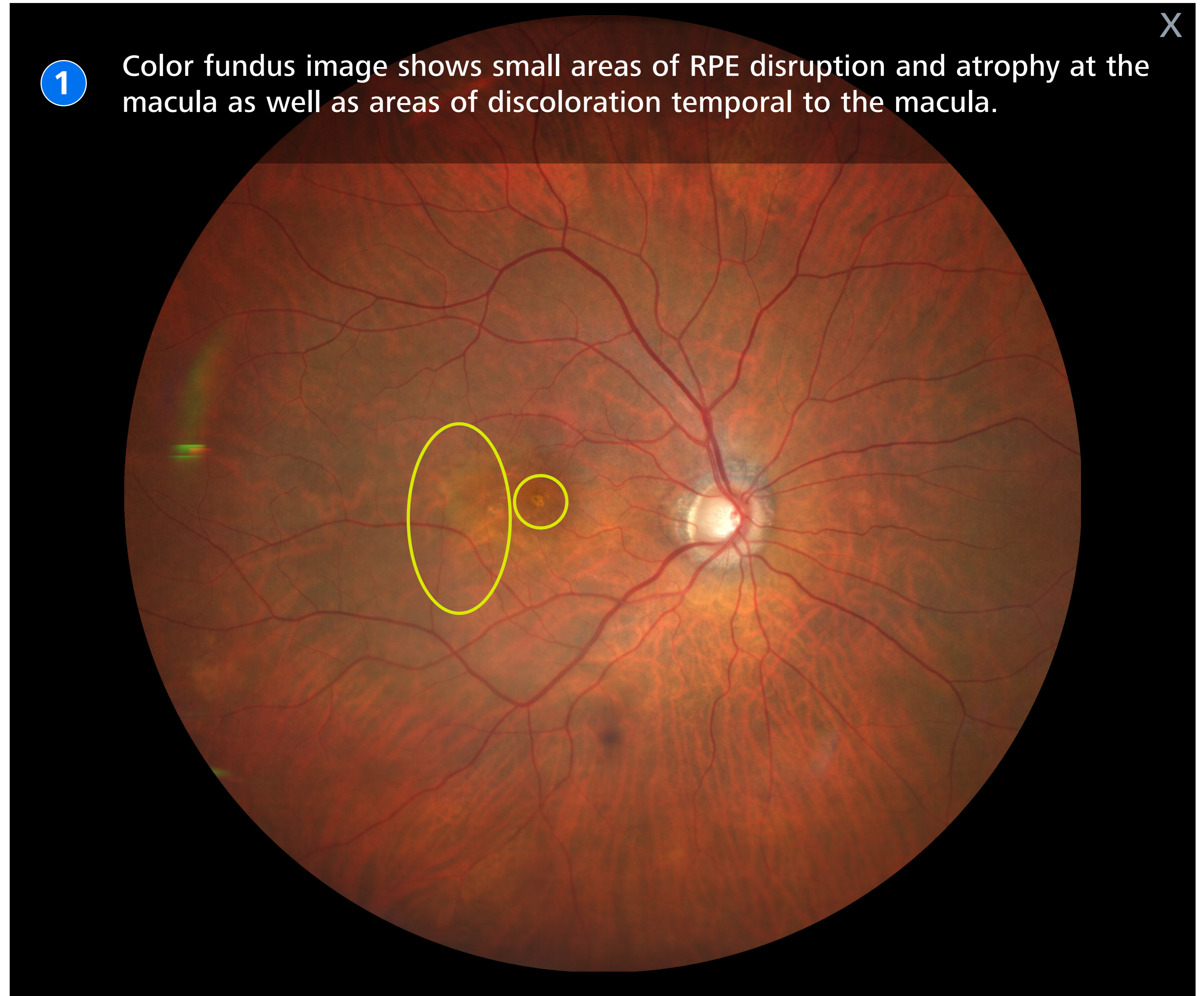


# Neovascular Age-related Macular Degeneration (AMD)

## Patient History

Patient presented with a history of neovascular AMD in the right eye, which has been treated with anti-VEGF.

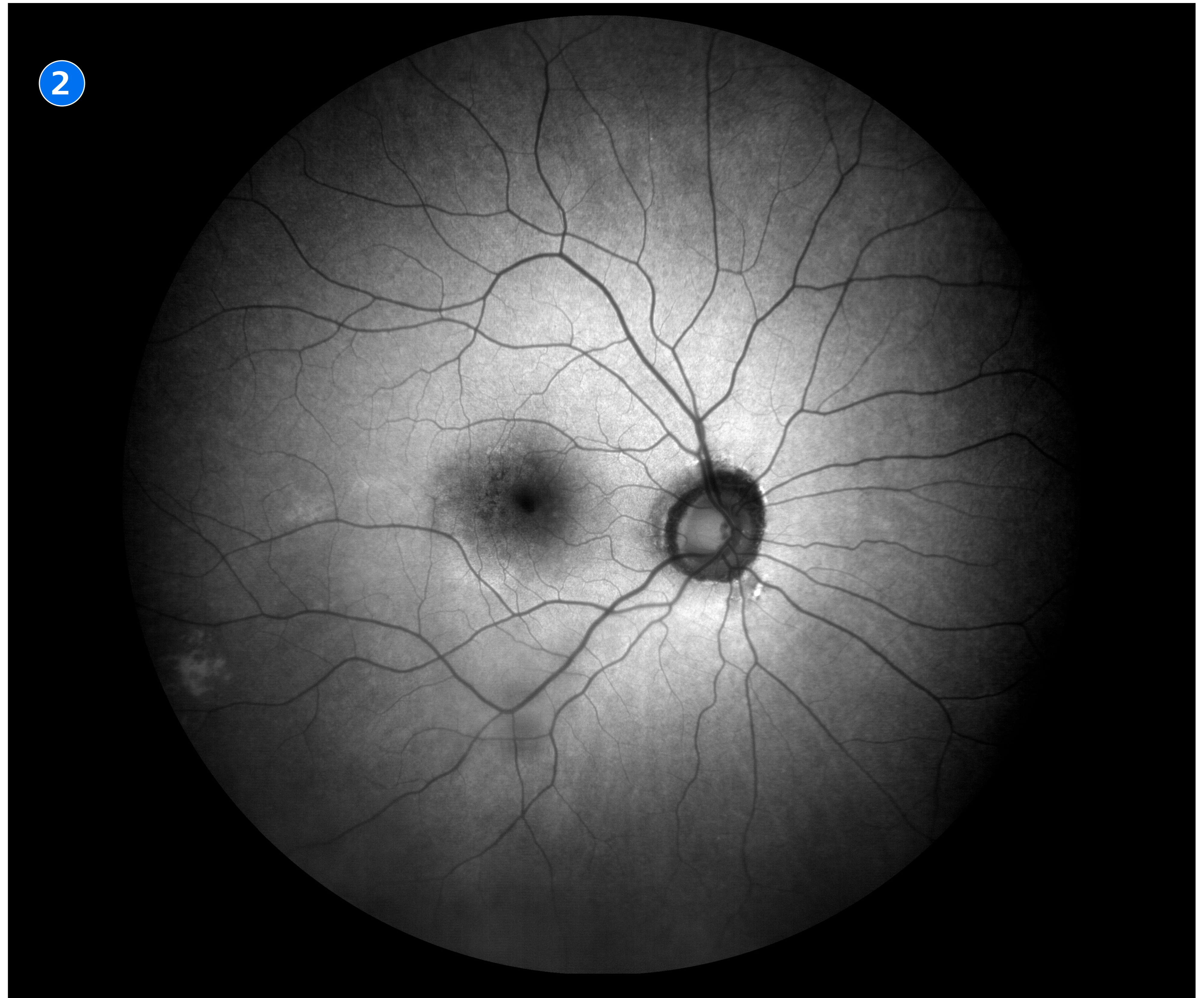
[More »](#)



# Neovascular AMD

**Fundus autofluorescence imaging (FAF)** is indicated in geographic atrophy to document the location and size of disease.

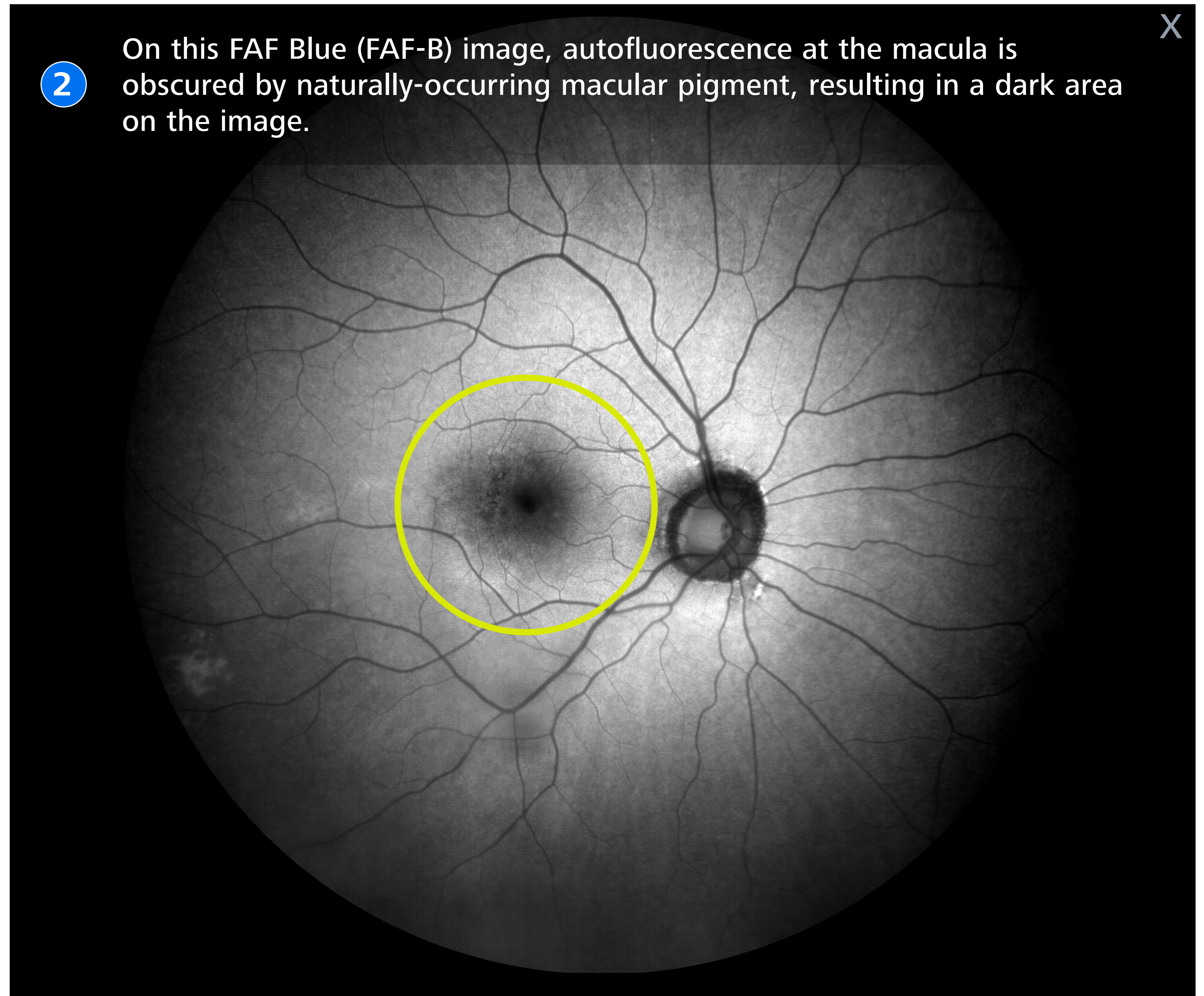
[More »](#)



# Neovascular AMD

**Fundus autofluorescence imaging (FAF)** is indicated in geographic atrophy to document the location and size of disease.

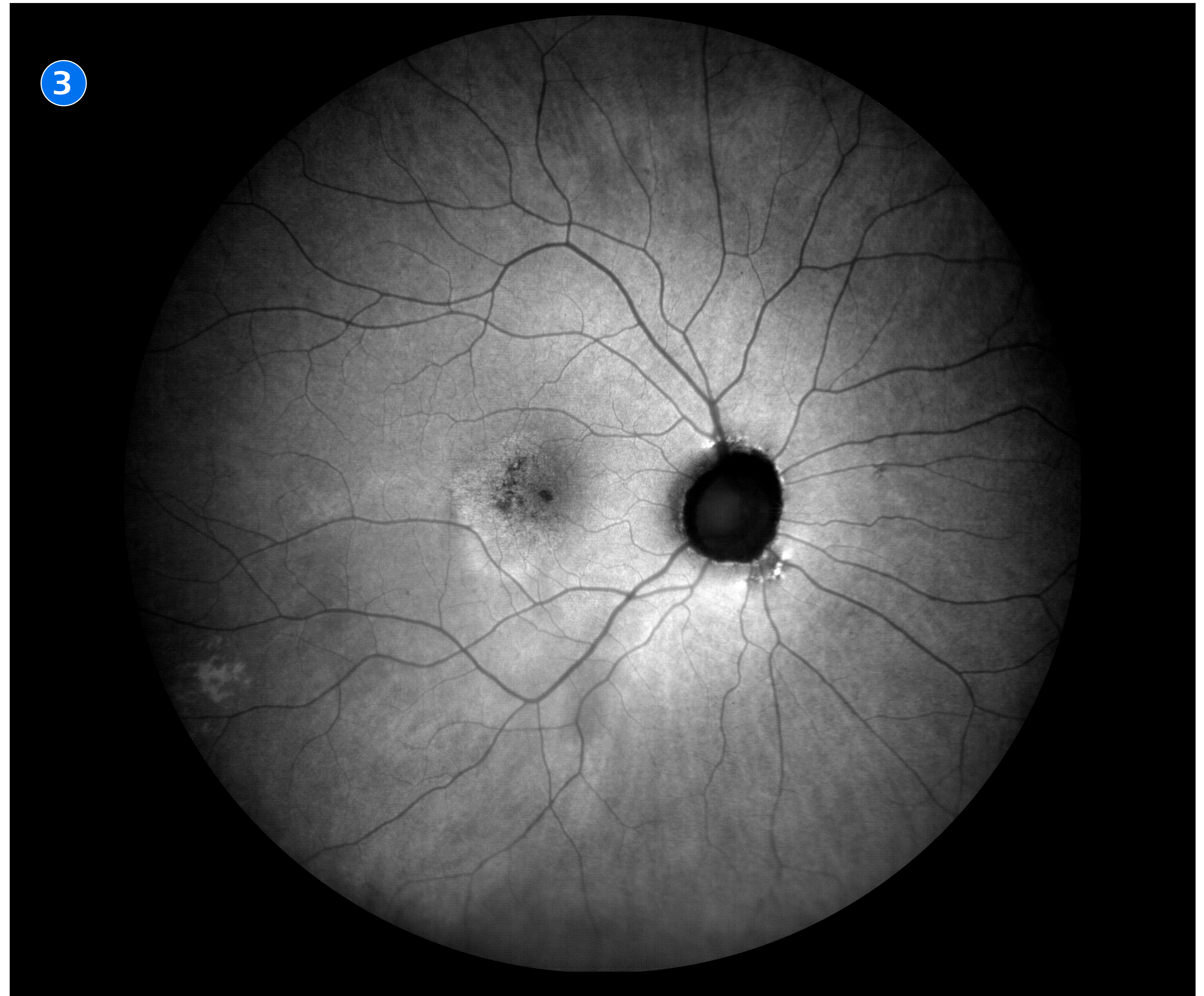
[More »](#)



# Neovascular AMD

FAF Green (FAF-G) is better at visualizing the macular area, since it is not affected by macular pigment.

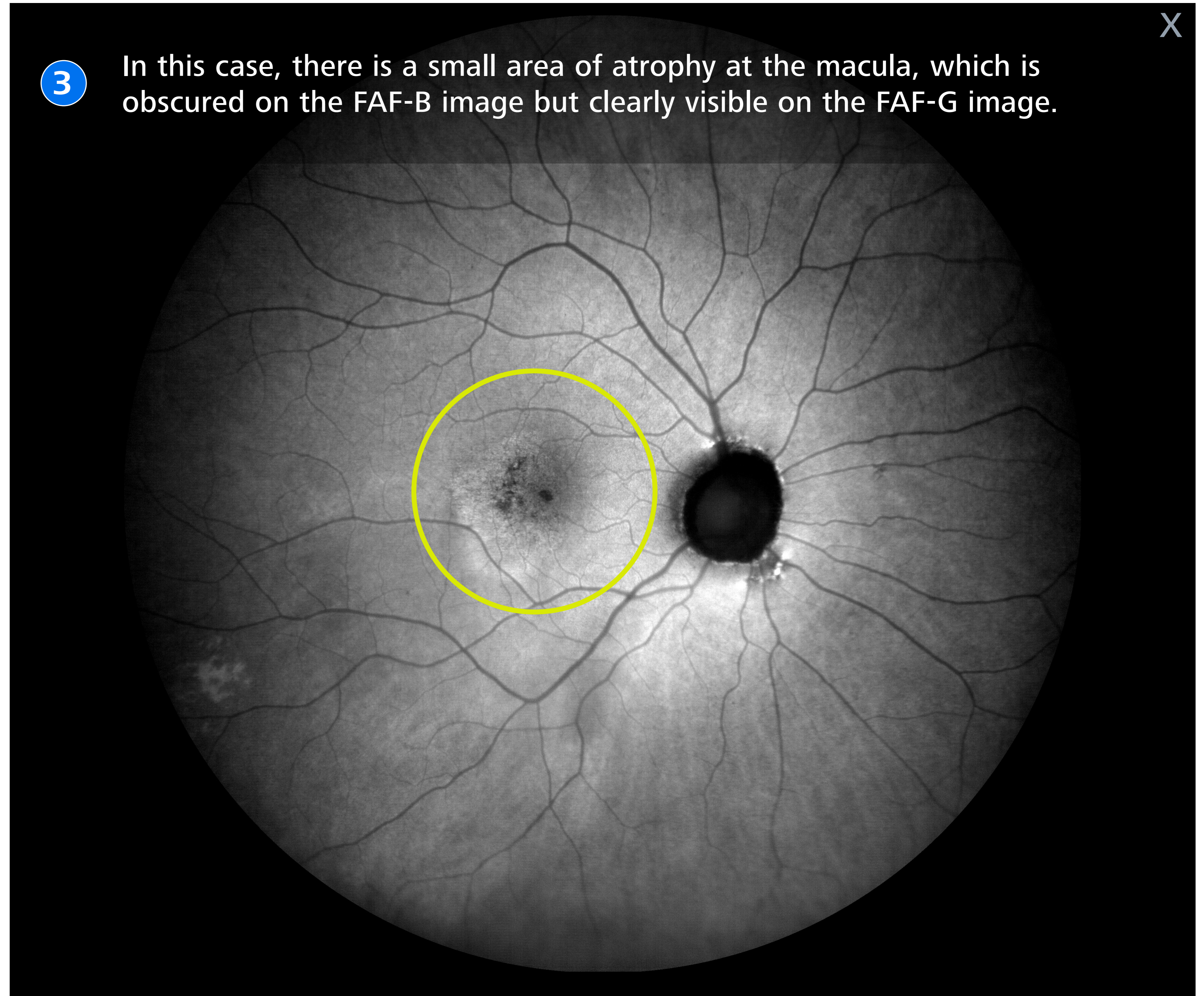
[More »](#)



# Neovascular AMD

FAF Green (FAF-G) is better at visualizing the macular area, since it is not affected by macular pigment.

[More »](#)

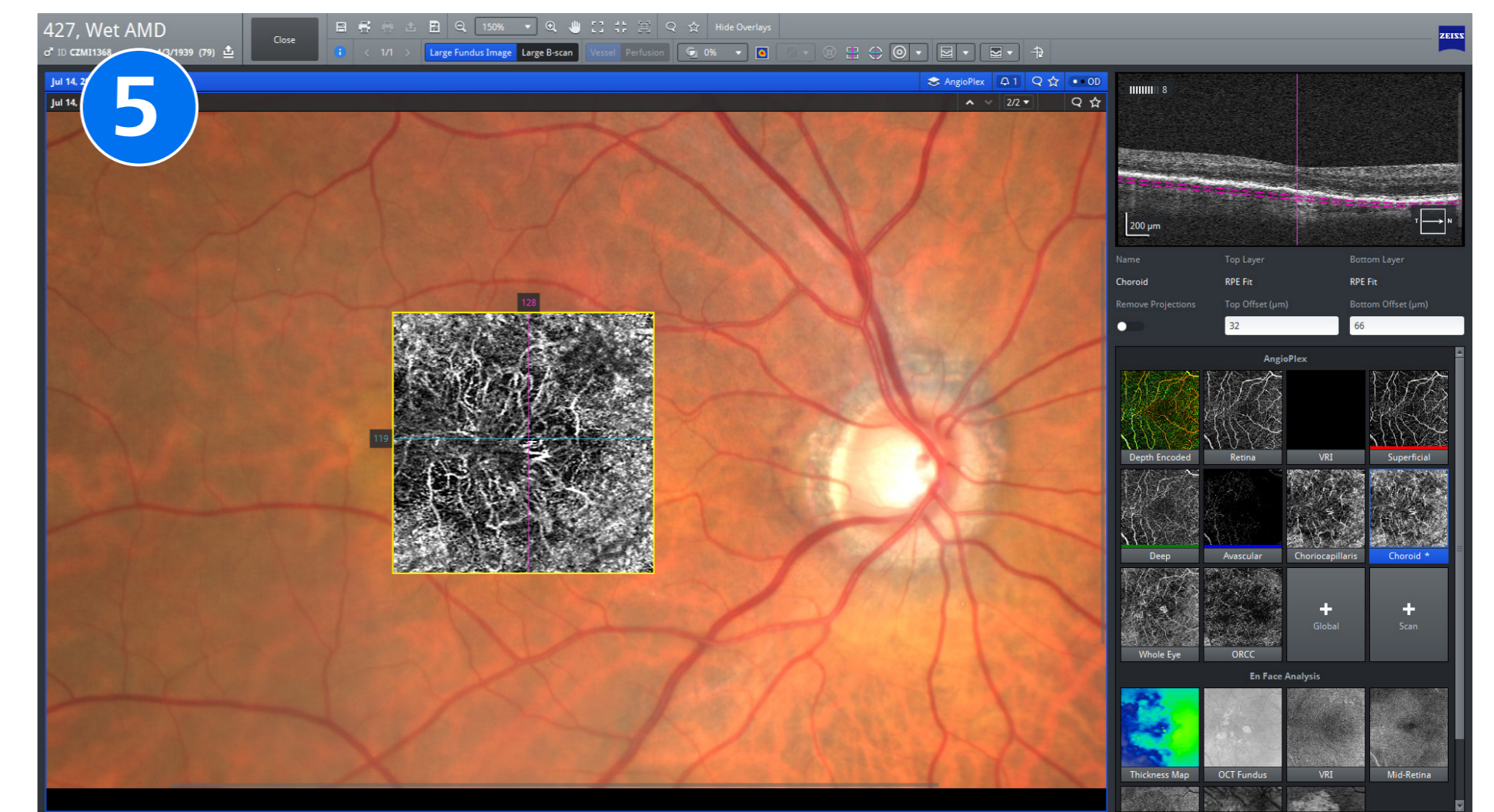
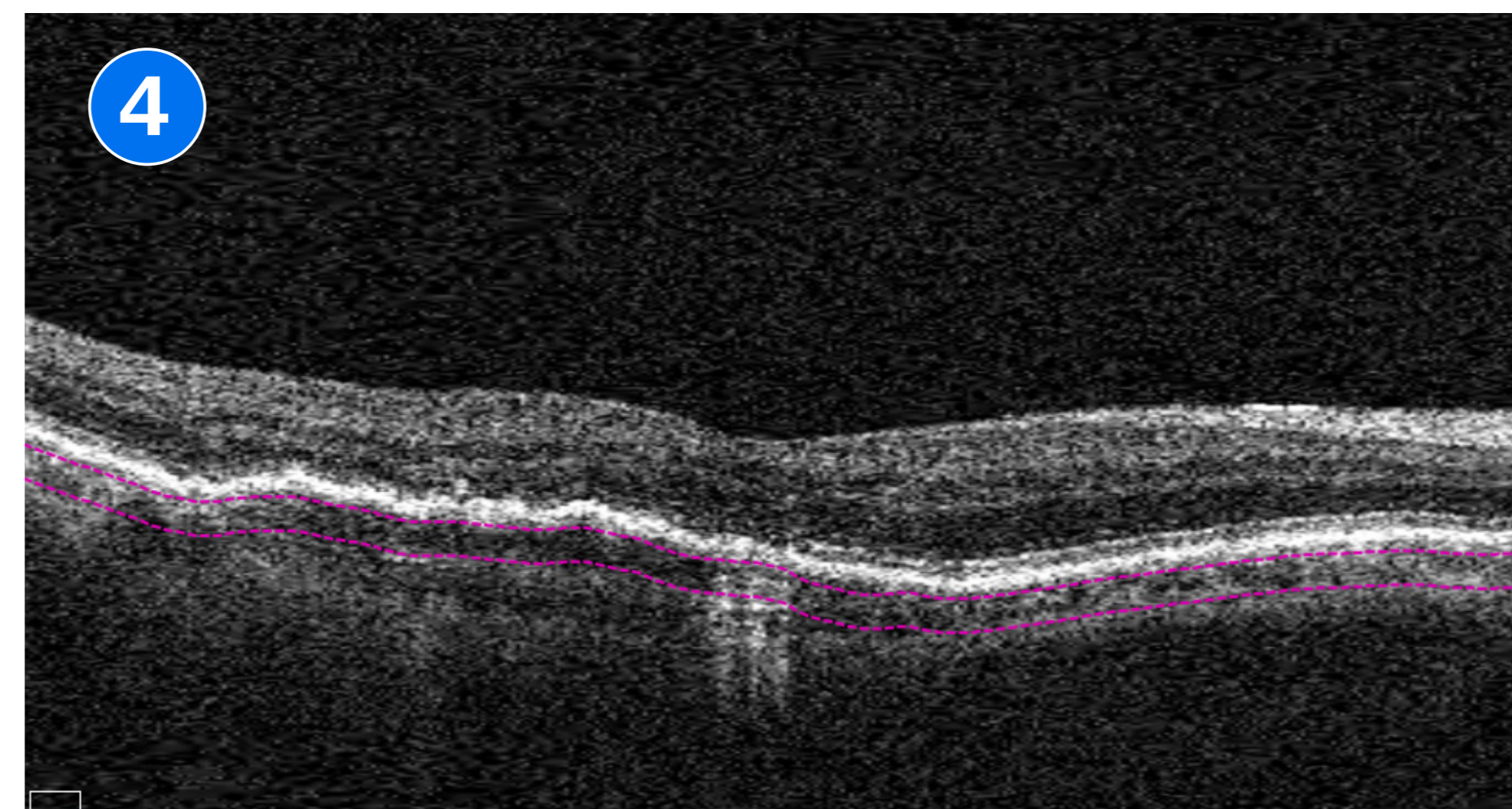
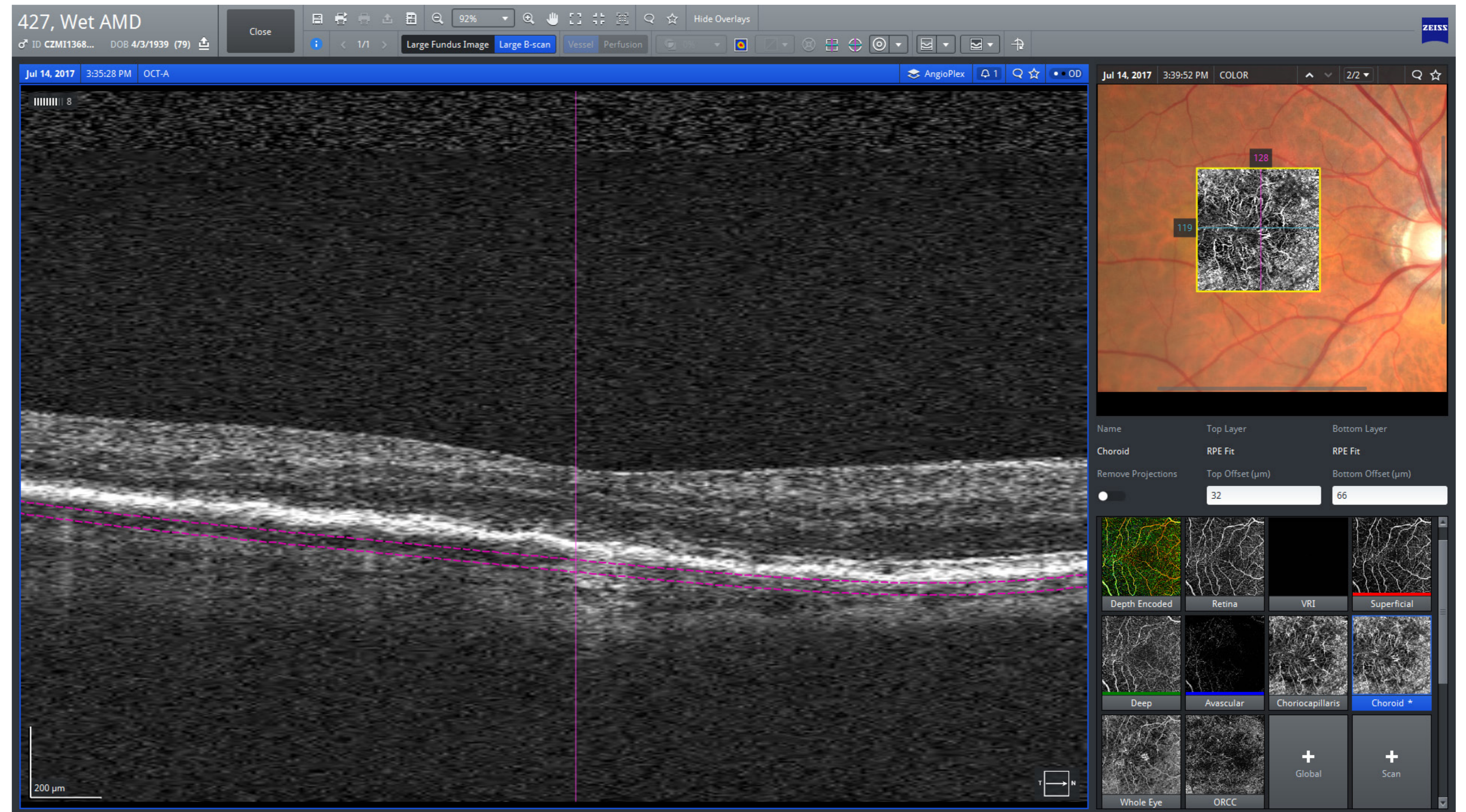


# Neovascular AMD

## Summary

Integrated diagnostic imaging allows the clinician to quickly monitor all aspects of the disease, from accurately documenting the location and the extent of geographic atrophy using color and FAF images, to monitoring for subretinal fluid with OCT.

With the addition of non-invasive OCTA, clinicians can monitor CNV with more frequent follow ups and appropriate, timely referrals when needed.

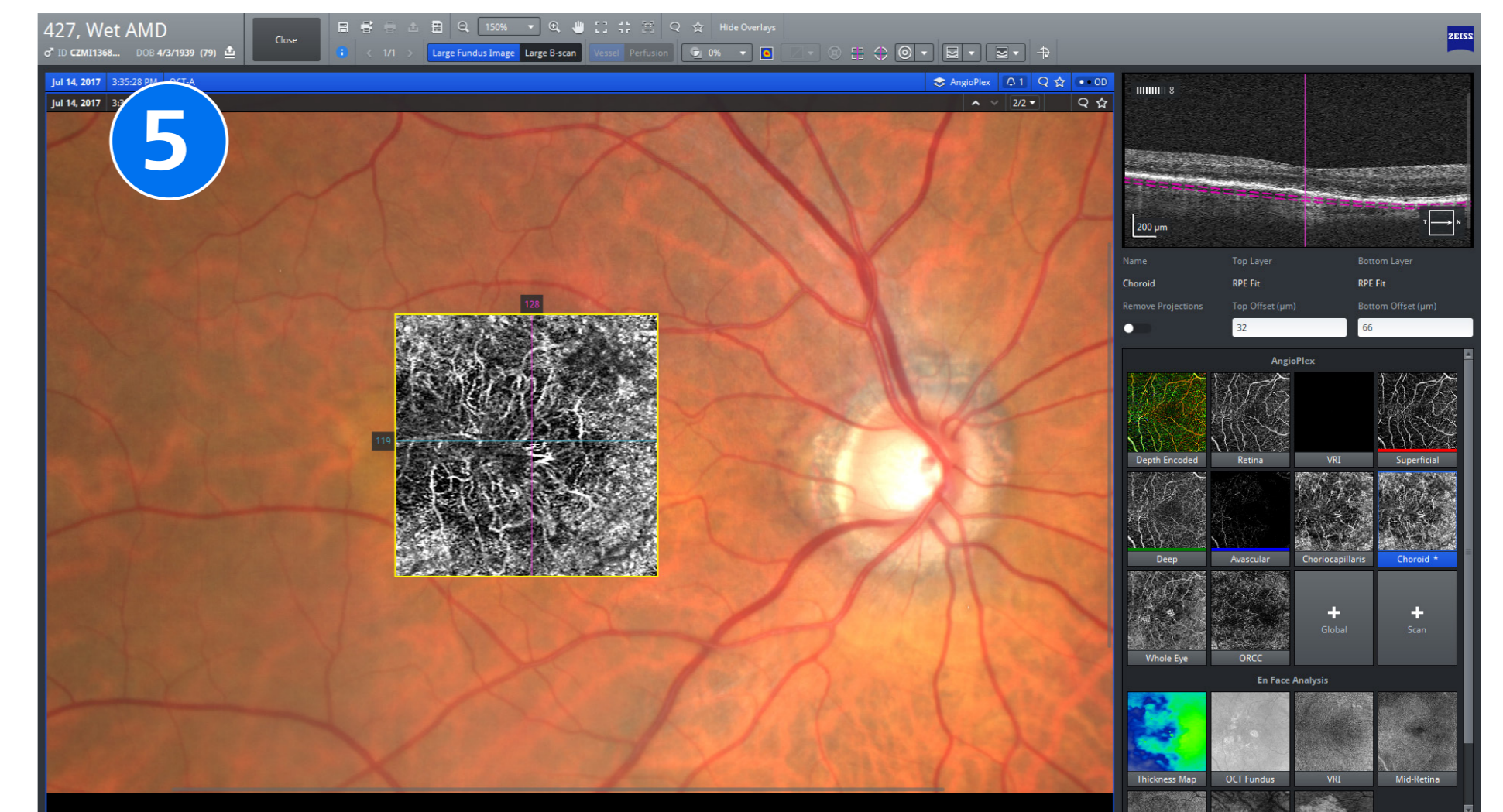
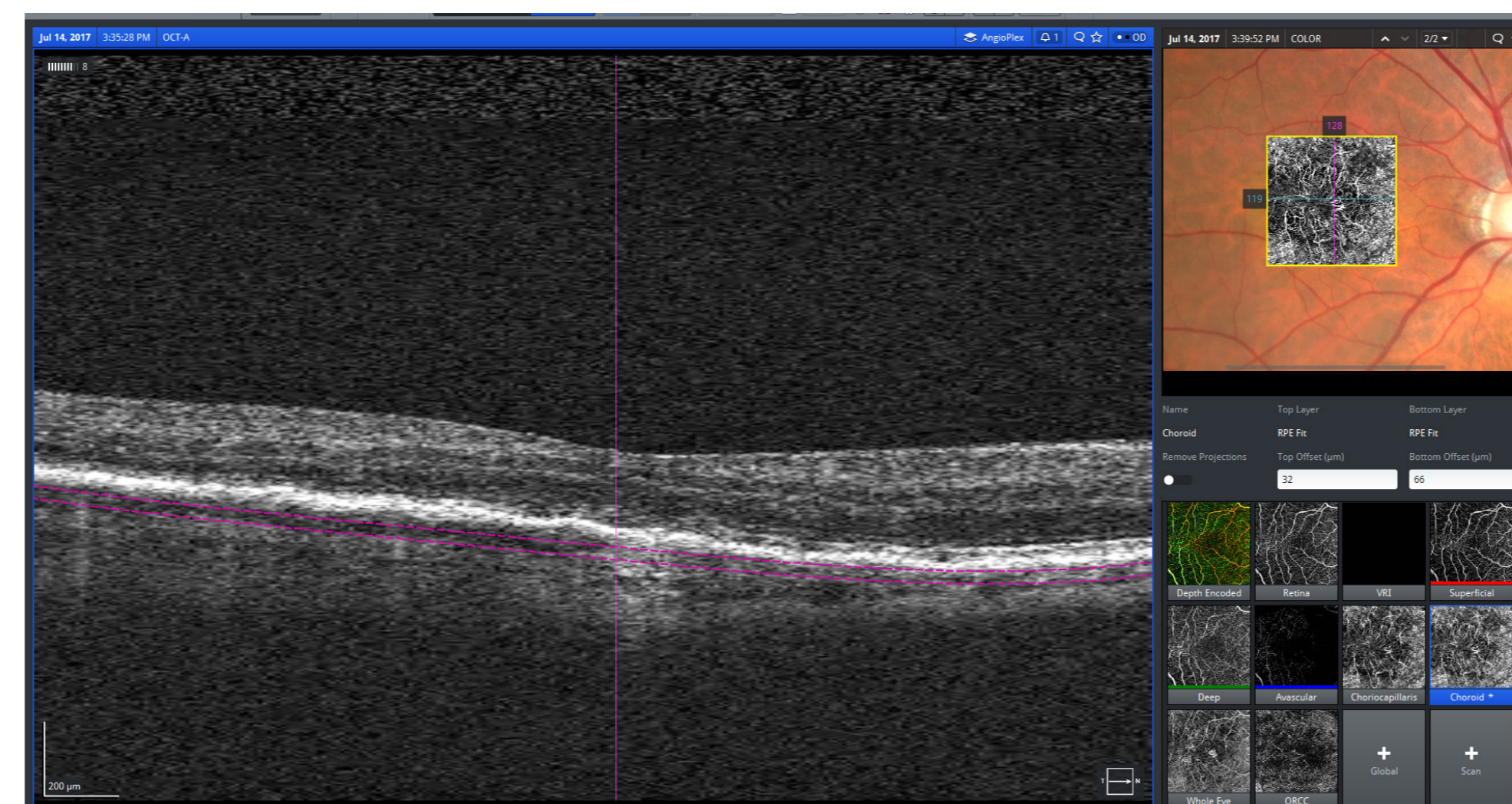
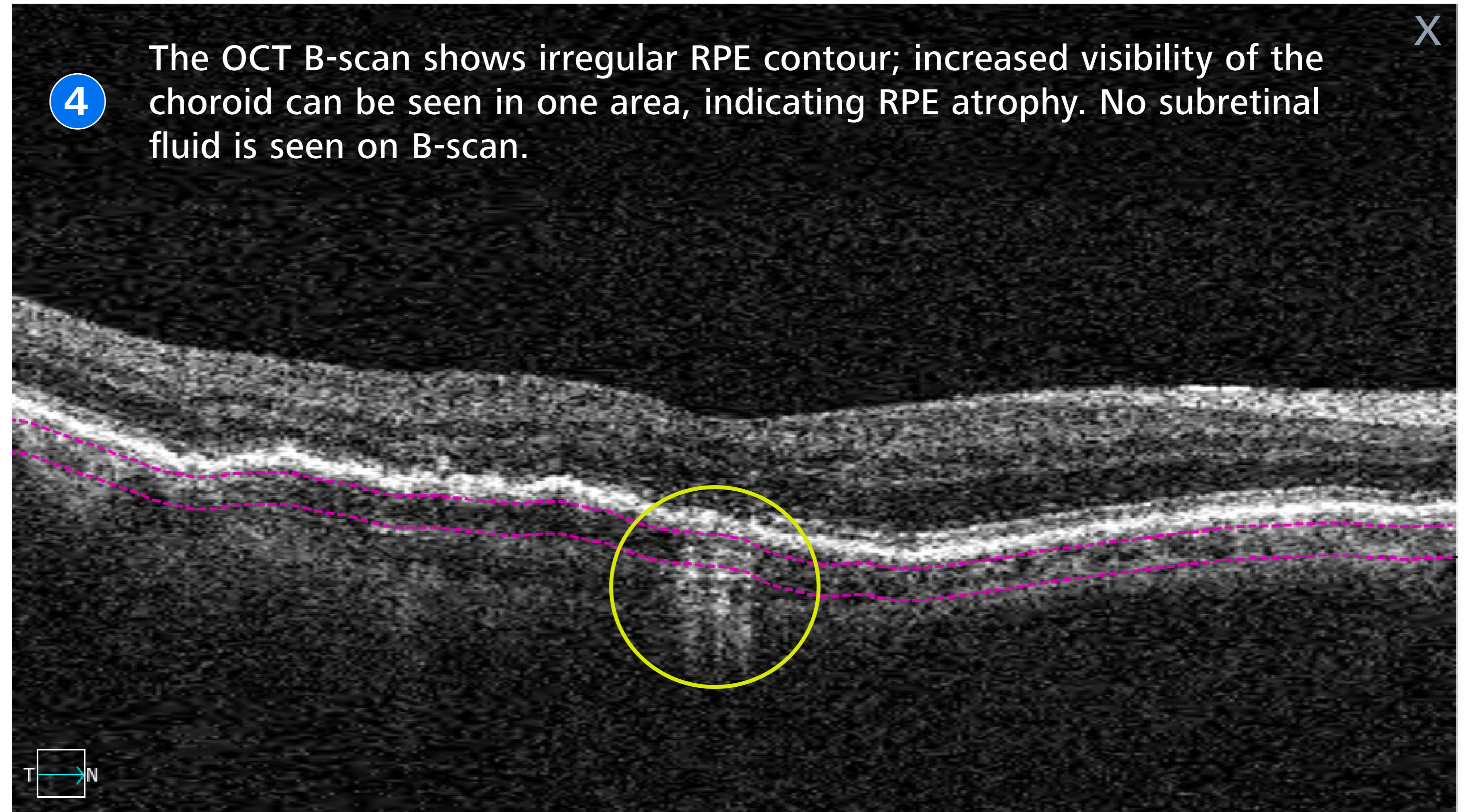


# Neovascular AMD

## Summary

Integrated diagnostic imaging allows the clinician to quickly monitor all aspects of the disease, from accurately documenting the location and the extent of geographic atrophy using color and FAF images, to monitoring for subretinal fluid with OCT.

With the addition of non-invasive OCTA, clinicians can monitor CNV with more frequent follow ups and appropriate, timely referrals when needed.

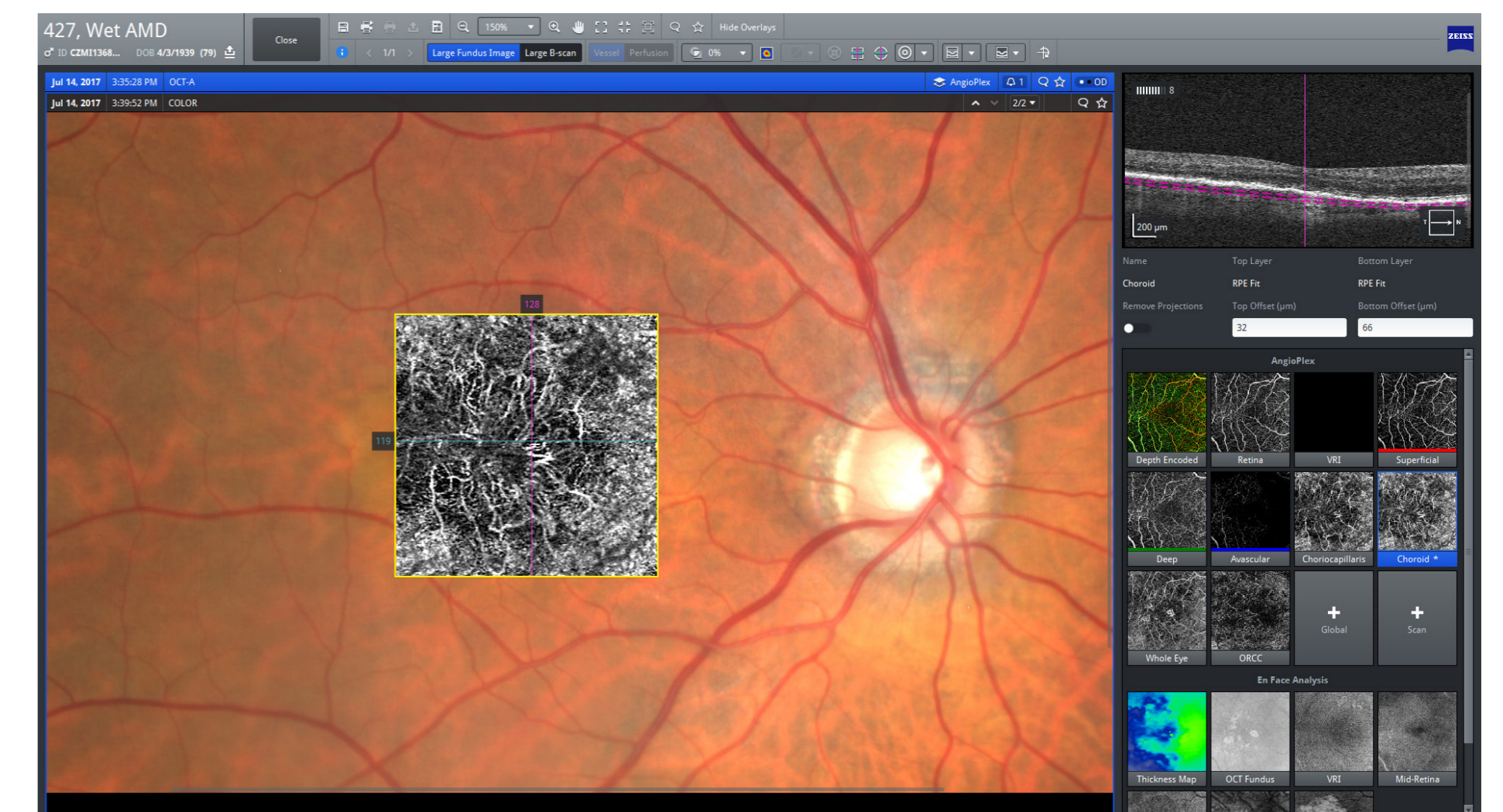
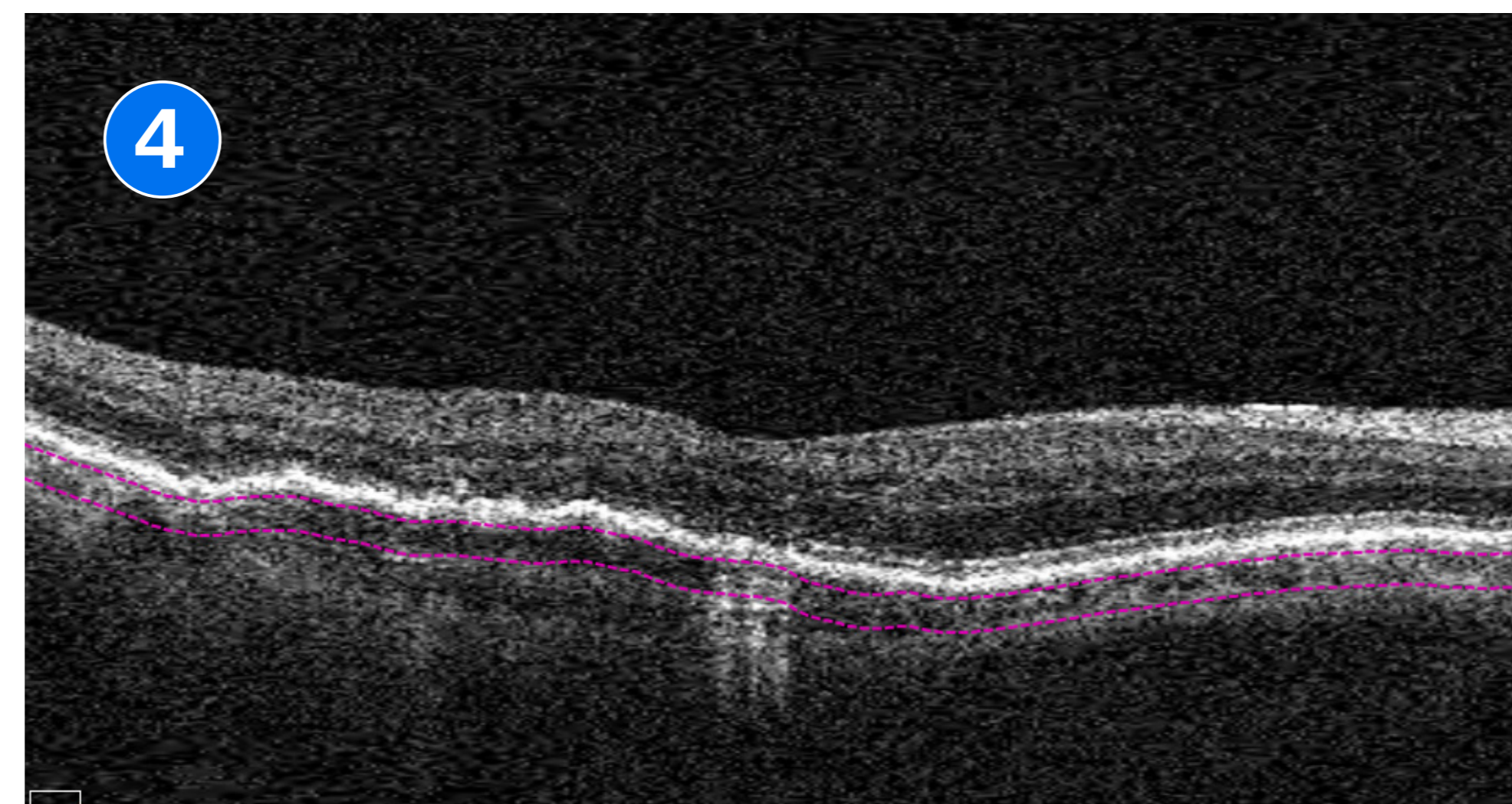
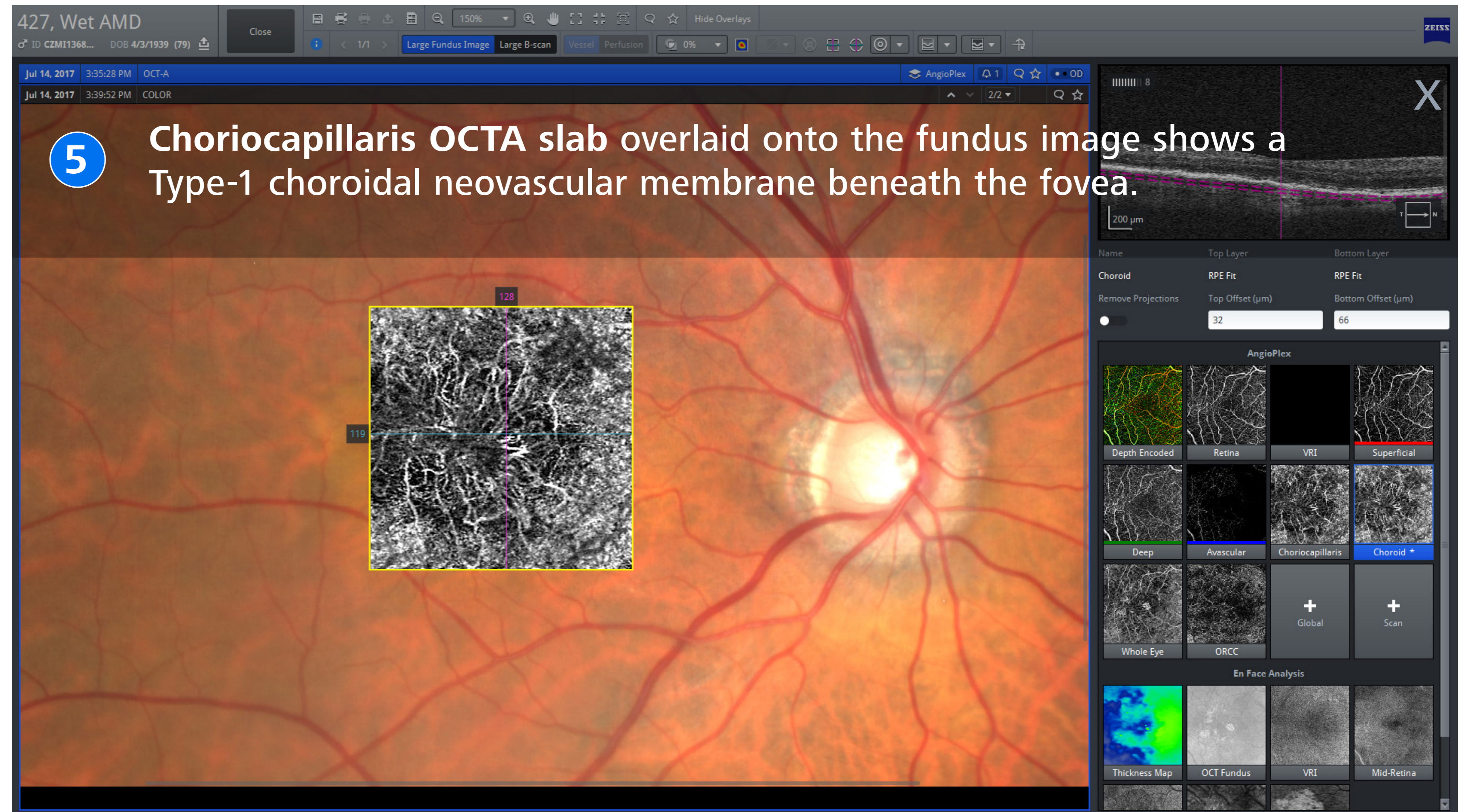


# Neovascular AMD

## Summary

Integrated diagnostic imaging allows the clinician to quickly monitor all aspects of the disease, from accurately documenting the location and the extent of geographic atrophy using color and FAF images, to monitoring for subretinal fluid with OCT.

With the addition of non-invasive OCTA, clinicians can monitor CNV with more frequent follow ups and appropriate, timely referrals when needed.

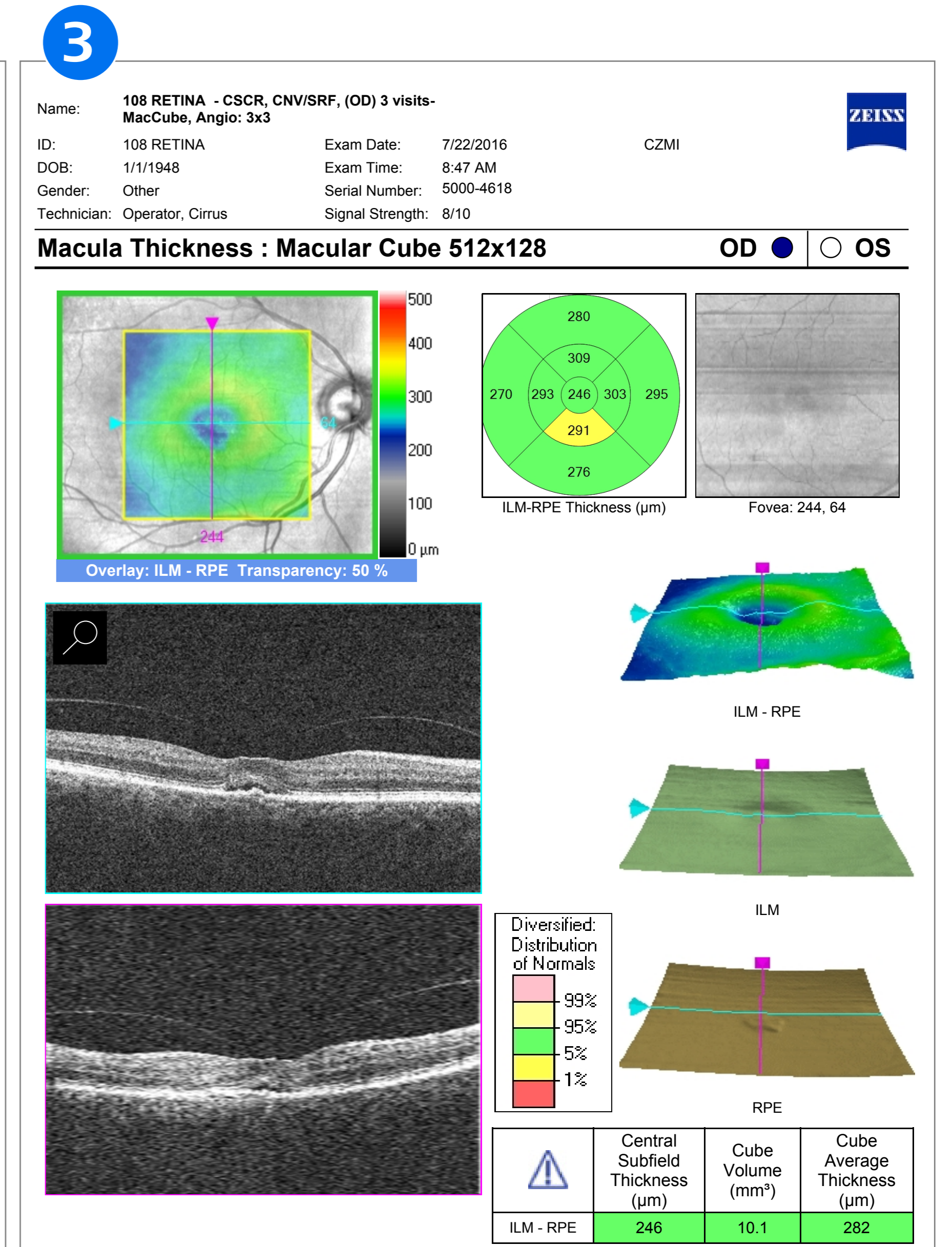
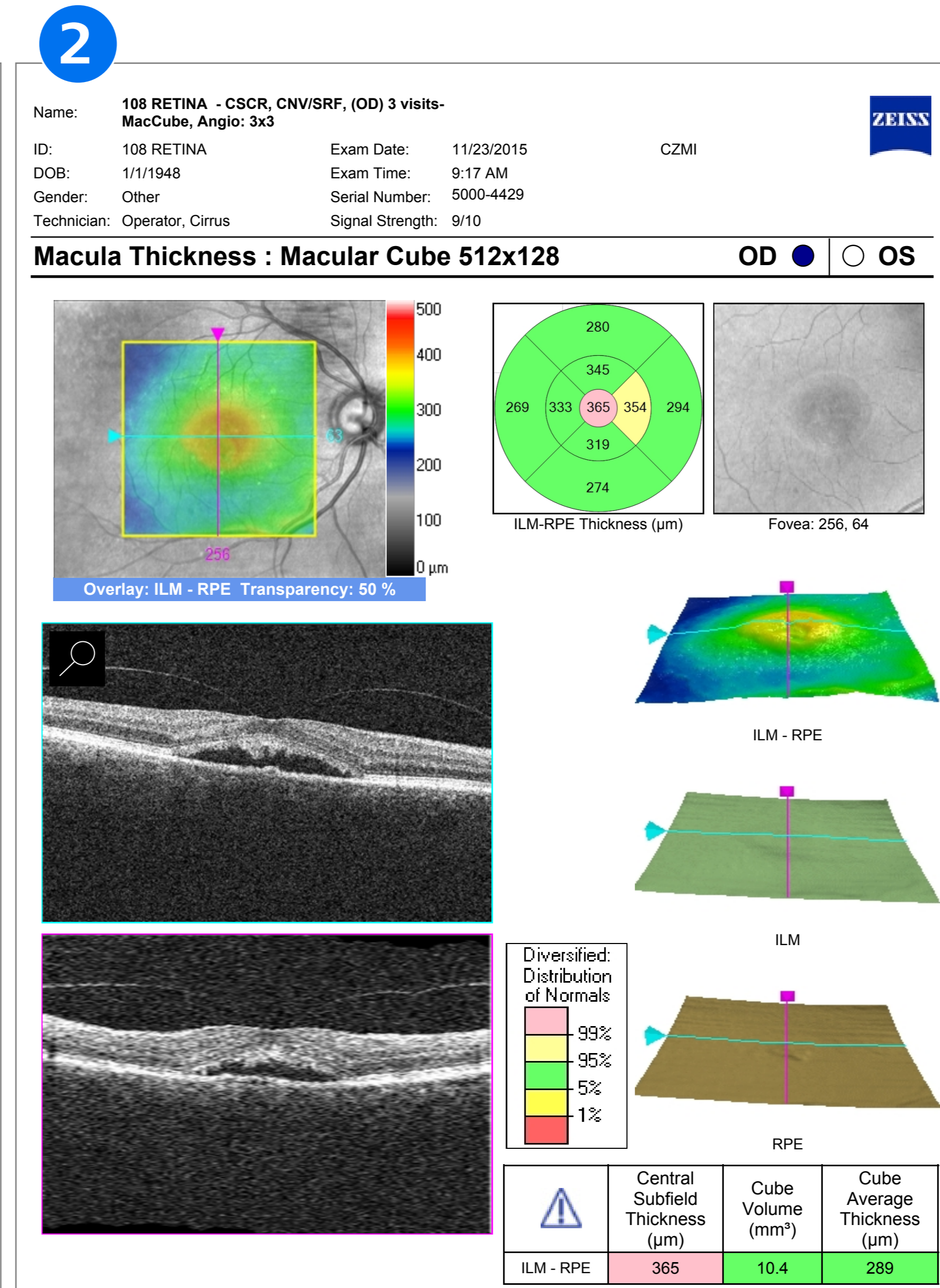
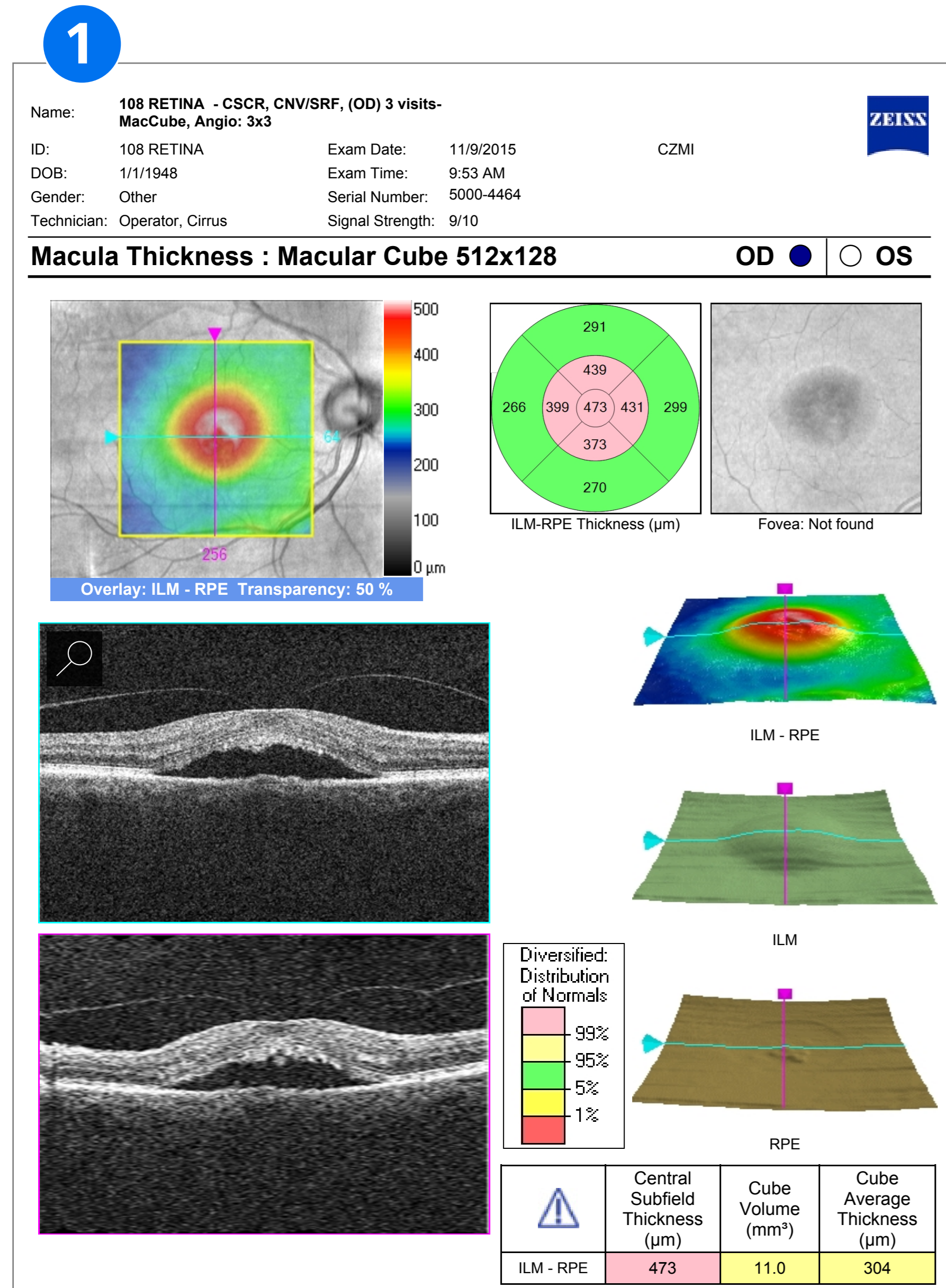


# Central Serous Chorioretinopathy (CSC)

## Patient History

70-year-old male. Patient presented with complaints of decreased vision in the right eye.

More »

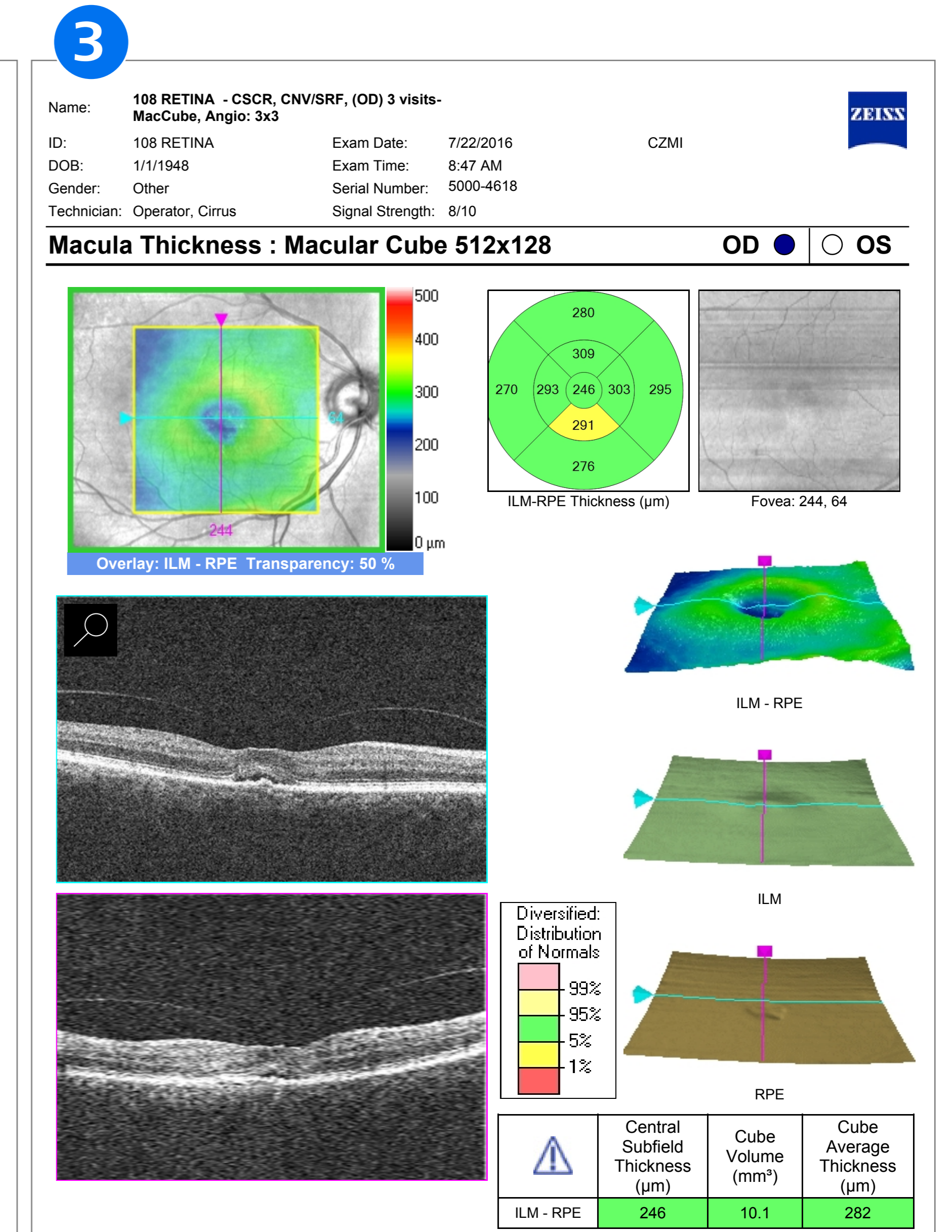
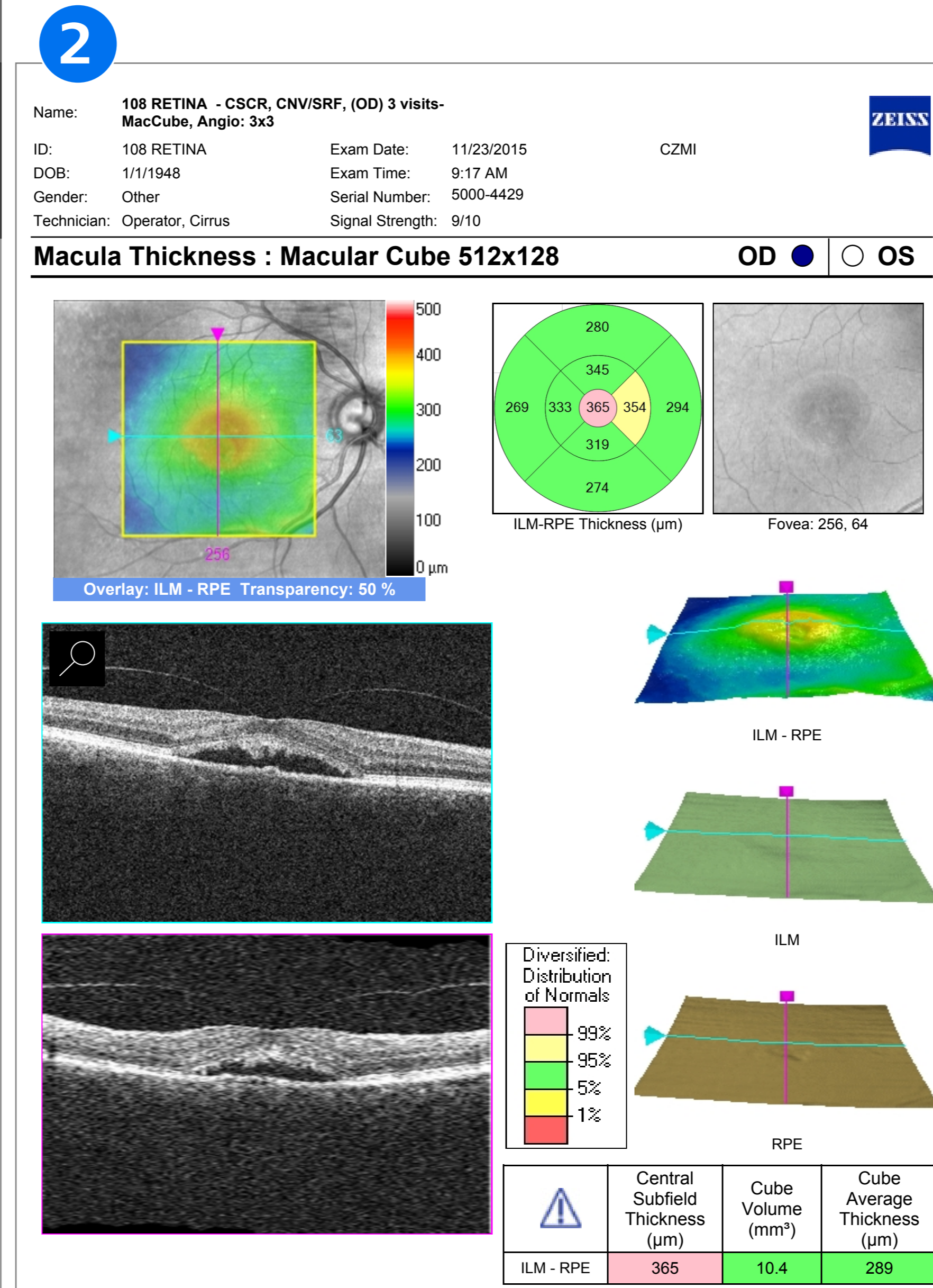
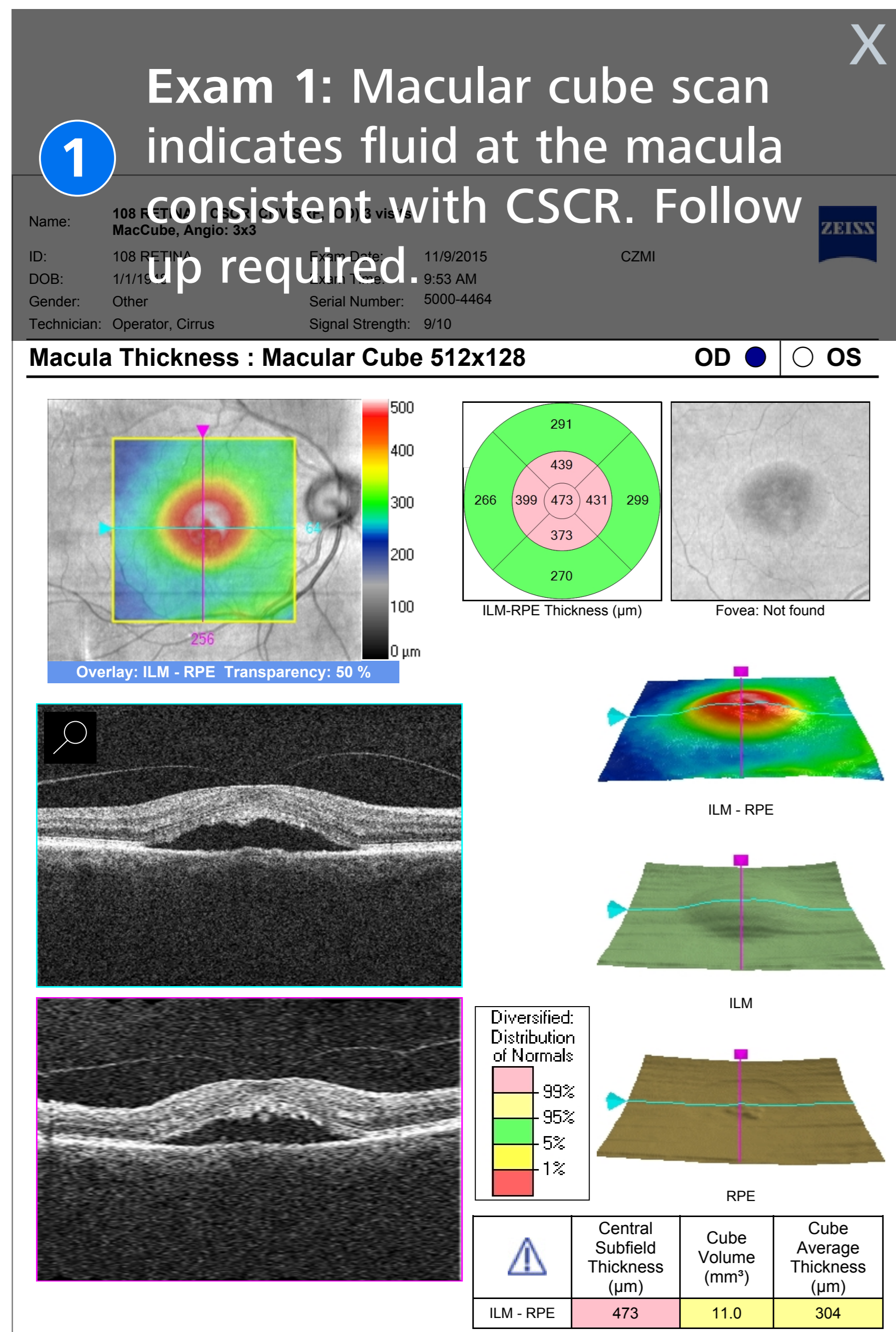


# Central Serous Chorioretinopathy (CSC)

## Patient History

70-year-old male. Patient presented with complaints of decreased vision in the right eye.

More »

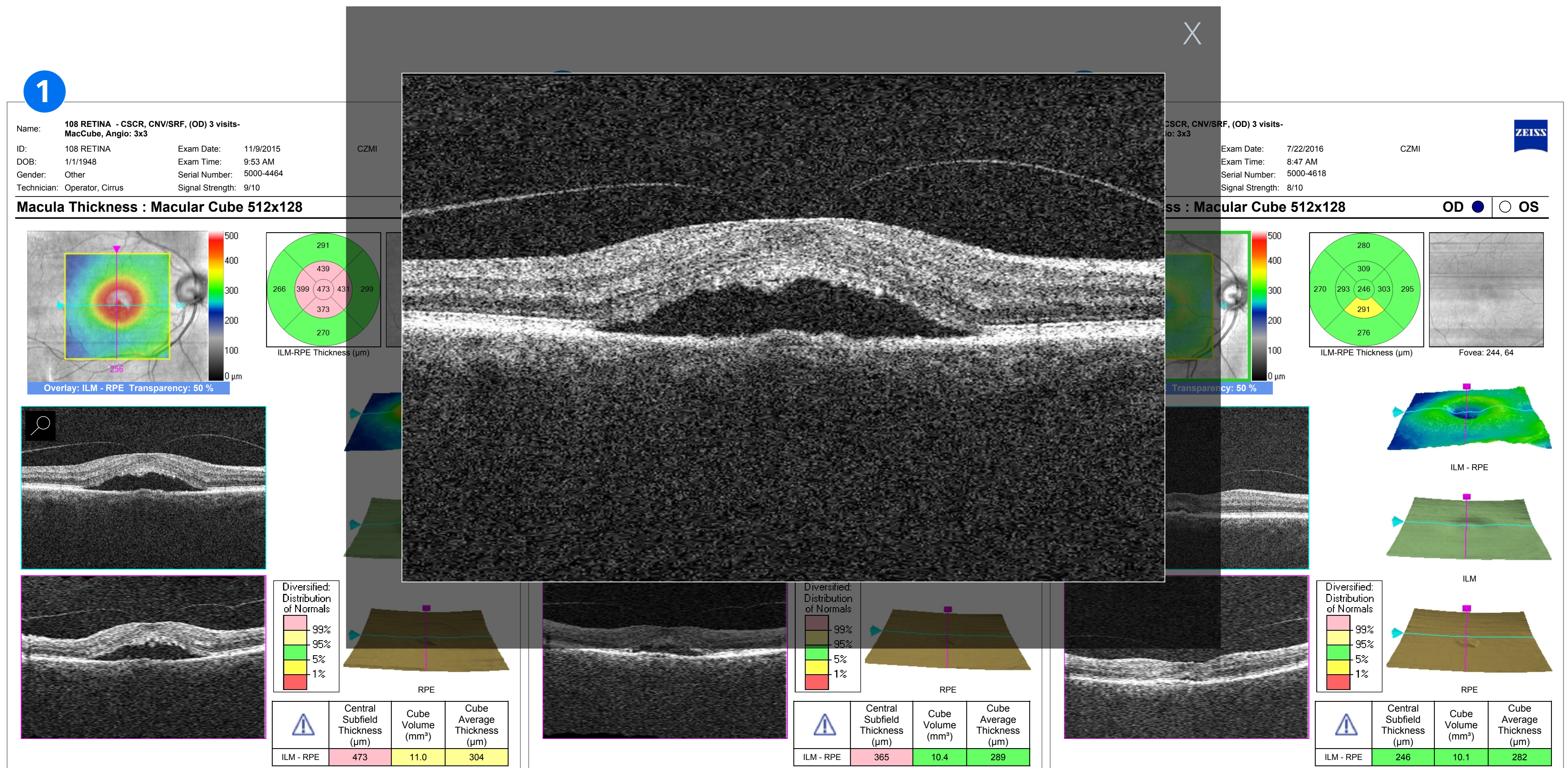


# Central Serous Chorioretinopathy (CSC)

## Patient History

70-year-old male. Patient presented with complaints of decreased vision in the right eye.

More »



# Central Serous Chorioretinopathy (CSC)

## Patient History

70-year-old male. Patient presented with complaints of decreased vision in the right eye.

More »

### 1

**108 RETINA - CSCR, CNV/SRF, (OD) 3 visits- MacCube, Angio: 3x3**

Name: 108 RETINA    Exam Date: 11/9/2015    CZMI

DOB: 1/1/1948    Exam Time: 9:53 AM

Gender: Other    Serial Number: 5000-4464

Technician: Operator, Cirrus    Signal Strength: 9/10

**Macula Thickness : Macular Cube 512x128**    OD ● ○ OS

ILM - RPE	Central Subfield Thickness (μm)	Cube Volume (mm <sup>3</sup> )	Cube Average Thickness (μm)
473	473	11.0	304

### 2

**Exam 2: Two weeks later, patient reports improved vision. Macular cube scan shows fluid is decreasing**

Name: 108 RETINA - CSCR, CNV/SRF, (OD) 3 visits- MacCube, Angio: 3x3

ID: 108 RETINA    Exam Date: 11/23/2015    CZMI

DOB: 1/1/1948    Exam Time: 9:17 AM

Gender: Other    Serial Number: 5000-4429

Technician: Operator, Cirrus    Signal Strength: 9/10

**Macula Thickness : Macular Cube 512x128**    OD ● ○ OS

ILM - RPE	Central Subfield Thickness (μm)	Cube Volume (mm <sup>3</sup> )	Cube Average Thickness (μm)
365	365	10.4	289

### 3

**108 RETINA - CSCR, CNV/SRF, (OD) 3 visits- MacCube, Angio: 3x3**

Name: 108 RETINA    Exam Date: 7/22/2016    CZMI

DOB: 1/1/1948    Exam Time: 8:47 AM

Gender: Other    Serial Number: 5000-4618

Technician: Operator, Cirrus    Signal Strength: 8/10

**Macula Thickness : Macular Cube 512x128**    OD ● ○ OS

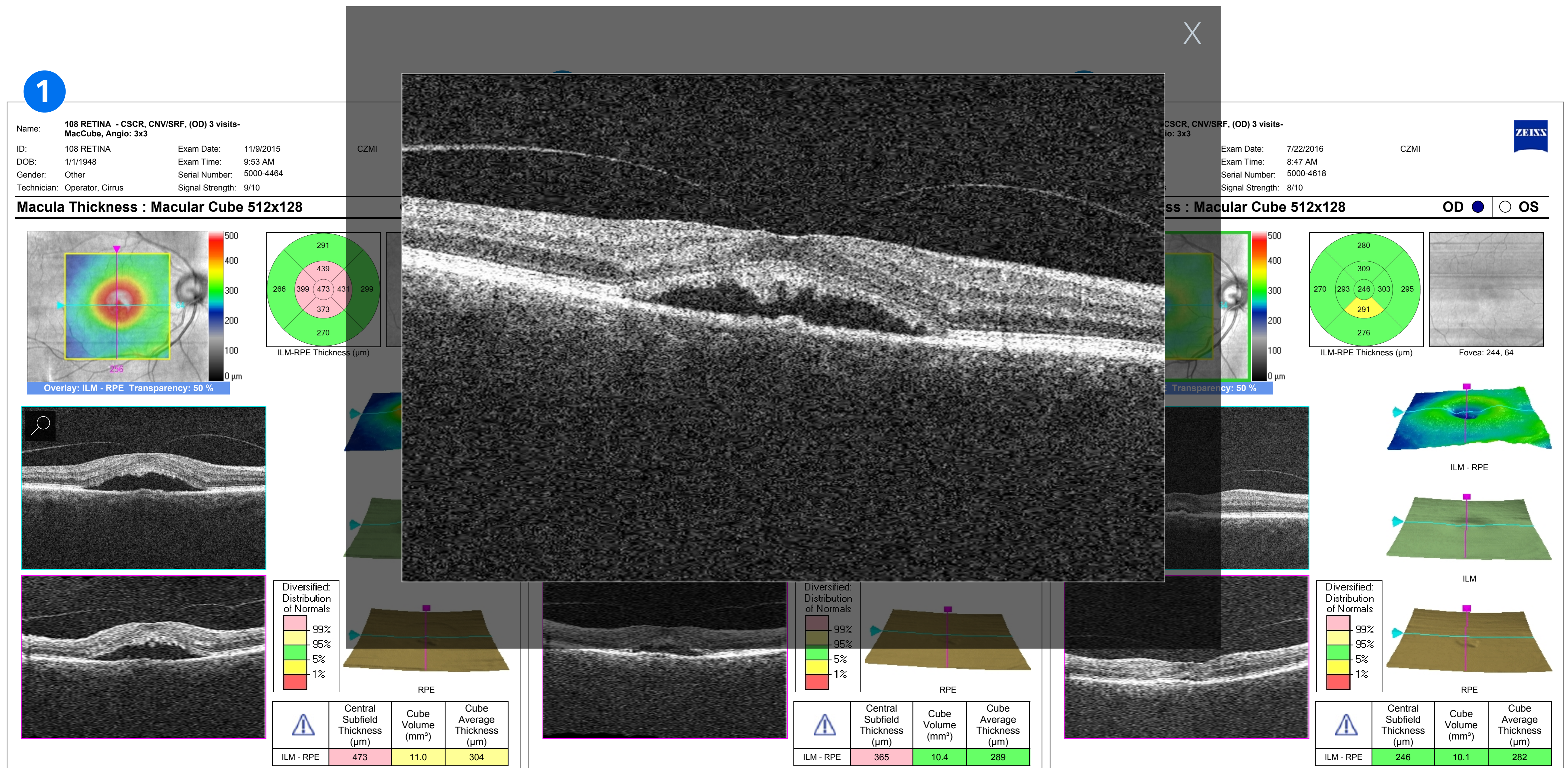
ILM - RPE	Central Subfield Thickness (μm)	Cube Volume (mm <sup>3</sup> )	Cube Average Thickness (μm)
246	246	10.1	282

# Central Serous Chorioretinopathy (CSC)

## Patient History

70-year-old male. Patient presented with complaints of decreased vision in the right eye.

More »

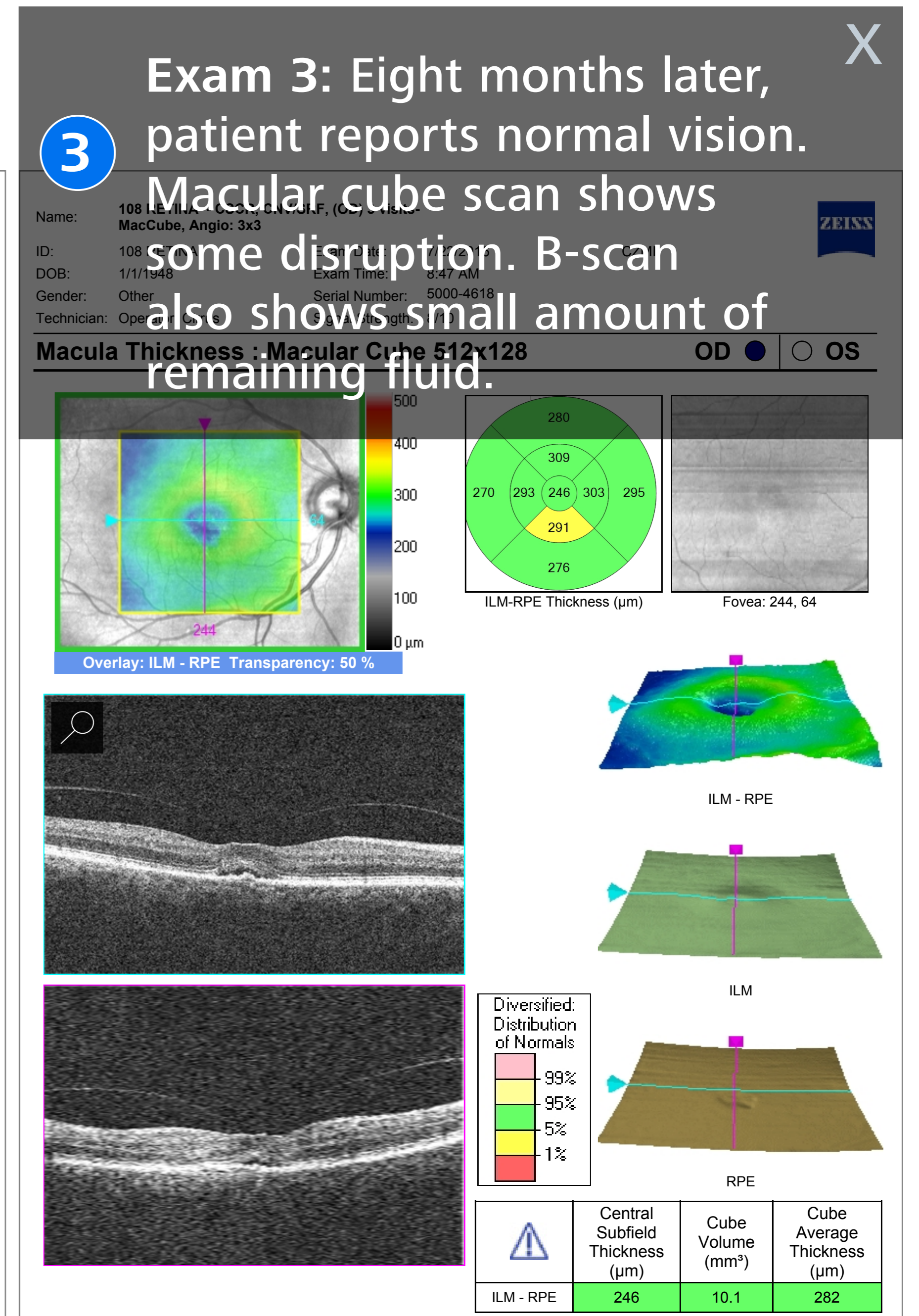
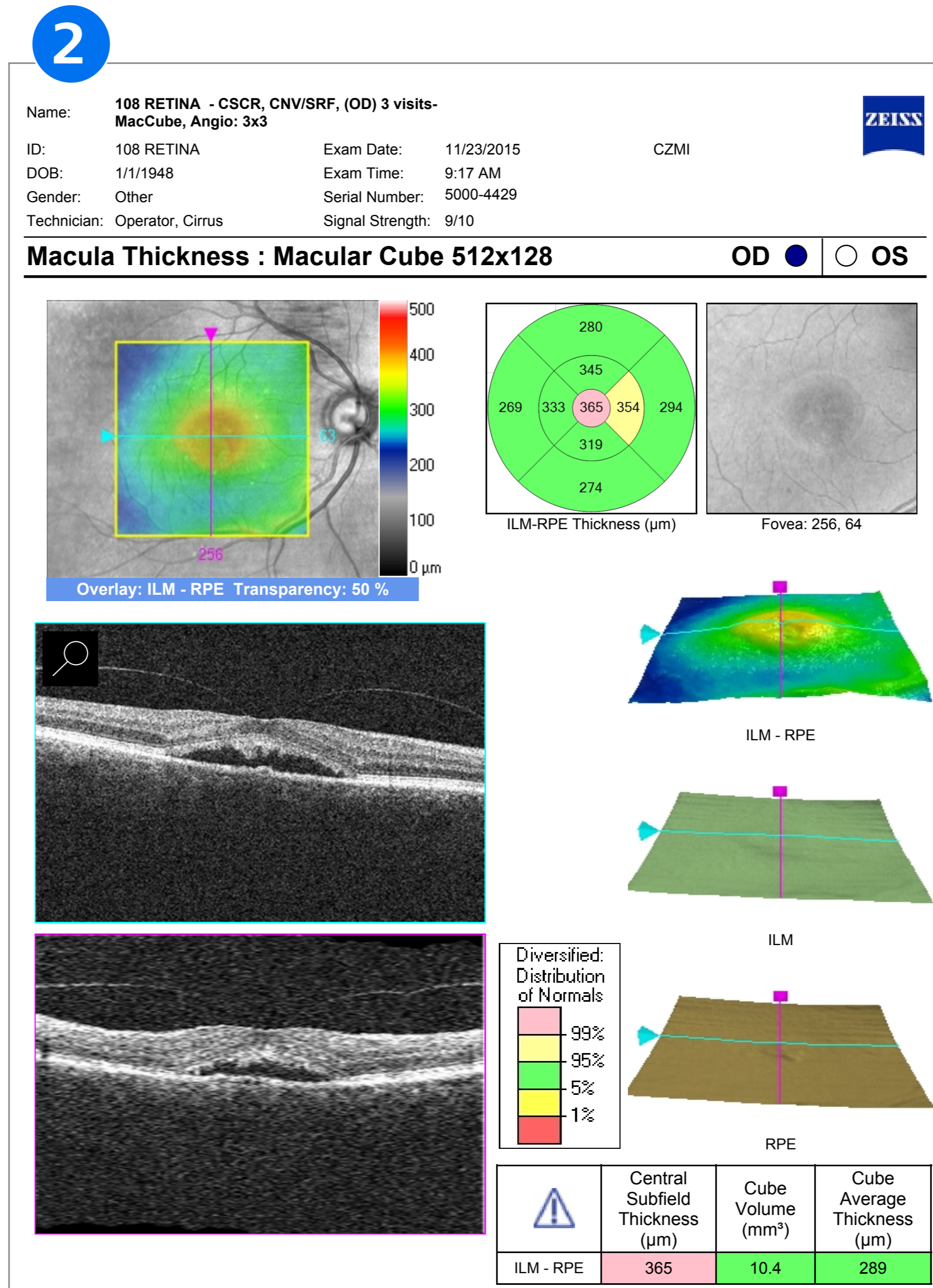
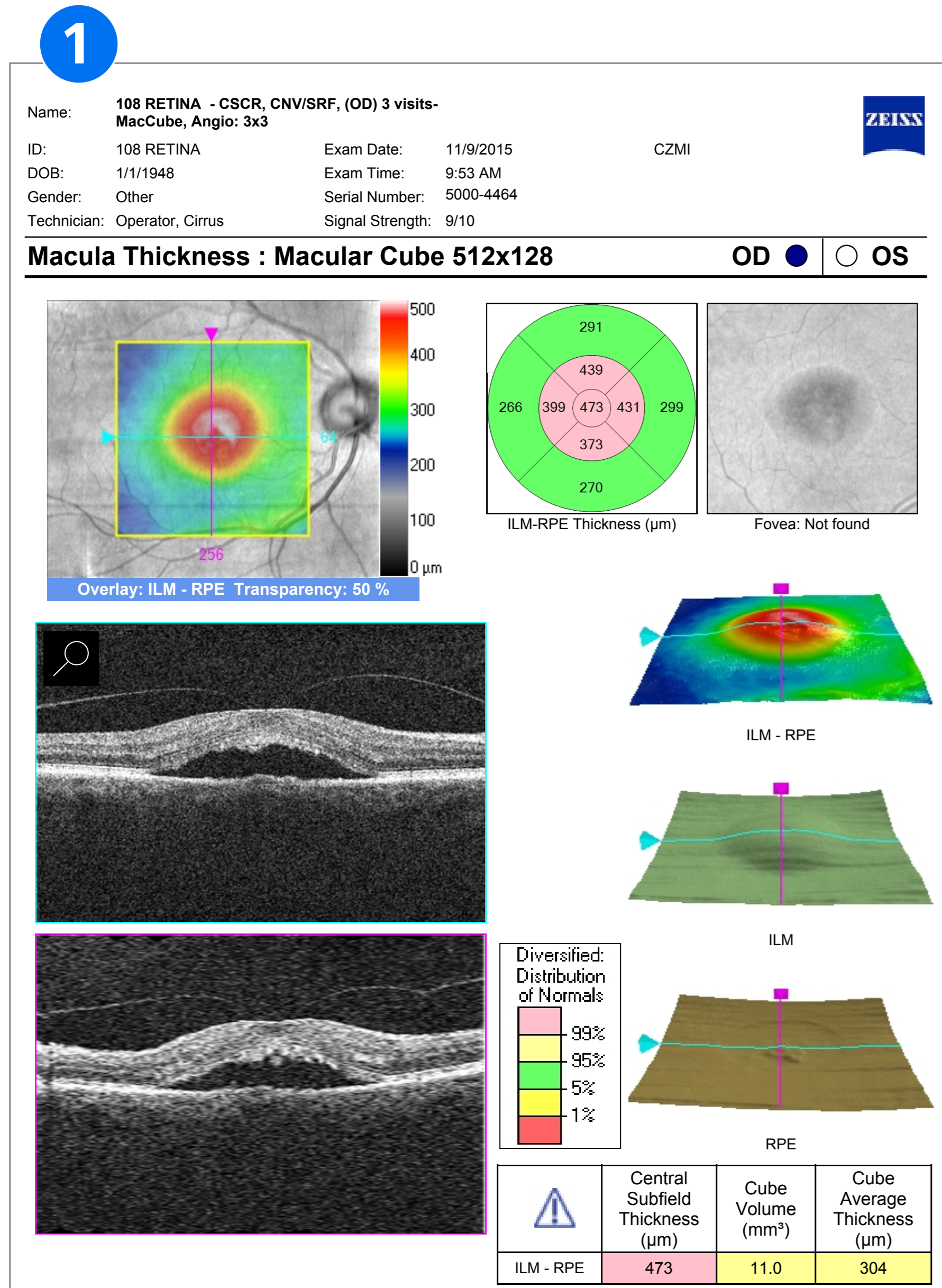


# Central Serous Chorioretinopathy (CSC)

## Patient History

70-year-old male. Patient presented with complaints of decreased vision in the right eye.

More »

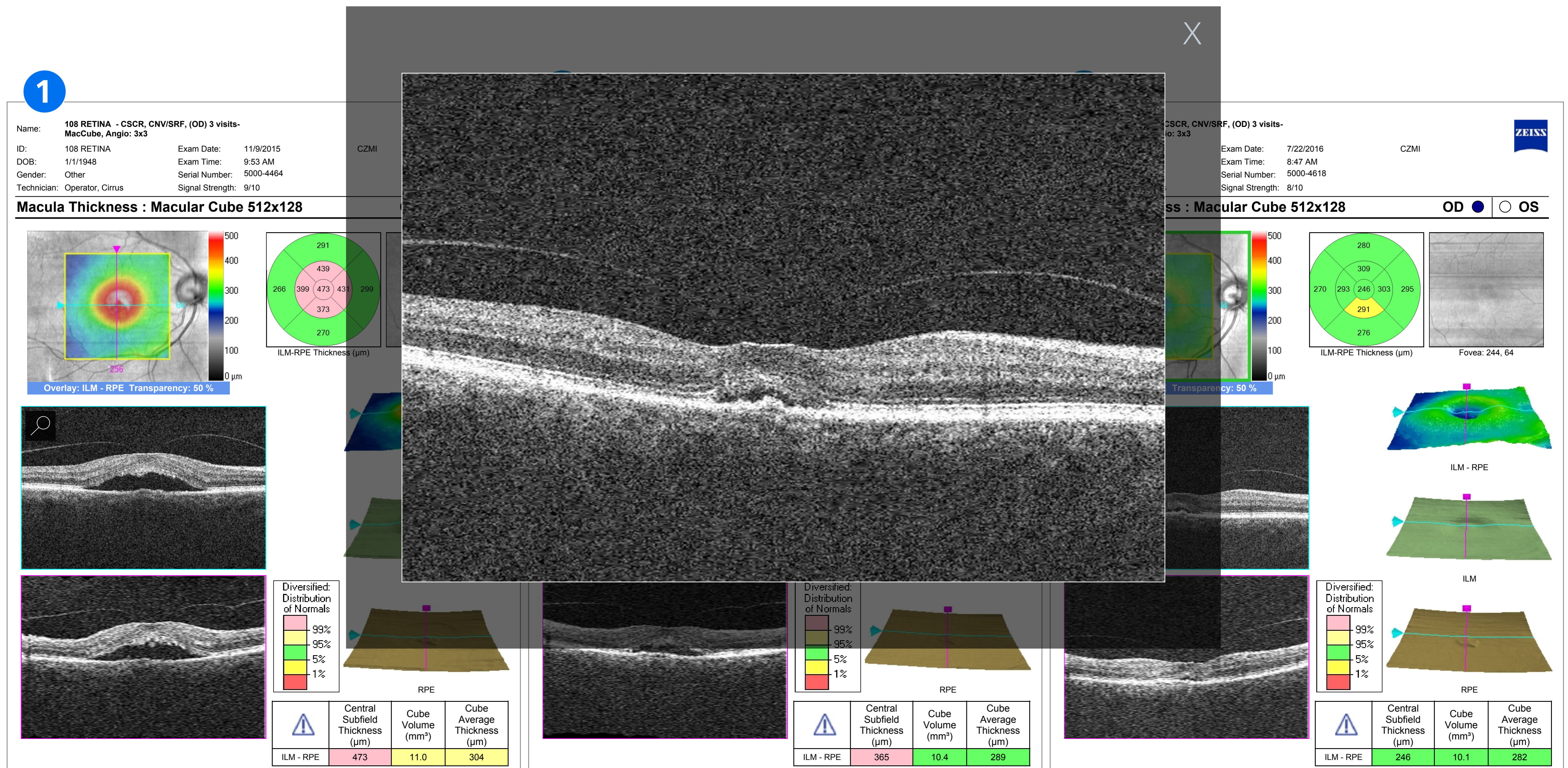


# Central Serous Chorioretinopathy (CSC)

## Patient History

70-year-old male. Patient presented with complaints of decreased vision in the right eye.

More »



# CSC

The patient was scanned using OCTA, and a quick overview of the OCTA slab thumbnails identifies the slabs needing further evaluation.

[More »](#)

4

8 RETINA - CSCR... 108 R... Other 1/1/1948 OD Right OS Left Records Edit Tools Help | Cirrus Op...

7/22/2016 Angiography 8x8 mm (9) 8:49:26 AM Angiography Analysis  
11/23/2015 Angiography 3x3 mm (9) 8:48:54 AM Angiography Change Analysis  
11/9/2015 Macular Cube 512x128 (8) 8:47:40 AM Angiography Change Analysis - Manual Selec...  
En Face Analysis

Watermark Date 7/22/2016 8:48:54 AM Edited 10/17/2018 10:53:40 AM Slice: 122 Signal Strength 9/10

AngioPlex - Superficial Structure - Superficial

VRI Retina Deep Superficial Choriocapillaris\* Whole Eye Choroid RPE-RPE Fit\* ORCC Sub-RPE

AngioPlex Matrix

Density Measure Vessel Perfusion

Overlays Map Trace FAZ Transparency (%) 50

ETDRS Vessel Density (mm/mm<sup>2</sup>)

Region	Density
Central	7.2
Inner	18.2
Full	17.0

FAZ Area 0.00 mm<sup>2</sup> Perimeter 0.16 mm Circularity 0.92

Overlays Thickness Map AngioPlex Structure Transparency (%) 50 Fundus Image Slice Navigators Reference Offset Top: ILM 0 Bottom: IPL 0 Remove Projections

B-Scan Flow Show 1 color 2 color Segmentation Lines Show Edit

Status : Archive volume has not yet been created ID Patient Acquire Analyze Finish

# CSC

The patient was scanned using OCTA, and a quick overview of the OCTA slab thumbnails identifies the slabs needing further evaluation.

[More »](#)

**4** In standard practice, this case would not warrant FA. However, the patient was scanned using OCTA, and a quick overview of the OCTA slab thumbnails identifies the slabs needing further evaluation.

**AngioPlex Matrix**

Density Measure: **Vessel** | Perfusion

Overlays: **Map** | Trace | FAZ

Transparency (%) 50

ETDRS Vessel Density (mm/mm<sup>2</sup>)

Region	Density
Central	7.2
Inner	18.2
Full	17.0

FAZ

Area	Perimeter	Circularity
0.00 mm <sup>2</sup>	0.16 mm	0.92

**Structure - Superficial**

Color scale: 0 μm to 500 μm

**B-scan Flow**

Show  
 1 color  2 color

**Segmentation Lines**

Show

Status:   Archive volume has not yet been created

# CSC

The patient was scanned using OCTA, and a quick overview of the OCTA slab thumbnails identifies the slabs needing further evaluation.

[More »](#)

4

8 RETINA - CSCR... 108 R... Other 1/1/1948 OD Right OS Left Records Edit Tools Help | Cirrus Op...

7/22/2016	Angiography 8x8 mm (9) 8:49:26 AM	Angiography Analysis
11/23/2015	Angiography 3x3 mm (9) 8:48:54 AM	Angiography Change Analysis
11/9/2015	Macular Cube 512x128 (8) 8:47:40 AM	Angiography Change Analysis - Manual Selec...
		En Face Analysis

Watermark Date 7/22/2016 8:48:54 AM Edited 10/17/2018 10:53:40 AM Slice: 122 Signal Strength 9/10

AngioPlex - Superficial Structure - Superficial

VRI Retina Deep Superficial Choriocapillaris Whole Eye Choroid RPE-RPE Fit\* ORCC Sub-RPE

Region	Density
Central	7.2
Inner	18.2
Full	17.0

Area	Perimeter	Circularity
0.00 mm <sup>2</sup>	0.16 mm	0.92

FAZ Edit

Overlays: Thickness Map, AngioPlex, Structure (Transparency 50%), Fundus Image, Slice Navigators

Reference: Top: ILM (Offset 0), Bottom: IPL (Offset 0)

Remove Projections

B-Scan Flow: Show 1 color 2 color Segmentation Lines: Show Edit

Status: Archive volume has not yet been created ID Patient Acquire Analyze Finish

## Summary

OCTA reveals the presence of CNV in a way that the standard OCT B-scan or macular cube scan cannot, thereby elevating confidence before a patient is referred for anti-VEGF injections.

**5** 8 RETINA - CSCR... 108 R... Other 1/1/1948 OD Right OS Left Records Edit Tools Help | Cirrus Op...

7/22/2016 Angiography 8x8 mm (9) 8:49:26 AM  
 11/23/2015 Angiography 3x3 mm (9) 8:48:54 AM  
 11/9/2015 Macular Cube 512x128 (8) 8:47:40 AM

Angiography Analysis  
 Angiography Change Analysis  
 Angiography Change Analysis - Manual Selec...  
 En Face Analysis

Watermark Date 7/22/2016 8:48:54 AM Edited 10/17/2018 10:53:40 AM Slice: 122 Signal Strength 9/10

AngioPlex - RPE-RPE Fit Structure - RPE-RPE Fit

VRI Retina Deep Superficial Choriocapillaris\* Whole Eye Choroid RPE-RPE Fit\* ORCC Sub-RPE

AngioPlex Matrix

Overlays

- Thickness Map
- AngioPlex
- Structure
- Transparency (%) 50
- Fundus Image
- Slice Navigators

Reference Offset

Reference	Offset
Top: RPE	-36
Bottom: RPEFit	64

Remove Projections

Status :   Archive volume has not yet been created

ID Patient Acquire Analyze Finish

## Summary

OCTA reveals the presence of CNV in a way that the standard OCT B-scan or macular cube scan cannot, thereby elevating confidence before a patient is referred for anti-VEGF injections.

**5 RPE to RPE fit slab reveals CNV.**

Date	Exam Type	Time	Analysis
7/22/2016	Angiography 8x8 mm (9)	8:49:28 AM	Angiography Analysis
11/23/2015	Angiography 3x3 mm (9)	8:48:54 AM	Angiography Change Analysis
11/9/2015	Macular Cube 512x128 (8)	8:47:40 AM	Angiography Change Analysis - Manual Selec... En Face Analysis

Watermark: Date 7/22/2016 8:48:54 AM Edited 10/17/2018 10:53:40 AM Slice: 122 Signal Strength 9/10

AngioPlex - RPE-RPE Fit

Structure - RPE-RPE Fit

AngioPlex Matrix

Overlays

- Thickness Map
  - AngioPlex
  - Structure
  - Transparency (%) 50
- Fundus Image
- Slice Navigators

Select the default superficial slab to enable AngioPlex Matrix

Reset

Reference	Offset
Top: RPE	-36
Bottom: RPEFit	64

Remove Projections

Status:   Archive volume has not yet been created

ID Patient Acquire Analyze Finish

## Summary

OCTA reveals the presence of CNV in a way that the standard OCT B-scan or macular cube scan cannot, thereby elevating confidence before a patient is referred for anti-VEGF injections.

**5** 8 RETINA - CSCR... 108 R... Other 1/1/1948 OD Right OS Left Records Edit Tools Help | Cirrus Op...

7/22/2016 Angiography 8x8 mm (9) 8:49:26 AM Angiography Analysis  
 11/23/2015 Angiography 3x3 mm (9) 8:48:54 AM Angiography Change Analysis  
 11/9/2015 Macular Cube 512x128 (8) 8:47:40 AM Angiography Change Analysis - Manual Selec...  
 En Face Analysis

Watermark Date 7/22/2016 8:48:54 AM Edited 10/17/2018 10:53:40 AM Slice: 122 Signal Strength 9/10

AngioPlex - RPE-RPE Fit Structure - RPE-RPE Fit

VRI Retina  
 Deep Superficial  
 Choriocapillaris Whole Eye  
 Choroid RPE-RPE Fit\*  
 ORCC Sub-RPE

500  
400  
300  
200  
100  
0 μm

Overlays  
 Thickness Map  
 AngioPlex  
 Structure  
 Transparency (%) 50  
 Fundus Image  
 Slice Navigators

Reference Offset  
 Top: RPE -36  
 Bottom: RPEFit 64

Remove Projections

B-Scan Flow  Show 1 color 2 color  
 Segmentation Lines  Show Edit

Status :   Archive volume has not yet been created ID Patient Acquire Analyze Finish

# CSC

## Summary

OCTA reveals the presence of CNV in a way that the standard OCT B-scan or macular cube scan cannot, thereby elevating confidence before a patient is referred for anti-VEGF injections.

**5** 8 RETINA - CSCR... 108 R... Other 1/1/1948 OD Right OS Left Records Edit Tools Help | Cirrus Op...

7/22/2016 Angiography 8x8 mm (9) 8:49:26 AM Angiography Analysis  
11/23/2015 Angiography 3x3 mm (9) 8:48:54 AM Angiography Change Analysis  
11/9/2015 Macular Cube 512x128 (8) 8:47:40 AM Angiography Change Analysis - Manual Selec...  
En Face Analysis

Watermark Date 7/22/2016 8:48:54 AM Edited 10/17/2018 10:53:40 AM Slice: 122 Signal Strength 9/10

AngioPlex - RPE-RPE Fit Structure - RPE-RPE Fit

VRI  
Deep  
Choriocapillaris  
Choroid  
ORCC  
Sub-RPE

Carl-Zeiss HD-OCT

Overlays  
 Thickness Map  
 AngioPlex  
 Structure  
Transparency (%) 50  
 Fundus Image  
 Slice Navigators

Reference	Offset
Top: RPE	-36
Bottom: RPEFit	64

Remove Projections

B-Scan Flow  Show  1 color  2 color  
Segmentation Lines  Show Edit

Status :   Archive volume has not yet been created

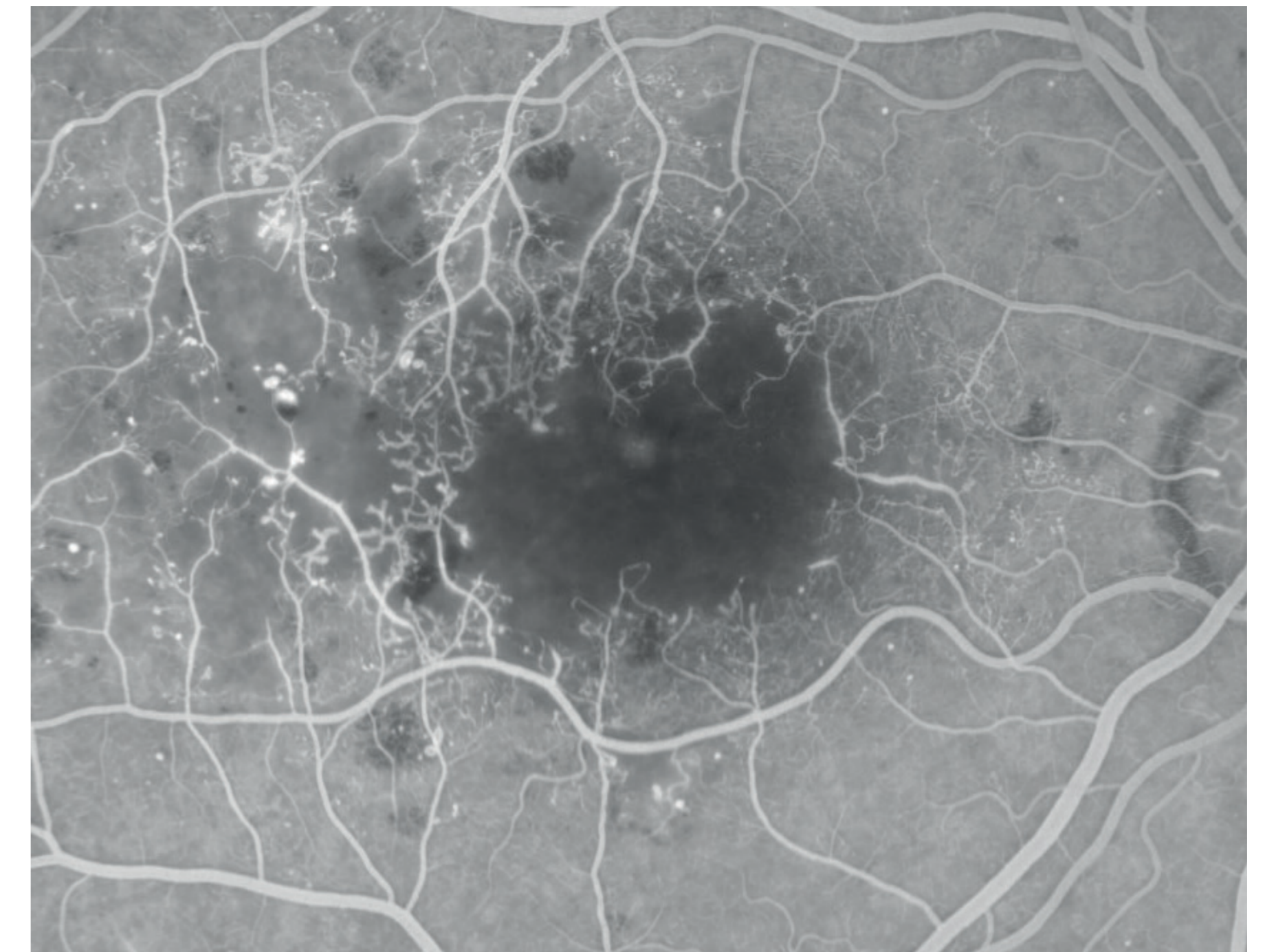
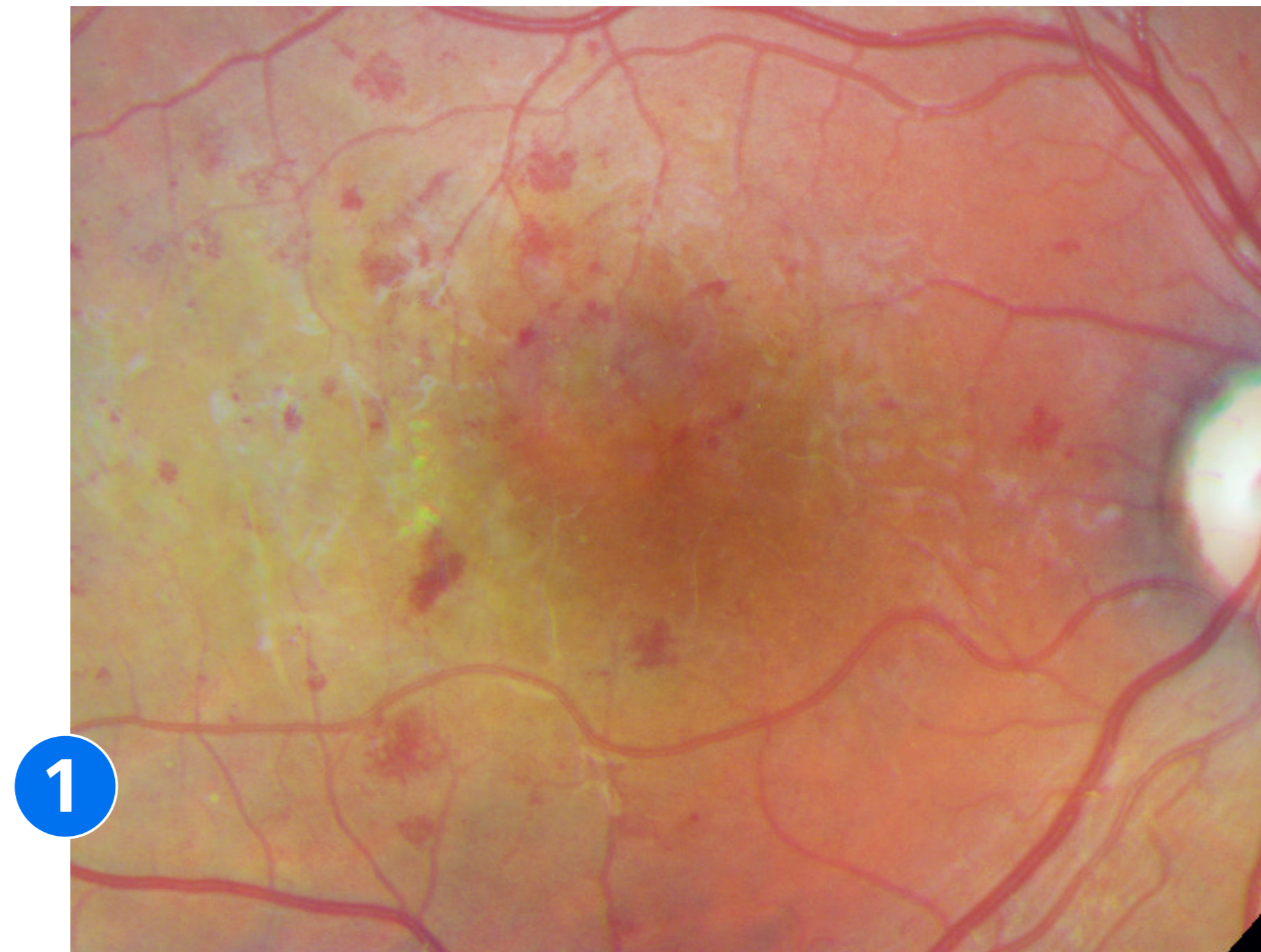
ID Patient Acquire Analyze Finish

# Ischemic Diabetic Maculopathy

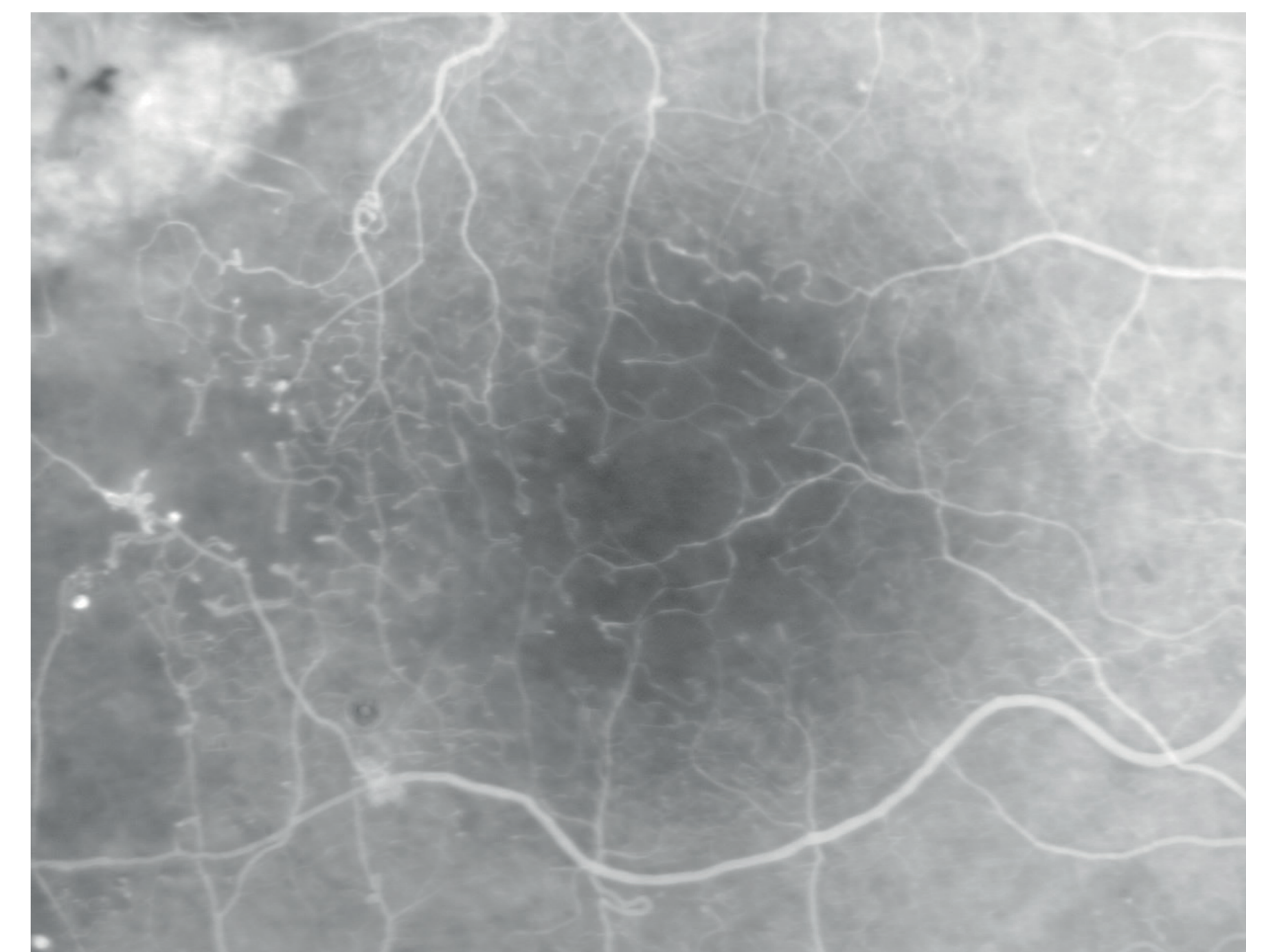
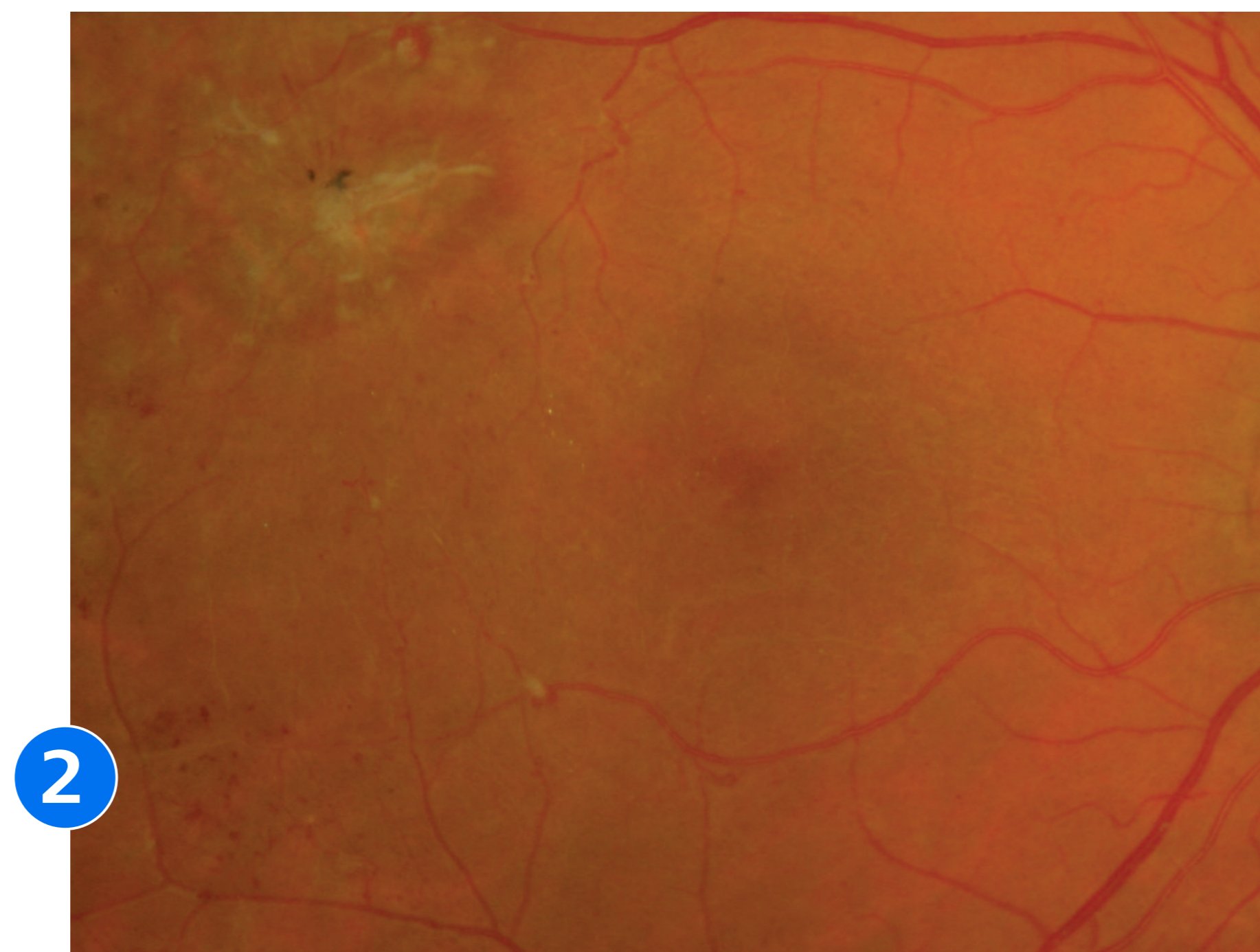
## Patient History

This patient was first imaged on a traditional fundus camera.

Color fundus images as well as fluorescein angiography images were taken prior to OCT Angiography.



[More »](#)



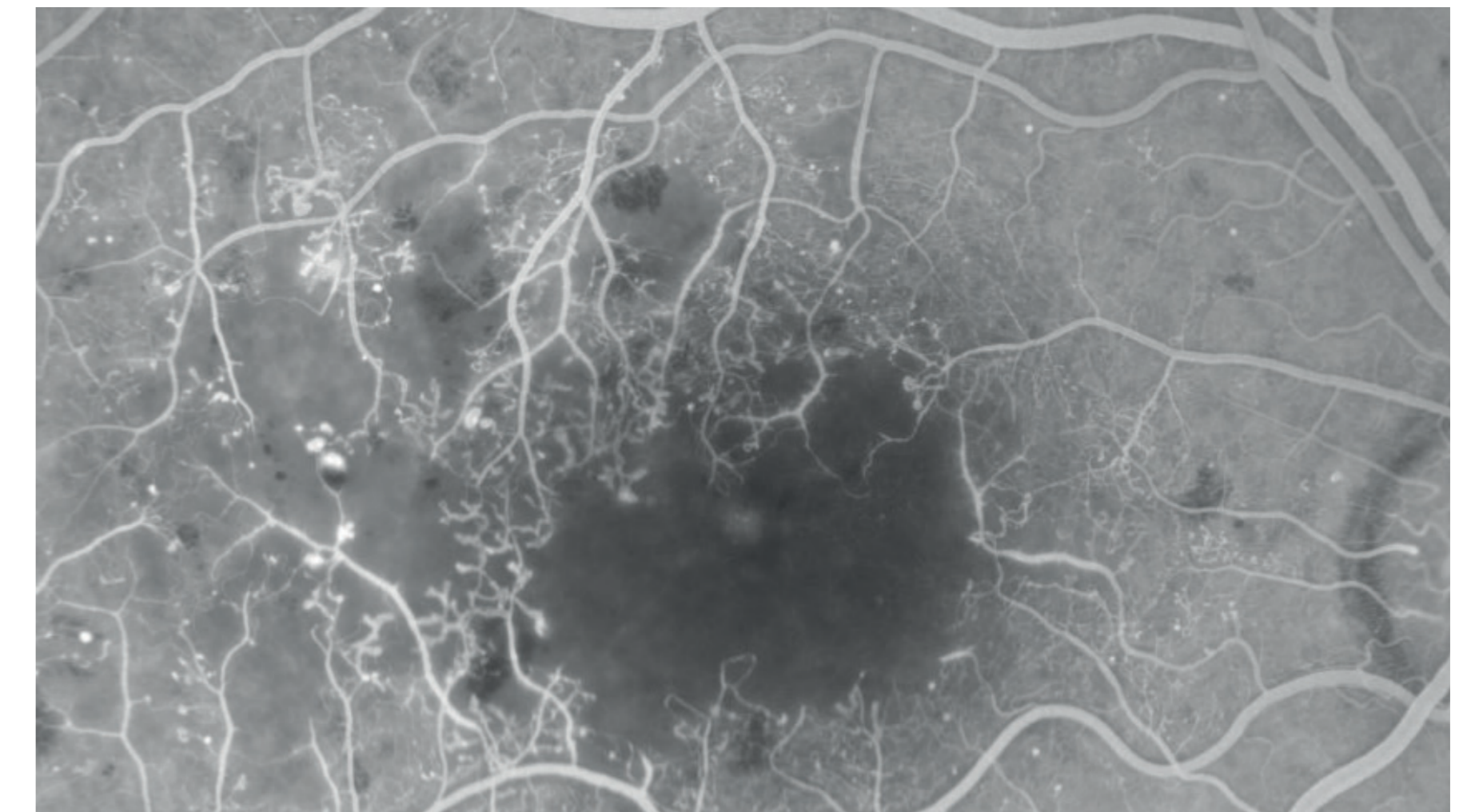
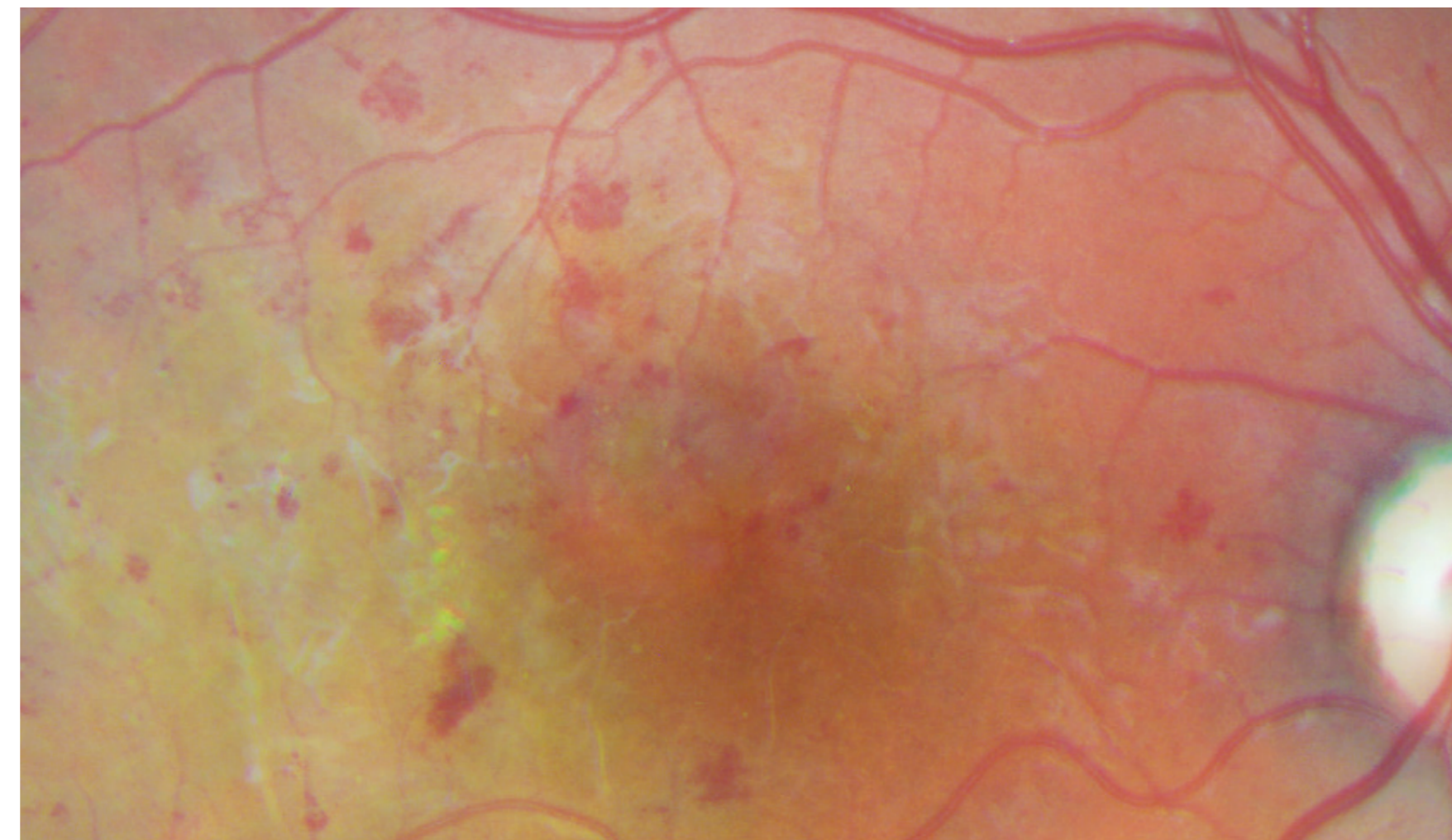
# Ischemic Diabetic Maculopathy

## Patient History

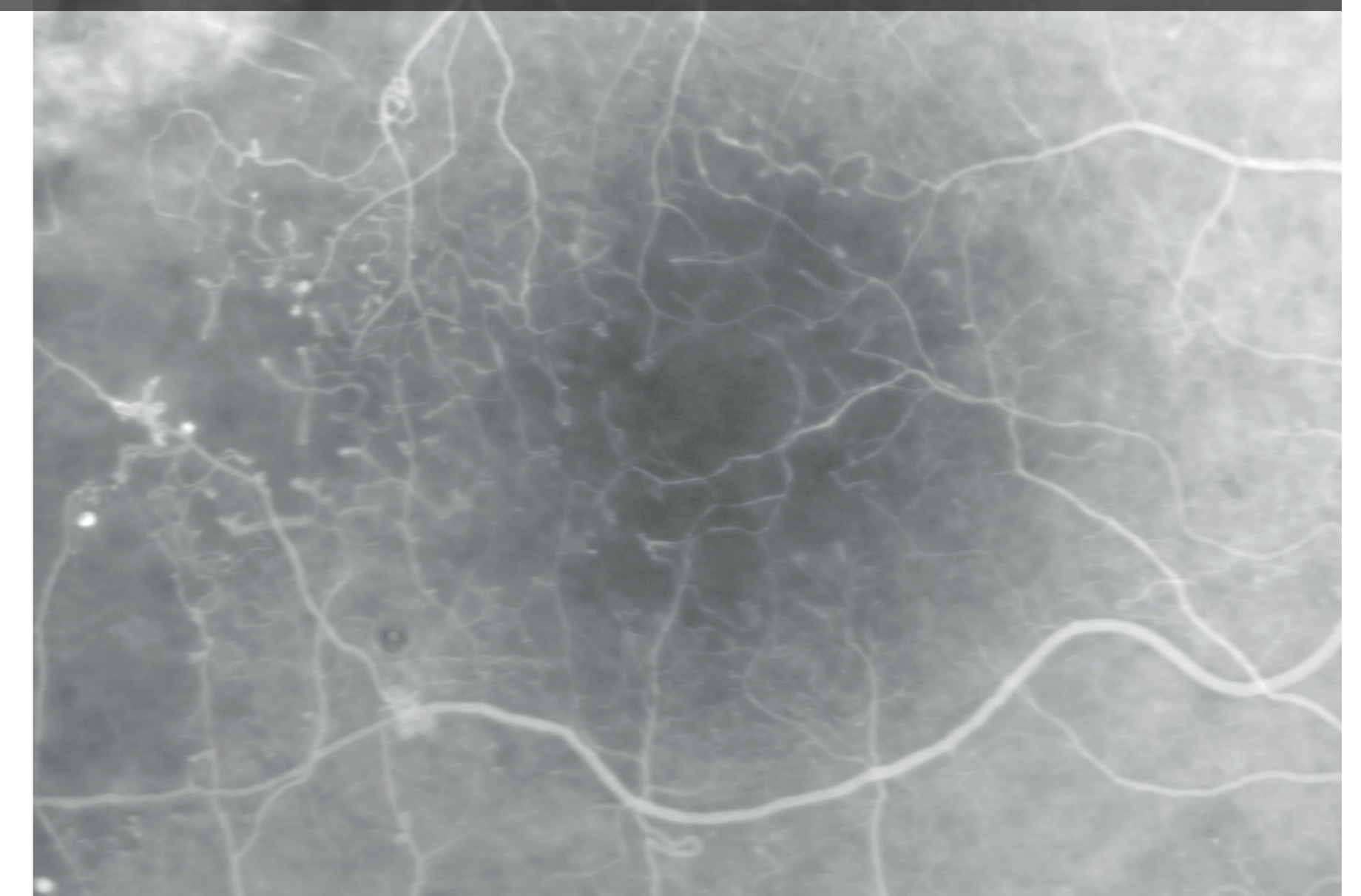
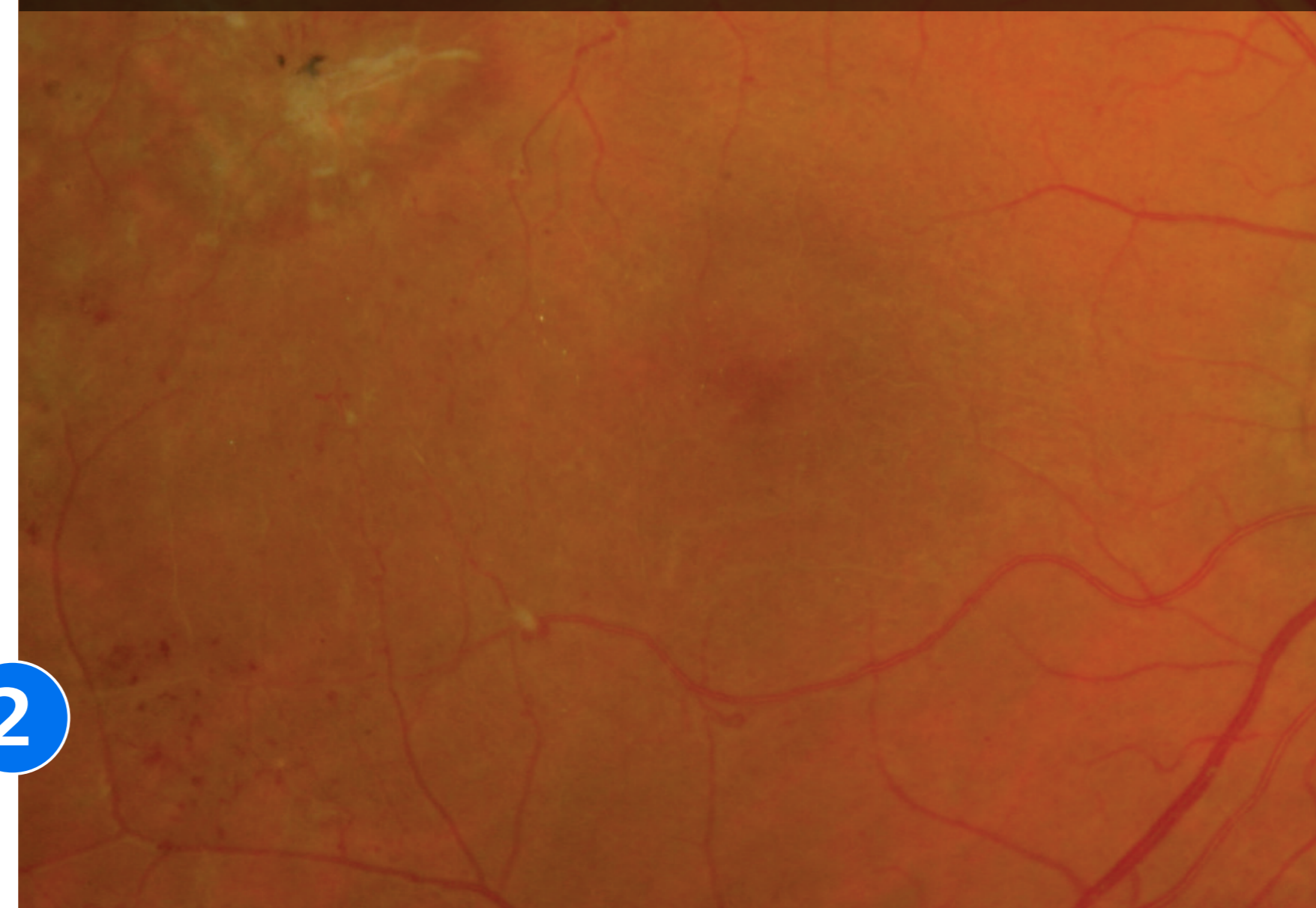
This patient was first imaged on a traditional fundus camera.

Color fundus images as well as fluorescein angiography images were taken prior to OCT Angiography.

[More »](#)



**1** Exam 1: Traditional color fundus shows hemorrhages, exudates and microaneurysm. Corresponding fluorescein angiography (FA) reveals ischemic diabetic maculopathy. In 2011 and 2012, the patient returned for their second and third follow-up exams, during which additional FA images taken revealed a loss of macular capillaries over time and growth of new vessels in the macula respectively.

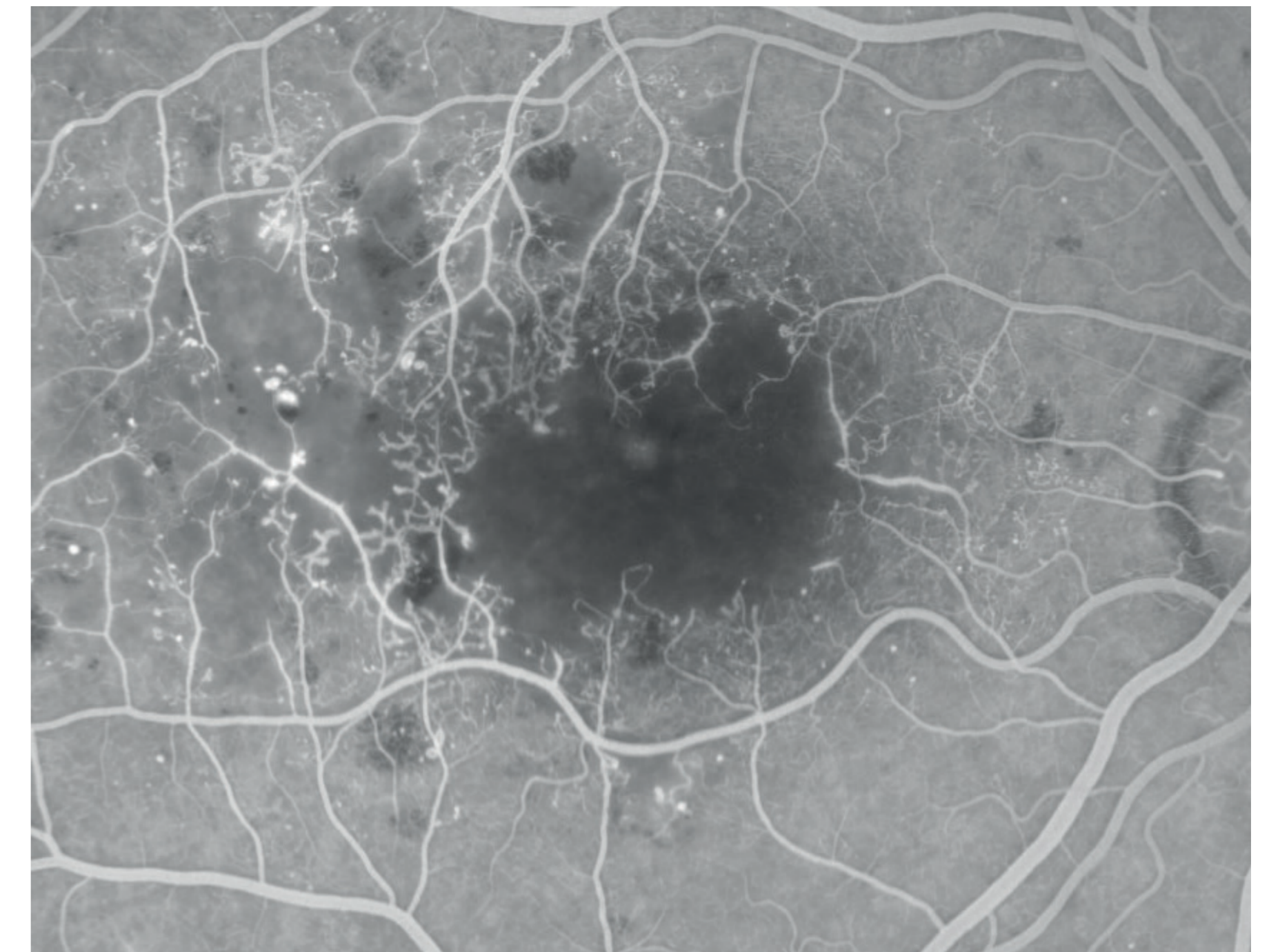
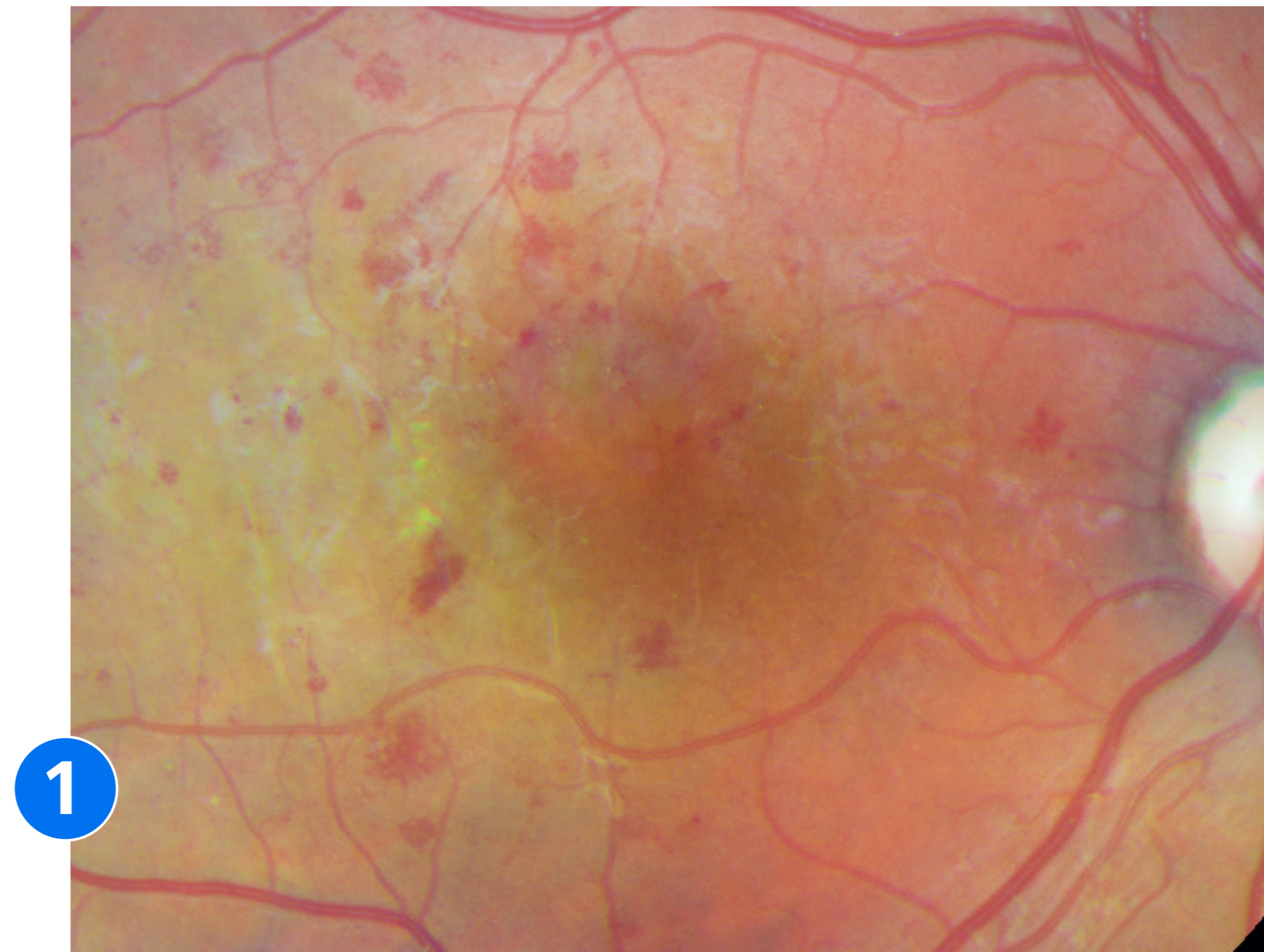


# Ischemic Diabetic Maculopathy

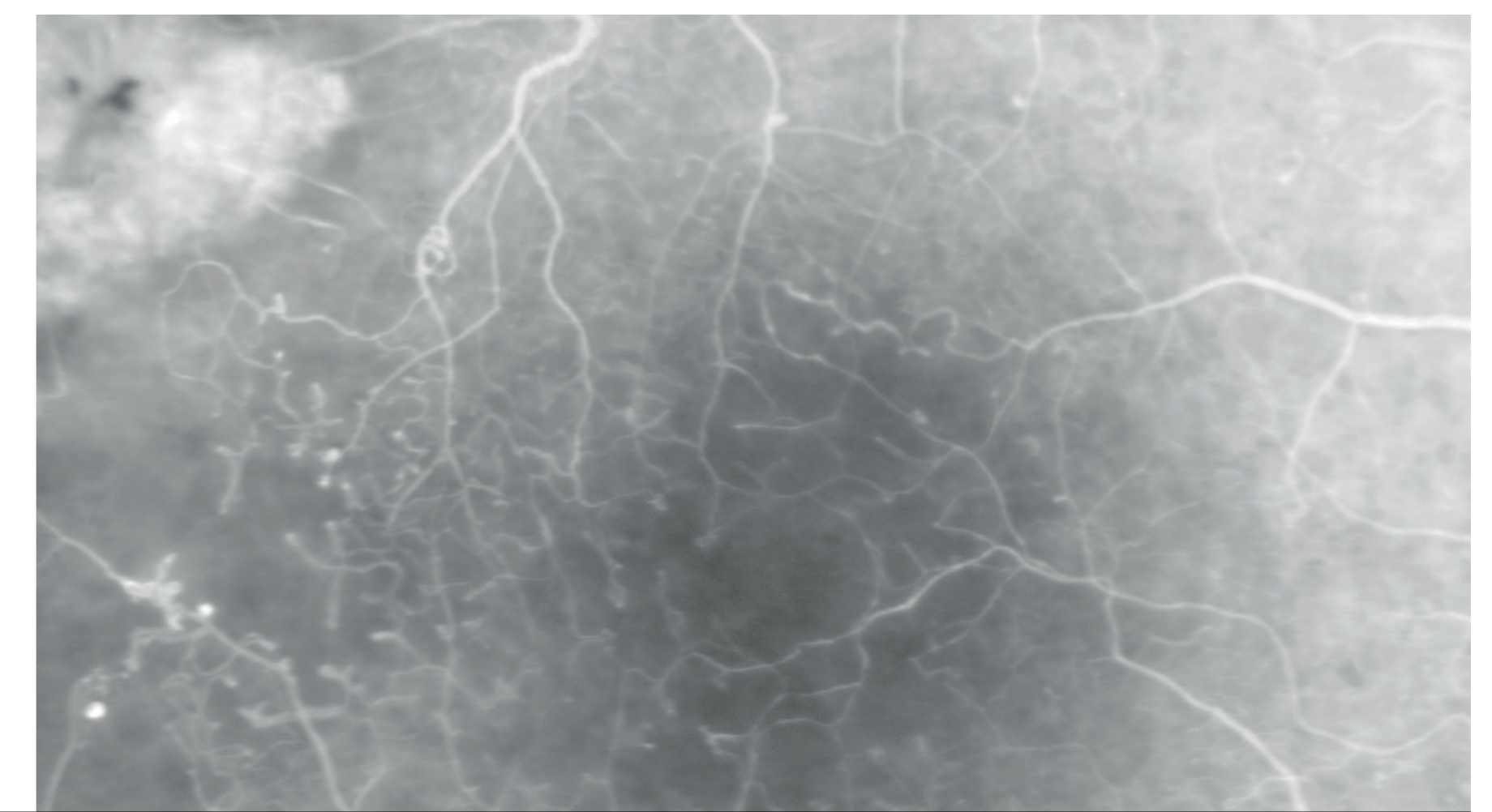
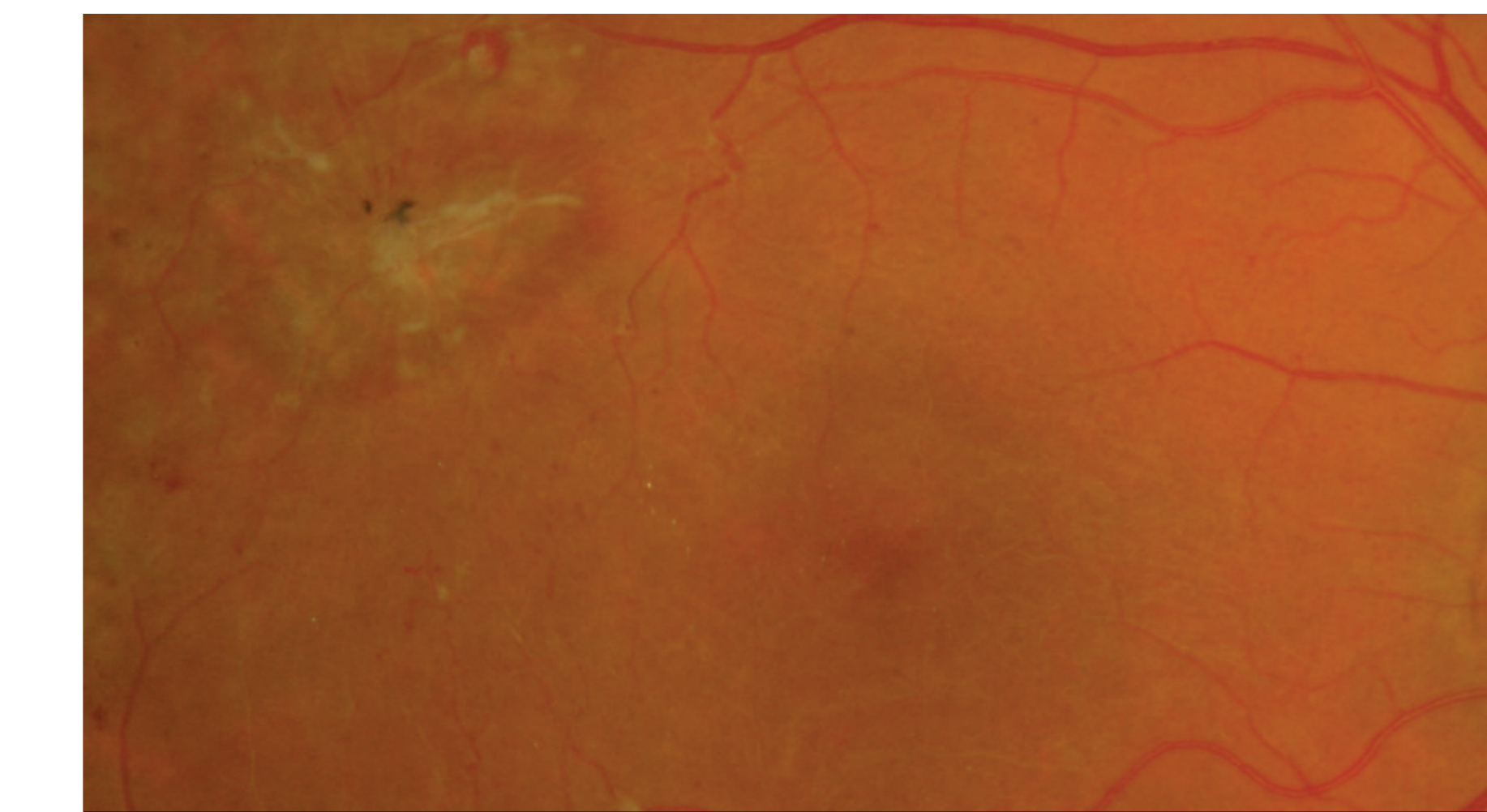
## Patient History

This patient was first imaged on a traditional fundus camera.

Color fundus images as well as fluorescein angiography images were taken prior to OCT Angiography.



[More »](#)



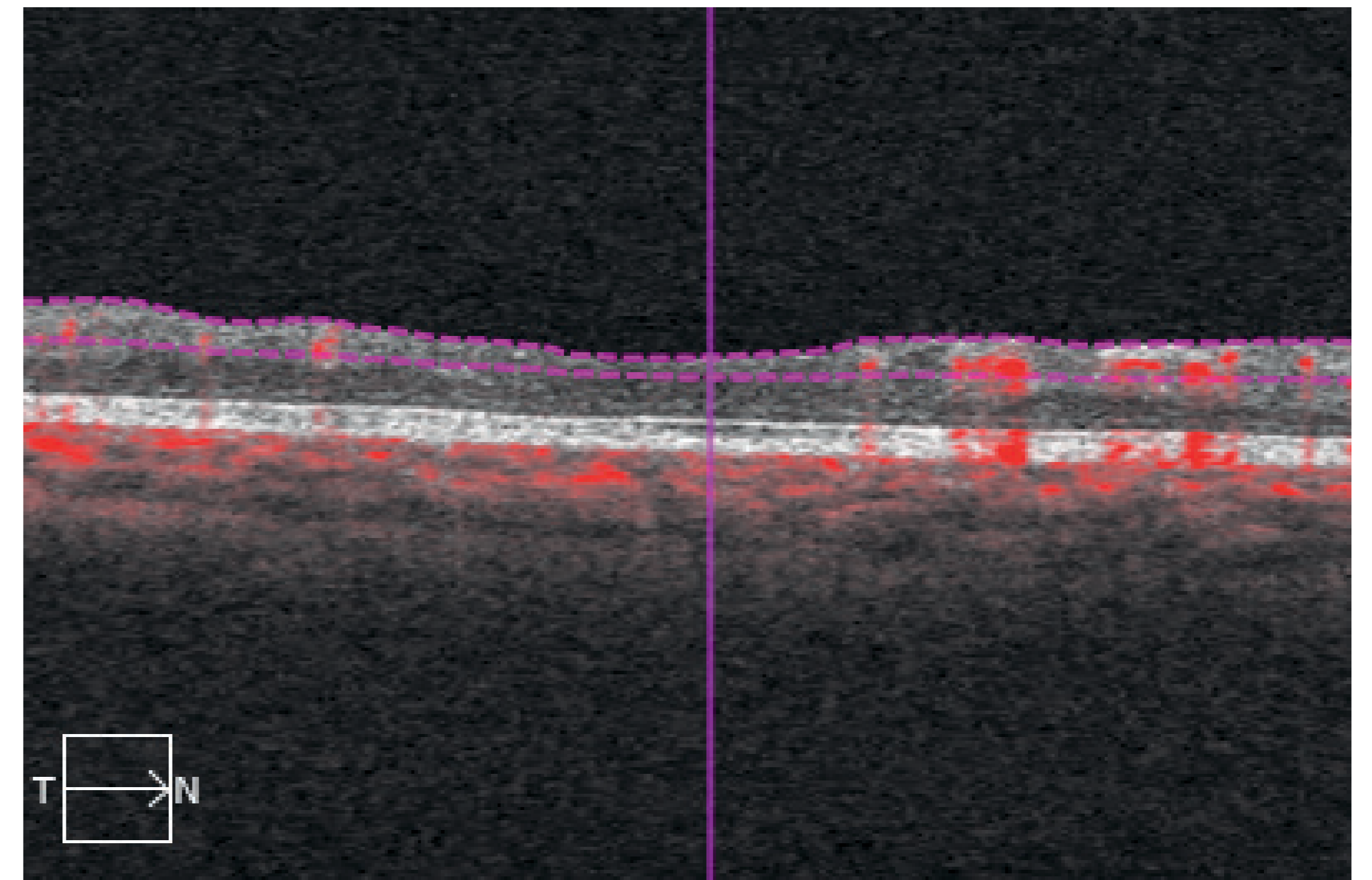
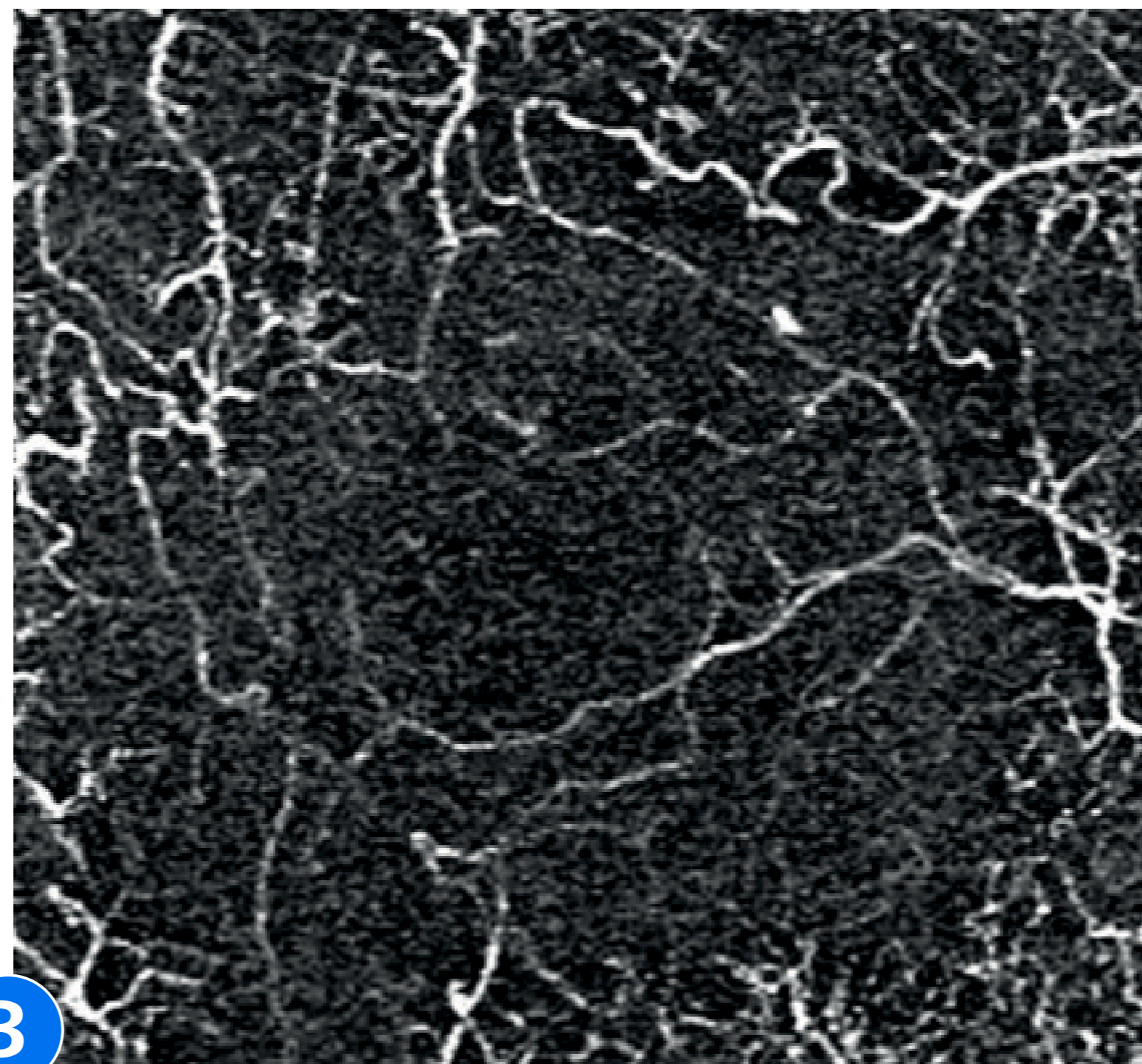
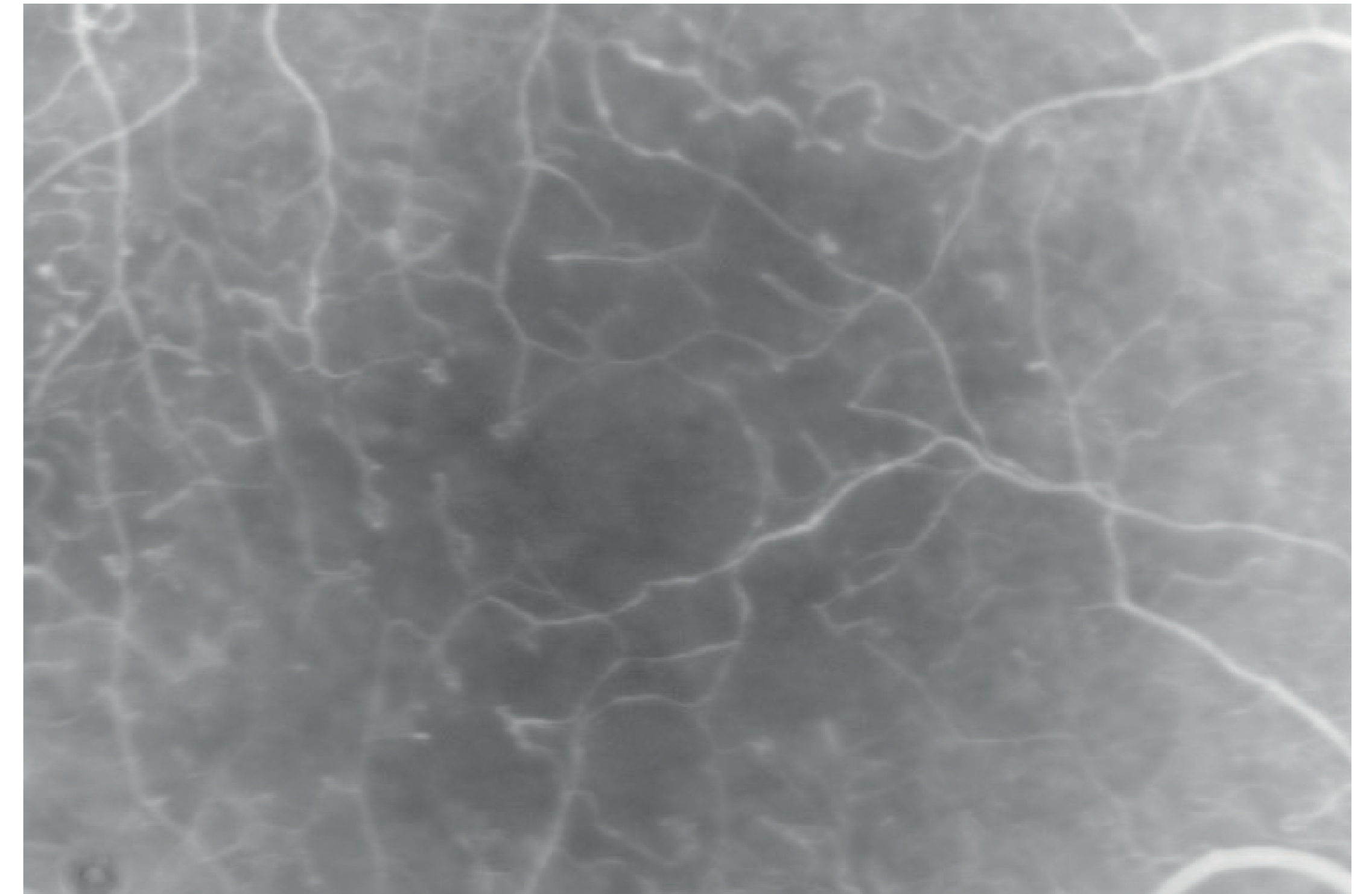
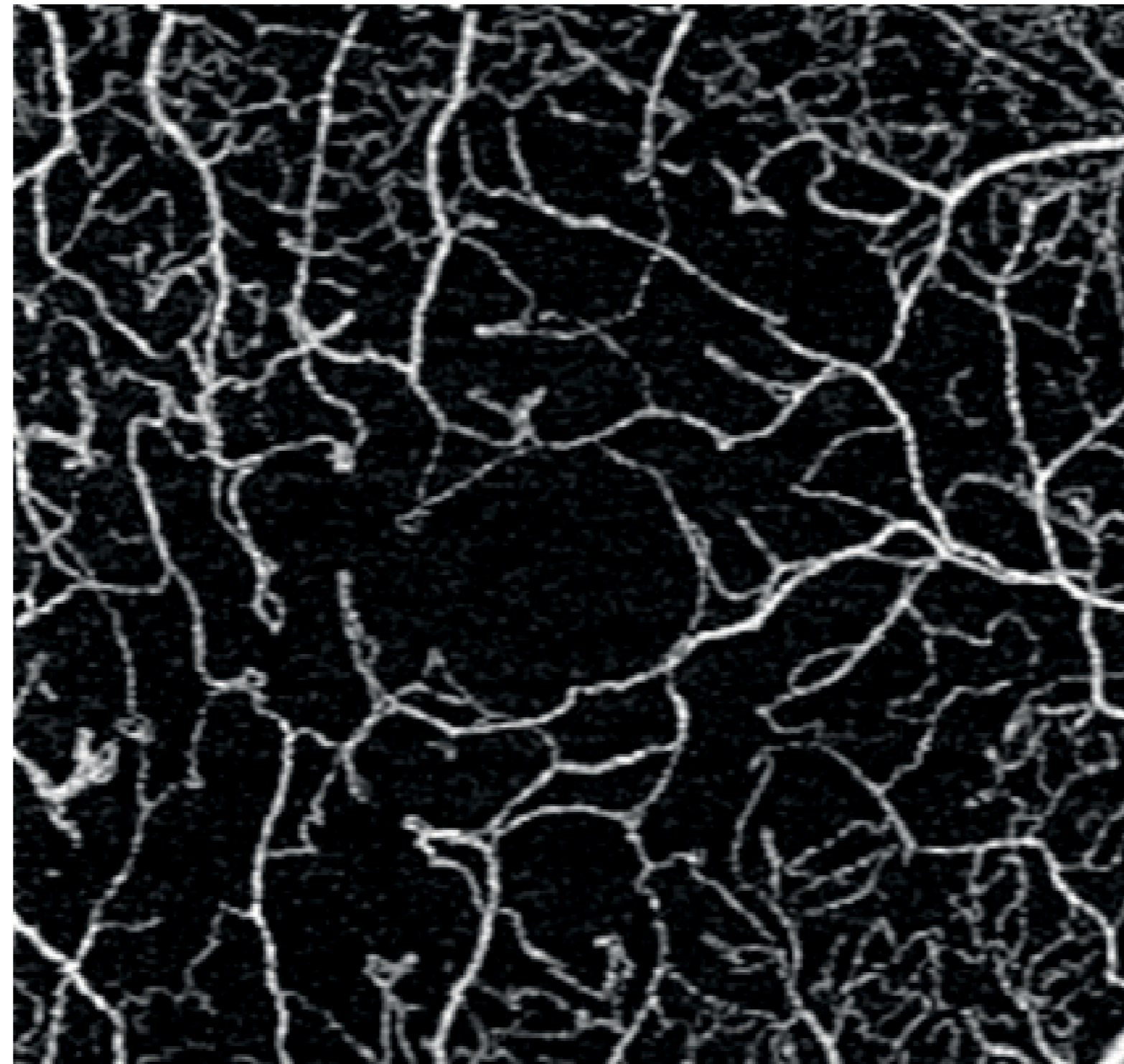
**2 Exam 4 (2016):** During the fourth exam, the limited FoV of the color fundus image suggests that the hemorrhages have improved. Whereas, the FA image shows reperfusion of the macula.



# Ischemic Diabetic Maculopathy

## Summary

In such cases, OCTA may be comparable to FA and preferred since OCTA is much quicker, non-invasive and more comfortable for the patient.

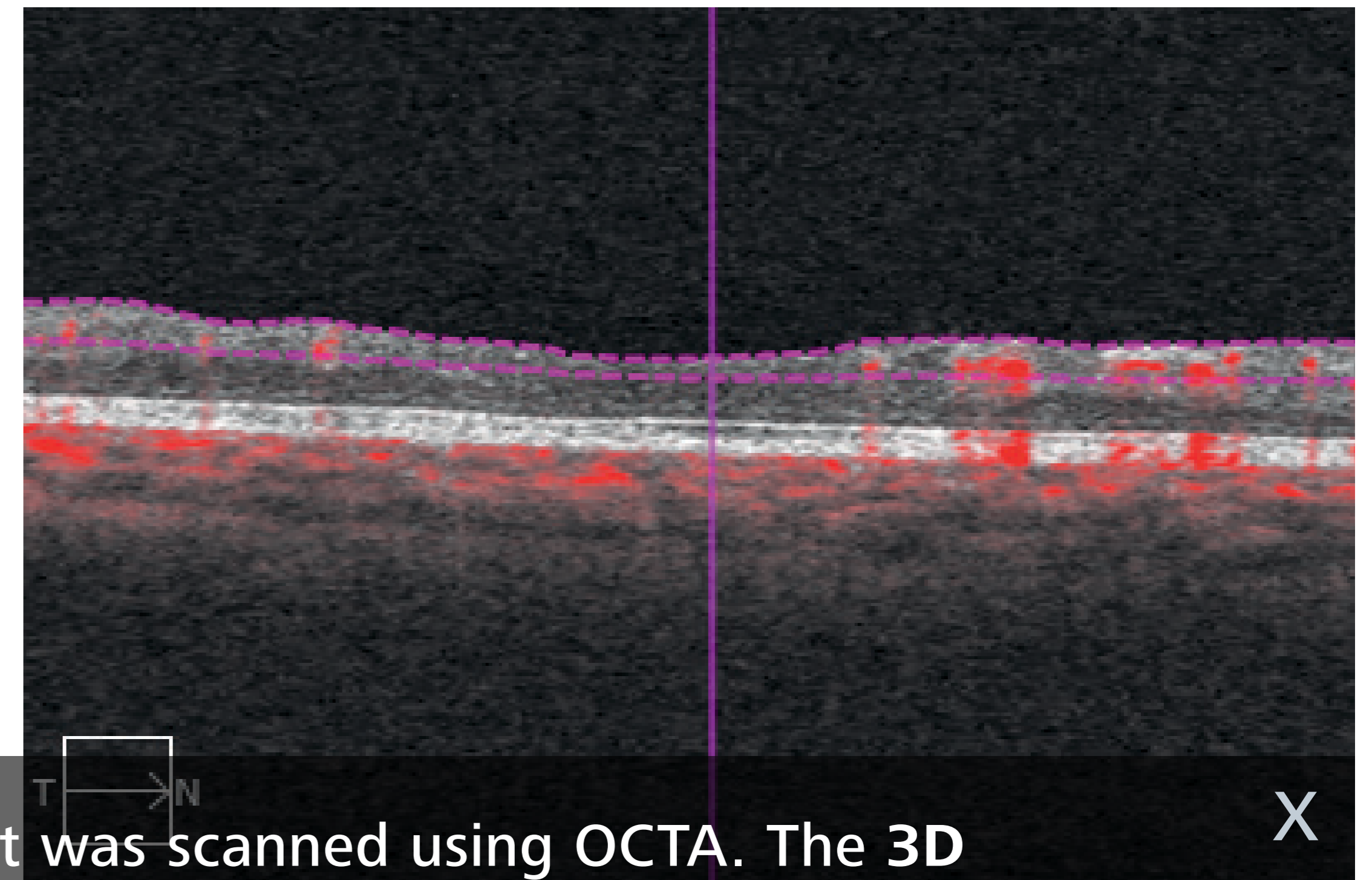
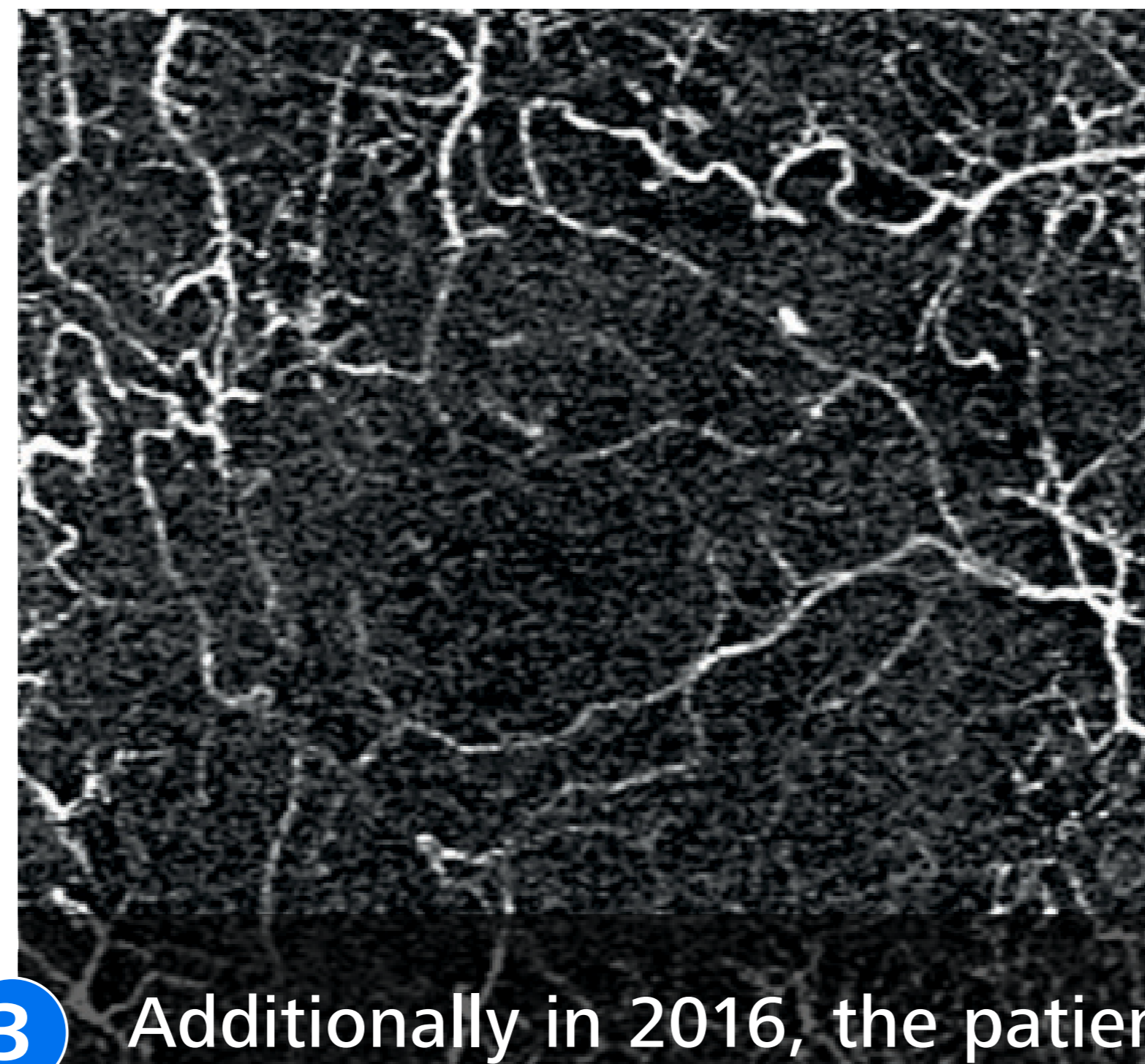
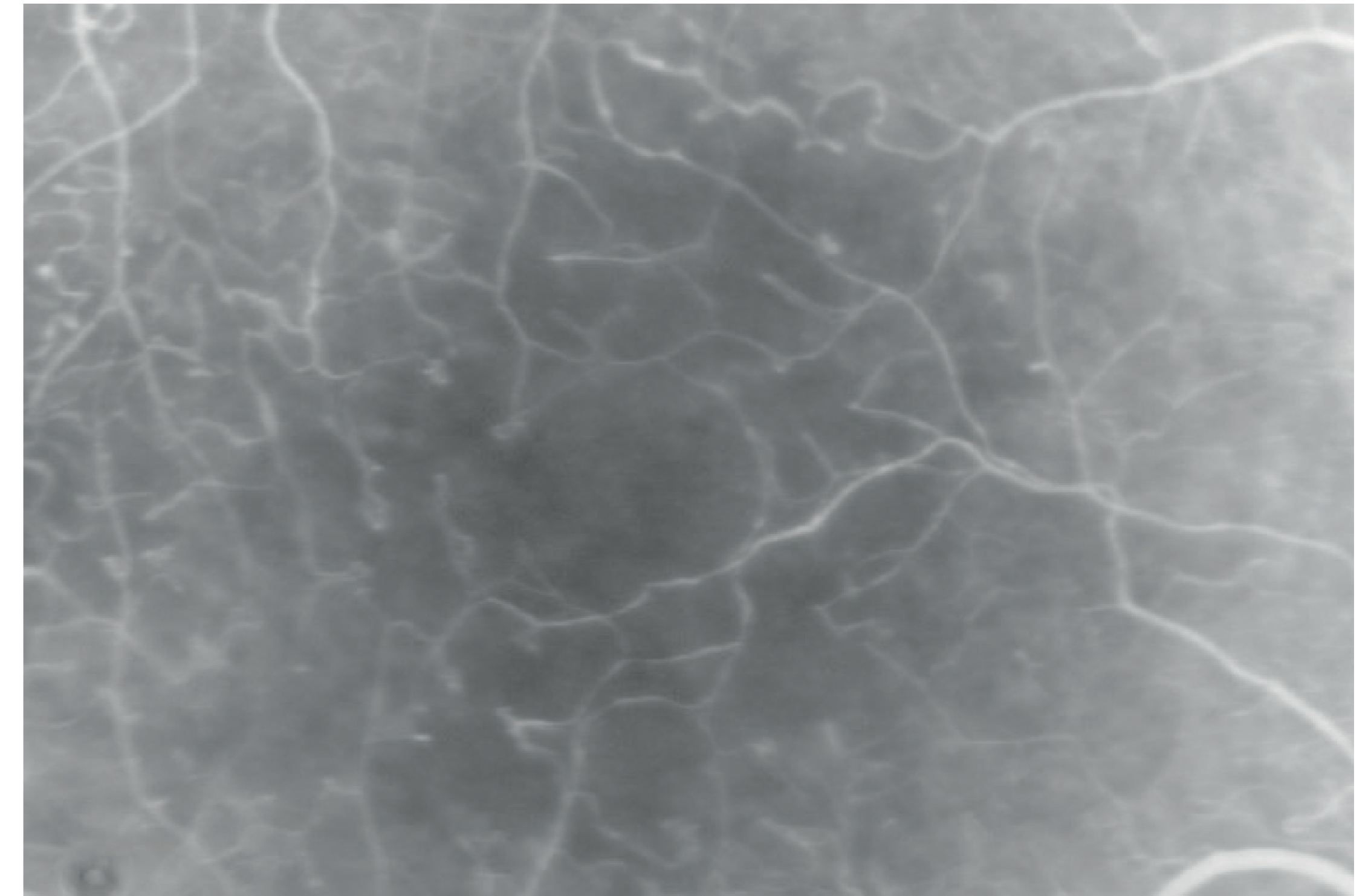
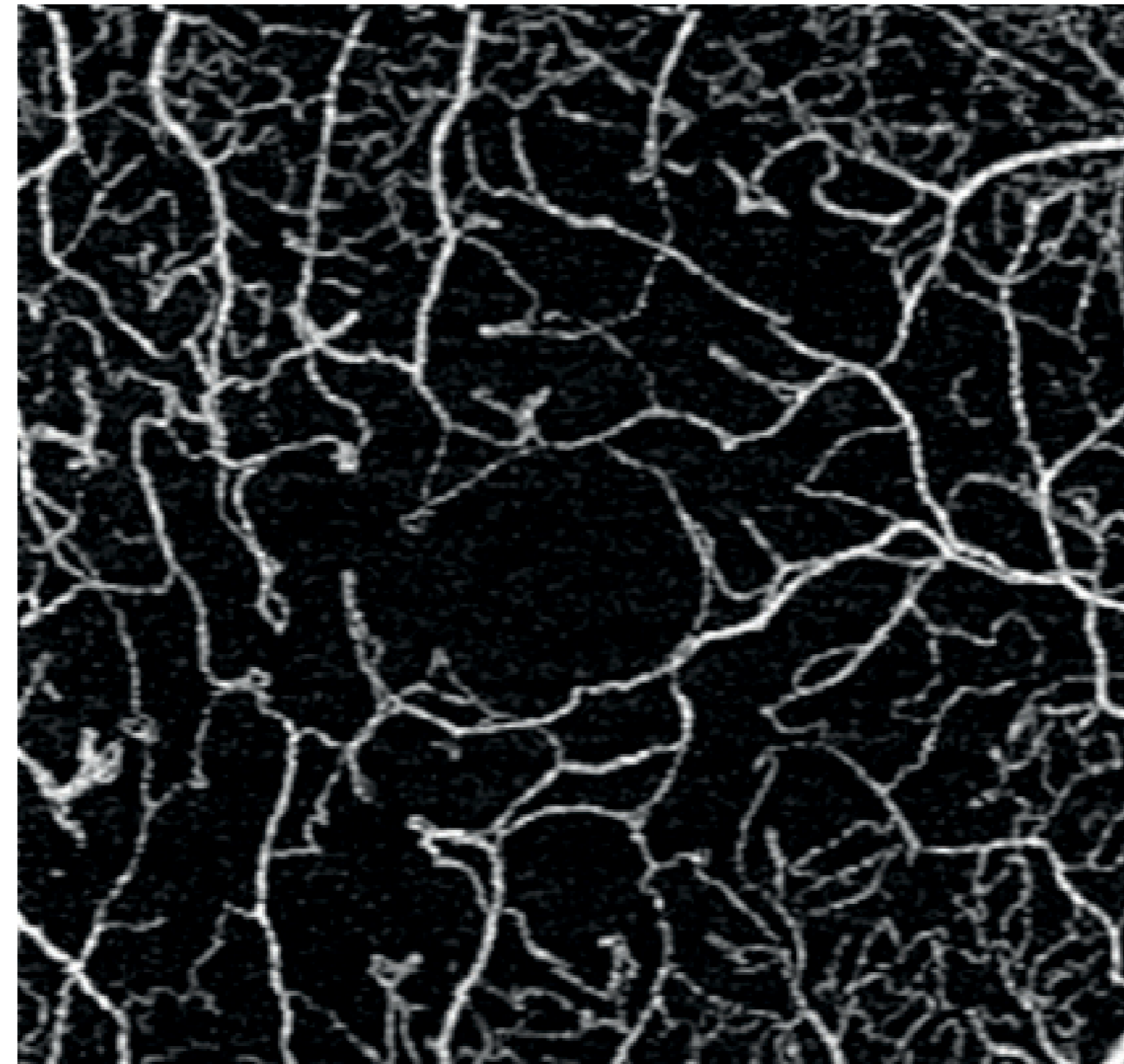


3

# Ischemic Diabetic Maculopathy

## Summary

In such cases, OCTA may be comparable to FA and preferred since OCTA is much quicker, non-invasive and more comfortable for the patient.



**3** Additionally in 2016, the patient was scanned using OCTA. The 3D segmentation capabilities of OCTA isolate the superficial capillaries, confirming the findings in the FA.

X

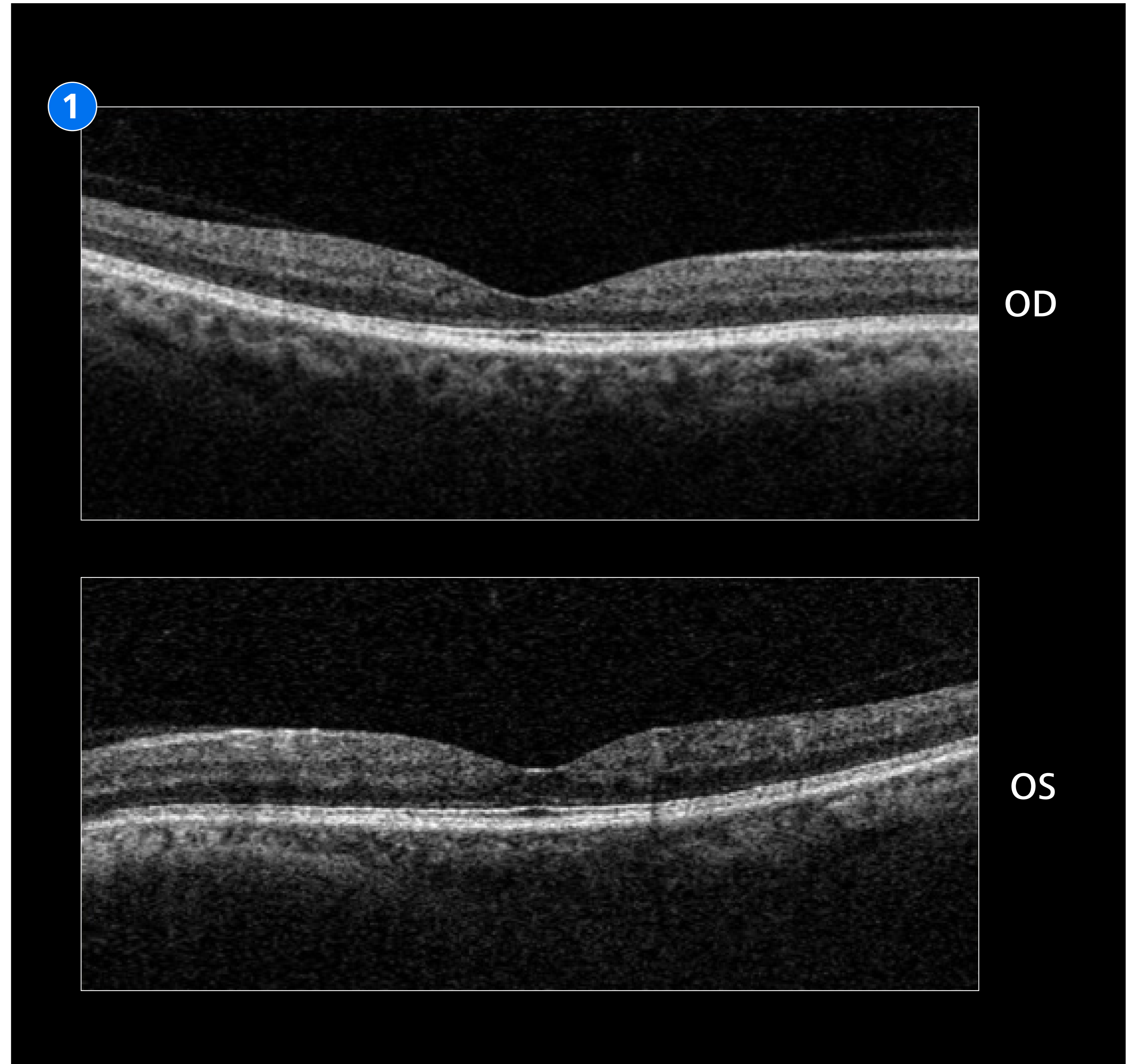
# Non-Proliferative Diabetic Retinopathy (NPDR)

## Patient History

57-year-old, diabetic male, presented with blurry vision, worse in the right eye.

Physical exam of the patient was unremarkable. There was no refractive error change; best-corrected visual acuity was 20/30 and 20/25 in the right and left eye, respectively. There were no lens changes. Upon dilated fundus exam, mild NPDR was noted in both eyes, with no DME seen.

[More »](#)



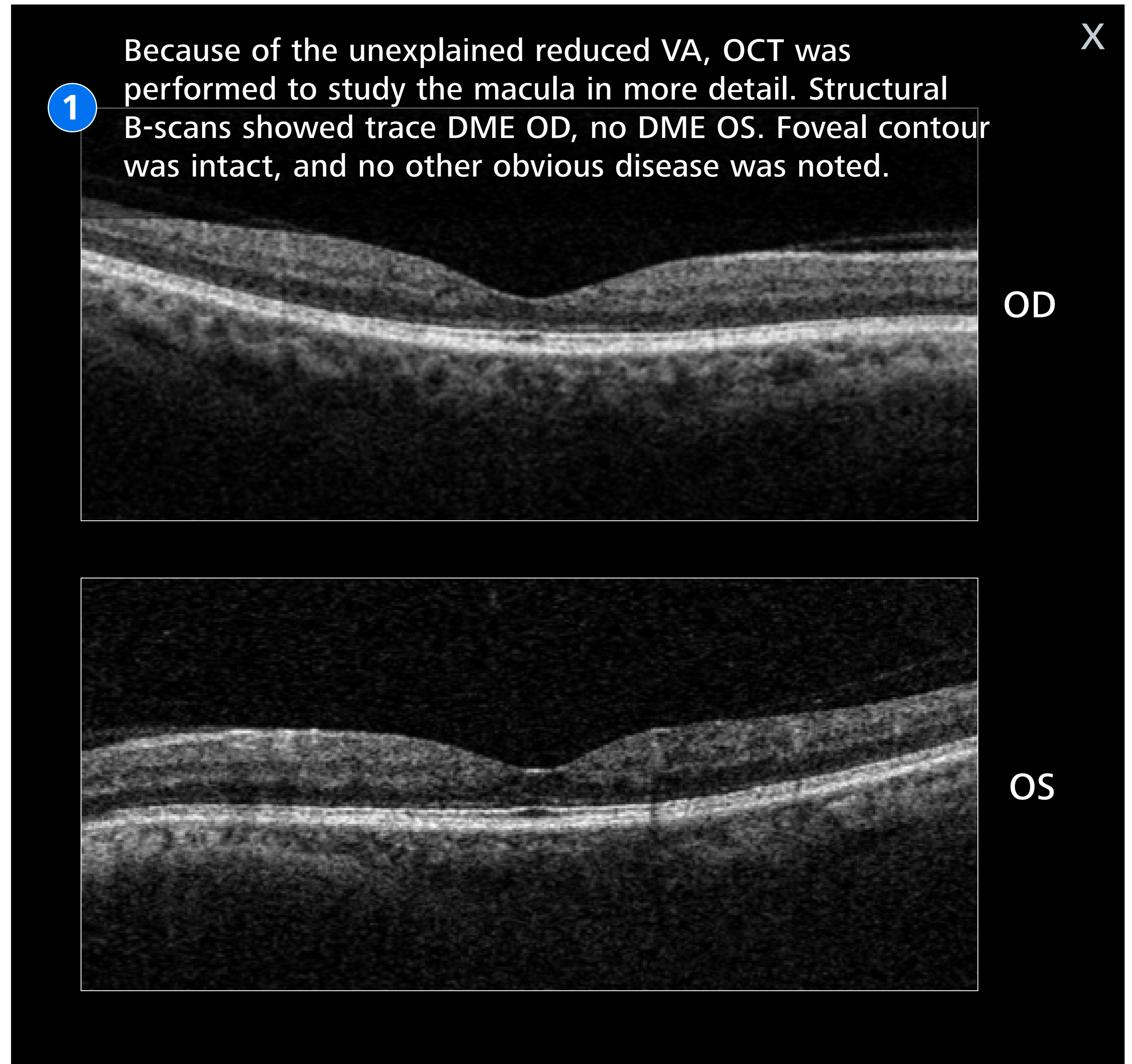
# Non-Proliferative Diabetic Retinopathy (NPDR)

## Patient History

57-year-old, diabetic male, presented with blurry vision, worse in the right eye.

Physical exam of the patient was unremarkable. There was no refractive error change; best-corrected visual acuity was 20/30 and 20/25 in the right and left eye, respectively. There were no lens changes. Upon dilated fundus exam, mild NPDR was noted in both eyes, with no DME seen.

[More »](#)



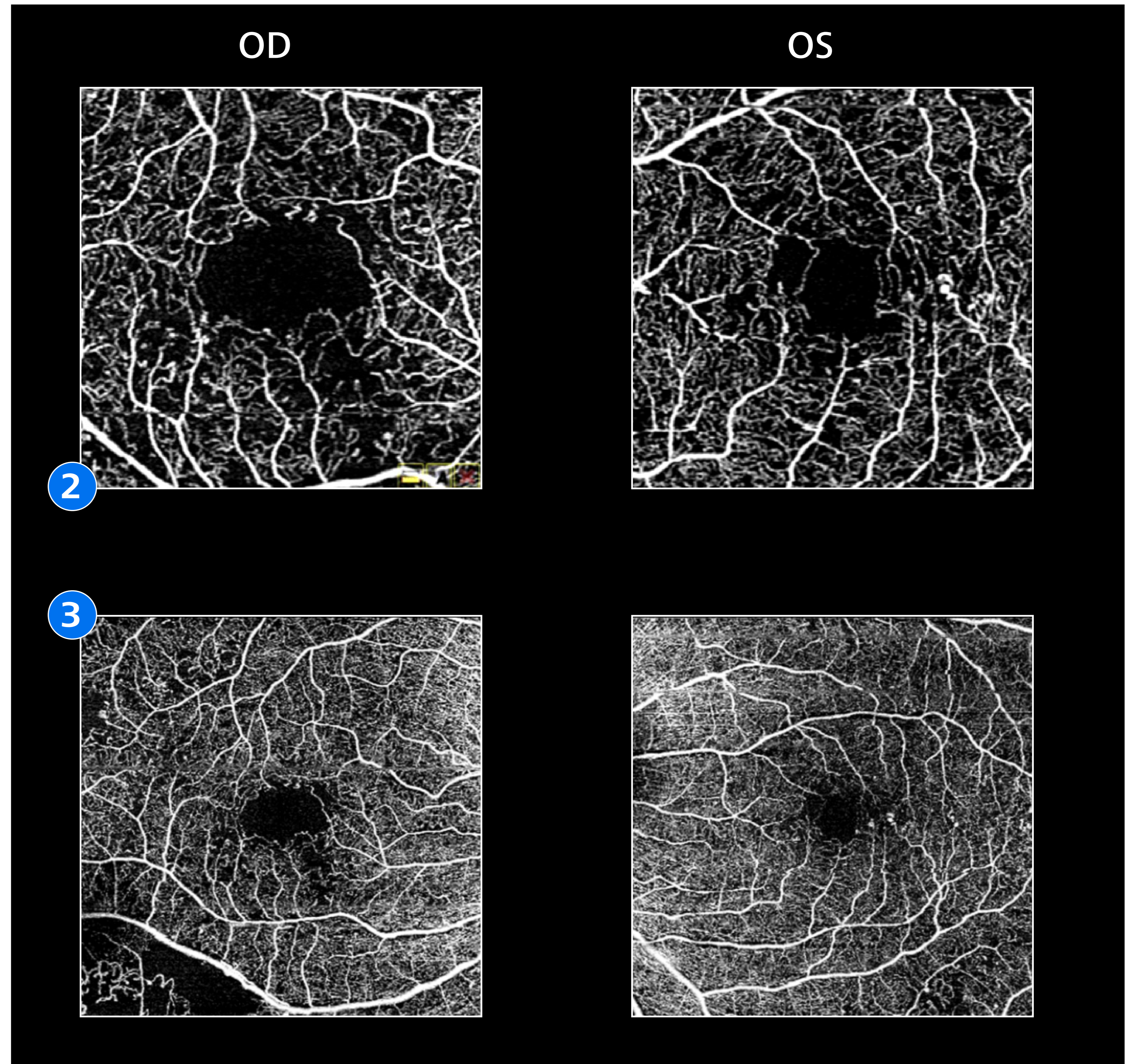
# NPDR

## Summary

OCTA imaging revealed macular ischemia in both eyes, which explained the reduced visual acuity.

OCTA is quick and non-invasive, providing valuable insight into the health status of the eye and allowing clinicians to evaluate the retinal vasculature when fluorescein angiography may not be indicated. This is especially helpful for diabetic patients, since some studies show that capillary dropout on OCTA may precede visible retinopathy.

In this case, the patient was educated on the need for good compliance with follow ups and treatment to prevent further vision loss.



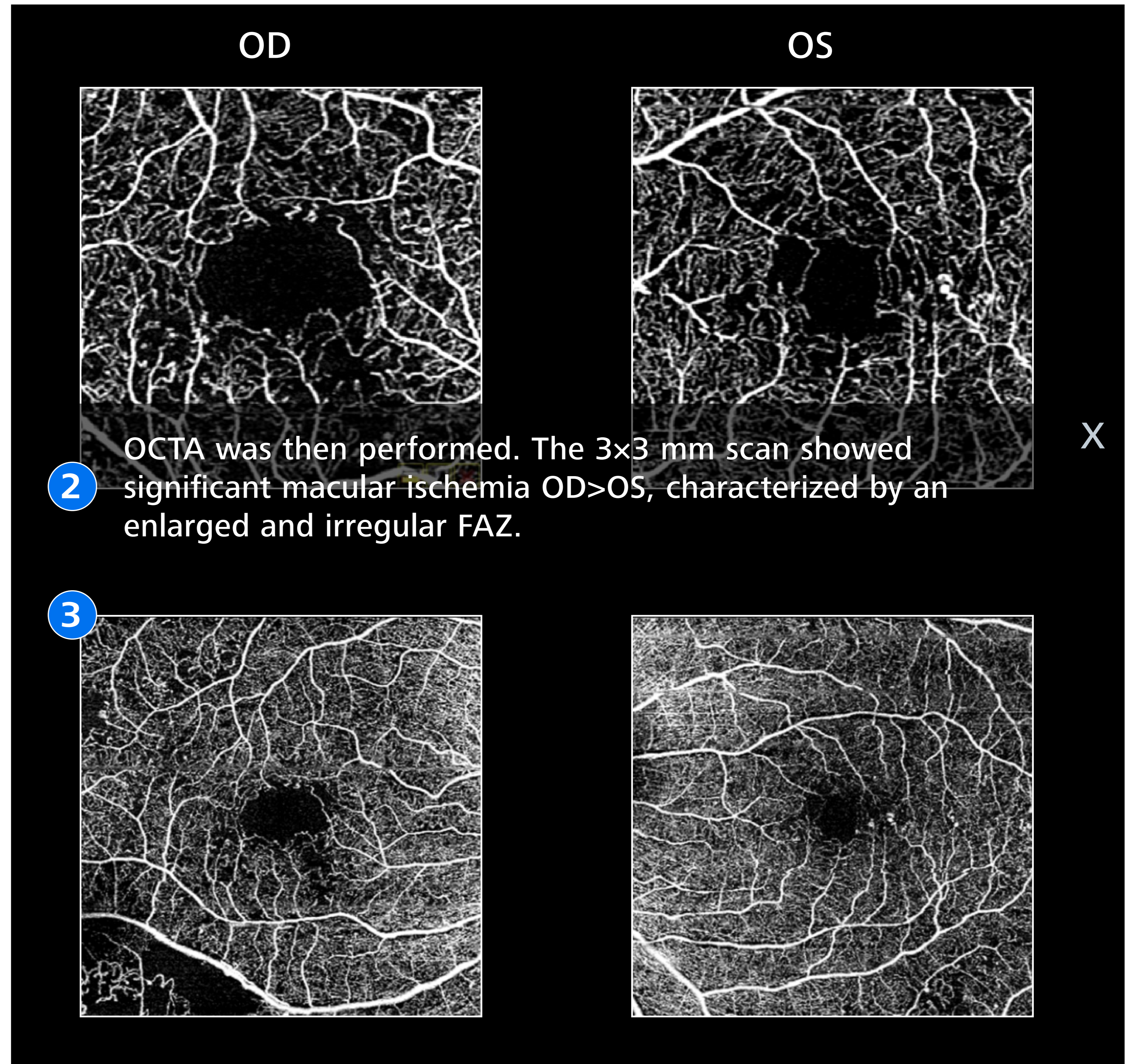
# NPDR

## Summary

OCTA imaging revealed macular ischemia in both eyes, which explained the reduced visual acuity.

OCTA is quick and non-invasive, providing valuable insight into the health status of the eye and allowing clinicians to evaluate the retinal vasculature when fluorescein angiography may not be indicated. This is especially helpful for diabetic patients, since some studies show that capillary dropout on OCTA may precede visible retinopathy.

In this case, the patient was educated on the need for good compliance with follow ups and treatment to prevent further vision loss.



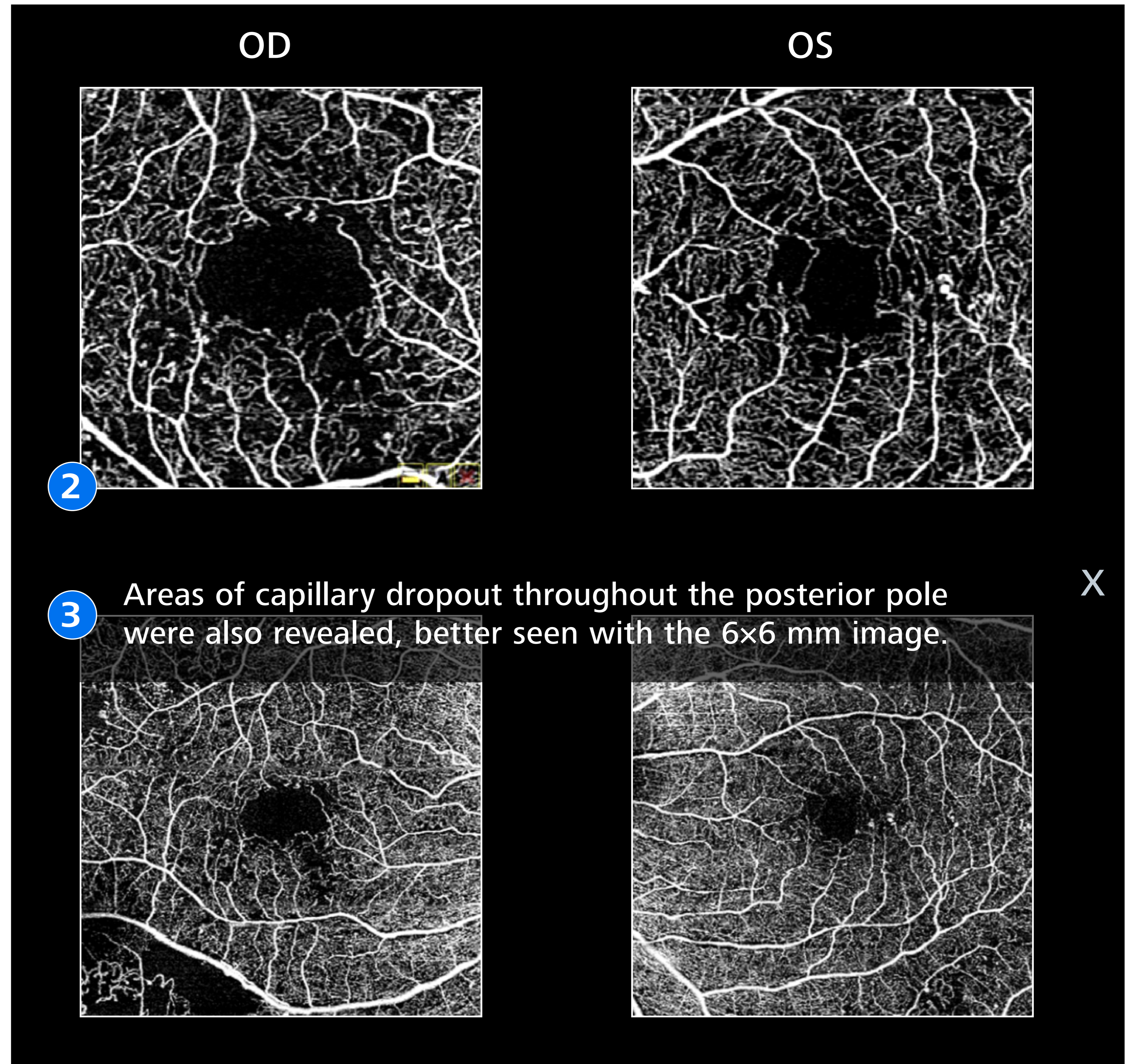
# NPDR

## Summary

OCTA imaging revealed macular ischemia in both eyes, which explained the reduced visual acuity.

OCTA is quick and non-invasive, providing valuable insight into the health status of the eye and allowing clinicians to evaluate the retinal vasculature when fluorescein angiography may not be indicated. This is especially helpful for diabetic patients, since some studies show that capillary dropout on OCTA may precede visible retinopathy.

In this case, the patient was educated on the need for good compliance with follow ups and treatment to prevent further vision loss.

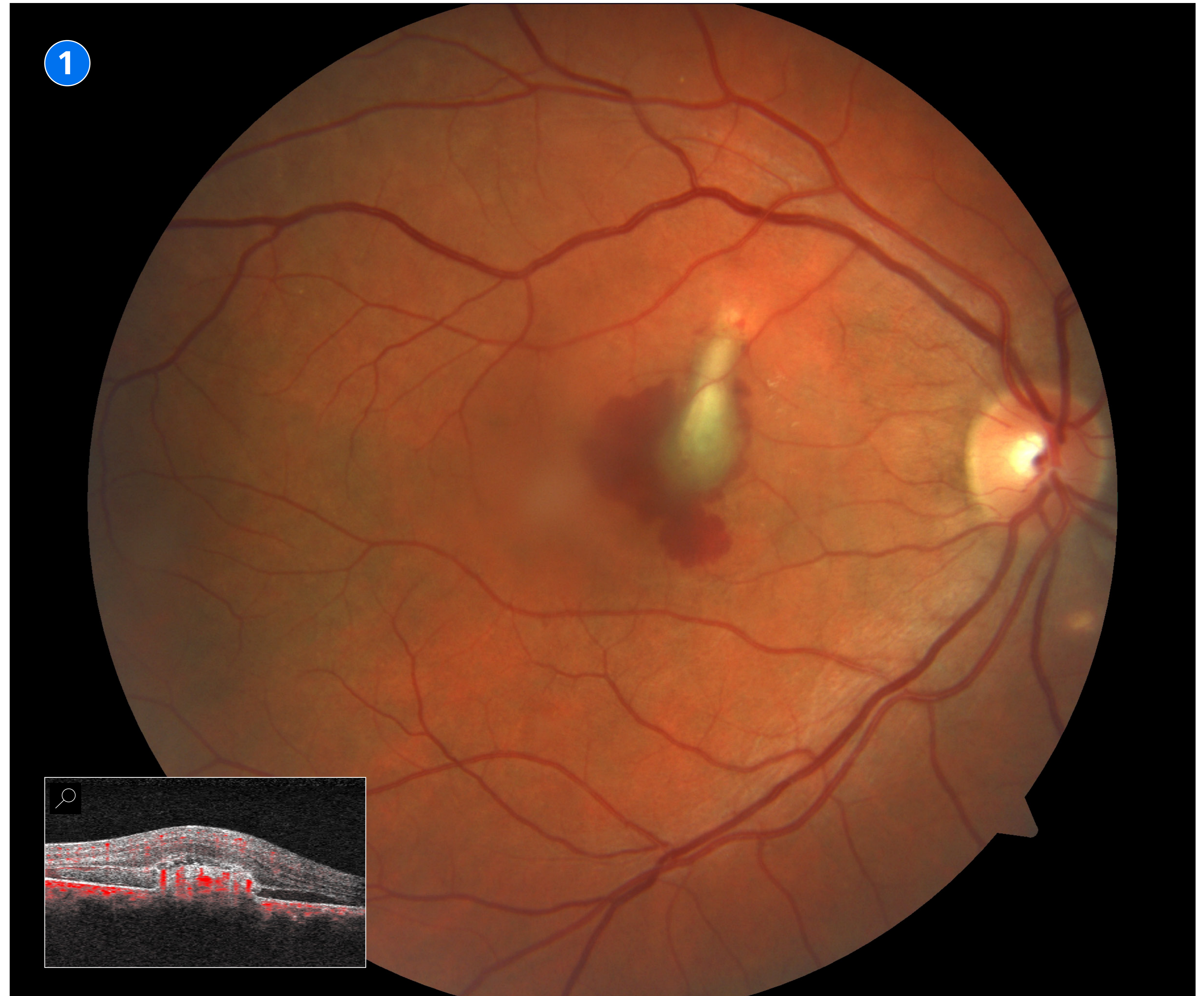


# Exudative CNV

## Patient History

A 52-year-old white male was referred to the clinic for retinal evaluation. The patient complained of sudden onset of decreased central vision in the right eye for the past 2 days.

[More »](#)

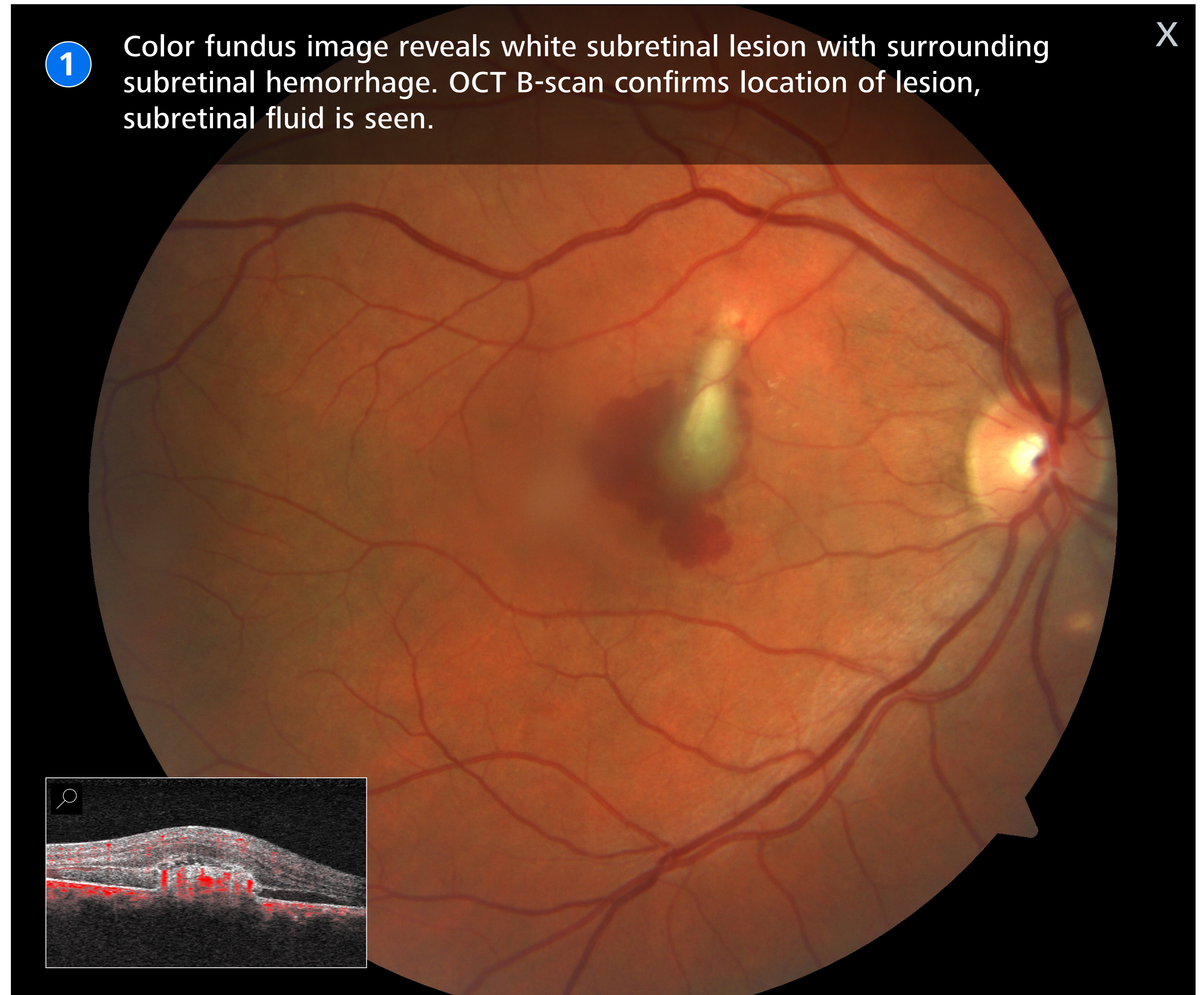


# Exudative CNV

## Patient History

A 52-year-old white male was referred to the clinic for retinal evaluation. The patient complained of sudden onset of decreased central vision in the right eye for the past 2 days.

[More »](#)

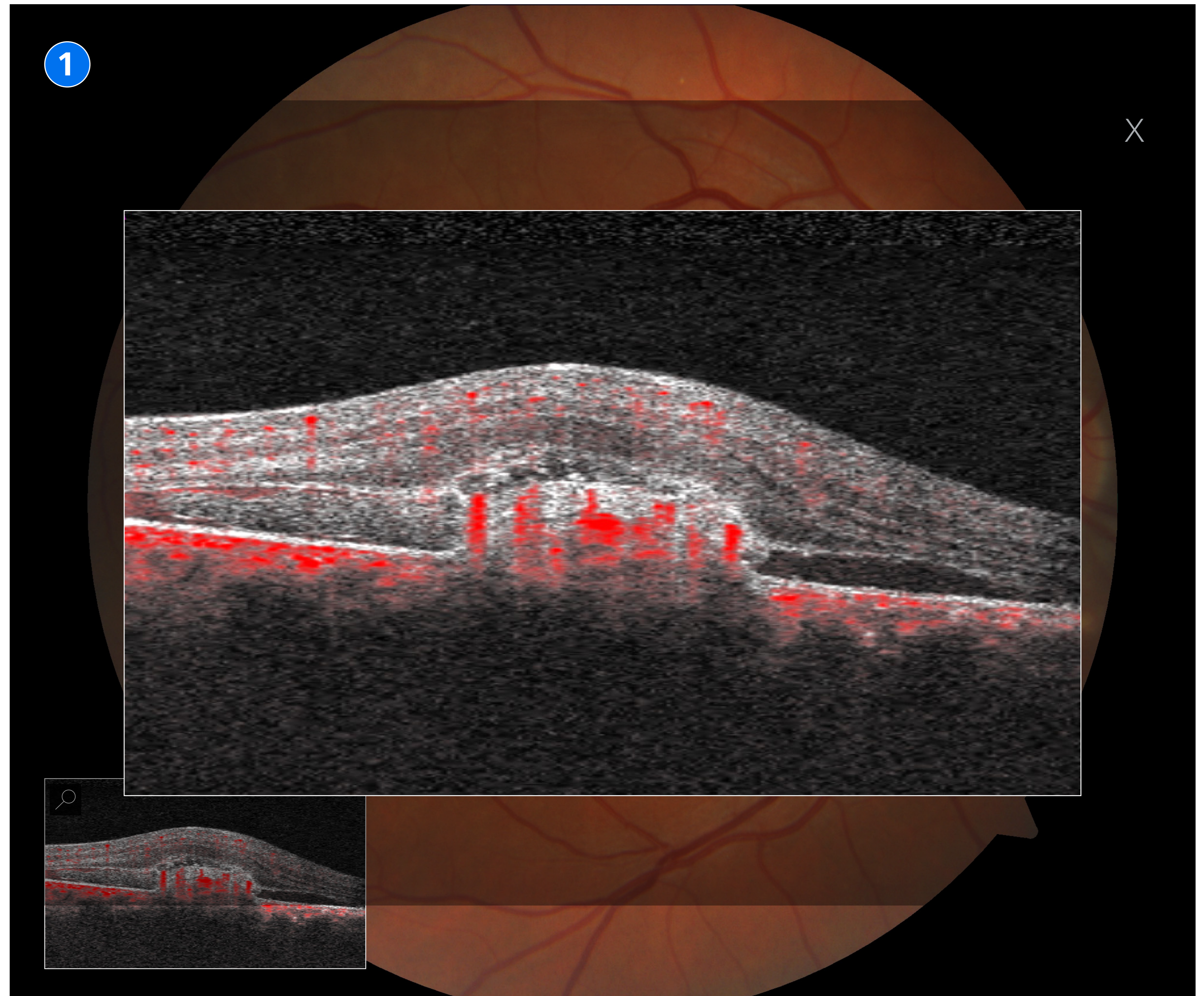


# Exudative CNV

## Patient History

A 52-year-old white male was referred to the clinic for retinal evaluation. The patient complained of sudden onset of decreased central vision in the right eye for the past 2 days.

[More »](#)



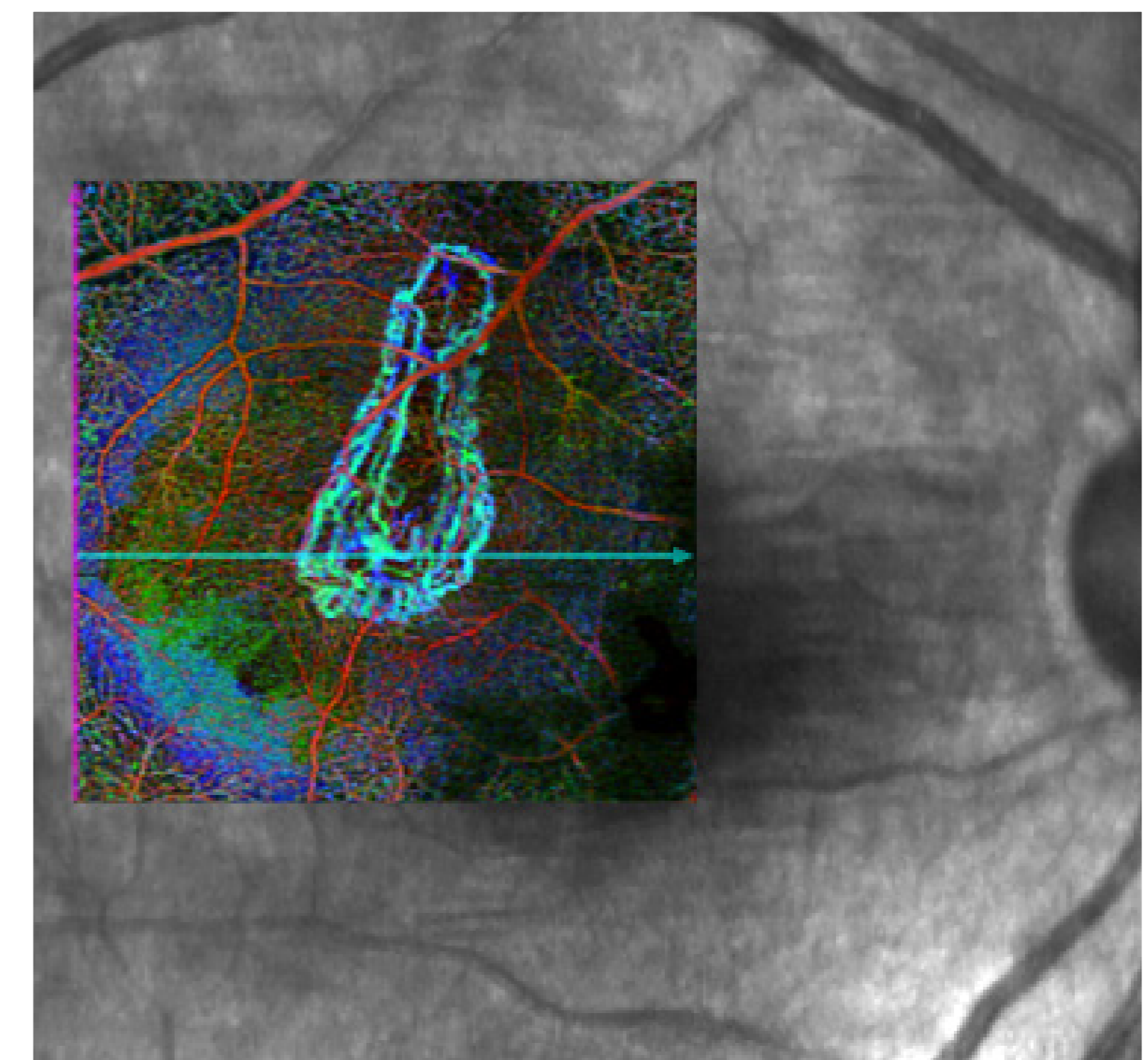
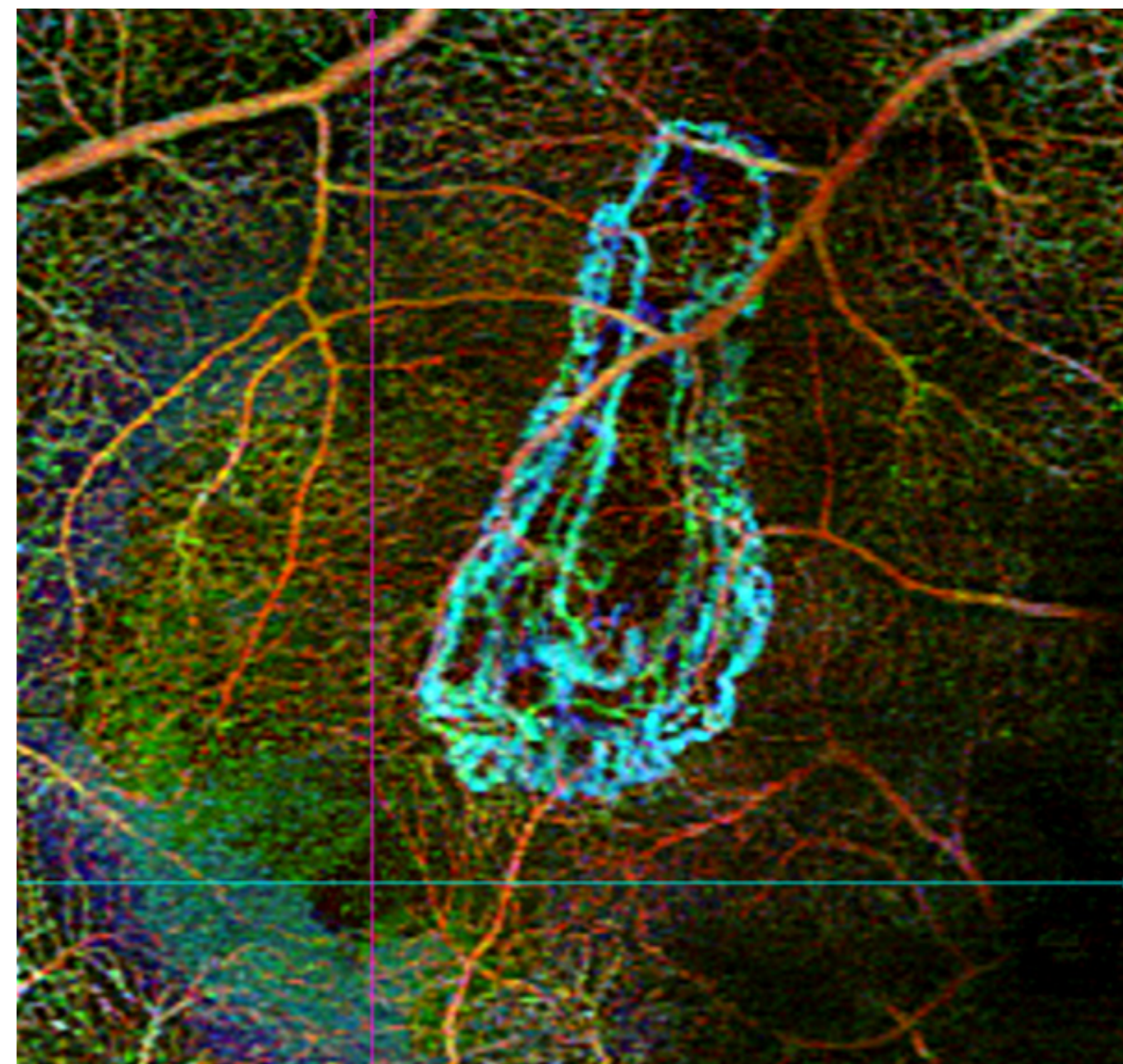
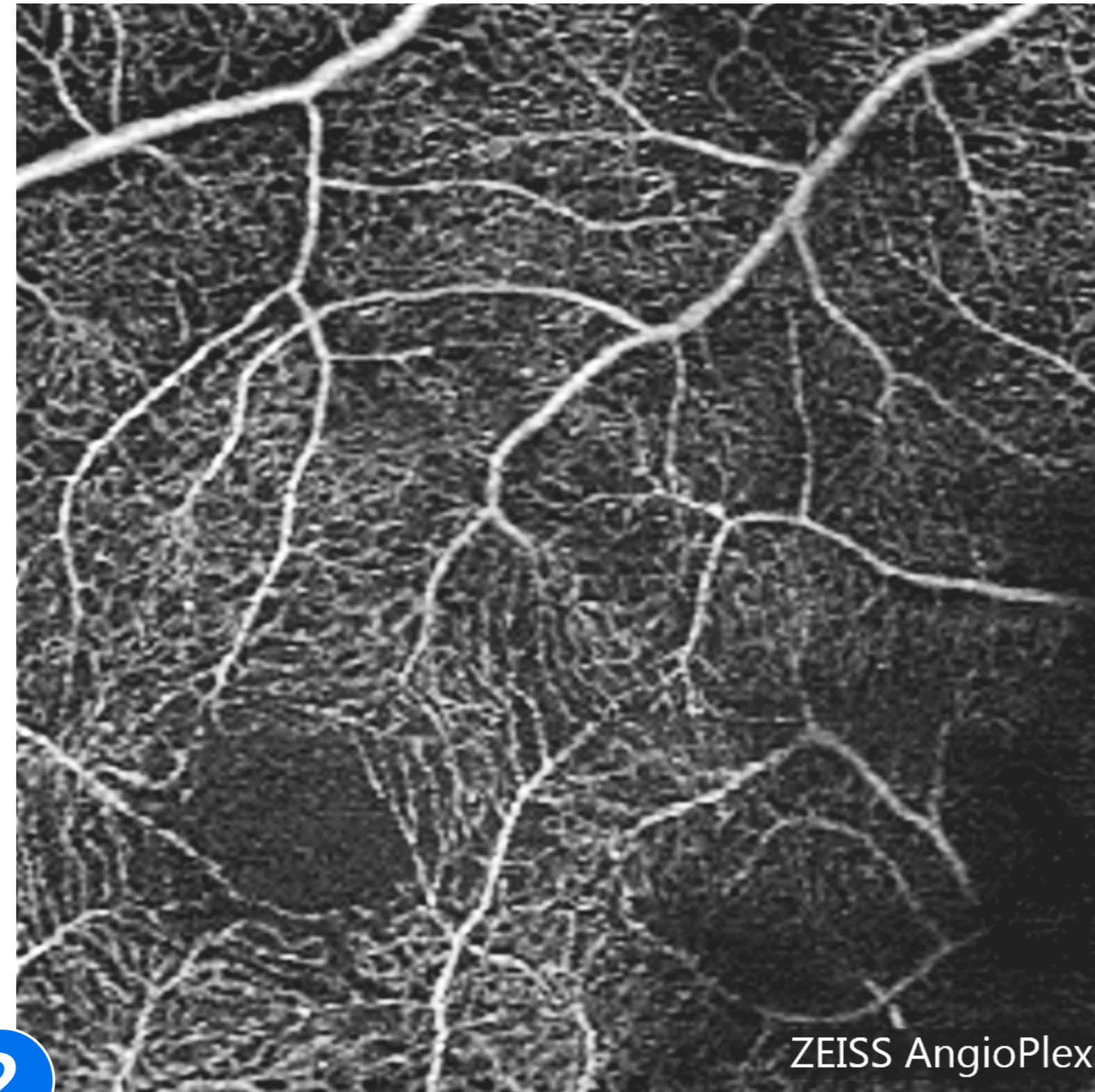
# Exudative CNV

## Summary

OCTA clearly reveals the CNV lesion in greater detail. In this case, FA may not be needed to make the diagnosis and plan treatment.

As the technology advances, OCTA may complement FA exams for certain diseases.

2

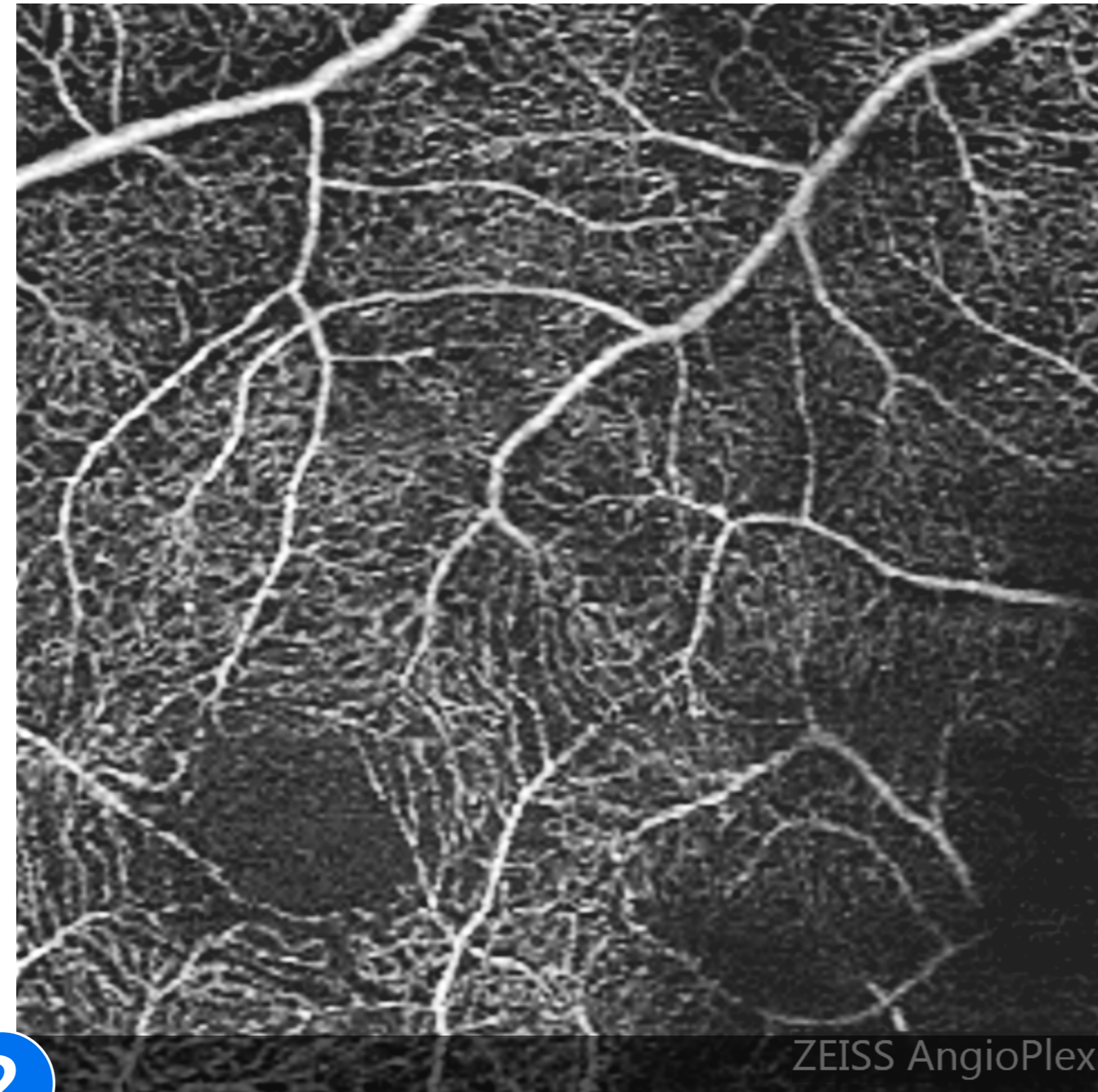


# Exudative CNV

## Summary

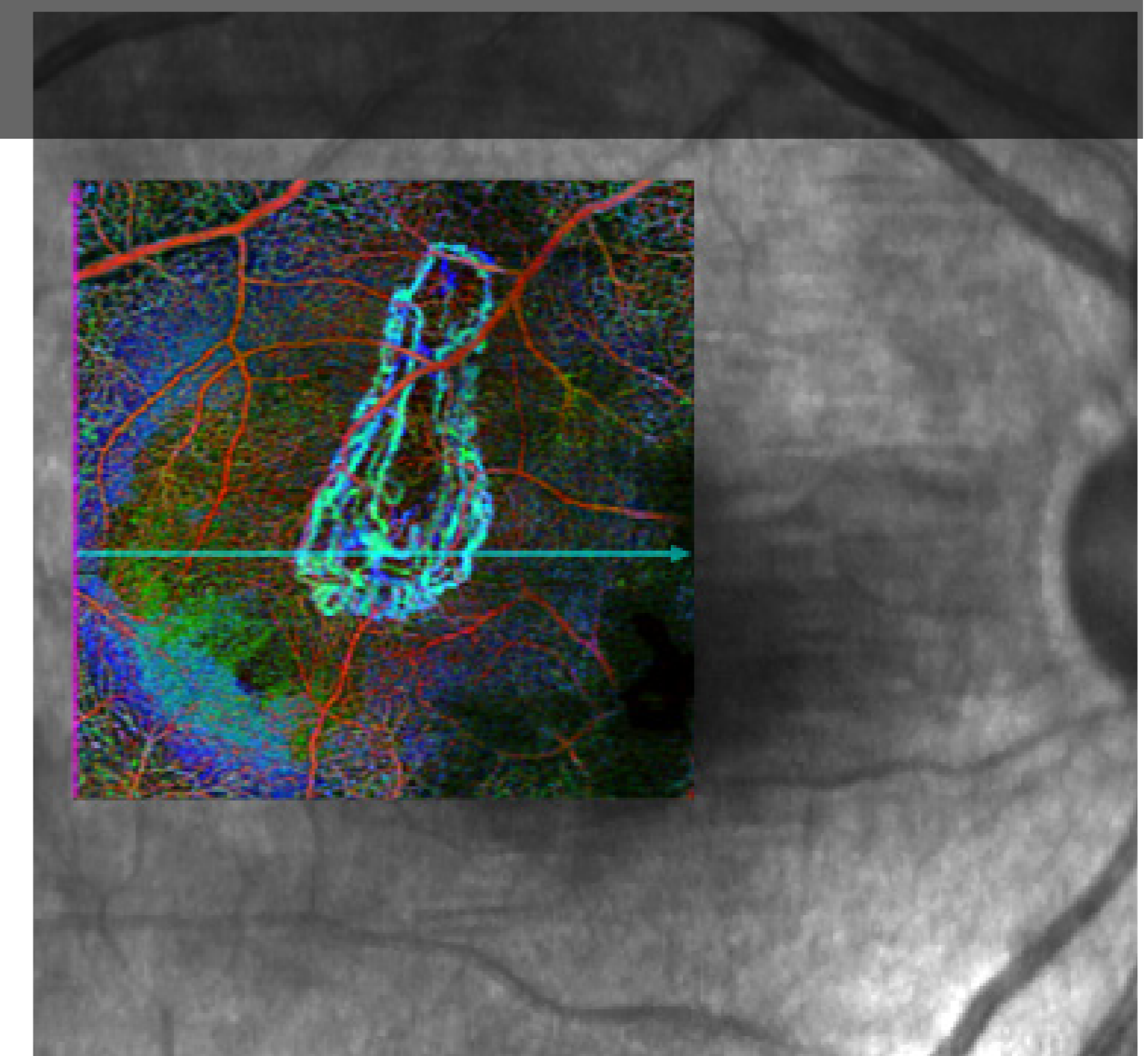
OCTA clearly reveals the CNV lesion in greater detail. In this case, FA may not be needed to make the diagnosis and plan treatment.

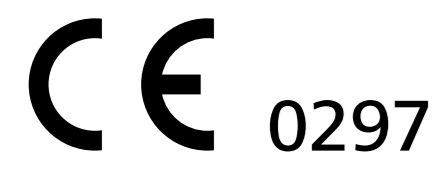
As the technology advances, OCTA may complement FA exams for certain diseases.



2

Superficial retinal vasculature on OCTA mostly intact. However, further segmenting the avascular layer of the retina (outer retina) reveals Type 2 CNV.





**Carl Zeiss Meditec, Inc.**  
5300 Central Parkway  
Dublin, CA 94568  
USA  
[www.zeiss.com/angioplex](http://www.zeiss.com/angioplex)  
[www.zeiss.com/med](http://www.zeiss.com/med)



**Carl Zeiss Meditec AG**  
Goeschwitzer Strasse 51-52  
07745 Jena  
Germany  
[www.zeiss.com/angioplex](http://www.zeiss.com/angioplex)  
[www.zeiss.com/med/contacts](http://www.zeiss.com/med/contacts)

**en-INT\_31\_025\_0834II** CZ-II/2025 International edition: Only for sale in selected countries.  
The contents of the brochure may differ from the current status of approval of the product, or service offering in your country. Please contact our regional representatives for more information. Subject to changes in design and scope of delivery and due to ongoing technical development. AngioPlex is registered trademark of Carl Zeiss Meditec AG or other companies of the ZEISS Group in Germany and/or other countries.  
© Carl Zeiss Meditec, Inc., 2025. All rights reserved.

