

# RSD Scan Quality Checklist

## IS IT A GOOD SCAN?

### 1) Patient Fixation

In order to get a good OCT scan, the patient must be looking in the right place.

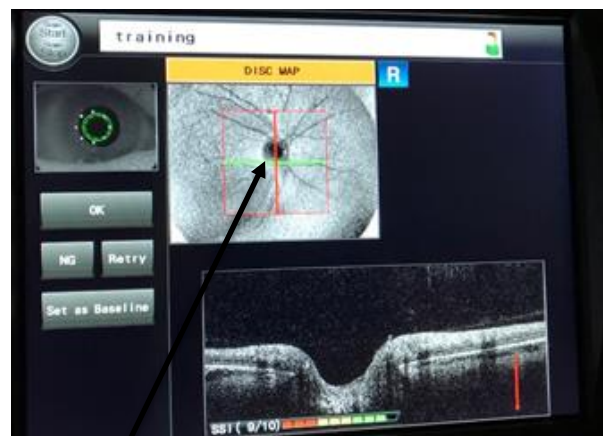
The green fixation dot on the RSD Touchscreen will indicate where the patient needs to look.

The dot will appear in the same place for the user as it will the patient, eg. If the dot is on the right of the touchscreen it will also appear to the patient's right.



The live camera view can be used to monitor the patient's fixation during the scan.

Steady gaze should be encouraged where possible.



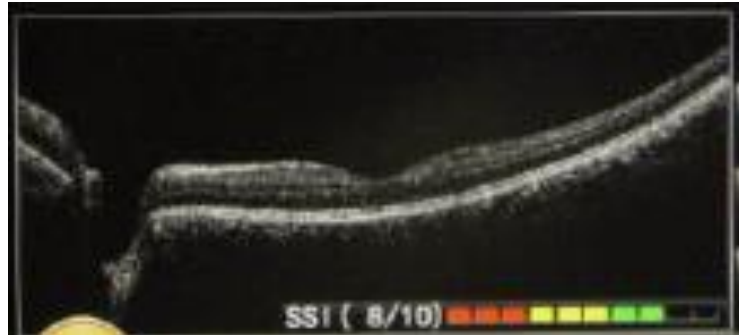
After the scan has been completed, the position of the **optic nerve** can be used to check the patient's fixation was correct.

The optic nerve should be on the side during a 'Macular' OCT scan.

It should be in the centre during a 'Disc' OCT scan.

## 2) SSI – SIGNAL STRENGTH INDEX

In order to get a good OCT scan, enough infrared light must reach the ocular structure we want to scan.



In a good scan, the SSI score should be 7 or over (at least 1 green bar).

It will likely be less, if the patient has cataracts, small pupils or a poor tear film.

**TIP!** – Sometimes you must accept a lower SSI score – the scan is only as good as the Px can give you.

## 3) Scan position

In the test room, the optometrist will only be able to analyse the scan data that is within the black preview box. If the scan position is too high or too low, areas of the scan will be lost.

The scan position should be as central as possible within the black preview box.



If the scan does not appear to be central, the position can be adjusted using the up and down arrows.

**TIP!** - The scan position can only be adjusted after 'Optimising' has disappeared and before scan capture begins ('Capturing'). Eg. If a scan is always appearing low, hover over the arrows so you can adjust quickly.

#### 4) Blinking?

The patient must keep their eyes open for the duration of the scan, but it is important to keep the tears fresh and they should blink normally until instructed to stare. It is important to inform the Px when they can blink and when they must stare. The scans generally last around 5 seconds.

When '**OPTIMISING**' is displayed on the touch screen, the patient can blink normally.

When 'Optimising' disappears from the touch screen, the scan is about to start and the px should stare.

A single beep will sound as the scan starts and '**CAPTURING**' will be displayed on the touch screen.

A double beep will sound to mark the end of the scan capture. At this point the patient can blink again.



After the scan has been captured, it is important to check whether the patient blinked using the preview screen on the main PC screen (**NOT** the OCT touchscreen). If the patient has blinked, red interference lines will appear all throughout the scan.

**TIP!** - It is important to distinguish the difference between the 'zig-zags' of a blink which will appear all through the scan and the 'zig-zags' that appear just at the edges of the scan which are normal

**TIP!** - Too many blinks are just as bad as not enough blinks – the key is to blink *normally*!

**TIP!** – Having good tears is very important for the RSD to focus. Sometimes for Px with poor tears / dry eyes, you or the Px (or the Optometrist) may need to put some lubricating drops into their eyes.

**TIP!** – Try not to say, '*don't blink*', as this is often just what the Px will do! Use phrases such as '*stare*', '*wide eyes*', or '*big eyes*'.



After the scan has been captured, you must review it and select one of the following options on the OCT touchscreen

## OK

You have reviewed the scan and are happy there are no errors, **OR** you have performed the scan several times and you wish to move onto the next scan in the combo

## NG - 'Not great'

The scan is not terrible, but it is not perfect either – but it may just be the best you can ever get for that Px. The device will hold onto the scan **AND** allow another attempt at the same scan. The user can then choose which scan is the best to be saved onto the patient file at the 'save & close' stage

## Retry

The scan will be deleted immediately, and a repeat scan attempted. The original scan cannot be retrieved.

**TIP!** - Any scan should be attempted a **MAXIMUM** of 3 times – Do not spend 20 minutes trying to get a brilliant scan! The scan is only as good as the Px will allow you to capture.

**TIP!** – Generally, the quicker you can capture the scans, the better the scans will be.

**TIP!** – If you are unsure which 'NG' scan is the best at the point of saving, tick all of them to save them and let the Optometrist decide which is the best scan.

**TIP!** – The key is to clearly direct the Px as to what you need them to do during the capture process –

*'Look at the green dot inside the OCT, I will tell you when you can blink and when you must stare'.*