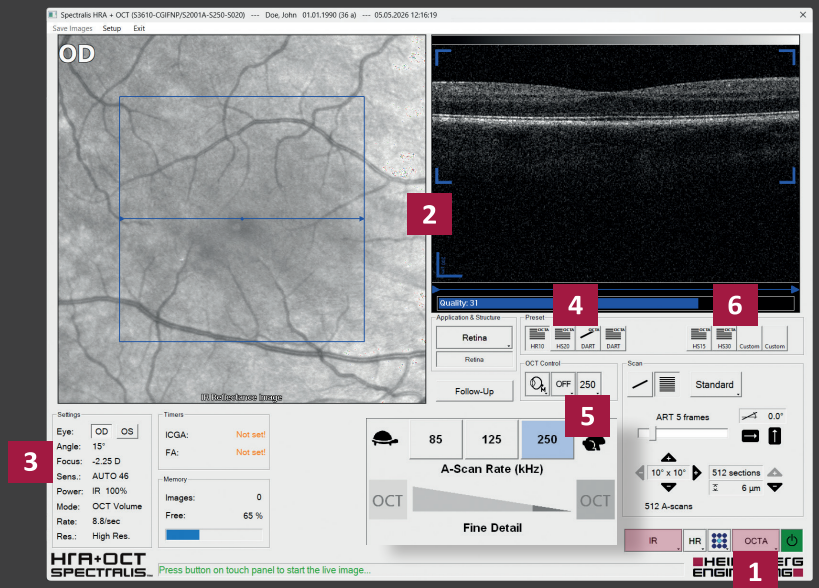
Quick Tutorial

SPECTRALIS® Image Acquisition: OCTA

Preparing for Image Acquisition

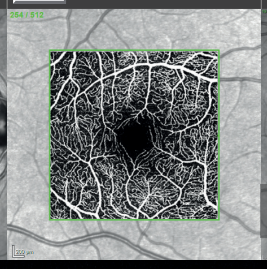
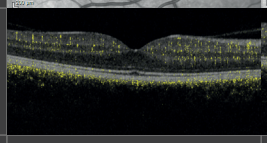
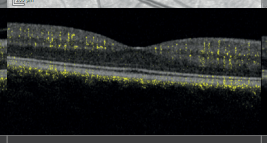
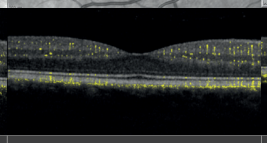
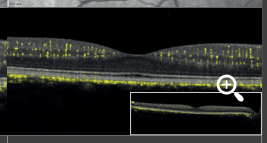


1 Start the examination via ⏻ and select the **OCTA** modality on the touch panel or the **IR** and **OCTA** modalities in the software.

2 Center the retinal reflex in the IR image and move the camera towards the patient's eye until the IR image is evenly illuminated and the OCT image is aligned in the Sweet Spot.

3 Adjust the focus of the IR image by turning the focus knob until the parafoveal vessels or the area of interest are sharp.

4 Select the desired scan pattern in the **Retina** application:

OCTA type	Standard		DART (Dense ART)	
Scan pattern	HS20 **20x20°** ~6x6 mm 512 section images | ART 5	HR10 **10x10°** ~3x3 mm 512 section images | ART 5	DART **10x0.5°** ~3x0.15 mm 25 section images | ART 28	DART **30°** ~9 mm 1 section image | ART 100
Transverse OCTA image "Enface" OCTA			No transverse OCTA image available	No transverse OCTA image available
OCT/OCTA fusion image 60% Struct. + 100% OCTA				
Scan speed	**250** | 125 | 85 kHz	**250** | 125 | 85 kHz	**125** | 85 kHz	**125** | 85 kHz
Use case	Standard → Specific			
	Routine evaluation of the retinal vasculature	Detailed visualization of the vascular architecture and in case of small lesions, e.g., in nAMD, CSCR, and MacTel	Detailed visualization of RPE detachments, including SIRE and drusen, to rule out MNV and in case of focal lesions such as PVAC or type 3 MNV	Detailed visualization of RPE detachments, including SIRE and drusen, to rule out MNV

5 Ensure that the Q value is the highest. If the Q value falls below Quality: 22, reduce the scan speed by clicking 250 or 125 and selecting the next lower setting (125 or 85 , respectively).

6 To save customized scan patterns, set the desired parameters, then click and hold Custom until the **Save Preset** box is displayed. Enter a name and click **OK**. The following customized scan patterns may be used:

Fast OCTA scan: HS15 IR 20° | 15x15° | HS | ART 5 | 125 kHz or higher

Wide OCTA scan: HS30 IR 30° | 30x15° | HS | ART 5 | 125 kHz (e.g., for detecting capillary non-perfusion)

Acquiring Images

1 To reposition a scan pattern, activate the eye tracking with a long press of the joystick button or by pressing on the touch panel, then drag and drop the scan to the fovea or area of interest.

2 Acquire an OCTA scan with a short press of the joystick button or by pressing **Acquire** on the touch panel. The image acquisition stops automatically when all OCT images have been acquired.

i Pressing **Acquire** measures the quality of the cSLO image and sets it as the reference for the color-coded quality bar in the live image.

i If you have acquired images without saving them for an extended period, click **Save Images** to free up memory and help prevent data loss due to PC or hardware issues.

3 During the examination, ensure that the live image shows even IR illumination and correct OCT section orientation. The color-coded quality bar should remain green throughout the image acquisition.

Keep your hands on the device. Readjust the camera, if necessary, until all images have been acquired.

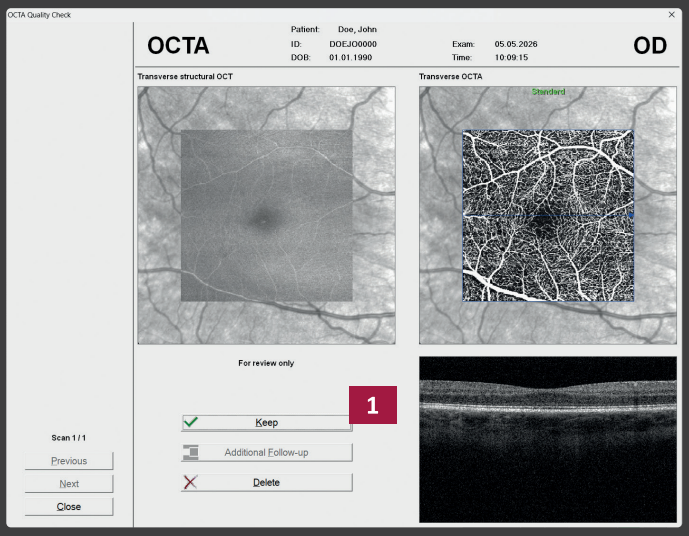
Checking OCTA Image Quality

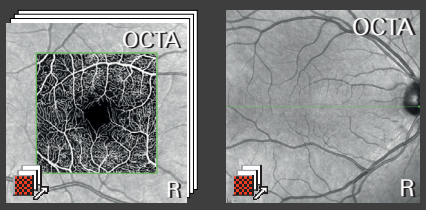
1 After the acquisition, the quality check panel (QCP) opens automatically if enabled. Click **Keep** or **Delete** to keep or delete the image.

i If the acquired scan is a follow-up image within a progression series, the **Additional Follow-up** button becomes active. Click it to reacquire the image.

2 The QCP closes automatically after keeping/deleting the latest image. Press Esc to exit the acquisition module.

i After the acquisition, OCTA scans are identified by the **OCTA** label in the upper-right corner of the thumbnail.





3 To start a progression series, the baseline image must be defined as reference before acquiring the follow-up image. Right-click the desired image thumbnail, select **Progression** and **Set Reference**.
The thumbnail is marked with .