

RTVue Quick Guide

Capturing Scans

1. Select existing or create a New Patient
2. Create a new visit (or Add New Visit with right click)
3. Click the **Examine** tab
4. Select desired scans from Retina, Glaucoma or Protocol Tabs
5. Select the eye to be scanned (or both)
6. Click **ADD**
7. In the Scan To-Do list, **Double click** the scan name **or** highlight and then **click** on the **SCAN** button at bottom center to start the scanning process
8. Align patient pupil center with center of scan pattern and move “through the pupil” visually in the IR fundus image
9. Adjust to get best fundus IR image (view of fundus from edge to edge – *there may be dark areas on either side when imaging the optic disc*). Hold scanner head in position
10. Adjust Z-motor to put the live scan in the target zone (between red lines) one of the following ways:
 - a. Double click in live OCT scan window (same as **Z Auto** button) will bring scan to the window)
OR (if the scan is partially visible in the window)
 - b. Click once in scan window and use mouse scroll wheel to bring scan to target area
11. Adjust scan pattern placement in the live IR image (if it is not where desired) by:
 - a. Double clicking the mouse cursor in the center of where you want the scan to be done (IR image) **OR**
 - b. Click and hold down on left mouse button with cursor on scan pattern, drag to desired location and release left mouse button
12. Adjust scan image quality (*see next section*)
13. Press the joystick button or click on the STOP button at bottom center – this is the capture function
14. Review OCT images
15. **Save** the scan
16. **Analyze** the results

Adjusting Scan Image Quality:

1. Use **Focus** slider to compensate for refractive condition of patient (scan should be stronger with correct adjustment).
2. Move scanner head in any X-Y direction using joystick (higher or lower on pupil or left or right) to get around partial opacity.
3. Use **P-Motor** to optimize the OCT image signal strength if there are cornea issues (i.e. ulcers, poor contact lens fitting, aged patients)

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RTVue Tips & Hints

Get a good fundus image first: When you get a good overall IR image of the fundus, you are in the **Correct Working Distance** range.

1. **Optic Disc scans:** you will get shadowing on the left and right of the fundus image resulting from the oblique entry through the pupil. This is normal.

AMD Patients: Use the External Fixation Target for the eye not being scanned and find a point (usually in their peripheral vision) where they can see the fixation target and stabilize the gaze with your desired target are in the IR fundus image.

1. You may need to move the scan pattern to the desired location in the IR image if not centered.
2. Use the **Z Motor** control to adjust to a shorter working distance
3. You may need to “roll the lid” or use a lid speculum

Cataract Patients: Media opacity will reduce the scan signal on any type of OCT

1. Move in as usual centered on the pupil.
2. Then using the joystick, move in the X-Z (up or down, left or right) direction within the pupil area to find a better path around the opacity (usually above or left of center of the pupil will get a better image). *During X-Y movement, look for higher color intensity/saturation (brighter).*

IOL Patients: IOLs present multiple reflections in the IR image.

1. Move forward past all reflections to get a clear fundus image. (Working distance is slightly closer on these patients, ~18mm).
2. NOTE: Depending upon the **type** of implanted lens, the reflections may not completely go away. In this case, get the best you can and focus on getting a good quality scan.

Weak Scan Result: Even with all parameters perfect, the patient is the limiting factor.

- a. Bleeding in the vitreous (for the whatever reason) will degrade the signal. The blood absorbs the scan reducing the potential signal. Move around in the pupil (as with a cataract) to see if there is a clearer path.
- b. Cornea issues (abrasions, ulcers, aging, etc.) will impede the signal. Use the “**P-Motor**” to try and counter the change in polarization caused by the issue.