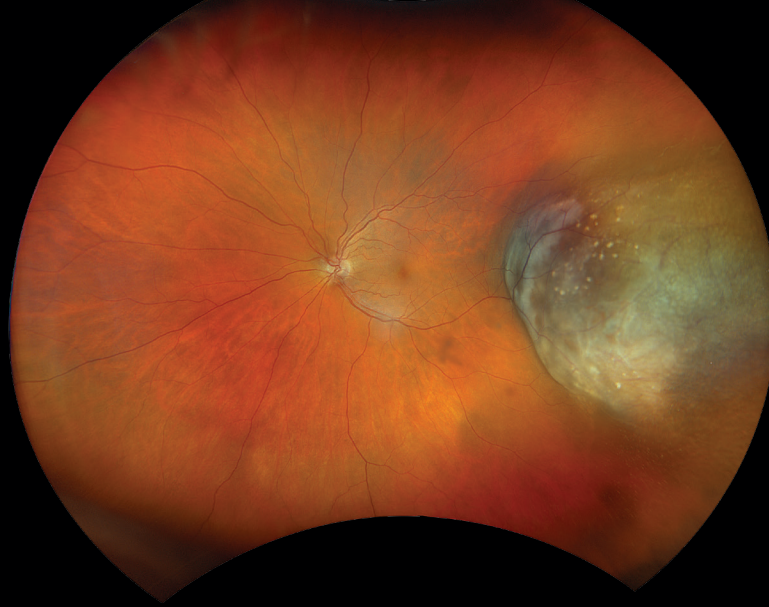


IMPROVES OCULAR ONCOLOGY CARE



optomap color rgb

optomap is more informative than clinical examination and traditional color fundus photography (CFP) in the diagnosis and management of ocular oncology.¹

- **optomap** correlates highly with clinical estimation and ultrasonography supporting accurate staging, treatment planning and follow-up of basal tumor dimension.^{2,3}
- **optomap** is more cost-effective and widely available than MRI for direct visualization of choroidal tumors.⁴
- **optomap** Sensory Retina (red-free) may be used to rapidly approximate tumor thickness, replacing the use of B-scan ultrasonography and optimizing the triage of melanocytic choroidal lesions.⁵
- **optomap** provides more information than traditional CFP, enhancing the detection and diagnosis of primary vitreoretinal lymphoma (PVRL) to reduce mortality risk.²
- **optomap** 3D wrap has been shown to accurately represent the geometry of a customized eye model within 0.2mm, which significantly supports surgical treatment of melanomas by realistically replicating relative tumor positioning and providing a baseline for post-treatment follow-up.^{6,7}

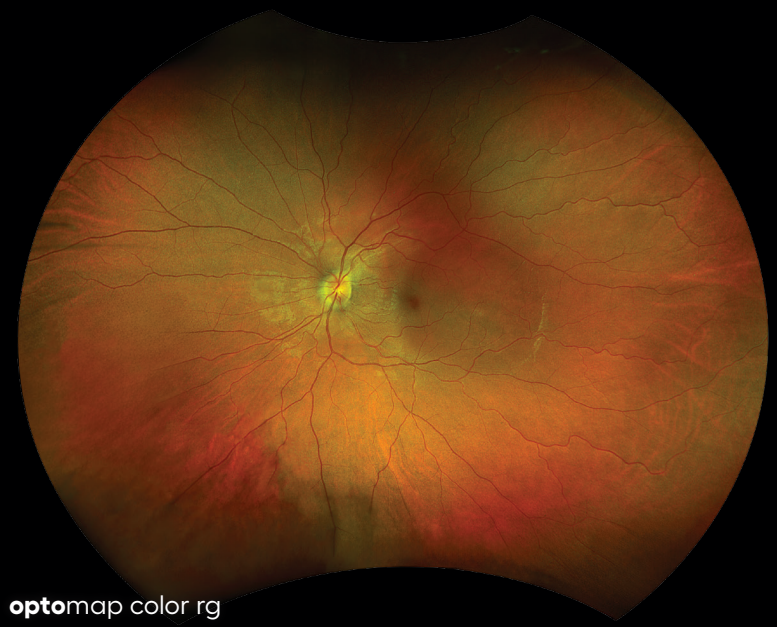
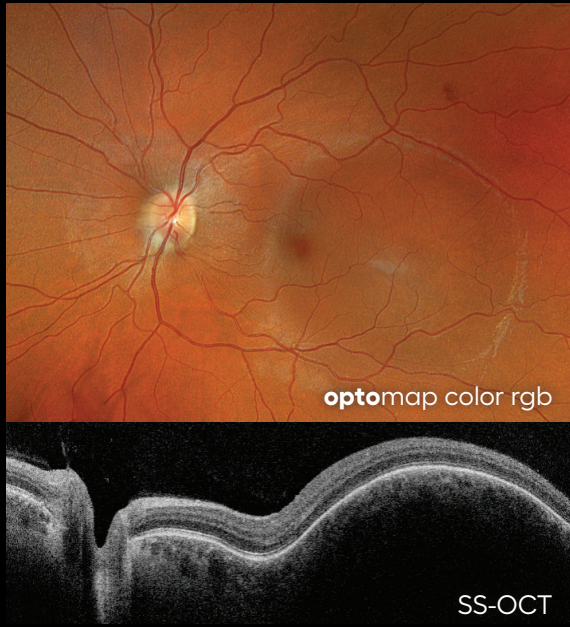
“With [ultra] widefield FA, smaller peripheral lesions that may not be visible on routine exams or fundus photography may be found sooner, allowing for earlier, less-invasive treatment with laser photocoagulation, which has minimal side effects and may halt progression of the lesions before vision loss occurs.”

— *Ophthalmic Surgery, Lasers and Retina Imaging, 2019*



See how **optomap** will help you manage your patients.
For more information scan the QR code on the back.

CLINICAL SUMMARY



Multimodal imaging demonstrating a choroidal hemangioma.

- **optomap** multimodal imaging detects abnormal findings in 100% of eyes and more abnormalities in 47% of eyes, such as vitritis, subretinal lesions, optic nerve head edema and retinal detachment, compared to traditional CFP in patients with PVRL.²
- **optomap** fa captures more findings in 61% of eyes than traditional fluorescein angiography (FA) including peripheral vascular leakage, sub-RPE lesions and window defects.²
- 45% of eyes with Von Hippel Landau disease (VHL) have findings on **optomap** not observed on clinical exam with 88% of lesions located outside 7SF.⁸
- **optomap** fa is superior to traditional CFP in identifying 61.8% of retinal lesions including small, peripheral lesions in patients with VHL allowing for earlier detection and less invasive treatment to mitigate risk of vision loss.⁹
- **optomap** fa enables the differentiation of retinal hemangioblastomas from diabetic retinal hemorrhages, allows for direct comparison of lesions overtime and provides secondary measures of activity such as leakage, progressive growth and neovascularization.⁸
- 91.7% of patients with VHL had bilateral involvement seen on **optomap** fa demonstrating the benefits of **optomap** over clinical exam alone.¹¹
- **optomap** icg has shown novel findings suggestive of choroidal infiltration in large B-cell lymphoma.¹⁰
- **optomap** guided SS-OCT perfectly agrees with ultrasonography to effectively assess choroidal nevi progression and refine risk of melanocytic transformation.¹¹

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