

UWF Primary

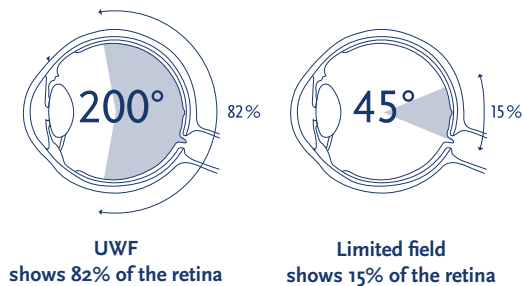


RETINAL IMAGING WITH REMOTE IMAGE REVIEW AND MANAGEMENT

UWF Primary is the ideal choice for retinal telehealth imaging. The ultra-widefield (UWF™) technology documents 82% of the retina in a single image helping doctors evaluate eye disease, including diabetic retinopathy, earlier when treatment is potentially the most effective.¹

UWF technology has been proven superior to limited field fundus cameras for identifying pathology and decreasing ungradable images, and was preferred by operators in large telemedicine screening programs.^{2,3} It is a clinically validated, economical tool for health professionals interested in the early detection of eye disease.⁴

UWF Primary shows more of the retina in a single capture than other telehealth options.



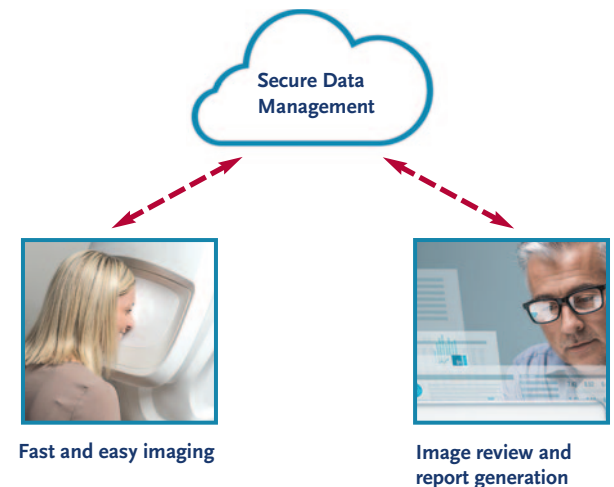
UWF Primary



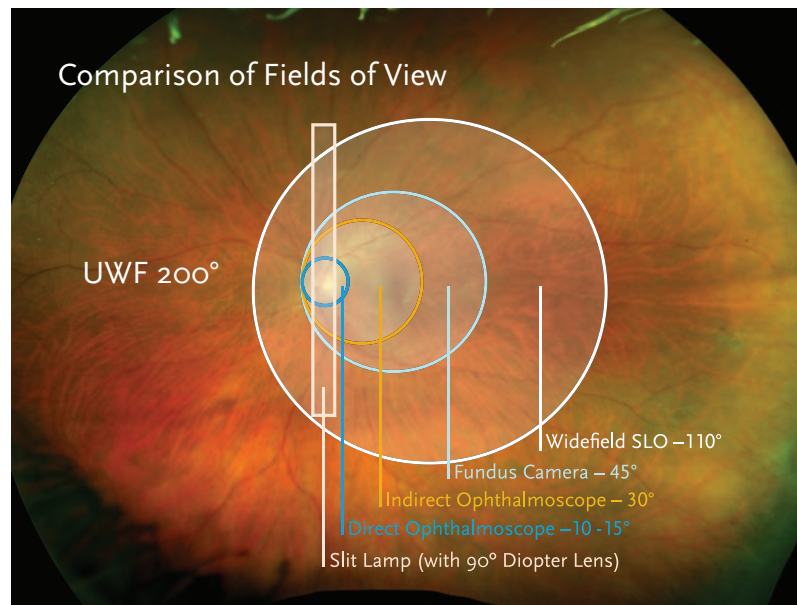
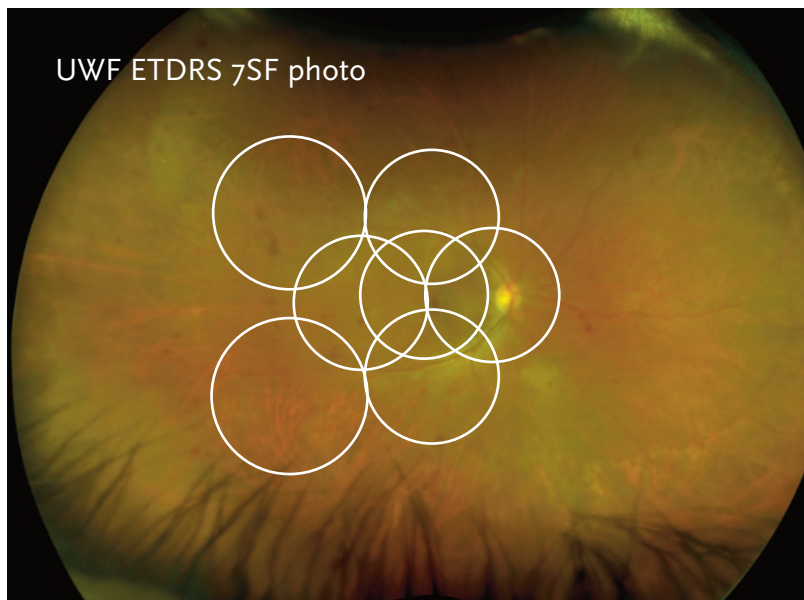
FEATURES AND BENEFITS

- **Fast** – image capture in less than ½ second (faster than limited field fundus cameras) keeps clinic moving.⁵
- **Easy** – existing staff can easily learn to operate the system and oversee imaging.
- **Outstanding diagnostic power** – high resolution, 200° images can improve pathology detection and may decrease the number of ungradable images.^{2,3}
- **Clinically efficient** – no dilation needed (2 mm pupil); images through most cataracts.
- **Reliable access** – interfaces directly with most EMR systems for seamless data management.
- **HIPAA compliant** – safe, quick, confidential image storage and transfer.
- **Economical** – can help raise quality scores and patient satisfaction.

UWF Primary is the ideal imaging tool for clinicians managing eye health of diabetic patients. ⁴



SETTING THE NEW STANDARD FOR MANAGEMENT OF EYE DISEASE INCLUDING DIABETIC RETINOPATHY ^{6,7}



Ultra-widefield images are important in diabetes

- Patients with predominantly peripheral lesions have been shown to have a higher potential of progression.¹
- Seeing more area of the retina may result in earlier treatment and better outcomes.⁸
- UWF images can help doctors identify "substantially more" diabetic pathology.⁹

Camera options for Retinal Imaging

	ULTRA-WIDEFIELD	LIMITED FIELD
Maximum field of view*	200°	30-150°
Amount of retina shown*	82%	15-60%
Image past vortex ampullae/equator*	YES	NO
Time Needed for 200° image	< ½ sec	>5-30min**

* In a single capture **Estimated for capture and montage

1) Peripheral Lesions Identified on Ultrawide Field Imaging Predict Increased Risk of Diabetic Retinopathy Progression over 4 Years; Paolo S. Silva MD, Jerry D. Cavallerano OD PhD, Nour Maya N. Haddad MD, Hanna Kwak BS, Kelli H. Dyer DO, Ahmed F. Omar MD, Hasanain Shikar MD, Lloyd M. Aiello MD, Jennifer K. Sun MD MPH, Lloyd Paul Aiello MD PhD; Ophthalmology 2015. 2) Identification of Diabetic Retinopathy and Ungradable Image rate with Ultrawide Field Imaging in a National Teleophthalmology Program; Paolo S Silva MD, Mark B Horton OD, MD, Dawn Clary OD, Drew G. Lewis BA, Jennifer K. Sun MD MPH, Jerry D. Cavallerano OD PhD, Lloyd Paul Aiello MD PhD; Ophthalmology, March 2016. 3) Potential Efficiency Benefits of Nonmydriatic Ultrawide Field Retinal Imaging in an Ocular Telehealth Diabetic Retinopathy Program; Paolo S. Silva, Jerry D. Cavallerano, Dorothy Tolls, Ahmed Omar, Komal Thakore, Bina Patel, Mina Sehzadeh, Ann M. Tolson, Jennifer K. Sun, Lloyd M. Aiello, Lloyd Paul Aiello; Diabetes Care, January 2014. 4) Nonmydriatic Ultrawide Field Retinal Imaging Compared with Dilated Standard 7-Field 35-mm Photography and Retinal Specialist Examination for Evaluation of Diabetic Retinopathy; Paolo S Silva, Jerry D Cavallerano, Jeffifer K Sun, Jason Noble, Lloyd M Aqiello, Lloyd Paul Aiello; AJO 2012. 5) The Impact of Ultra-wide-field Retinal Imaging on Practice Efficiency; Paul E Tomambe MD; US Ophthalmic Review, March 2017. 6) The Future of Ultrawide Field Imaging for Diabetic Retinopathy Pondering the Retinal Periphery; Lloyd Paul Aiello MD PhD, Jennifer Sun MD MPH; JAMA Ophthalmology, on-line December 2015. 7) Comparison of Diabetic Retinopathy Severity Grading by ETDRS and Ultrawide field imaging; Aiello; Presented at AAO, Nov 2017. 8) Long-term outcomes of ranibizumab therapy for diabetic macular edema: The 36-month results from two phase III trials (RISE and RIDE); Brown DM, Nguyen QD, Marcus DM, et al; Ophthalmology, 2013. 9) Peripheral Lesions Identified by Mydriatic Ultrawide Field Imaging: Distribution and Potential Impact on Diabetic Retinopathy Severity; Paolo S. Silva MD; Jerry D. Cavallerano OD PhD; Jennifer K. Sun MD MPH; Ahmed Z. Soliman MD; Lloyd M. Aiello MD; Lloyd Paul Aiello MD PhD; Ophthalmology, 2013.

TECHNICAL SPECIFICATIONS

TRADE NAME	UWF Primary
MODEL NAME	P200T UWF-P
MODEL NUMBER	A10600 UWF-P
IMAGING MODALITIES	Color
RESOLUTION	20 µm
WAVELENGTHS	Red laser: 635 nm Green laser: 532 nm
EXPOSURE TIME	Less than 0.4 seconds
FOOTPRINT	Width: 424 mm/17 in Depth: 473 mm/19 in Height: 800 mm/32 in
WEIGHT	Max 28 kg/62 lbs
TABLE SPACE REQUIREMENTS (not including wheel position)	Width: 887 mm/35 in Depth: 600 mm/24 in
COLOR	White
LASER CLASS	Laser safety class-1 following EN60825-1 and 21 CFR1040.10 and 1040.11
SYSTEM VOLTAGE	100 - 240V, 50/60 Hz
POWER CONSUMPTION	300VA
COMMUNICATION PROTOCOL	DICOM Compatible



Ultra-widefield retinal imaging is a powerful tool in the fight against vision loss. More than 900 published studies show the value of ultra-widefield imaging in diagnosis, treatment planning, and patient engagement.

NOTE: Specifications are subject to change without notice.



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