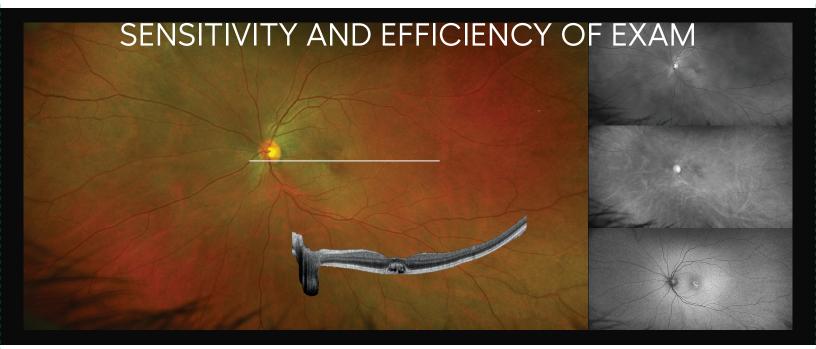
optomap®

REGISTERED OCT CAN INCREASE THE



Combining optomap with SD-OCT increases the identification of macular pathology when compared with fundus imaging alone by 29.4%¹ and supports the detection of glaucoma with high accuracy.²

- Monaco is the first retinal imaging device combining single capture 200° ultra-widefield (UWF™) with SD-OCT.
- Monaco can capture color and optomap af images along with posterior pole OCT scans of both eyes in as little as 90 seconds.
 Simultaneous optomap and OCT have been shown to benefit the evaluation and management of retinal pathologies.³
- Monaco includes a comprehensive reference database (RDB) which follows new best practice, state of the art guidelines for optic nerve head (ONH) size allowing for more accurate glaucoma predictions.
- Multi-modal imaging allows for the reduction of ungradables to less than 1% and of false positives by 58%.¹
- Adding SD-OCT to UWF imaging helps in identifying diabetic macular edema (DME) and epiretinal membrane (ERM), increasing sensitivity for central pole lesions compared with fundus imaging alone. A screening program that implemented *Monaco* found 14% were referrable for diabetic retinopathy (DR).¹
- Glaucomatous defects measured with Monaco correlate well with visual field results and Cirrus.^{4,5}
- Monaco ONH distribution reporting and measures correlate with Cirrus.⁵
- Monaco retinal thickness measurements strongly correlate with and are comparable to the Heidelberg Spectralis OCT.³

"Integrated system
[Monaco] provides quality
fundus photographs as
well as OCT, obviates the
need for two separate
instruments and likely
improves the clinic flow."³

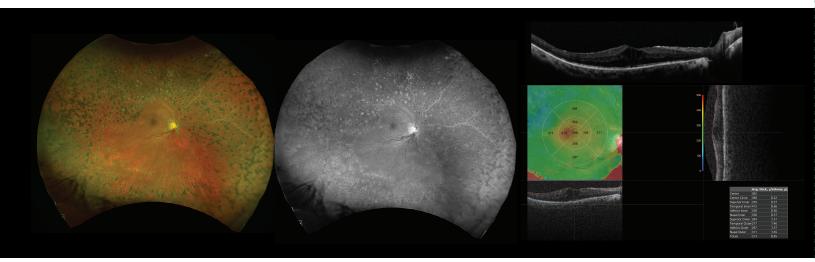
See how **opto**map will help you manage your patients. For more information call **800-854-3039** or **BDS@optos.com**.





CLINICAL SUMMARY

Additional details about the utility of Monaco



Proliferative Diabetic Retinopathy with DME previously treated with panretinal photocoagulation.

- Monaco combines optomap UWF technology with SD-OCT creating a fast, convenient, multi-modal imaging tool. Monaco can produce 200°, single-capture retinal images of unrivaled clarity and can display a six-image overview including color, af, and OCT of both eyes in as little as 90 seconds.
- The includes five scan types: Line Scan, Raster Scan, Retina Topography Scan, ONH Topography Scan, Retinal Nerve Fiber layer (RNFL) Scan.
- The comprehensive US cleared RDB included with Monaco is based on 879 subjects, without pathology, collected across 9 clinical sites. Subjects ranged from 22-84 years old (average age: 51 years old), 61.9% were female and ethnicities included were: 57% White, 16% Asian, 14% African American, 15% Hispanic.

- The RDB enables the results of OCT analysis to be shown in relation to 1%, 5%, 95% and 99% of the RDB population.
- Monaco follows new best practice, state of the art guidelines for ONH size which allows for more accurate glaucoma predictions. ONH Size Covariate: Small optic discs (disc area <1.76mm2 : 33%); Medium optic discs (disc area 1.76mm2 - 2.15mm2 : 37%); Large optic discs (disc area >2.15mm2 : 30%).

1. Aiello. Integrating Macular Optical Coherence Tomography with Ultrawide Field Imaging in a Diabetic Retinopathy Telemedicine Program Using a Single Device. Retina. 2023. 2. Chaglasian. Accuracy of Glaucoma Detection with a Novel Imaging Device: Combined UWF-SLO and SD-OCT. ARVO 2024. 3. Chalam. Baseline retinal thickness measurements with a novel integrated imaging system (concurrent optical coherence tomography and fundus photography) positively correlates with spectralic soptical coherence tomography. Quant Imaging Med Surg 2021;2(1):477-424. 4. E. Sinai. Structure and Function Relationship in Glaucoma with a Novel Multi- Modal Imaging Device Combining UWF-SLO and SD-OCT. ARVO 2024. 5. A. Speilburg. The Normal Distribution of Disc Area on a Combined UWF-SLO + SD-OCT device with Comparison to SD-OCT. ARVO 2024.





^{*}There are regionally approved databases which vary in number, composition and presentation state.