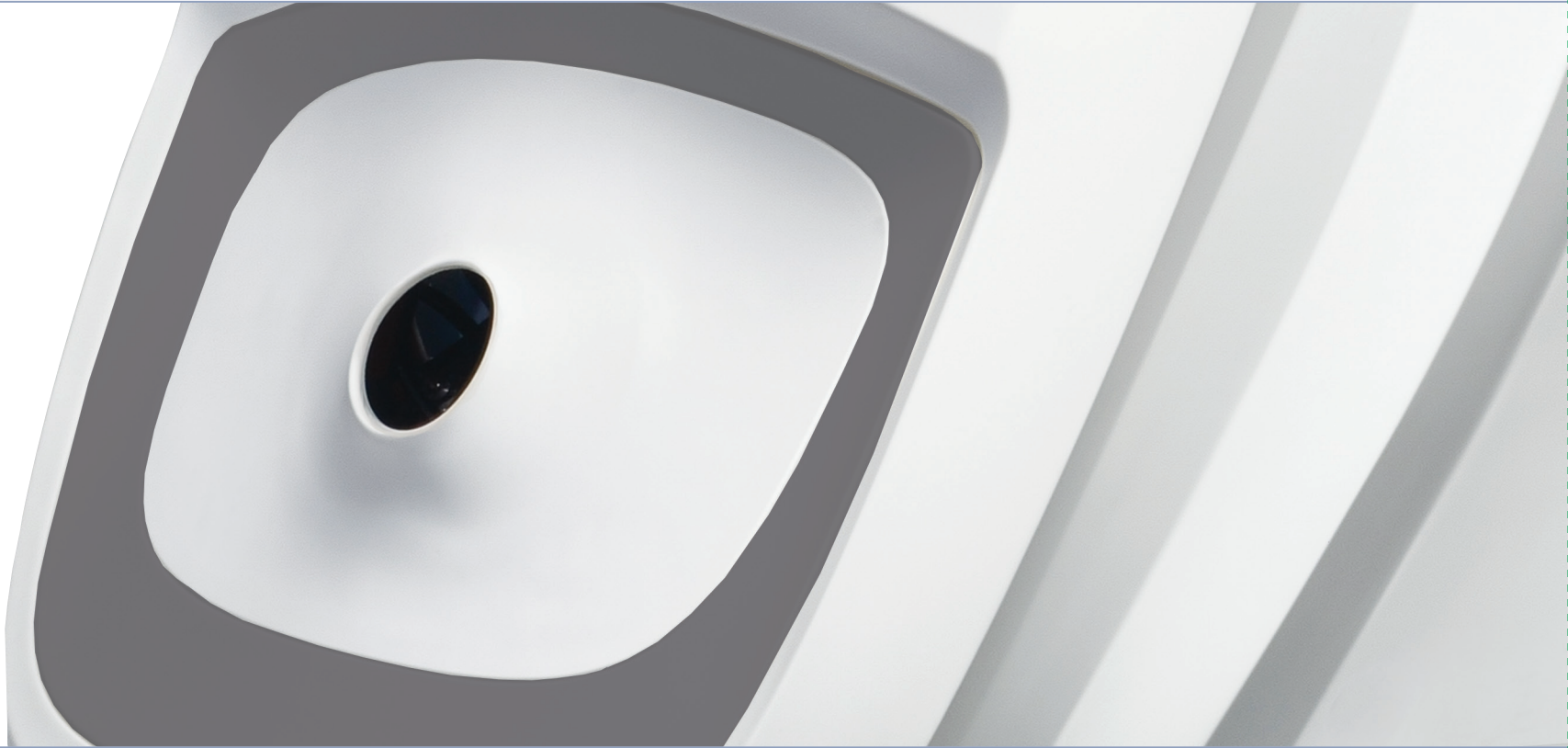
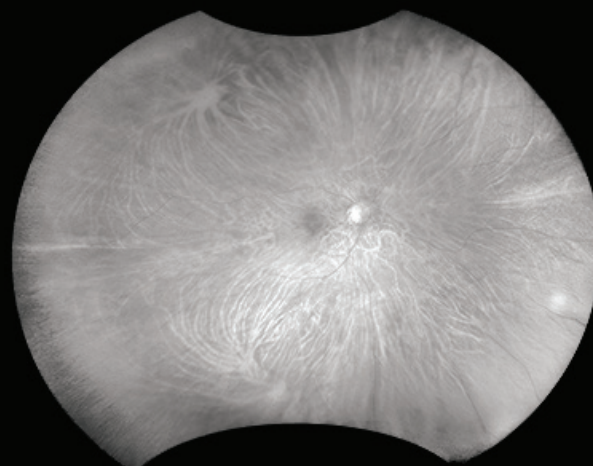


UWF Primary



Only Optos captures three 200° ultra-widefield (UWF™) images in a single shot - a capability unmatched by any other retinal imaging solution.

Clinically validated for more comprehensive disease detection,¹ Optos UWF Primary is the ideal solution for fast, high-quality remote retinal assessments. Proven superior to limited field fundus cameras for supporting detection of pathology,^{2,3} reducing ungradable images,³ and streamlining workflow by imaging through a 2mm pupil and up to 3+ cataracts.⁴



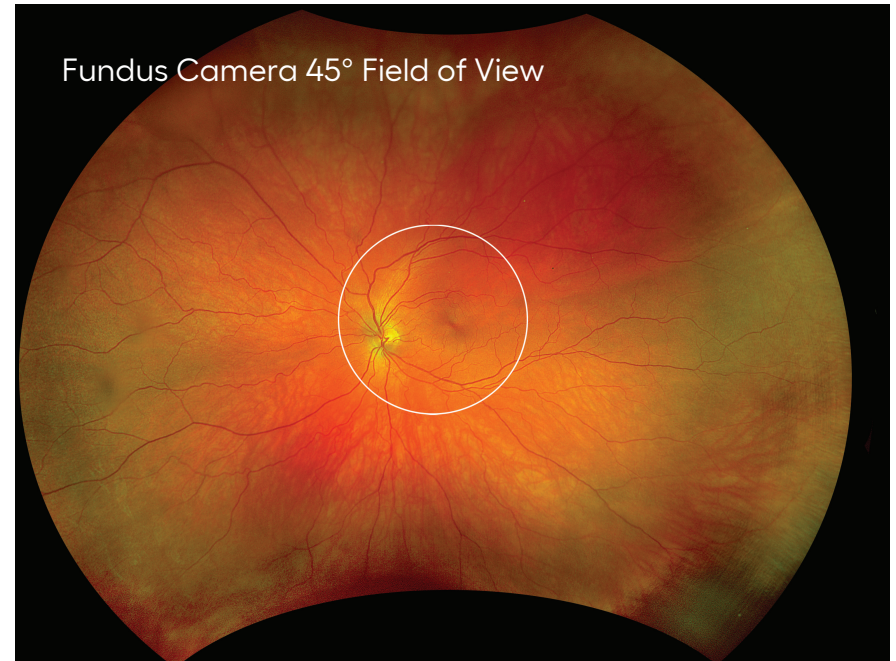
optomap *Sensory Retina*

optomap *Choroidal*

optomap *color rg*

Clinically Validated Superior Imaging

Thousands of published studies confirm that the expanded field of view and ease of use of ultra-widefield imaging enhance diagnosis, improve treatment planning, and boost patient engagement.



Clinical Highlights:

- Single shot UWF technology has been proven superior to limited field fundus cameras for identifying pathology and decreasing ungradable images.^{2,3}
- UWF was preferred by operators in large telemedicine screening programs.^{2,3}
- It is a clinically validated, economical tool for health professionals interested in the detection of eye disease.⁵
- Ultra-widefield sets the new standard for management of eye disease including diabetic retinopathy.^{6,7}
- UWF images can help doctors identify “substantially more” diabetic pathology.⁸
- Ultra-widefield imaging increased compliance rate.⁹
- Seeing more area of the retina may result in earlier treatment and better outcomes.¹⁰
- Patients with predominantly peripheral lesions have been shown to have a higher potential of progression.¹

Technical features

- Ultra-fast image capture in under 0.5 seconds-significantly faster than traditional limited-field fundus cameras.³
- No dilation required; captures high-quality images through pupils as small as 2 mm and up to 3+ cataracts.⁴
- DICOM-native architecture enables seamless integration with imaging and diagnostic systems.
- Cloud-native design supports fast, secure data transfer between capture sites and reading locations-whether for human review or AI analysis.
- Direct integration with most EMR platforms ensures streamlined data management.
- Fully HIPAA-compliant for secure, confidential image storage and transmission.
- Clinically proven to improve quality metrics in screening programs utilizing ultra-widefield imaging.
- End-to-end secure data management-from image acquisition to review and report generation.

Technical specifications

| | |
|---|---|
| TRADE NAME | P200T UWF Primary |
| MODEL NAME | P200T UWF-P |
| PART NUMBER | A10600 |
| IMAGING MODALITIES | Color |
| RESOLUTION | 14 µm, 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 |

NOTE: Specifications are subject to change without notice.

1) Silva, P. S., et al. Peripheral Lesions Identified on Ultrawide Field Imaging Predict Increased Risk of Diabetic Retinopathy Progression over 4 Years; Ophthalmology, 2015. 2) Silva, P. S., et al. Identification of Diabetic Retinopathy and Ungradable Image rate with Ultrawide Field Imaging in a National Teleophthalmology Program; Ophthalmology, 2016. 3) Silva, P. S., et al. Potential Efficiency Benefits of Nonmydriatic Ultrawide Field Retinal Imaging in an Ocular Telehealth Diabetic Retinopathy Program; Diabetes Care, 2014. 4) Friberg. Advances in retinal imaging of eyes with hazy media: Further Studies. ARVO 201. 5) Silva, P. S., et al. Nonmydriatic Ultrawide Field Retinal Imaging Compared with Dilated Standard 7-Field 35-mm Photography and Retinal Specialist Examination for Evaluation of Diabetic Retinopathy; American Journal Ophthalmology, 2012. 6) Aiello, L. P., Sun, J. The Future of Ultrawide Field Imaging for Diabetic Retinopathy Pondering the Retinal Periphery; JAMA Ophthalmology, 2015. 7) Aiello, L. P., Comparison of Diabetic Retinopathy Severity Grading by ETDRS and Ultrawide field imaging; Presented at AAO, 2017. 8) Silva, P. S., et al. Peripheral Lesions Identified by Mydriatic Ultrawide Field Imaging: Distribution and Potential Impact on Diabetic Retinopathy Severity; Ophthalmology, 2013. 9) Silva, P. S., et al. Comparison of Nondiabetic Retinal Findings Identified With Nonmydriatic Fundus Photography vs Ultrawide Field Imaging in an Ocular Telehealth Program. JAMA Ophthalmology, 2016. 10) Brown, D. M., et al. Long-term outcomes of ranibizumab therapy for diabetic macular edema: The 36-month results from two phase III trials (RISE and RIDE); Ophthalmology, 2013.



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