Optical Coherence Tomographer-Certified

Spectral Domain Specific Portfolio Requirements

Version 2.0b 2016

Effective Date September 13, 2016

If the date on this Program Guide is more than six months old, please check the OPS website (opsweb.org) to make sure you have the most current version.

Copyright 2016 The Ophthalmic Photographers’ Society, Inc. All rights reserved.
Appendix B

Spectral Domain OCT Portfolio Requirements

The portfolio must be produced entirely by the applicant. These requirements are broad-based and can be applied to any SD OCT device. If you have questions about your particular device please first refer to the device-specific user manual and if needed please contact the OCT-C Section Chair and they will direct you to someone that can help with your question.

The portfolio submission form must be completed and submitted along with the portfolio. By signing the portfolio submission form, the applicant attests to the authenticity of the work submitted. Submission of work completed by anyone other than the applicant constitutes fraud. Fraud or misrepresentation of the portfolio may result in disqualification of the applicant.

All item submissions must be saved in a format that includes relevant imaging data. Submissions that do not display this information will not be accepted.

Label all files with your last name as a prefix to the item#. For example, the submission set for item # 7 should be labeled: “your last name” 7a (SMITH 7a). Complete naming and labeling conventions can be found on page 6 of the OCT-C Program Guide.

Normal eye can be used when pathology is not specified in the item description. If applicable, the same eye may be imaged for multiple items.

1. Submit a serial set of two macular map analyses of one eye without macular pathology and a normal foveal contour. The scans must be performed on the same day of the same eye with a minimum of 5 minutes and a maximum of 8 hours between scans (make a note of the time). The central foveal thickness value for each map must be within 10% of each other.
   a. Submit the map analyses for both scans
      i. Label first map: 1A
      ii. Label second map: 1B + the length of time between scans (EX: 1B5 for +5 minutes or 1B1HR for +1 hour)

2. Submit a serial set of two macular map analyses of one eye with a central foveal thickness of 350 microns or more. The scans must be performed on the same day of the same eye with a minimum of 5 minutes and a maximum of 8 hours between scans (make a note of the time). The central foveal thickness value for each map must be within 10% of each other.
   a. Submit the map analyses for both scans
i. Label first map: 2A
ii. Label second map: 2B + the length of time between scans (EX: 2B5 for +5 minutes or 2B1HR for +1 hour

3. Acquire one macula and one RNFL mapping scan group through an un-dilated or minimally dilated pupil. Pupil size should be less than 4 mm. Both scans must be acquired on the same eye. Signal strength needs to be 50% or greater as displayed by your device’s scan quality value.
   a. Submit one retinal map and one RNFL analysis map for each scan
      i. Label retinal map: 3A
      ii. Label RNFL map: 3B

4. Acquire one high resolution line scan through some type of media opacity (i.e. cataract, vitreous hemorrhage, etc.) of an eye with macular or foveal pathology. Scan should illustrate the compromised scan quality from the opacity.
   a. Submit one individual scan for portfolio
      i. Label: 4A

5. On the same eye used in item # 4, acquire a high resolution line scan around the media opacity. Scan angle or positioning within the pupil should be adjusted to minimize scan degradation and be able to illustrate improved visibility of pathology and retinal layers
   a. Submit one individual scan for portfolio
      i. Label: 5A

6. Acquire one high resolution line scan at 90 degrees
   a. Submit one individual scan for portfolio
      i. Label: 6A

7. Acquire one high resolution line scan horizontally at the default scan length setting possible for your device.
   a. Submit one individual scan for portfolio
      i. Label: 7A

8. Acquire one high resolution line scan centered on the fovea in the right eye at the longest scan length setting for your device. Change the axis of the scan by 5 degrees and scan the eye from temporal to nasal.
   a. Submit one individual scan for portfolio
      i. Label: 8A

9. Using any line scan, provide a measurement of any retinal pathology using the caliper or measurement function provided by your specific device. Caliper or measured value must be displayed on the submitted scan or image.
   a. Submit one individual scan for portfolio
      i. Label: 9A

10. Submit the specified scan and analysis for four out of the five conditions below. You only need submissions for one eye for each condition.
    a. Cystoid Macular Edema
       i. Macular thickness analysis or map
          1. Label: 10A1
       ii. Perform and submit one individual high resolution horizontal line scan
1. Label: 10A2

b. Macular Hole/Macular Traction/Epi-Retinal Membrane
   i. Perform and submit one individual high resolution horizontal line scan
      1. Label: 10B1
   ii. Perform and submit one individual high resolution vertical line scan
      1. Label: 10B2

c. Glaucoma
   i. RNFL scan with report/analysis
      1. Label: 10C1
   ii. Perform and submit one individual high resolution horizontal line scan of the optic nerve head. Scan should section the nerve at 3:00 and 9:00
      1. Label: 10C2

d. Retinal Pigment Epithelial Detachment
   i. Perform and submit one individual high resolution horizontal line scan sectioned through the pathology
      1. Label: 10D1
   ii. Perform and submit one individual high resolution line scan of the same eye, through approximately the same section of pathology as in Di, using enhanced depth imaging (EDI)
      2. Label: 10D2

e. Age Related Macular Degeneration
   i. Macular thickness map centered on the macula. Pathology must be within the scanned area (i.e. macula)
      1. Label: 10E1
   ii. Perform and submit one individual high resolution horizontal or vertical line scan sectioned through the pathology
      1. Label: 10E2