

INSTRUCTIONS FOR EYEDOC OCT and RETINAL PHOTOGRAPHY FORM (ORP)



## I. General Instructions

The OCT and retinal photography form is designed to record axial length, track pupillary response to dilation, record whether study staff were able to obtain images and whether study staff were satisfied with the quality of images obtained.

Every participant should have their axial length measured twice in both eyes. The DCC will provide field centers with the selection of eyes to undergo retinal imaging (right/left/both), as well as whether this participant was selected to have their retinal images sent twice to the reading center.

## II. Detailed Instructions for Each Item

The ORP is organized into two sections:

**A:** First Eye Imaging. Refer to MOP for instructions on how to use the retinal photography and OCT machines.

- Record whether the right or left eye was selected for imaging first. For those NOT selected for both eye imaging, this will correspond to the study eye determined by the participant's ID, as detailed in form EOH and EOH\_QxQ instructions. For those who ARE SELECTED for both eye imaging (refer to the EyeDOC scheduling report and pre-populated field Q4 in EOH) image the eye with greater dilation first, and the other eye second. Mark the eye selection on the ORP form.
- 2. Measure the pupillary diameter of this eye prior to taking retinal image. If the participant was dilated, study staff should allow at least 20 minutes after placing dilating drops in the participant's eye before taking the image. Record pupil size to the nearest millimeter (mm) using a handheld chart for comparison.
- 3. Attempt to take a retinal photograph, up to 5 attempts to take an image can be made, though fewer attempts may be considered if the participant is tiring, refuses further attempts, or has issues (i.e. arthritis) which prevent proper positioning in the machine. Study staff should record whether they were satisfied with the quality of the <u>best</u> image obtained, or if they had a reservation. If an image is unable to be obtained, mark this in item 5. There is space for study staff to record notes about the image obtained, for example, 'participant kept blinking' or 'participant moved'.
- 4a-f.Attempt to obtain OCT scans following the procedure in the MOP, up to 5 attempts to take each individual scan can be made at the study staff's discretion. Study staff should record whether they were satisfied with quality of the <u>best</u> individual scan obtained, or if they had a reservation. If an individual scan is unable to be obtained, mark this in item 5. There is space for study staff to record notes about the scan obtained, for example, 'participant kept blinking' or 'participant moved'.

## B: Second Eye Imaging – To be completed only for those selected for both eye imaging

- 5. Record whether the right or left eye was selected for imaging second. For many patients, the second eye will not be imaged. When the second eye is imaged, it will be the opposite eye as that imaged first.
- 6. Measure the pupillary diameter of this eye prior to taking retinal image. If the participant was dilated, study staff should allow at least 20 minutes after placing dilating drops in the participant's eye before taking the image. Record pupil size to the nearest millimeter (mm) using a handheld chart for comparison.
- 7. Attempt to take a retinal photograph, up to 5 attempts to take an image can be made. Study staff should record whether they were satisfied with the quality of the <u>best</u> image obtained, or if they had a reservation. If an image is unable to be obtained, mark this in item 5. There is space for study staff to record notes about the image obtained, for example, 'participant kept blinking' or 'participant moved'.
- 8a-f.Attempt to obtain OCT scans following the procedure in the MOP, up to 5 attempts to take each individual scan can be made at the study staff's discretion. Study staff should record whether they were satisfied with quality of the <u>best</u> individual scan obtained, or if they had a reservation. If an individual scan is unable to be obtained, mark this in item 5. There is space for study staff to record notes about the scan obtained, for example, 'participant kept blinking' or 'participant moved'.
- 9. This field should be pre-populated based on whether or not this participant was selected to have the same study images sent twice to the OCT reading center for grading. If the field is blank, refer to the scheduling report for selection status and mark item 11 appropriate. The EyeDOC scheduling report will include a phantom ID to be used to label duplicate images. The phantom ID should be used in place of the ARIC participant ID only on the duplicate (2<sup>nd</sup> copy) set of images. If were selected for double grading, the images should be sent to the OCT reading center in Oregon at least 2 weeks apart.