# Maestro2

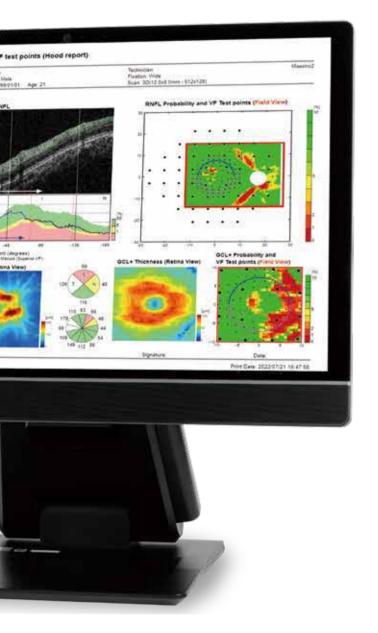
Optical Coherence Tomography
True Color Fundus Camera







Image more with just one touch of a button. Maestro2 provides OCT scans, true color\* fundus imaging and the Hood Report for Glaucoma.



With Maestro2 and IMAGEnet6 for OCT\*1, you have fast, multimodal OCT, fundus imaging and OCT Angiography (OCTA)\*2.

# A clinical workstation for any busy practice.





#### Maestro2

Introducing automated OCT, true color\* fundus photography and automated OCT Angiography in one compact instrument. With the touch of a button, OCTA provides you instantaneous vascular structure information - from our world-renowned, multimodal OCT solution.

#### Features:

- OCT and true color\* fundus photography
- Fully automated image capture
- Compact and space saving design
- 3D wide scan with Hood Report for Glaucoma
- Reference database comparison for full retinal thickness (Retina), ganglion cell + inner plexiform layer thickness (GCL+), ganglion cell complex thickness (GCL++), circumpapillary retinal nerve fibre layer thickness (RNFL)
- Automatic 3D layer segmentation
- Anterior segment OCT
- · Panoramic fundus imaging
- 3D volume view

#### **User-friendly**

A user-friendly OCT. The Maestro2 uses robotic technology and improves practice efficiency whilst providing optimal patient care.

#### **Fully Automated Capture**

With a single touch, the Maestro2 automatically performs alignment, focus, optimization and capture. After image capture, the report can be immediately displayed by clicking on the icon.

#### Manual/Semi-Automatic Capture

In addition to automated capture, the Maestro2 offers manual/semi-auto options for difficult-to-image patients.



# Auto Align. Auto Focus. Auto Capture.



Full 360° rotating monitor allows operator distance.

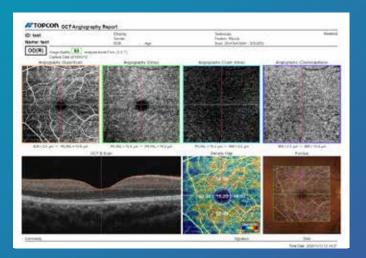


### Maestro2 - Now Featuring OCT Angiography

#### Introducing fully automated **OCT Angiography**\*1

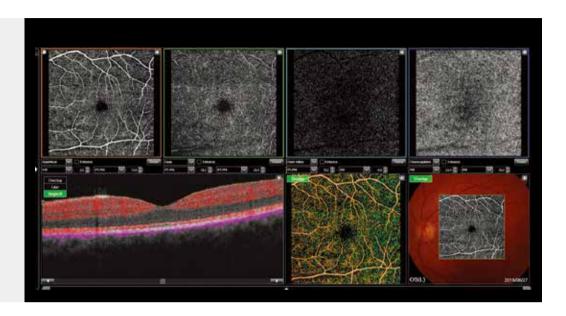
At the touch of a button, Maestro2 provides instantaneous vascular flow information without the need for contrast dye injection, together with comprehensive segmentation to enable advanced diagnosis. OCT Angiography includes OCTA Density.\*2

- \*1 OCTA is optional. Please check with the distributor in your country.
  \*2 The OCTA Density is defined as the ratio between the high signal area and low signal area and it is displayed in color and/or number.

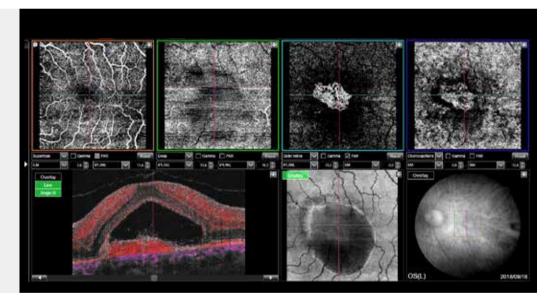




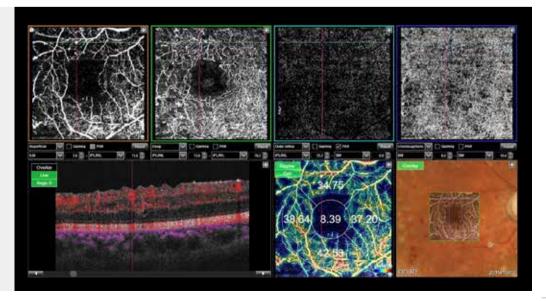
Healthy Eye\*1



Choroidal Neovascularization (CNV)\*2



Diabetic Retinopathy (DR) PinPoint™ Registration of  $microaneurysms^{*3}\\$ 

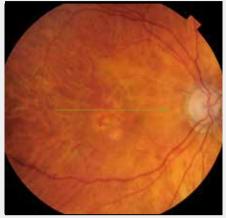


<sup>\*1</sup> Michael H. Chen, OD
\*2 Prof. Siamak Ansari Shahrezaei, MD PhD (Karl Landsteiner Institute for Retinal Research and Imaging)
\*3 Miho Nozaki, MD, PhD (Nagoya City University Hospital)

## Efficient Diagnostic Workflow

#### **Follow-Up Scans**

For smaller, more localized areas, tracking based on the reference image allows follow-up scans to be performed.



Tracking is used to capture exactly the same area at each visit and is available for single line, radial or 5 line cross scans.



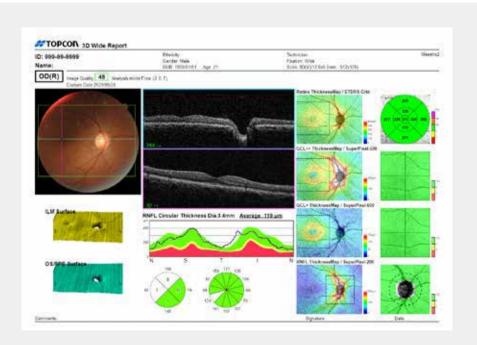
Baseline visit



Follow-up visit

#### Widefield OCT Scan

The Maestro2 can capture a 12mmx9mm widefield OCT scan, encompassing both the macula and optic disc. Ideal for an annual eye exam, the scan reduces patient testing time. It provides thickness and reference data for the retina, RNFL and ganglion cell layers together with a Glaucoma report which includes disc topography.

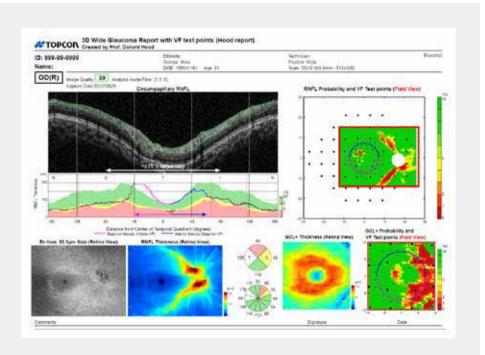


GCL+: The thickness of GCL and IPL

GCL++: The thickness of GCL, IPL and RNFL

#### Hood Report for Glaucoma with Probability Maps with 3D Wide 12x9mm Scan

Retinal Thickness/RNFL/GCL and probability maps, all in one report. The New Hood Glaucoma Report is now available. This innovative report streamlines the decision-making process through the correlation of structure (GCL/RNFL) with function (overlay of visual field test locations).\*

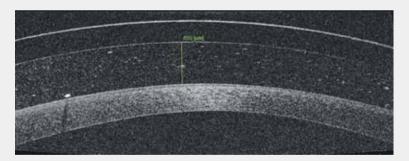


\*Donald C. Hood PhD, Translational Vision Science & Technology No.6 Vol.3 2014: Evaluation of a One-Page Report to Aid in Detecting Glaucomatous Damage.

# Anterior Segment Caliper/ Angle measurement

Maestro2 has the added advantage of Anterior Segment OCT scanning capability, without the need for an additional attachment lens. By simply adding the anterior headrest support, the Maestro2 is able to capture cornea and anterior chamber scans, together with the ability to measure corneal thickness, contact lens clearance and anterior segment angle using the integrated caliper tools.

\*In order to activate the anterior scanning function, Anterior segment attachment (HA-2) is needed to purchase.



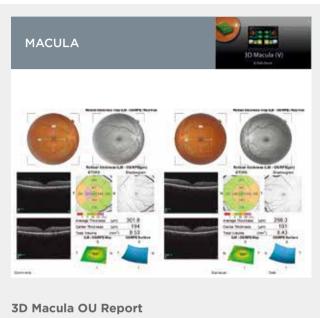


# Extensive Set of Reports: Guidance for Diagnosis

#### **Extensive Set Of Reports**

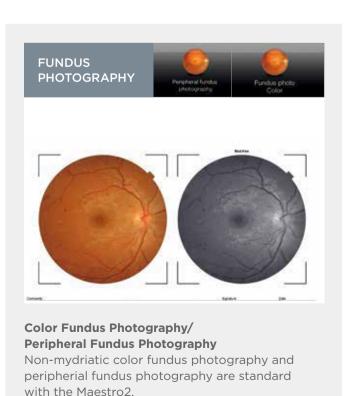
Maestro2 provides rich analysis functions for the macular and disc regions and optic nerve. Comprehensive, predefined reports can be auto exported, quickly printed or sent to your image management system or EHR in common file formats.





3D Macula report available for single or both eyes if OU comparison is preferred. Analysis over 6x6mm scan area including retinal thickness and reference data.





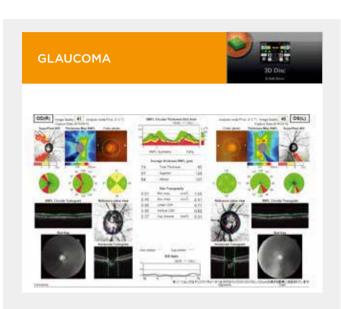
#### **Additional Glaucoma Related Reports**

The Hood Report is often the report of choice following capture of a 3D wide scan but a choice of reports are available.



#### 3D Wide Report (12mmx9mm)

This scan provides an image of the macula and optic nerve head in one report, providing thickness and reference data for GCL+, GCL++ and RNFL.



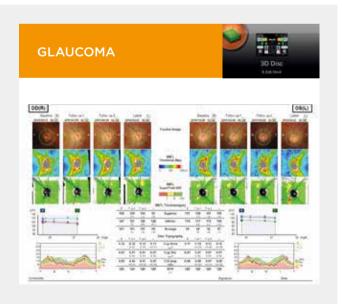
#### **3D Disc Report OU**

Combines disc topography, fundus photography and RNFL thickness measurements. The reference database for RNFL and disc parameters is also incorporated.



#### Glaucoma Analysis Report - Macula

Based on the 3D Macula Vertical scan, this report provides RNFL, GCL+ and GCL++ thickness maps, comparison with reference data and symmetry analysis.



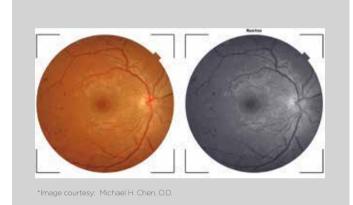
#### **3D Disc Trend Analysis Report OU**

Baseline and subsequent visits can be examined and analyzed over time. Trends are provided for disc parameters in addition to RNFL thickness, along with a reference database comparison.

# High Resolution OCT, Non-Mydriatic, and True Color Fundus Images

#### True Color Fundus Photography

Maestro2 has an integrated true color fundus camera. With one touch, you can simultaneously acquire a true color fundus image with your OCT or OCTA scan. This allows PinPoint™ Registration and multimodal observation of the pathology. Small pupil function is also available, as well as fundus only capture.



#### **Peripheral Fundus Photography**

Maestro2 allows the operator to automatically select 9 standard fields or manually manipulate the patient's fixation to create a mosaic image with the AutoMosaic software.

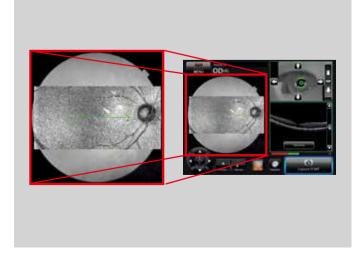




\*Image courtesy: Michael H. Chen, O.D.

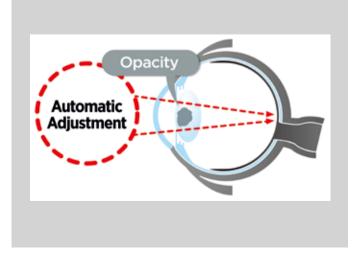
#### **Live Fundus View™**

OCT-LFV is a live projection image of the retina. The live fundus image makes the disc, retinal vessels and scanning position easy to see.



#### **Cataract Mode**

Cataract mode automatically adjusts the scanning position to minimise the impact of any opacity such as cataract.

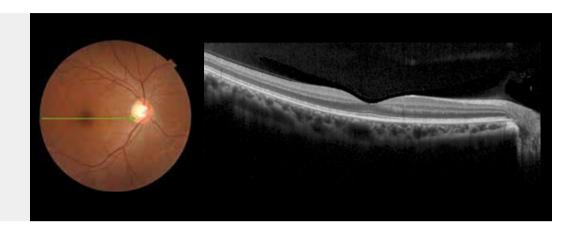


#### **High Resolution OCT and Color Fundus Photography**

A high-resolution B-scan facilitates the evaluation of pathology by visualizing layers of the retina in fine detail. OCT B-scans, complemented by true color fundus photos, are vital for confident diagnosis.

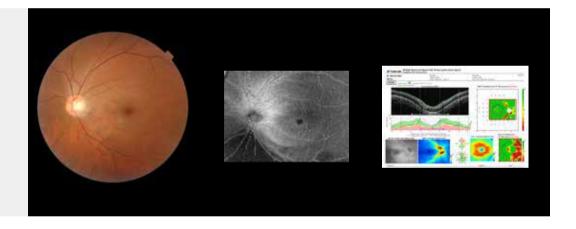


\*Image courtesy: Michael H. Chen, O.D.



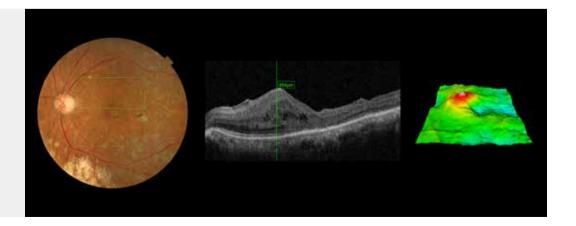
#### Glaucoma\*

\*Image courtesy: Michael H. Chen, O.D.



# Diabetic Retinopathy (DR)\*

\*Image courtesy: Miho Nozaki, MD, PhD (Nagoya City University Hospital)



# Specifications

Item **Specifications** 

Observation & photography of the fundus	
Type of photography	Color, Red-free (Note 1) & IR (Note 3)
Picture angle for photography	$45^{\circ}\pm5\%$ or less $30^{\circ}$ or equivalent (digital zoom)
Operating distance	34.8 ± 0.1mm (when taking a picture of fundus)
Photographable diameter of pupil	Normal pupil diameter: ø4.0mm or more Small pupil diameter: ø3.3mm or more
Fundus image resolution (on fundus)	Center :         60 lines/mm or more           Middle (r/2) :         40 lines/mm or more           Middle (r) :         25 lines/mm or more           IR photography :         Center: 5 lines/mm or more (Note 3)
Observation & photographing of the fundus tomogram	
Scan range (on fundus)	Horizontal direction 3 – 12mm ± 5% or less Vertical direction 3 – 9mm ± 5% or less
Scan pattern	3D scan (horizontal/vertical) Linear scan (Line-scan/Cross-scan/Radial-scan)
Scan speed	50,000 A-Scans per second
Lateral resolution	20μm or less
In-depth resolution	6µm or less Pixel spacing: 2.6µm ± 2%
Photographable diameter of pupil	ø2.5mm or more
Observation & photographing of the fundus image/fundus tomogram	
Fixation target	Internal fixation target:  Dot matrix type organic EL display. The display position can be changed and adjusted. The displaying method can be changed. Peripheral fixation target: This is displayed according to the internal fixation target displayed position. External fixation target
Observation & photographing of anterior segment	
Type of photography	Color & IR (Note 3)
Operating distance	62.6 $\pm$ 0.1mm (when taking a picture of anterior segment) (Note 2)
Observation & photographing of the anterior segment tomogram	
Operating distance	62.6 $\pm$ 0.1mm (when taking a picture of anterior segment) $^{(\text{Note 2})}$
Scan range (on cornea) (Note 2)	Horizontal direction $3 - 6mm \pm 5\%$ or less Vertical direction $3 - 6mm \pm 5\%$ or less
Scan pattern	Linear scan (Line-scan/Radial-scan)
Scan speed	50,000 A-Scans per second
Fixation target	External fixation target

(Note 1) Digital Red-free photography that processes a color image and displays it in pseudo-red-free condition.

(Note 2) When the attachment for anterior segment is included in the system configuration

(Note 3) This is used only for recording the position where a tomogram is captured.

CLASS 1 LED PRODUCT PRODUIT LED DE CLASSE 1 (CEI60825-1:2001)

IMPORTANT In order to obtain the best results with this instrument, please be sure to review all user instructions prior to operation

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