

Tips for taking the best images for Ophthalmology

1 Before you start

- **You must obtain permission to send images and information to HES from:** patient, parents or guardian (if patient is a child or dependent adult), via the App, verbally, or in writing (template available if needed).
- **Ensure images are for correct patient information,** and not another patient.
- **Consider the lighting, good overhead lighting is ideal.** Anterior segment photos need as much natural lighting as possible.
- **Prepare to send only images relevant** to the reason for the query.

2 Take more than one image

- **Avoid taking photos of monitors** and screens.
- **Crop photos accordingly** to show areas of interest and to remove any PID.
- **For OCT images, a reference line where the scan is done is helpful,** especially if it is extrafoveal, or not horizontal.

3 Always take an establishing image

- **Do include colour photos** of the fundus and images of both eyes for comparison.
- **If it is a series of images over time,** do highlight the time stamp on the respective images if it not already present.
- **Anterior segment photos** need as much natural lighting as possible.

4 Wide angle fundus photos

- **If an abnormality** is found on a wide angle fundus photo, clinical assessment is still needed to confirm this finding.
 - **For wide angle fundus photos, the colours are different from a regular normal colour fundus photo.** The same is true for some OCT machines that allow a composite colour photo to be generated. Please bear this in mind when interpreting such images.
-

Tips for taking the best images for Ophthalmology

5 Tips for some conditions

- **For Retinal concerns:** include reference, or location lines for OCT scans, and/or colour fundus images.
- **For Macular Fluid** (seen as dark or hypo-reflective areas, or increased retinal thickening, on OCT scan) where Wet AMD is suspected, please discuss with the AMD Bleep holder at the Eye Centre.
- **For Choroidal Naevi:** if possible, include an OCT of the central portion of the central base of the lesion. This is to gauge the elevation of the lesion.
- **For Optic Disc Swelling:** do radial scans and send the most horizontal section as this give best detail of temporal and nasal segments of the disc. Note: If you are worried about papilloedema do contact the Eye Centre Triage line directly. Ideally, these should not be sent via Consultant Connect.

The Consultant Connect App is free to clinicians within participating CCG/Health Board/Trust/Hospital areas and can be downloaded from the App Store or Google Play.

We would like to thank the team at Chesterfield Royal Hospital NHS Foundation Trust for helping us produce this guide.

For support from Consultant Connect:

E: hello@consultantconnect.org.uk

T: 01865 261467

W: consultantconnect.org.uk

