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EMERALD

NI Clinical Trials Unit (NICTU)

Protocol	Number

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17020NL-AS



Effectiveness of Multimodal imaging for the Evaluation of Retinal oedema And new vesseLs in Diabetic retinopathy (EMERALD)

Wide Angle Optos Grading Form Grader Name: Date: __/_/__ Time grading began Were all wide angle optos images available: (please | 🗸 boxes) No Yes If no, please tick those that are missing below: Superior Inferior Centre Overall, were the wide angle Optos images: (please) only one box per eye) RE LE Adequate Artifacts absent and images are of adequate quality for interpretation OR Inadequate RE LE Artifacts present or images missing or of inadequate quality for interpretation

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Wide Angle Optos Grading Form

Have the eyes received panretinal photocoagulation (PRP) and if so, to what extent?								
RE No PRP Partial PRP Complete PRP								
LE No PRP Partial PRP Complete PRP								
To determine whether PDR was 'Active' or 'Inactive' please read the definitions below: Active PDR is defined by the presence of pre-retinal or vitreous haemorrhage and/or								
active new vessels (new vessels with lack of fibrosis on them)								
Note: Fine new vessels in the disc (NVD) or new vessels elsewhere (NVE) may be seen with no clear fibrosis on them in a patient with full and complete panretinal photocoagulation; under these circumstances this would be considered "Inactive PDR".								
<u>Inactive PDR</u> is defined by absence of pre-retinal or vitreous haemorrhage and absence of active new vessels or fine NVD or NVE in the context of a full and complete PRP								
PDR in the RIGHT EYE (tick one box only):								
No PDR PDR present UNSURE if present UNGRADEABLE								
If PDR is present:								
INACTIVE UNSURE if active								
PDR in the LEFT EYE (tick one box only):								
No PDR PDR present UNSURE if present UNGRADEABLE								
If PDR is present:								
INACTIVE UNSURE if active								

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Wide Angle Optos Grading Form

			RIGHT EYE			LEFT E	YE	
		Absent	Present	Unsure	* Abser	nt Prese	resent Unsure *	
Pre-retin								
Vitreous haemorri	nage							
			ritreous haen					
	Please record the absence/presence of Active or Inactive NVD and NVE: "Cannot grade" may be assigned if vitreous haemorrhage is present)							
	RIGHT EYE LEFT EYE							
						LEFT	EYE	
	Absent		Cannot	Unsure *	Absent	Present	Cannot grade	
Active NVD	Absent		Cannot		Absent		Cannot	
	Absent		Cannot		Absent		Cannot	Uns,
NVD Inactive NVD		Present	Cannot	*		Present	Cannot	
Inactive NVD * Unsure i		Present re seen is a	Cannot grade	* ner abnorma		Present	Cannot	

Protocol Number:

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Image ID Number:

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Wide Angle Optos Grading Form

ı								
		RIGH	T EYE		LEFT EYE			
	Absent	Present	Cannot grade	Unsure *	Absent	Present	Cannot grade	Unsure *
Active NVE								
If Active NVE present: Specify locations by placing "X" in the correct clock hours	((

		RIGH	T EYE			LEF	T EYE	
	Absent	Present	Cannot grade	Unsure *	Absent	Present	Cannot grade	Unsure *
Inactive NVE								
If Inactive NVE present: Specify locations by placing "X" in the correct clock hours	((

^{*}Unsure if the structure seen is an NVE or other abnormality (e.g. IRMA)

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E	М					

Wide Angle Optos Grading Form

NVE present but unsure if active or inactive	RIGHT EYE	LEFT EYE
	N/A	N/A
Specify locations by placing "X" in the orrect clock hours		

Patient outcomes:

Does the patient require a full clinical assessment by an ophthalmologist

YES		NO	
-----	--	----	--

If full clinical assessment by ophthalmologist is required please indicate reasons(s) below: Please tick as many boxes as are appropriate

Presence of 'Active PDR'		
I am unsure if there is active PDR		
Inadequate quality images		
Presence of other condition requiring	referral: please specif	У

RIGHT EYE

LEFT EYE

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tocol Number:	Imag	e ID Nur	nber:				
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	Wide A	Angle	Optos	Grac	ding F	- Form	
OR							
Could this patient con	tinue to be	reviewe	ed in the o	ophthalr	nic grad	der pathway?	
	ES	reviewe		ophthalr O	mic grac	der pathway?	
	ES		N	0	mic grac	der pathway?	
Y	ES		N	0	mic grac	der pathway?	
Y	ES		N	0	mic grac	der pathway?	
Y	ES		N	0	mic grac	der pathway?	
Y	ES		N	0	mic grac	der pathway?	
Y	er comments	s you thi	N	evant:	mic grac	der pathway?	
Please provide any other	er comments	s you thi	nk are rele	evant:	mic grac	der pathway?	
Please provide any other	er comments	s you thi	nk are rele	evant:	mic grac	der pathway?	