

# **EYESI INDIRECT ROP** Training simulator for retinal examinations on preterm infants



Look closer. See further.

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# Eyesi Indirect ROP Training of retinal examinations on preterm infants

The Eyesi Indirect Opthalmoscope ROP Simulator (Eyesi Indirect ROP) is a mixed reality simulator for training of retinal examinations on preterm infants using a binocular indirect ophthalmoscope. The simulator comes with a didactically structured curriculum designed for teaching device handling and classification of retinopathy of prematurity (ROP).

#### PROCEDURAL & DIAGNOSTIC TRAINING Expertise comes from experience

Performing indirect ophthalmoscopy on a preterm infant requires fine motor skills and the ability to interpret an inverted retina image. At the same time, the examination must be carried out quickly and skillfully to keep stress release for the patient to a minimum. The Eyesi Indirect ROP simulator enacts all relevant aspects of the examination scenario to offer eye specialists a lifelike, yet risk-free, training experience.

### EMBEDDED CURRICULUM Classification of ROP

The Eyesi Indirect ROP teaches the main characteristics of ROP and how to recognize the different zones and stages according to the "International Classification of Acute Stages of Retinopathy of Prematurity". Trainees also become acquainted with their specific country's guidelines for screening intervals and treatment of ROP. With a didactically structured curriculum for self-guided training and objective assessment and feedback, Eyesi Indirect ROP allows trainees to become experienced – before they examine their first real patient.



# Lifelike training environment

The Eyesi Indirect ROP simulator enacts every relevant aspect of the real examination scenario. It consists of a head-mounted stereo display representing an ophthalmoscope, a patient model head with eyes, and mimics of lenses and a scleral depressor. When wearing the device, the user is presented with an immersive 3D simulation of the patient; the indirect ophthalmoscope mimic, the handheld lens, and the patient's eye must be aligned exactly to visualize the retina. To add to an immersive, close-to-life environment, the patient's eyes can be indented and tilted into different directions using the scleral depressor.

# Standardized curriculum

The simulator comes with an embedded curriculum featuring virtual patients with different stages of retinopathy, including aggressive ROP, plus disease and retinal detachment. The standardized curriculum ensures that each resident has been trained on the same range of pathologies.

# Evidence-based assessment

The Eyesi Indirect ROP provides both trainees and educators with an objective performance assessment. Immediate feedback after each case helps trainees to improve their skills systematically.

# High-end mixed reality Immersive training experience

The Eyesi Indirect ROP simulator mimics the examination down to the last detail, using a head-mounted stereo display representing an ophthalmoscope, two lens mimics, a patient model head with pliable eyes, and a scleral depressor. A touch screen displays the user interface and a live view of the examination.



### HIGH-END MIXED REALITY & HAPTIC FEEDBACK Realistic device handling training

The Eyesi Indirect ROP applies mixed reality technology, combining real and virtual images. When trainees put on the head-mounted stereo display and pick up the lens mimic, they see their own hand holding the virtual lens and a 3D virtual patient in place of the model head. The ophthalmoscope mimic, the lens, and the patient's eye must be aligned precisely to visualize the retina. To add to an immersive, close-to-life environment, the pliable eyes of the patient model head can be indented and tilted into different directions using the scleral depressor. The effect of the manipulation is simulated in real-time.

# REAL-TIME SIMULATION

The Eyesi Indirect ROP provides a highly realistic and dynamic 3D simulation of the patients' retinas and the ophthalmoscope lens, allowing trainees to get accustomed to physical optical effects such as chromatic aberration or inversion of the image.

### LIGHT & LENS Ophthalmoscope settings

On the touch screen, trainees can control the indirect ophthalmoscope settings, such as the angle and diameter of the light cone, light intensity, filters, lens magnification, or adapting the optics to the patient's pupil size.

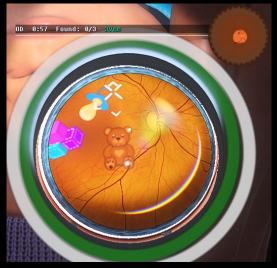
### PATIENT'S EYES Examination settings

Users can further control the examination using the touch screen, for example, by inserting a speculum into the left or right eye, hearing the sound of the baby crying, or activating random eye movements.









COURSE A1: ABSTRACT SCENARIO



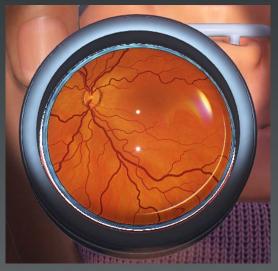
COURSE C: DEMARCATION LINE HIGHLIGHTED



COURSE B: ANATOMY OF THE IMMATURE RETINA



COURSE D: RETINAL DETACHMENT



COURSE E: PRE-PLUS DISEASE

# Step-by-step to expert performance

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# Eyesi Indirect ROP courseware Examination & classification training

Simulator-based training allows for a standardized learning experience and ensures that all students reach the same level of clinical proficiency. With a ready-to-go courseware, the Eyesi Indirect ROP simulator can easily be integrated into educational programs.

### standardized curriculum Ready-to-go courseware

The Eyesi Indirect ROP comes with a didactically structured curriculum, which has been designed to lead trainees step-by-step to expert performance. Students advance through the curriculum independently and self-guided. Educators can lock or unlock courses as required.

#### OVERVIEW

### Eyesi Indirect ROP courseware

#### Course A1: Basic navigation training

Course A offers abstract scenarios in which objects have to be found on the retina (zone I and posterior zone II) to train the basic handling of an indirect ophthalmoscope and orientation in the eye.

#### Course A2: Peripheral navigation training

Course A2 offers further abstract tasks to deepen examination skills and learn to handle a scleral depressor. Objects have to be found in the retinal periphery, and the difficulty rises as the patient's eyes move randomly.

#### Course B: Retinal anatomy

Course B offers an anatomical introduction to the premature retina. Trainees learn to identify anatomical landmarks, estimate the relative distance between them, and identify the retinal zones necessary for ROP diagnosis.

#### Course C: Classifications (learning mode)

In this course, different patients with pathological characteristics of ROP, such as lesions and plus disease, are presented. Trainees learn to identify the related findings and differentiate the ROP stages.

#### Course D1: Retina recognition challenge

Trainees must now work against the clock. Once the timer starts, they must examine the retina and try to remember what they see. Then, they must pick the correct image out of five representing the current case.

#### Course D2: Classifications (exam mode)

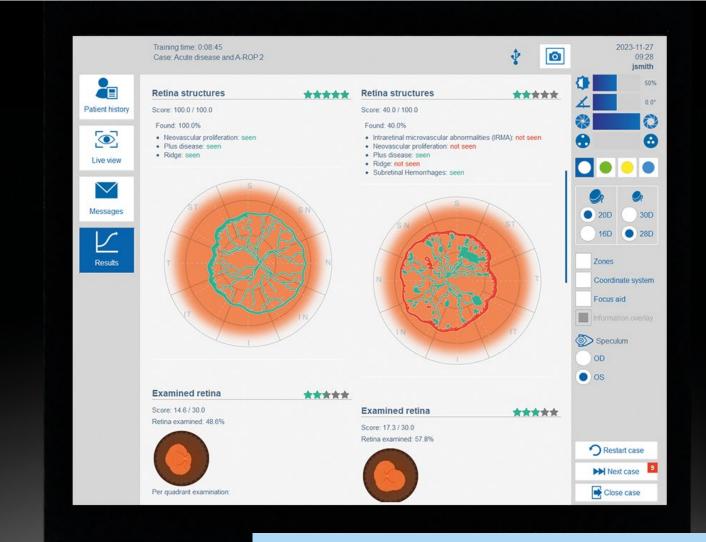
Course D presents the patients from Course C in a random order. Trainees need to apply the knowledge acquired in course C and must identify and classify all findings in an input mask.

#### Course E: Clinical Cases

The clinical cases are based on actual patient cases. Trainees are provided with comprehensive patient information and, after the examination, have to specify their findings and classify the disease in an input mask.

# Guidance & assessment **Classification training**

The Eyesi Indirect ROP offers an interactive training environment that provides trainees with immediate feedback on their performance. Educational guidance elements support beginners in their learning process. Additional medical background information helps to deepen the understanding of anatomical and pathological characteristics. A personal findings library, which is also accessible on the VRmNet web portal, allows students to recap their learning matter.



# EDUCATIONAL SUPPORT

The Eyesi Indirect ROP features visual and auditive guidance to support beginners in their learning process, for example, by highlighting retinal findings, indicating the correct position of the lens, or showing how to use the scleral depressor. During the examination, a head-up display is visible in the oculars of the ophthalmoscope, showing information such as the names of detected anatomical structures or a retina chart that highlights the areas already examined.

# MEDICAL BACKGROUND

When a trainee detects a pathological finding in the more advanced cases, it is highlighted on the retina. A findings tile appears on the touch screen, providing medical background information. All detected findings are stored in the trainee's personal findings library and are also accessible on the VRmNet web portal for recap. The findings menu on the simulator can be used to start cases associated with the specific finding.

### ROP CLASSIFICATION Classification input forms

In courses D2 and E, trainees have to fill in their findings and classifications into input masks. Besides pathological characteristics and anomalies, they may also be asked to look out for non-retinal characteristics such as pupil rigidity or vitreous opacities. Finally, they have to conclude by providing a follow-up recommendation for screening intervals and treatment according to specific country guidelines.

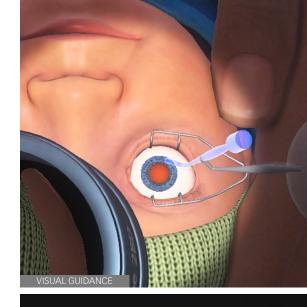
#### COUNTRY-SPECIFIC GUIDELINES

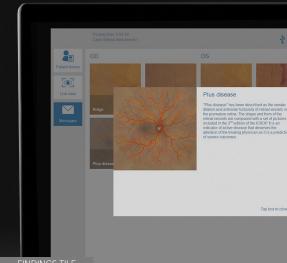
## Treatment recommendations

The Eyesi Indirect ROP teaches the main characteristics of ROP and how to recognize the different zones and stages according to the "International Classification of Acute Stages of Retinopathy of Prematurity". Trainees also become acquainted with their specific country's guidelines for screening intervals and treatment of ROP.

### PERFORMANCE ASSESSMENT Detailed evaluation

After each case, the Eyesi Indirect ROP presents trainees with a detailed performance summary. Evaluated parameters are, for example, the light exposure, completeness of the retinal area examined, completeness and correctness of findings, appropriate use of indentation, or examination time. The objective assessment allows trainees to improve their skills systematically. Required minimum scores ensure that trainees meet a standard skill level. Comprehensive training reports available on VRmNet also allow educators to assess their trainees' skill acquisition.







# VRmNet Web portal for networked simulators

VRmNet is a web-based service available for networked medical training simulators from Haag-Streit Simulation. The web portal offers online features for both trainees and educators. Users can access their personalized VRmNet dashboard from any computer or mobile device 24/7.

### EASY ADMINISTRATION Staying informed

Educators can use VRmNet to comfortably set up users and manage courses. Configurable notifications and reports keep teachers informed on their classes' training status. Trainees log in to VRmNet to access their training data and their findings library for recap of learning content. To prepare trainees for their first training session, VRmNet provides an online orientation with short videos on simulator usage.

### **Benefits for operation & service**



Automatic updates



**Optimized allocation** 

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**Online service** 

# Administration tools

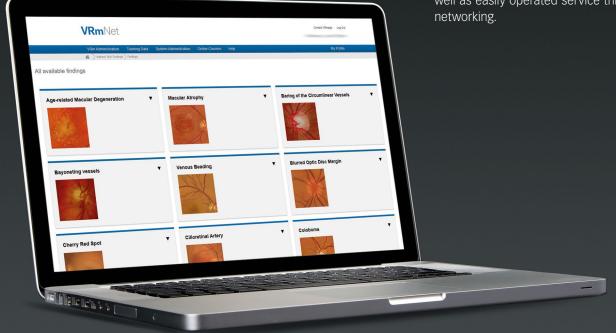
Educators can use VRmNet to comfortably set up users, manage courses, and monitor their classes' training progress.

# Online learning for trainees

For trainees, VRmNet features an online orientation on training with the Eyesi Indirect ROP simulator, medical courses, and a library with background information for recap of learning content.

# Automatic software updates

All simulators connected to VRmNet receive the latest software updates automatically. Customers benefit from data back-ups and synchronization as well as easily operated service through the VRmNet networking.



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