



Location

South Carolina,
US



Device

Silverstone
California



Optometrist

Scott Oliver
David Oliver

Combined Ultra-widefield and OCT Provides Better Patient Experience and Practice Efficiency

Before Drs Scott and David Oliver, brought Optos technology into their practice, they dilated patients routinely. It wasn't speedy, and it often created some bottlenecks with patients needing to come back later for the dilation.

In 2018, they added the *California* from Optos and adopted the practice of imaging all patients who came to Oliver Eye Associates in Rock Hill, South Carolina. It changed the patient flow and pacing right from the start. "We would review the **optomap** images with patients in the exam room," says Dr. David Oliver. "Even if we had to take the patient out to the exam room to get an ocular coherence tomography [OCT] as a result of something we saw, it was still much faster than our old system," he says.

The doctors do still dilate some patients, but in many cases, the **optomap** image provides them the assurance they want that the retina looks healthy. In fact, they almost immediately saw the value of capturing **optomap** images on everyone. "In the first week we had the *California*, we saw at least two patients with retinal holes way out in the periphery, and we had a 15-year-old asymptomatic patient with a retinal tear," he says. Because of the ultra-widefield single-

capture image that **optomap** provides, these findings were easily detectable on the image but might have been harder to spot with dilation alone.

The system proved itself over and over. "We'd regularly identify patients with retinopathy who didn't know they had diabetes. It has also been extremely helpful with patient education," he notes. He uses it often with glaucoma patients who are noncompliant. "When I can show them that their optic nerve looks different than a normal optic nerve, it motivates them to be more compliant. Or if I can show a patient with early age-related macular degeneration (AMD) that there are drusen, that helps them understand the condition better," he says.

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Drs Scott and David Oliver, OD
Oliver Eye Associates



Last year, the practice upgraded to the *Silverstone* device, which combines the ultra-widefield (UWF™) retinal imaging with integrated, image-guided swept source OCT. “We conduct a lot of medical eye exams in our office, so when we know that a patient has a previous diagnosis of glaucoma, AMD or diabetes or takes a medication that puts them at higher risk for ocular complications, we run the basic retinal image and the macula grid scan—at the same time. We don’t have to send patients for a second scan as the system captures both at once,” he says.

He uses a simple analogy to show patients how much more data this system provides. “I compare it to a birthday cake. I can show you a photo of a birthday cake, and you’ll know what it is. But you don’t know what it’s made of or what’s between the layers,” he says. These images provide him with a much fuller picture.

When the patient schedule is filled with medical patients—all of whom previously had to be dilated, and now many of them can be scanned in just one sitting—that saves a lot of time. That’s time that the doctors use to discuss compliance, the patients’ conditions or complaints, or new products or services that might help. “Some practices could choose to see more patients in the day, but our patients are accustomed to spending some time with us,” he says.

This practice was established in 1947, and Dr. Scott Oliver joined the original owner in 1962. Dr. David Oliver says the practice has a loyal following of patients who have been coming for decades.

The big difference that Optos makes in the experience is that “it’s a more relaxing environment now. There isn’t the stress of moving patients in and out of the exam lane and waiting for the dilating drops in as many cases,” he says.

When it is necessary to refer a patient, Dr. Oliver says the Optos images can be very helpful. He recently had a patient come to the office who had never been to the practice and may never have seen an eye doctor. The patient reported that the inferior visual field was getting blurry, and recently, that blurriness was creeping more toward his central field of vision. “Everything looked normal, but the **optomap** showed a swollen right optic nerve with hemorrhages around it. We suspected ischemic optic neuropathy, but we also wanted to be sure he wasn’t having a stroke.” Dr. Oliver was glad that he could direct the patient to the emergency room with very specific instructions so that doctors could assess him specifically and quickly.

Similarly, the retinal physicians to whom he refers appreciate that when he does send a referral, they know that it’s serious enough to warrant their immediate attention. The practice can also share images with an MD’s office and determine the management and treatment plan together.

Dr. Scott Oliver says the impact has been tremendous. “I’m practicing very differently now from when I first started 33 years ago. Optos has made my job easier, more efficient and better for my patients, and I’m a better doctor because of it.”

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