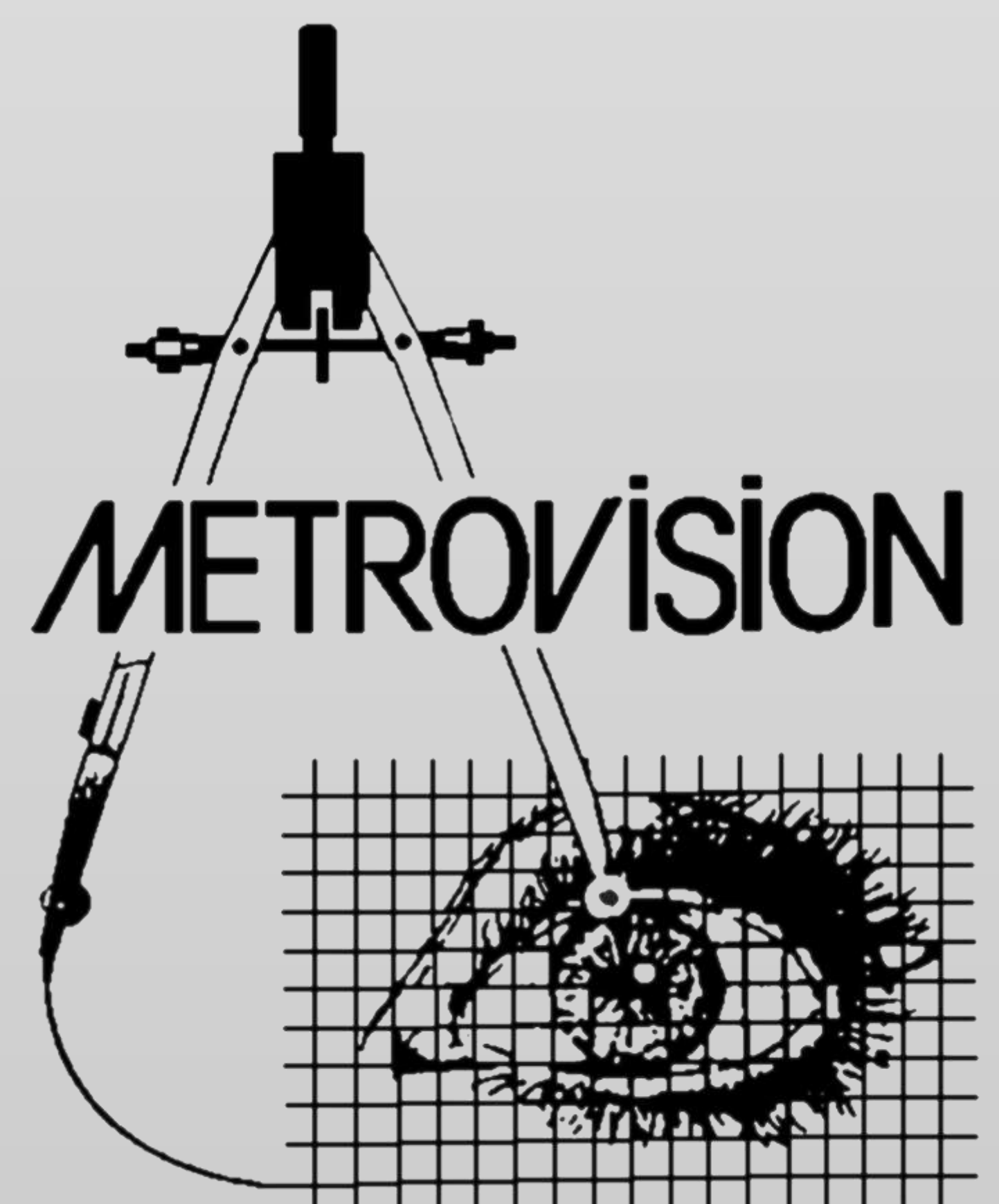
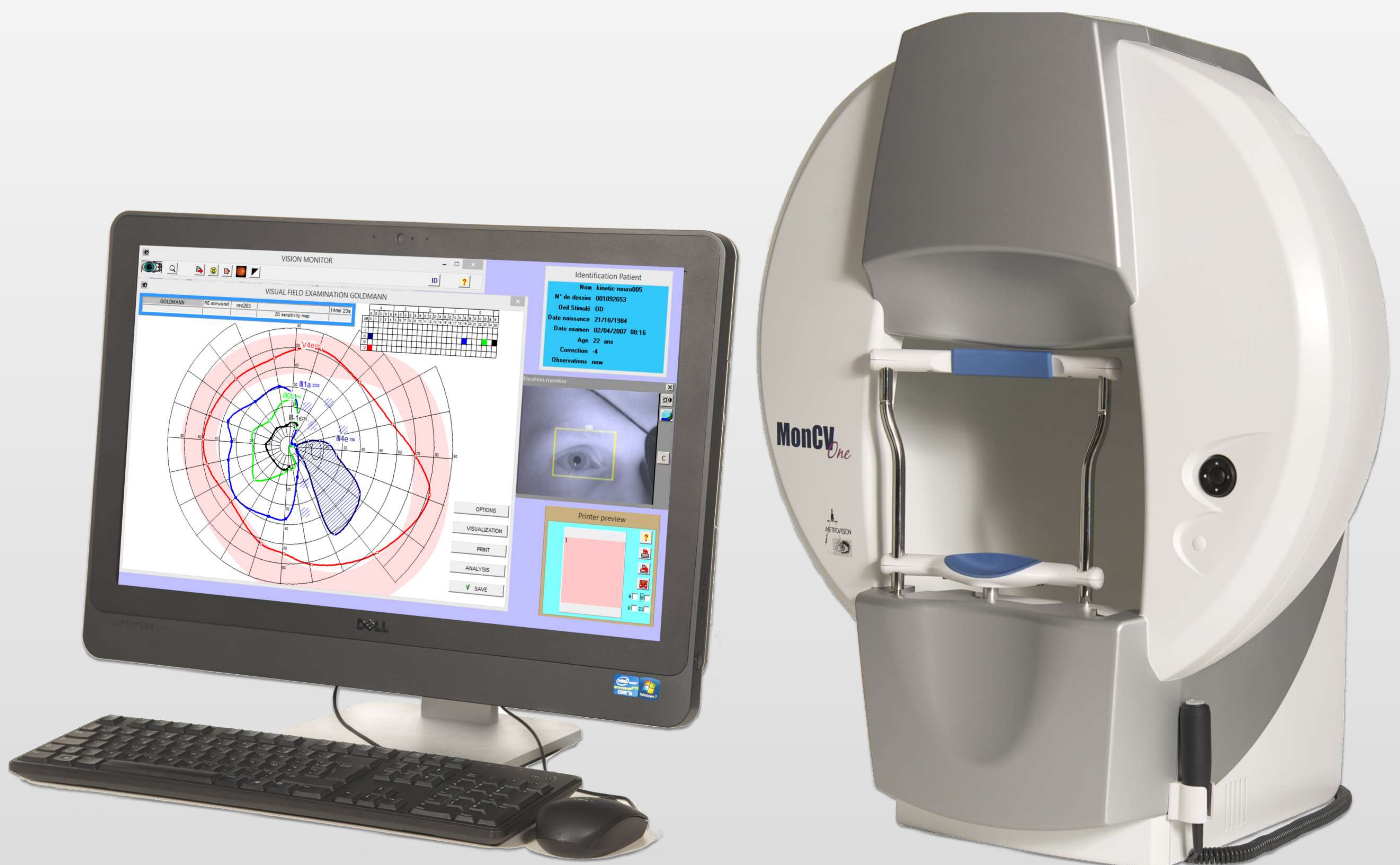


MonCV *One*

Standard Automated Perimetry Goldmann Perimetry

All in One



CE 0120

Manufactured by Metrovision
ISO 9001:2008 ISO 13485: 2003
certified quality system

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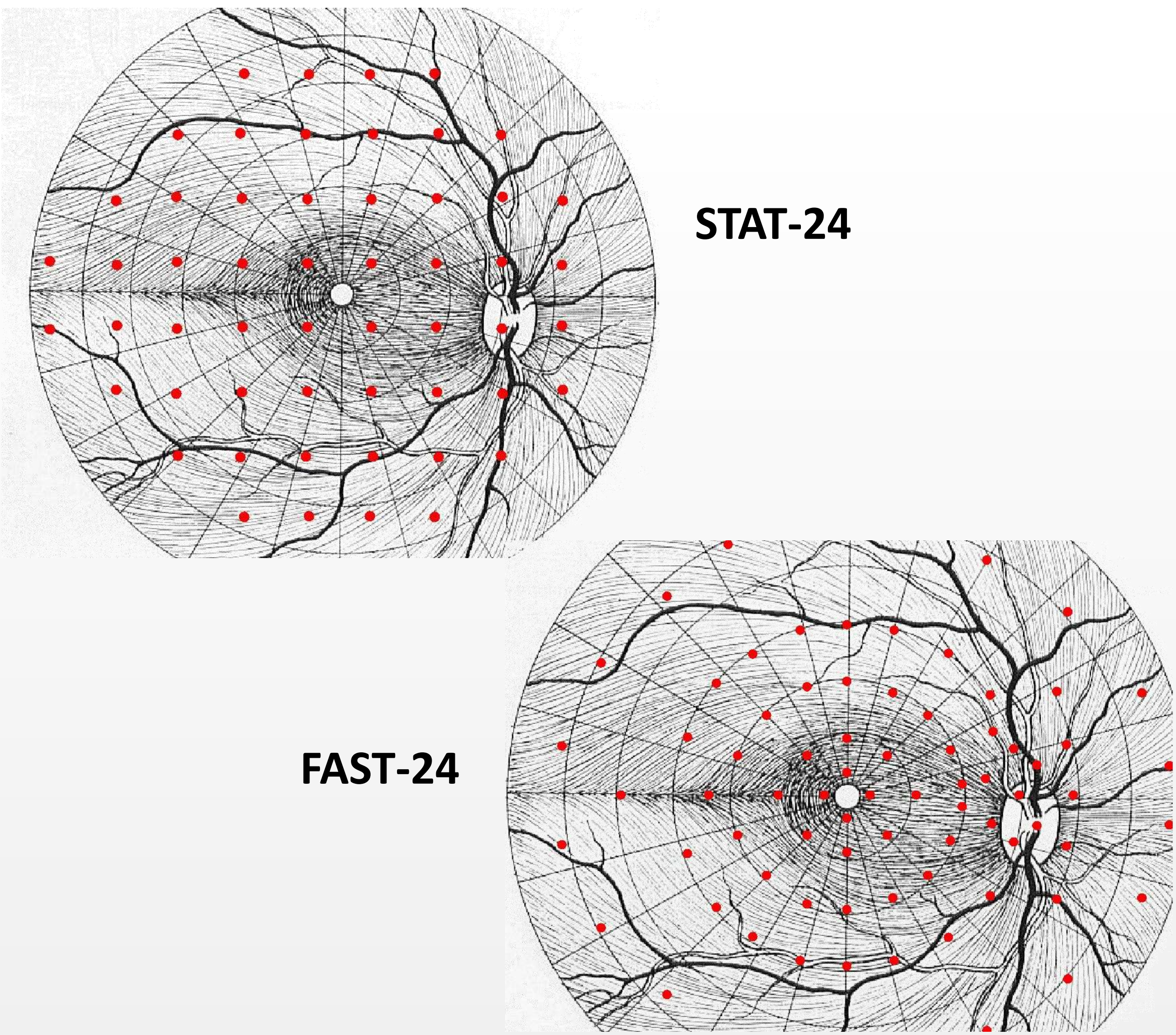
Standard Automated Perimetry

Optimized test distribution and strategy

MonCV^{One} proposes two sets of tests for static perimetry:

The **STAT** tests use a conventional distribution of test points with a uniform spacing.

The **FAST** tests (Fiber Adapted Static Tests) use an optimized distribution of test points according to the density of fibers and to the most frequent alterations of the retina and optic nerve.



Key point

- FAST tests provide more complete information in less time.*

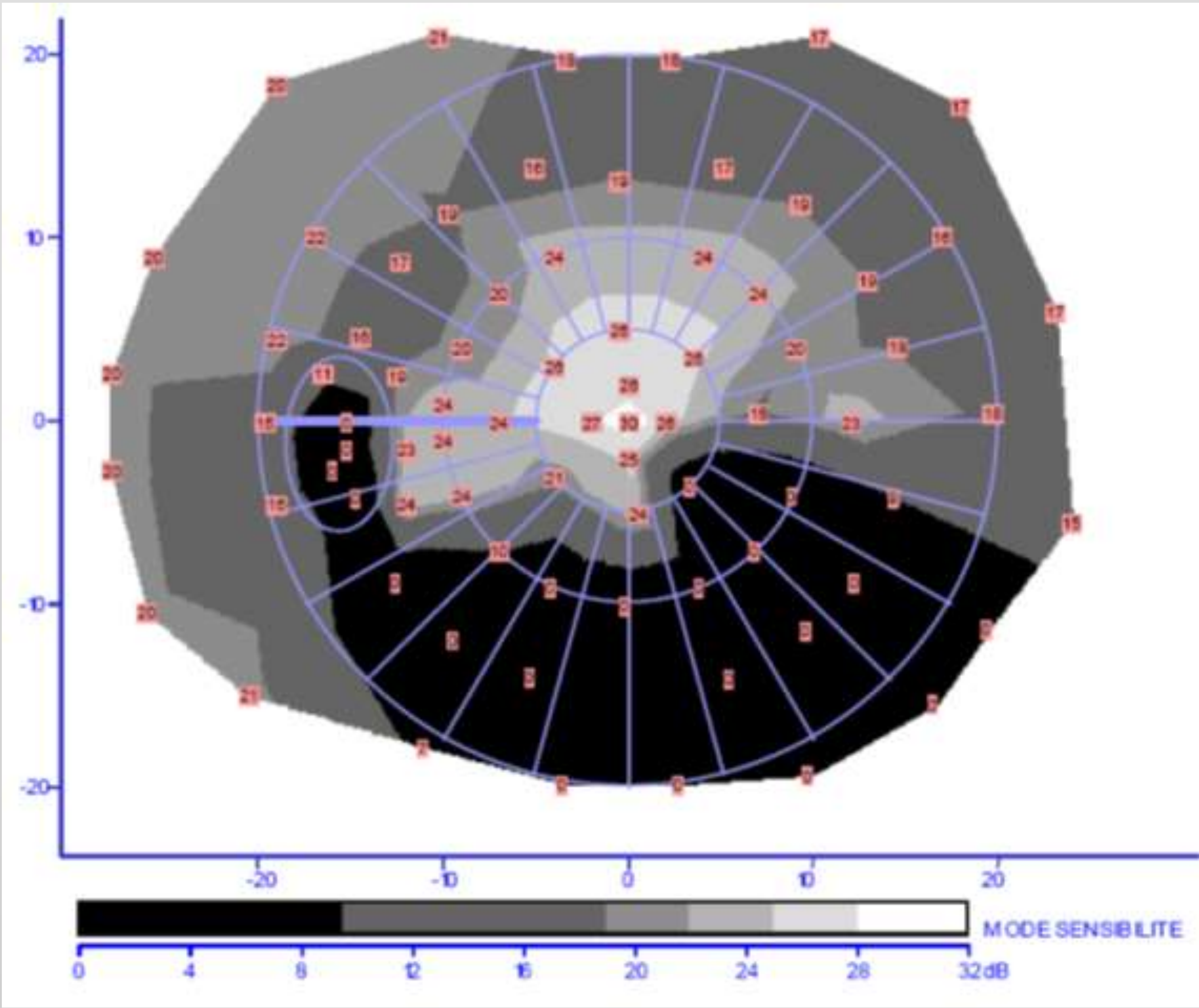
	Background (cd/m2)	Stimulus size	Eccentricity (degrees)
STAT/FAST 30	10	III	30
STAT/FAST24	10	III	24
STAT/FAST10	10	III	10 - 12
Fovea	10	III	fovea
FAST-60	10	III	60
Low vision	10	V	30
Driver test	10	III	80 (horizontal)

The test library includes **STAT** and **FAST** procedures covering eccentricities up to 10, 24, 30 and 60 degrees.

Additional tests are also available for testing low vision and driving aptitude.

Advanced graphics for an easier interpretation

Advanced graphic technology allows a precise description of the scotoma shape and localization.



Key points

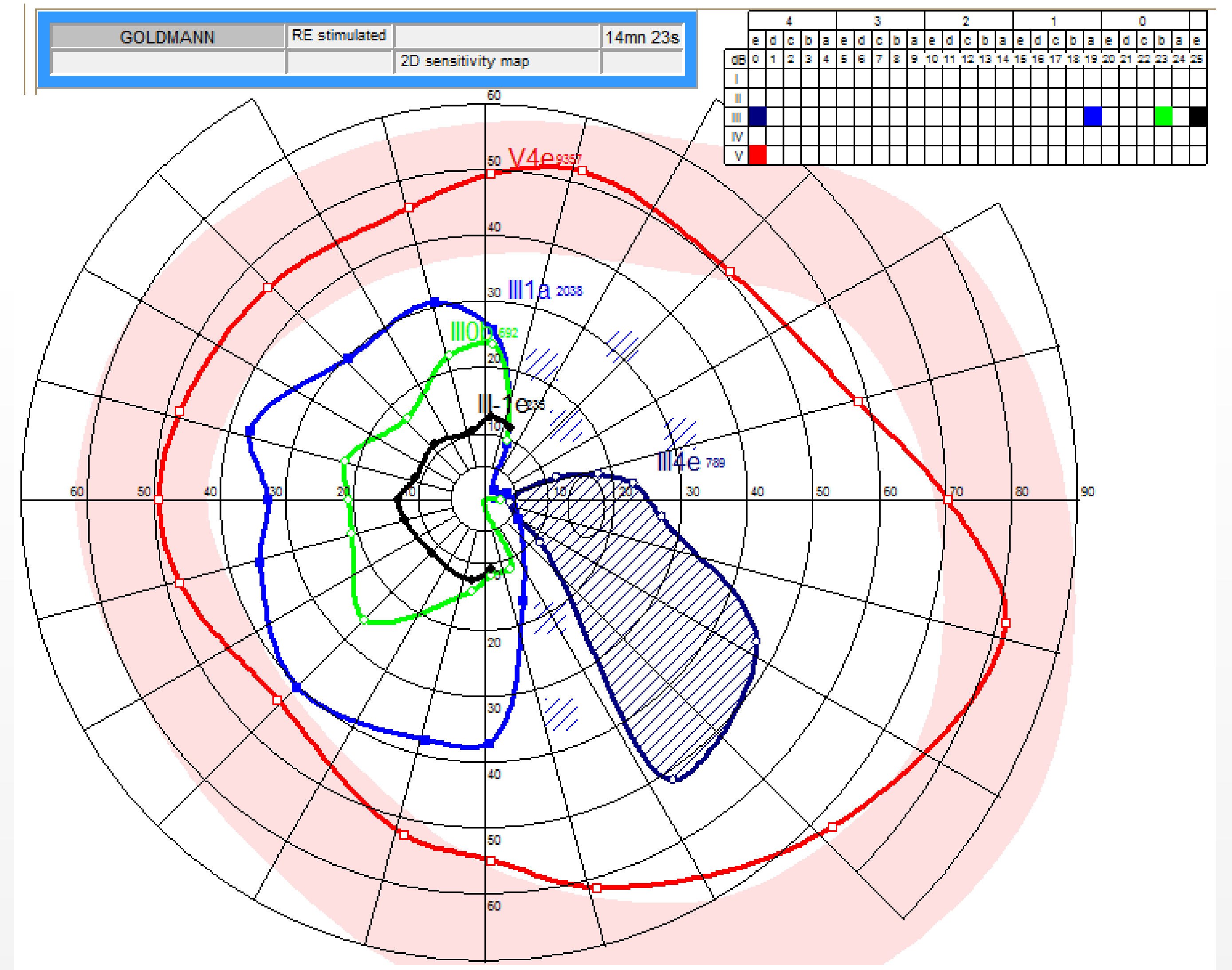
- Accurate description of arcuate scotoma.*
- Precise evaluation of the functional impact of deficits with test points at 2 and 5 degrees eccentricity.*

Goldmann Perimetry of the 21st century

Manual Perimetry

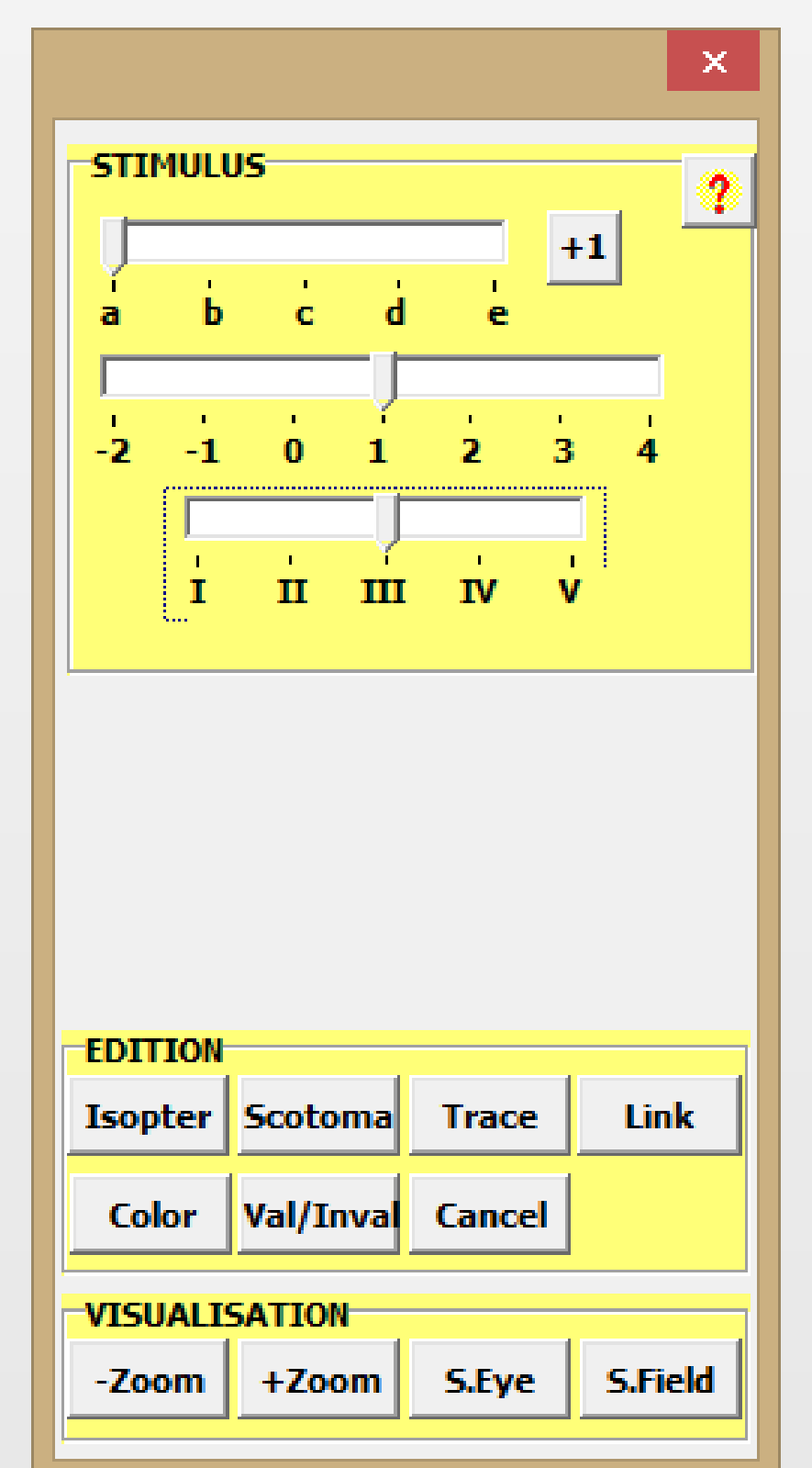
Manual perimetry is needed in a number of clinical situations:

- for patients who are not able to perform automated perimetry,
- for the control of abnormal results obtained with automated perimetry,
- for the evaluation of acute visual field loss.



Key points

- *Goldmann emulation with mouse or stylus interface,*
- *Automated quantification of isopters and scotoma.*
- *Detailed evaluation of the macula obtained by zooming the central field.*
- *Fundus oriented perimetry performed in superposition with the image of the eye fundus.*



Attraction Perimetry

One unique feature of **MonCV^{One}** is its ability to perform perimetry exams on infants (below the age of 7) and other non cooperative subjects.

The operator has a direct control of the stimulus presentation and can record the infant's eye movement responses thanks to the high quality of the video.



Key points

- *High quality video allows the detection of infants' responses.*
- *Video playback synchronized with the test presentations allows the off line analysis of results and their control (*).*

* Patent pending

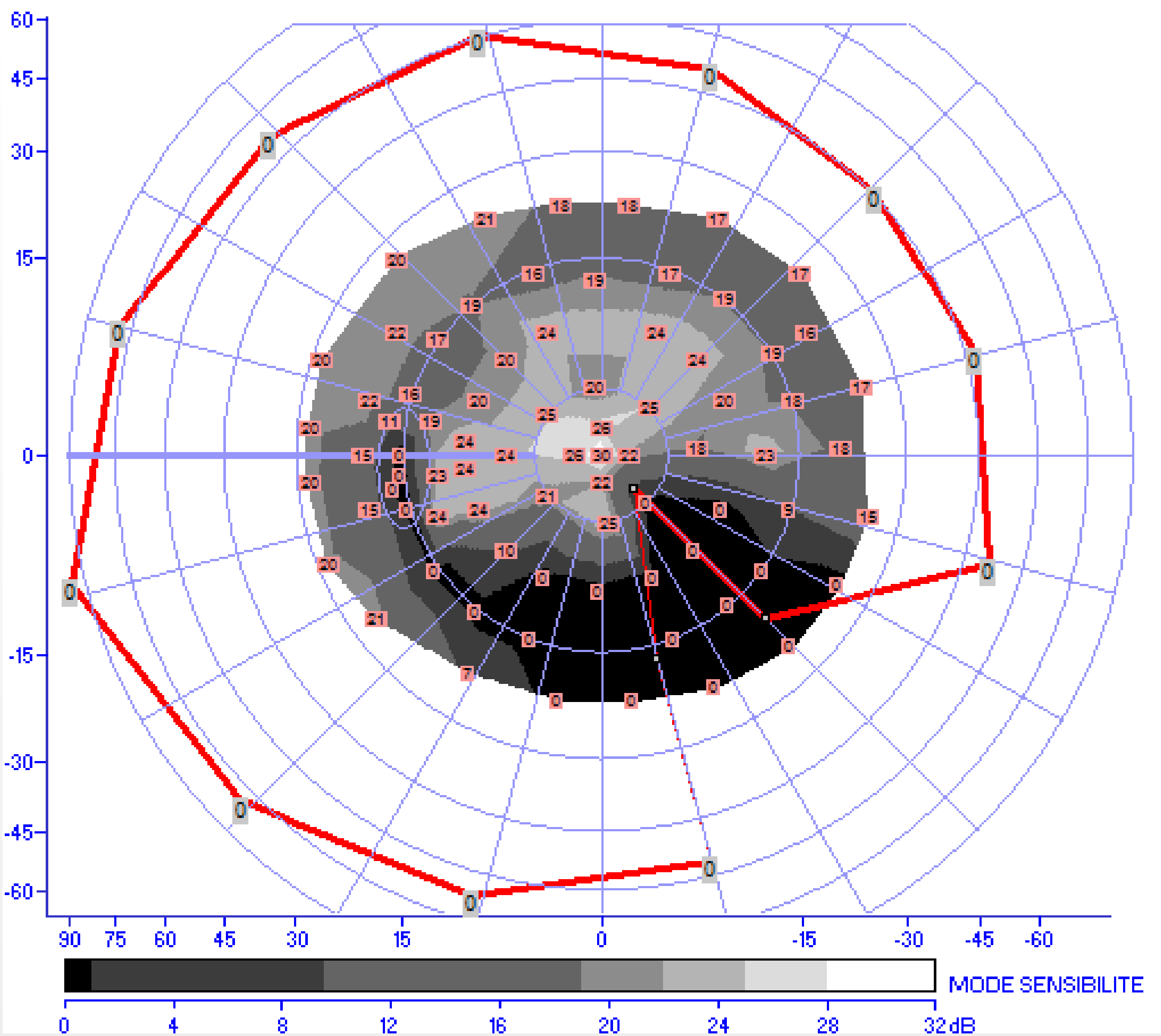
Mixed Perimetry: the combination of Kinetic and Static Perimetry

Mixed perimetry combines the evaluation of the peripheral field with kinetic tests and the evaluation of the central field with static tests.

Key points

- Mixed perimetry gives a more complete evaluation of the visual field,
- Mixed perimetry saves time in severely affected visual fields.

	Background (cd/m2)	Stimulus size	Eccentricity (degrees)
MIXED-30	10	III	Periphery +30
MIXED-24	10	III	Periphery +24
MIXED-12	10	III	Periphery + 12



Special tests

Additional tests are available on the **MonCV***One*

Perimetry tests

- Blue / yellow perimetry
- Scotopic perimetry

Tests relying on video recording

- Cardinal positions of gaze
- Evaluation of ptosis

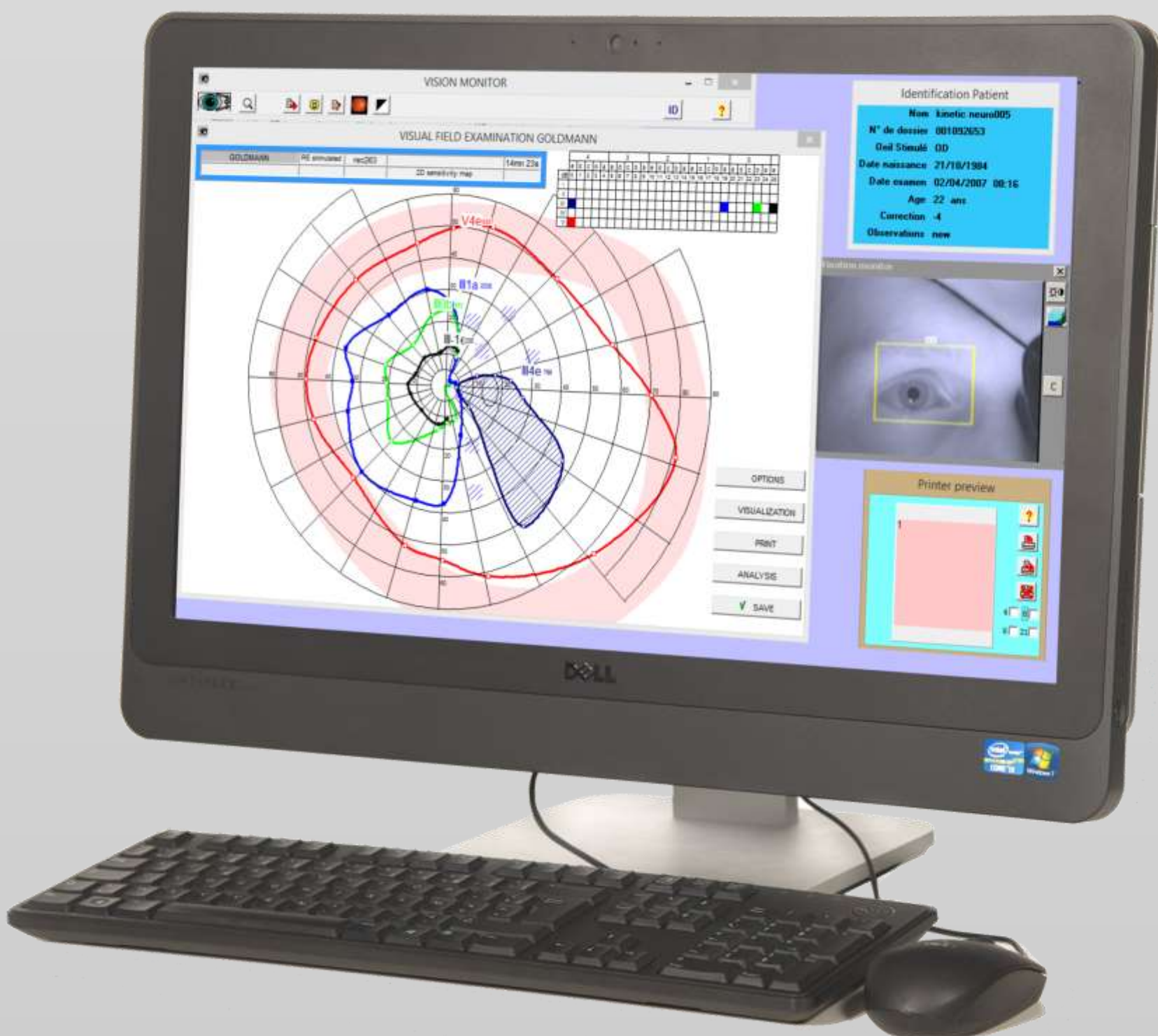
Others

- Dark adaptation
- Pupillometry
- Ganzfeld flash ERG and VEP



Computer networking

MonCV*One* is controlled from a standard PC or tablet operating under Windows. It can be connected to a computer network allowing the access to results from a work station and their exportation under PDF or DICOM formats.



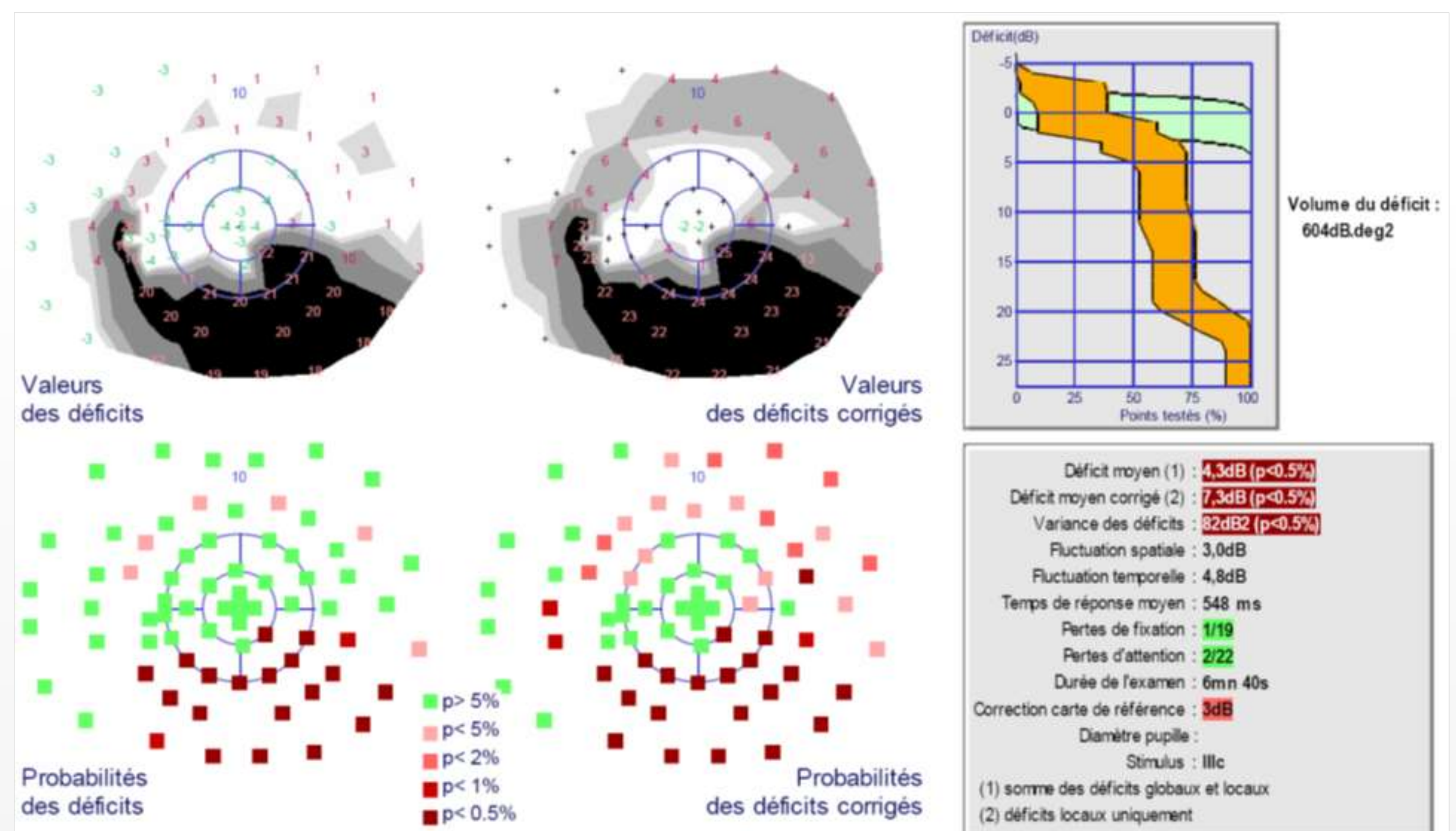
Statistical analysis

This analysis provides:

- a map of deficits relative to normal, age corrected thresholds,
- a map of relative deficits obtained after subtraction of the diffuse component,
- global indexes.

Key point

- *Comparison of the patient's result with age corrected normal data.*

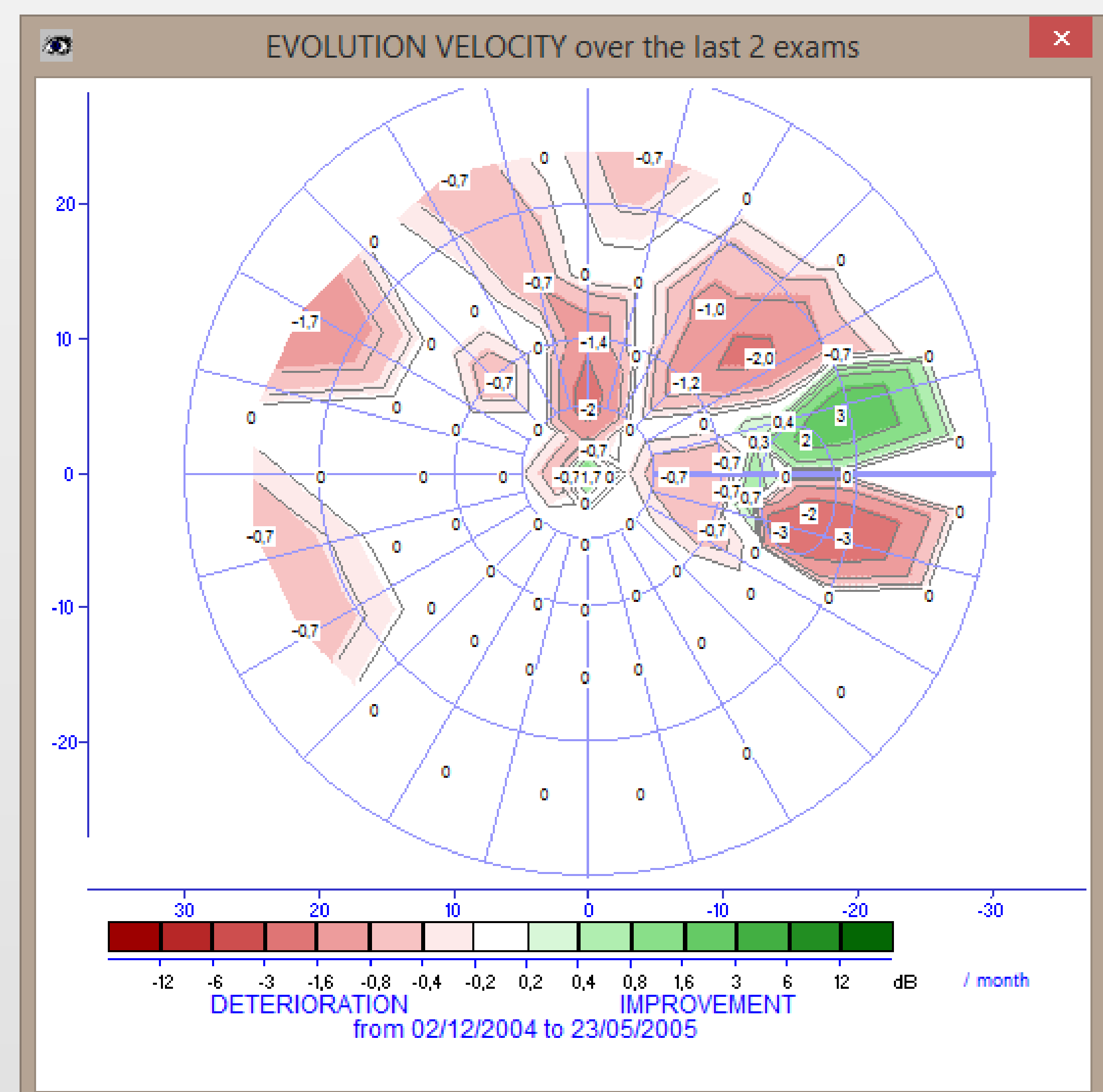


Follow-up analysis

The follow-up analysis uses the set of results obtained from the patient to analyze the progression of the visual field.

Key point

- *The map of evolution indicates which parts of the field are changing and so to determine if the evolution is due to glaucoma, cataract or ARMD.*

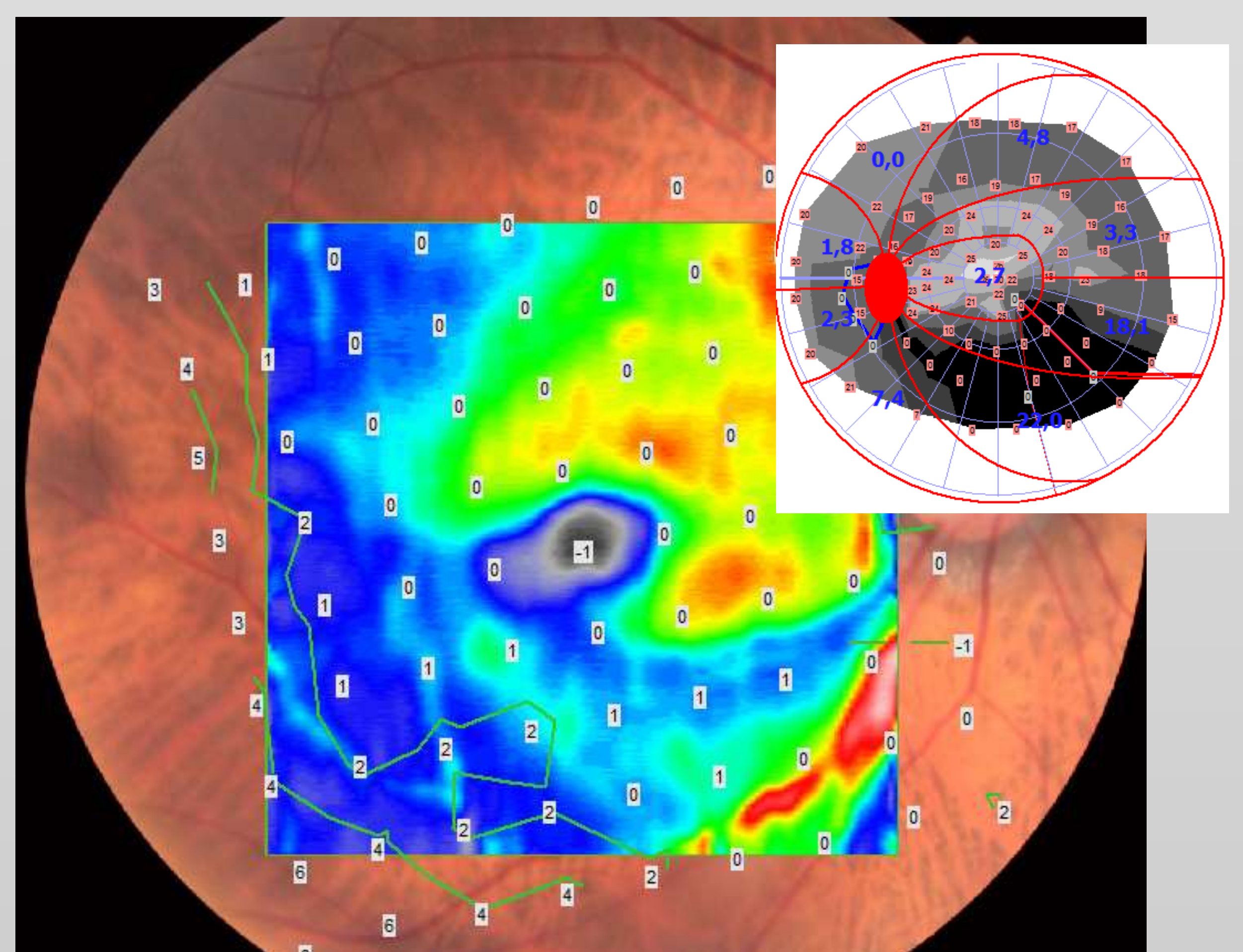


Function-Structure comparison

This analysis makes a comparison of the visual field with the image of the eye fundus or OCT. The image is imported under a standard format (jpeg, bmp,...) and is automatically scaled to the visual field after clicking on the positions of the papilla and fovea.

Key point

- *This analysis indicates if the functional deficit is related to the structural alteration.*



Specifications

- Hemispherical cupola with 30 cm radius
- Test projection up to 100 degrees of eccentricity (temporal)
- **Background**
Default value = 10 cd/m² for white
100 cd/m² for yellow
Programmable from scotopic up to high photopic (600 cd/m²)
- **Test color**
white, blue, red
- **Test sizes**
Goldmann I, II, III, IV, V
- **Weight:** 33 kg (without PC, printer and electric table)
- **Power supply:** 110-230V, 3.6-1.8A , 50-60Hz



Correction of refractive errors

MonCV One is supplied with a standard lens holder or, alternatively, with a set of large field lenses (55 mm in diameter).

Key point

- *Large field lenses prevent peripheral field errors due to the lens rim or lens misalignment.*

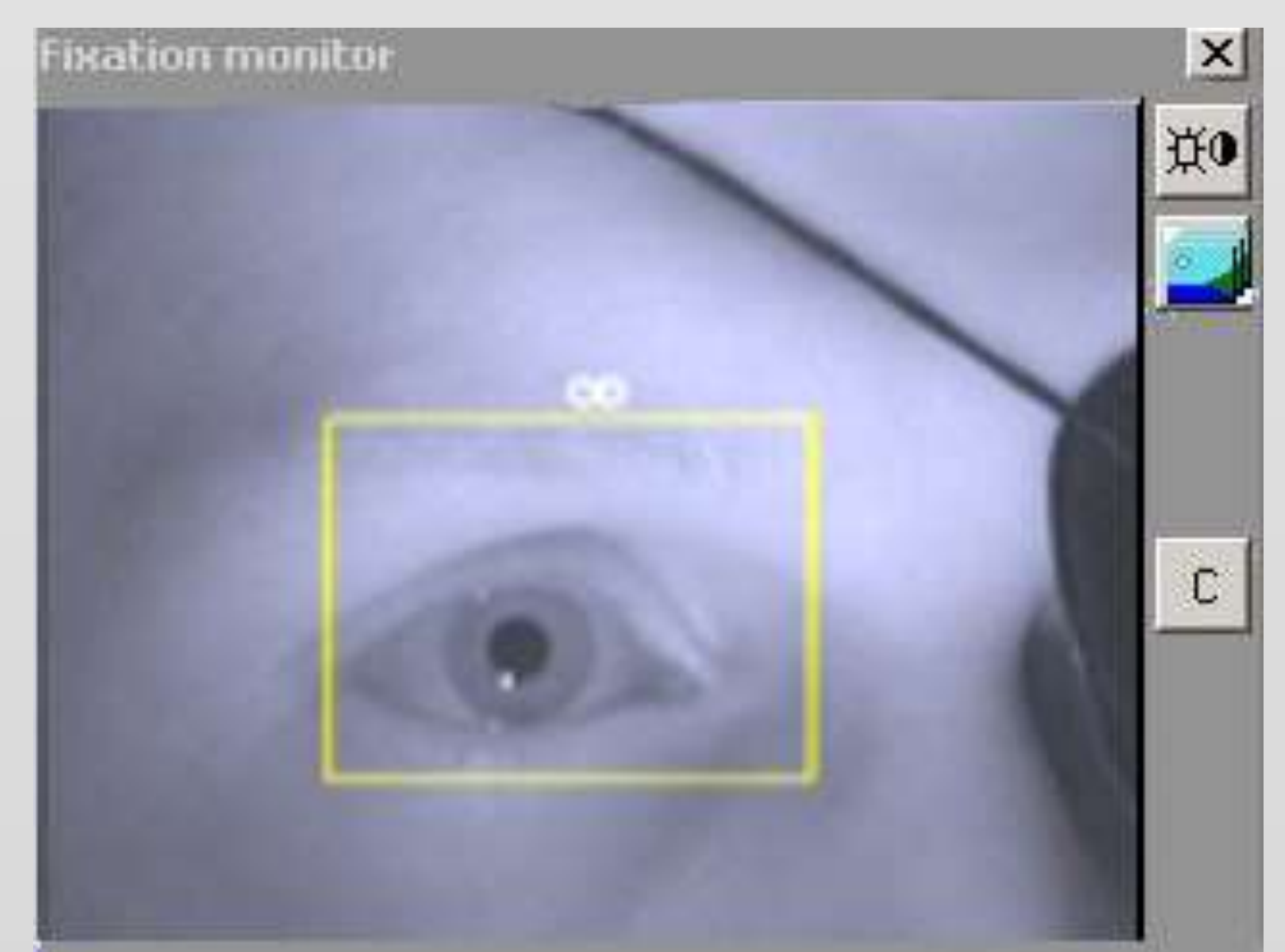


Eye tracker

MonCV One is equipped with an eye tracker for the automated measurement of the pupil size and controls of fixation and blinking. It can also provide a video recording of the entire exam.

Key point

- *Video recording allows to document problems such as ptosis, nystagmus, lens misalignment...(*)*



* Patent pending

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