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DESCRIPTION AND COMPARATIVE ANALYSIS OF THE EXTERNAL OPHTHALMIC DIAGNOSTIC USING A REMOTE SECOND REFERRAL OPTION SYSTEM AND A LOCAL EXAMINATION.

Purpose: To investigate the possibilities of a teleophthalmology system to be used at a remote second referral program, and to compare the virtual to the local diagnostic. Methods: A local exam was compared to a virtual examination. the local examination followed the regular schedule and routine examination of the external disease section of the department of ophthalmology at UNIFESP (before the digital examination, the referal doctor of the ambulatory of did a detailed examination in the slit lamp and note the files of each patients with description of the alterations, diagnostic and purpose of treatment). After the real examination a trained technician took digital pictures of the case and uploads the jpeg files to a remote location using a proprietary system named Eyemail, especially designer to that purpose. Demographic and clinical information followed the picture and were available immediately to the virtual consultant. The images of the anterior segment were digitized by an other doctor using a digital camera attached in a slit lamp, and a computer with the Eyemail program. The images were attached to the clinical description of each case. The files were sent to the website (specially built site) www.suportemedico.com.br, and was accessed under a password by three virtual consultant, that made a formal diagnosis in a remote place. Then, the diagnostic based in the virtual files were compared to the in loco diagnostic. Results: Forty five cases of 45 eyes were sent to the website www.suportemedico.com.br using the Eyemail program. The three virtual consultations and the local consultation were compared. Virtual operator 1: In 41 of the 45 cases (93.18%) the local and the virtual consultators did the same syndromic diagnostic and in 36 of 45 cases (81.81%) did the same etiological diagnostic. Virtual operator 2: In 42 of the 45 cases (95.45%) the local and the virtual consultators did the same syndromic diagnostic and in 40 of 45 cases (90.90%) did the same etiological diagnostic. Virtual operator 3. In 41 of the 45 cases (93.18%) the local and the virtual consultators did the same syndromic diagnostic and in 38 of 45 cases (84.44%) did the same etiological diagnostic. Discussion: Efforts are being made to integrate the system to Universitary clinical software allowing it to perform second opinion consultations. Further analysis shall subside its reliability in other subspecialties and under adverse conditions. Conclusion: The results proved that the system has a potential use as a second referral program in ophthalmic external disease under the tested conditions.