

6a: Concepts for Diagnosis - Real Time / Yale Fisher, MD

Transcript

So now we know how to hold the probe. We know how to examine the globe. How do we approach the entity of a clinical diagnosis? It is really with three concepts and these concepts in contact scanning really haven't changed for forty years.

In B-scan, it almost always relates to the ability to see something move, which I am going to call, as a concept, real time. Basically, it's movie. Things move differently in the vitreous; retinal detachments move differently than blood in the vitreous. And it is the movement, or the quality of the movement, or moving something away from the wall that allows us to see something underneath the vitreous. So real time is one of the first, basic, clinical diagnostic concepts that are required for contact B-scan diagnosis.

So how do you make the eye move? Well, with the probe held against the globe at any of the positions we've previously described, you have the patient voluntarily move the eye and that will begin to shake the material inside. You'll see what's moving and what's not.

It's very revealing because you will rapidly realize that the retina undulates and the vitreous dances more quickly. Is it blood just within the form vitreous? Or is blood behind the vitreous face? All these movements and motions, even subretinal fibular material in a long standing detachment, have movements which are pretty diagnostic and you're going to see many of them in the library that follows these basic lessons.

So real time is an important part of clinical diagnosis.