

#### Welcome

- Slides and recorded presentation will be posted to the website <u>www.telehealthtac.org</u>
- Funding for this presentation comes from the Health Resources and Services Administration, the Office for the Advancement of Telehealth, and Indian Health Services
- Presented in partnership with the Regional Telehealth Resource Centers – <u>www.telehealthresourcecenters.org</u>





#### Welcome – Overview of Today's Talk

- Definition of Terms
- Technology Overview
- Making Them Work VTC and Store-and-Foward
- A Look at the Market
- Thoughts on Imaging
- Image Comparisons
- Summary
- The Toolkit
- Q&A





# **Definition of Terms**

A look at the terminology associated with video otoscopes

## **Definitions – The Categories**

- Otoscopes with Video Output
  - Multiple video connector options
    - S-Video
    - Composite
    - HDMI
    - DVI
  - Multiple interface options
    - Stand-alone monitors
    - VTC Endpoints
    - "Framegrabber" video cards
    - Video-USB adapters





## **Definitions – The Categories**

- Otoscopes with USB Output
  - Requires a computer to view video
  - Multiple interface options
    - Live VTC software
    - Store-and-forward software applications





### **Definitions – Resolution**

- Standard Definition
  - 640x480 pixels (NTSC)
  - ~300,000 pixels, or < 1/3 megapixel
  - Uses S-Video or Composite cables / connectors
  - 4:3 aspect ratio
- High Definition
  - 1280x720 vs 1920x1080
  - ~1 megapixel vs ~2 megapixels
  - Uses HDMI, DVI or Component cables / connectors
  - May have 16:9 aspect ratio





# **Technology Overview**

A look at how the devices work, and common features, functions, and issues surrounding this technology

#### The Parts









#### The Parts – Probe

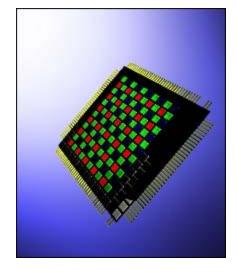


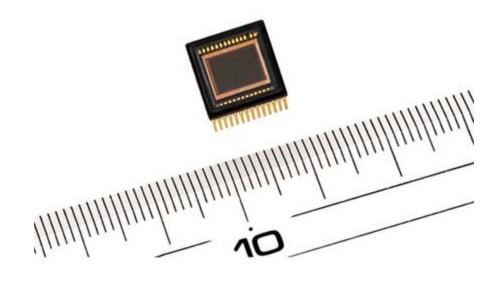


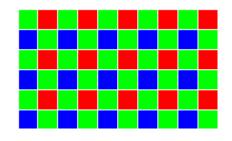




#### The Parts – Imaging Sensor











#### The Parts – Focus Ring







#### The Parts – Light Source

















#### The Parts – Cables

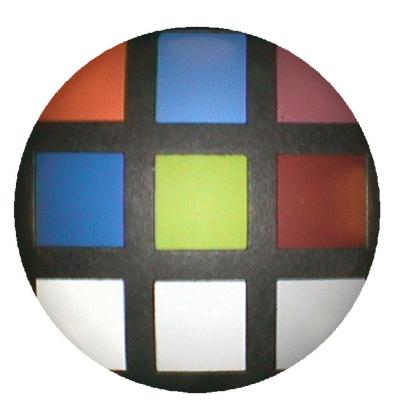
- Fiber Optics
- Power to Probe
- Power to Light Box
- Video Output to Light Box
- Video Output to Auxiliary Device
- USB





# White Balancing

- Automatic
  - Slight adjustments may change color
  - Performance varies
- Manual
  - Reset the sensor to "white" before use







# Light Intensity

- Manual controls for increasing or decreasing the brightness of the lights
- Lower light levels may reduce "blooming" in images
- Not all devices support this









### Sensor Sensitivity

- "Gain Control"
- Automatic
  - Easier to use
  - Can result in variations in color or brightness with minor movements
- Manual
  - Easier to control
  - May require frequent adjustments to get the best image









# Insufflation

- Can clear humidity in the ear and "clouding" of the lens
- Not all devices support this
- Not all insufflation bulbs work on all probes



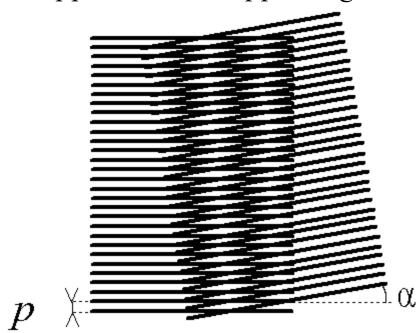




# Anti-Moiré

TTAC

- Moiré is an imaging artifact that results in the appearance of a regular pattern in the final image
- Important to suppress when supporting flexible scopes





### Capture Image

- Internal memory
  - Images are stored to the device
  - Images may or may not be deleted on power down
  - Images can be retrieved through USB or media readers
- External software
  - Devices may communicate with proprietary software





#### Software

- Store patient information
- Capture images
- Case / encounter management
- May have limits on how many images can be added in one encounter
- Sometimes have background processes that use CPU





### Focusing

- Fixed Focus
  - Typically only on devices with large focal length
  - Usually does not allow for "wide" shots
- Manual Focus
  - Requires user to focus the camera
  - May be prone to accidental adjustments
- Useful to be able to focus before inserting into ear canal





## Depth of Field

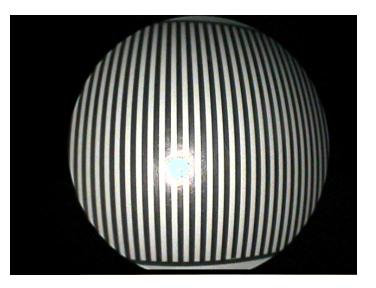
- Also referred to as "focal length"
- Refers to the range of distances that an object can be in focus
- Very important when imaging with an otoscope
  - A greater depth of field is very useful

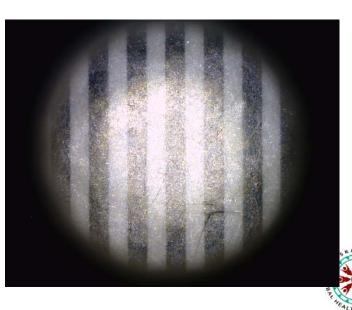




## Field of View

- How much of the world can be captured by the sensor
- Wide field of view is important
- Extremely wide FOV can lead to distortion or "fish-eye"







# Making Them Work With VTC

Getting video otoscopes to work with videoconferencing systems.

## VTC Overview – Inputs

- Videoconferencing systems often support auxiliary inputs
  - VCR, DVD player, etc
    - Older Tandberg units supports Composite inputs
    - Tandberg C\* series codecs may support HDMI, Component, Composite and DVI
    - Polycom supports S-Video inputs
    - Vidyo does not support auxiliary inputs
      - Recommends using a "video scaler" device
    - Lifesize supports HDMI, Component, Composite, S-Video, and DVI inputs





## **Connections and Conversions**

- Connecting to Standard Definition
  - S-Video and Composite connectors
    - Non-USB video otoscopes should support this
  - High-definition converters
    - Requires down-conversion from HDMI or Component to SD
    - Aspect ratio becomes a problem





## **Connections and Conversions**

- Connecting to High Definition
  - HDMI and DVI
    - This is not yet a common feature on video otoscopes
  - High-definition converters
    - Requires up-conversion from S-Video or Composite to HDMI or Component
    - Will not gain resolution in conversion
    - Aspect ratio becomes a problem





## **Desktop Videoconferencing**

- USB-based converters
  - S-Video and Composite video can be attached to USB "dongles" that make the camera input appear as a webcam to desktop videoconferencing applications
  - Success may depend on software and USB converter
  - Would require switching the video source from the normal USB webcam to the converter





# Making Them Work With S&F

Getting video otoscopes to work with frame grabbers and store-and-forward systems.

#### **Frame Grabbers**

- Capture standard-definition video or high-definition video to a PC through a special card
  - Usually integrated with a store-and-forward software application
  - Same requirements as VTC systems
    - Converters, connectors, etc





# **Full-Resolution Captured Content**

- USB video otoscopes may support capturing images to internal memory or removable media
- Proprietary software may support capturing still images
- Requires USB connection or memory card reader
- Allows saved files to be transmitted





#### **Product Overview**

A look at the manufacturers and their devices

#### The Products

- Advanced Monitors VO USB
- Advanced Monitors VO Video
- AMD 300 (discontinued)
- AMD 500
- Aurical OTOCam 300
- Jedmed Combo 24
- Jedmed Digicam
- Lightning Enterprises M-100
- MedRx

TTAC

- MGE DinoLite Pro USB
- MGE DinoLite Pro Video
- RF Co. ME-16 Morse TypeS Video
- RF Co. ME-16 Morse TypeS USB
- SecondOpinion DrCamscope Standard Definition
- SecondOpinion DrCamscope High Definition (discontinued)
- WelchAllyn Macroview



#### Video Otoscopes





Advanced Monitors – Video and USB











AMD 500









Aurical OTOCam 300









#### JEDMED Combo 24













#### JEDMED Digicam – G3 and MightBrite







TTAC

MEDIT M-100







MedRx







TTAC

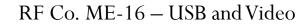
DinoLite Pro – USB and Video





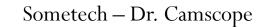
TTAC













TTAC











# Thoughts on Imaging

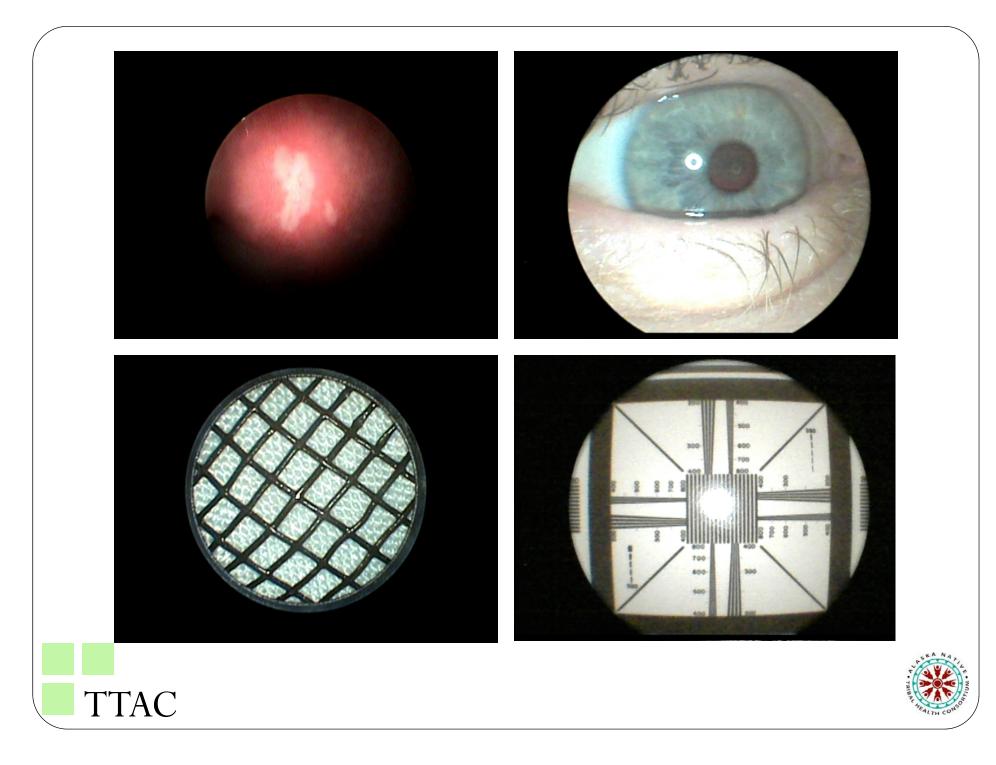
General feedback on issues that were experienced with devices when used to capture images

# What Are Useful Images?

- Clinical Images
  - Most familiar to providers performing reviews
  - Challenging to control completely
    - Changes in humidity and temperature
    - Movements of subject and operator will be captured
- "Technical" Images
  - Allow for additional analysis of performance
  - May not reflect realistic use cases
  - May cause devices to look worse in review







# When Capturing Images ...

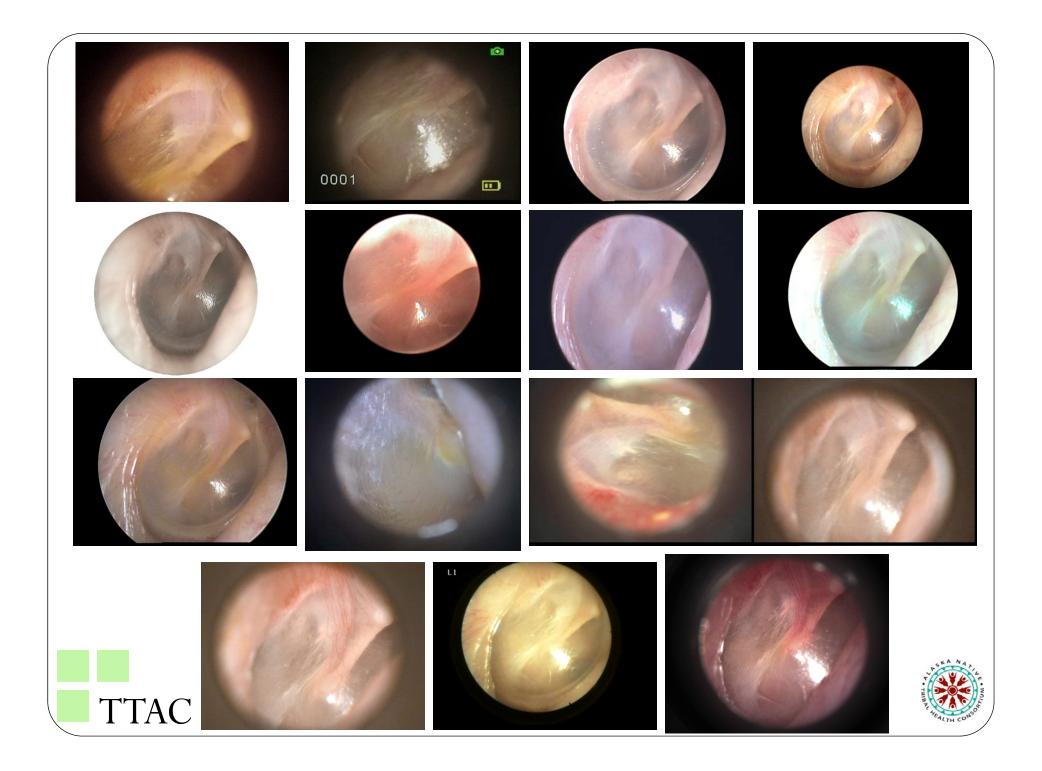
- Learn before you start shooting
  - See if there are tests that don't fare well on all devices
  - Get a feel for how to use the devices
- Stay consistent
  - Fixed distance or consistent framing?
  - Speculum on or off?
  - Image labels





# Image Comparisons

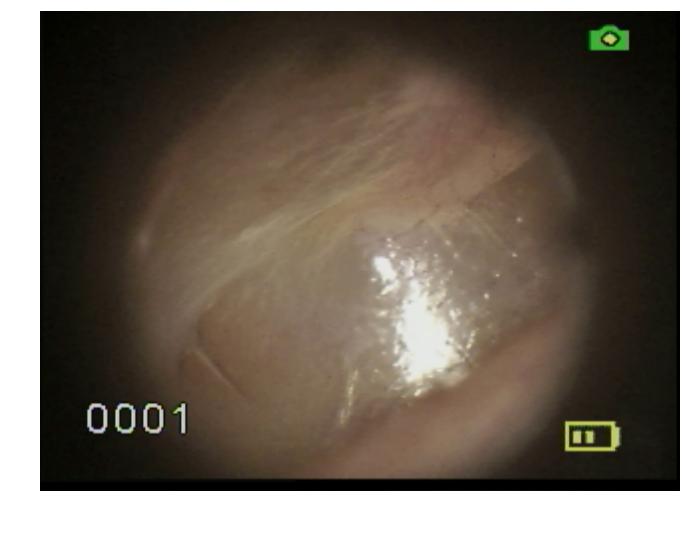
A review of images from various devices.















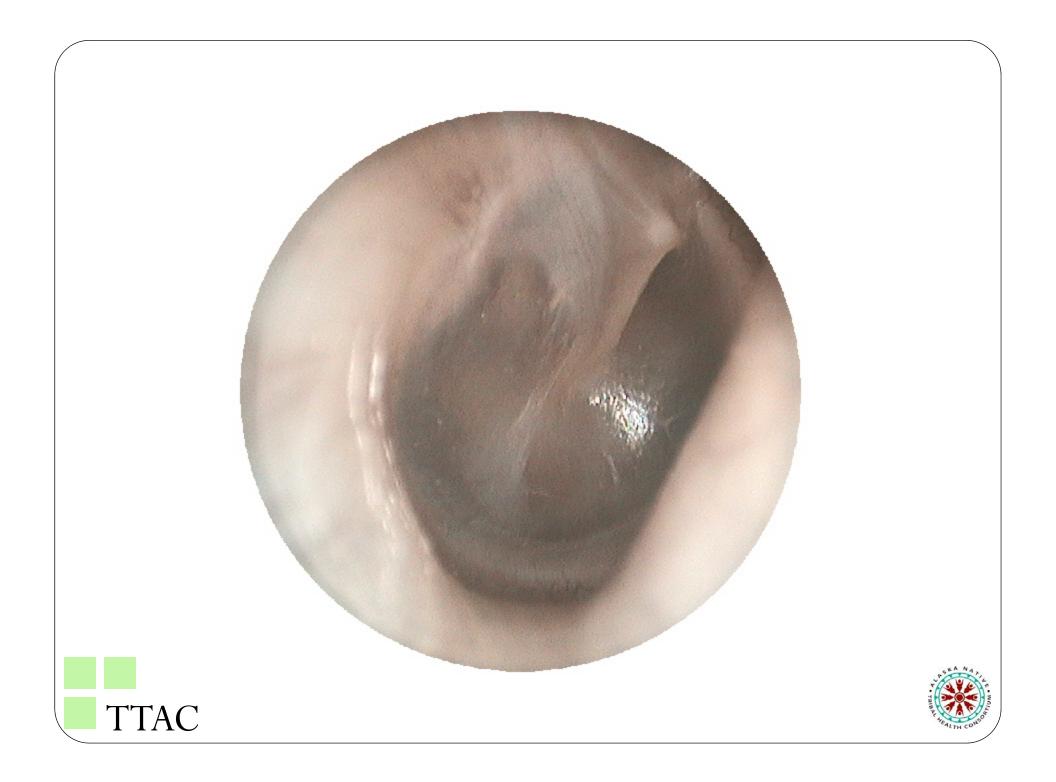


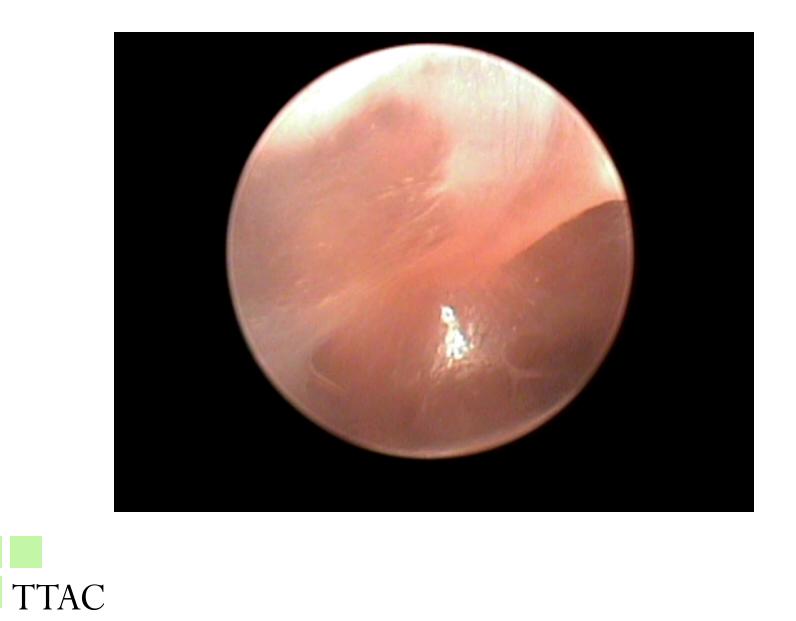




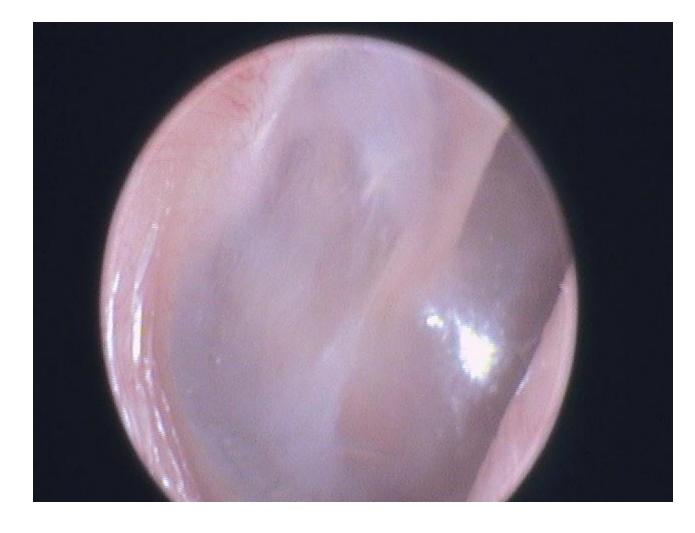






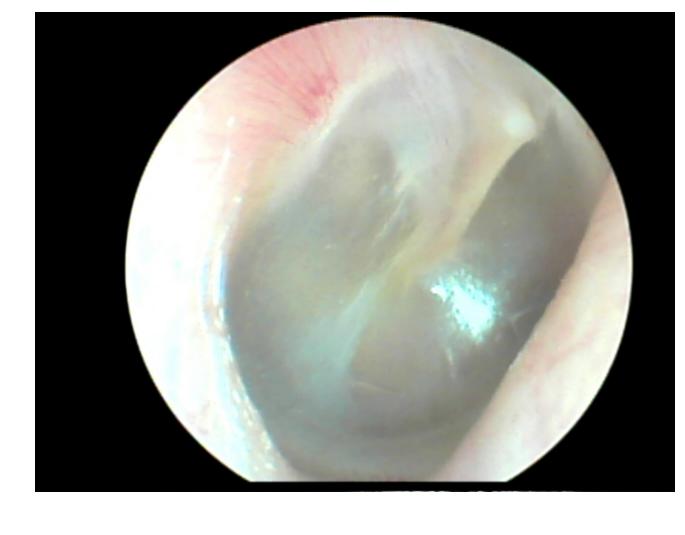












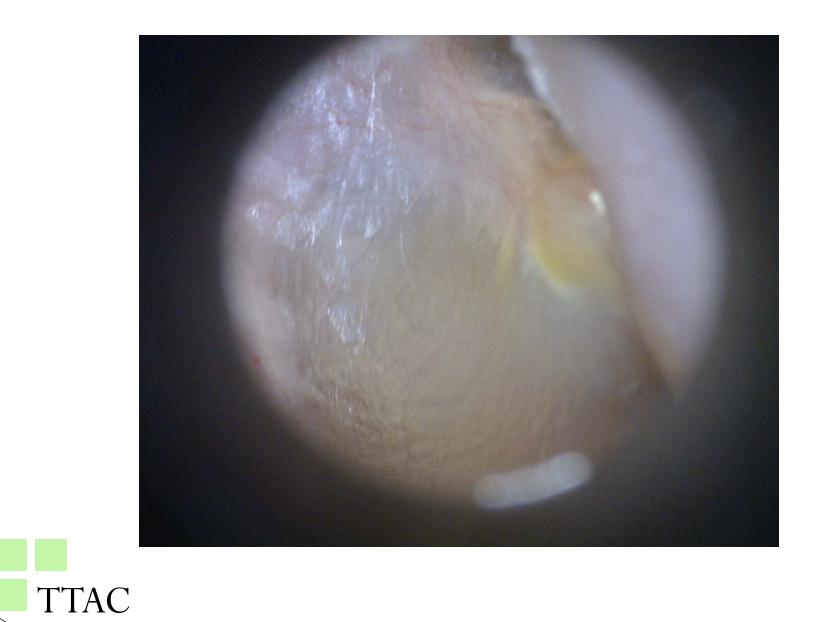




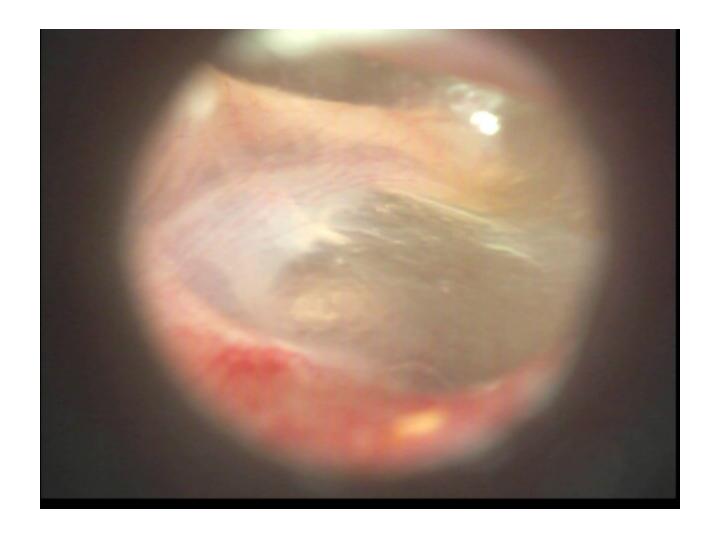
























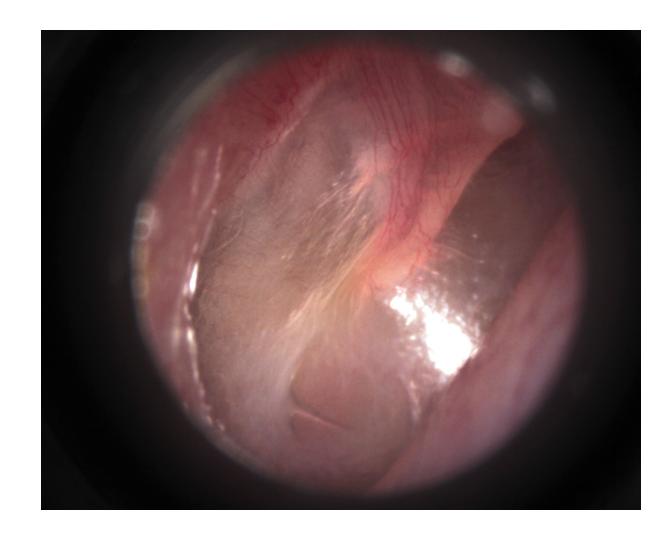








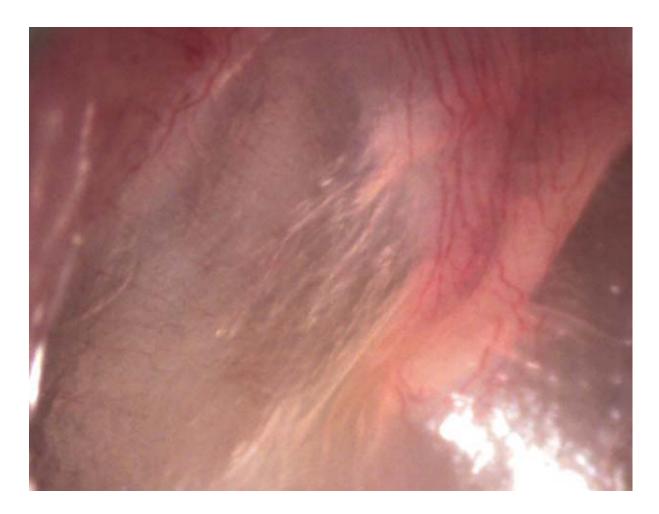






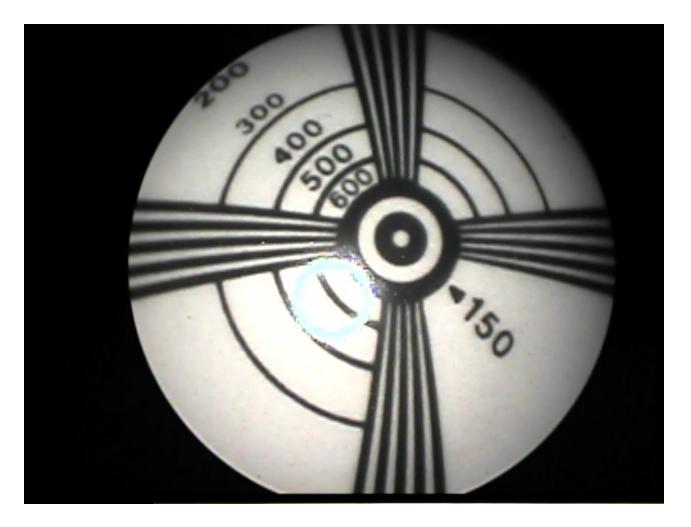


#### Resolution – USB



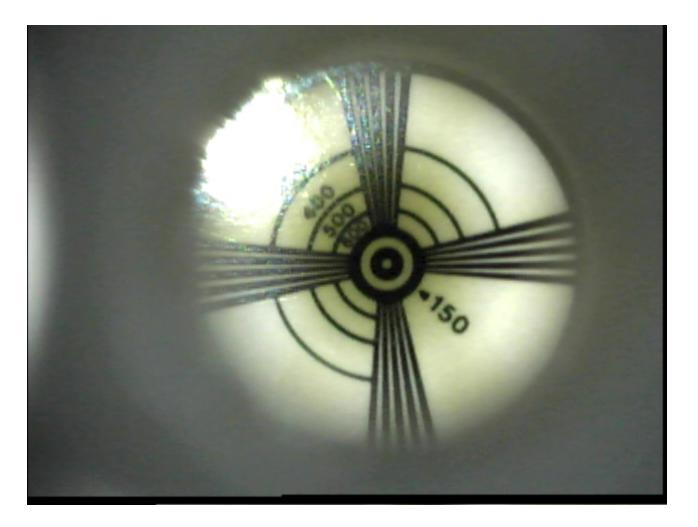






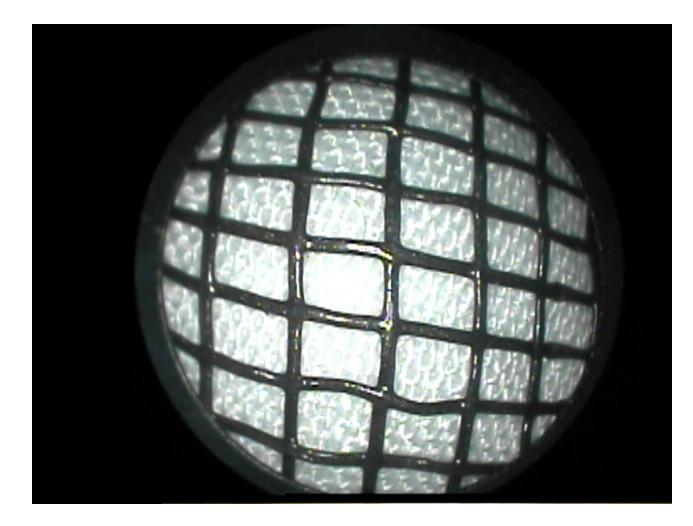






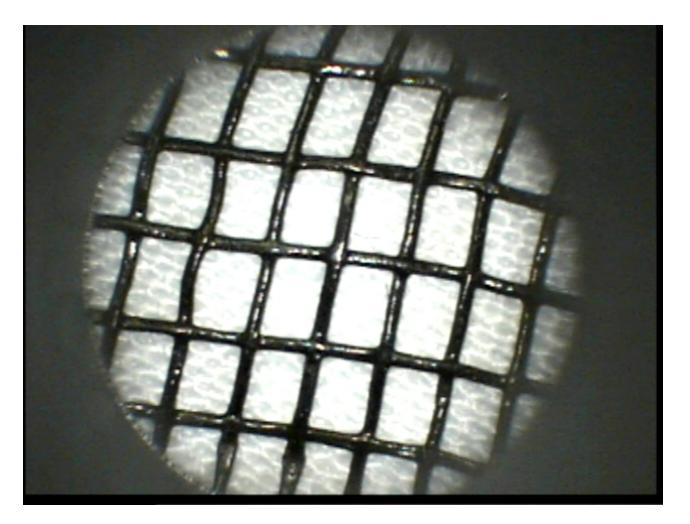






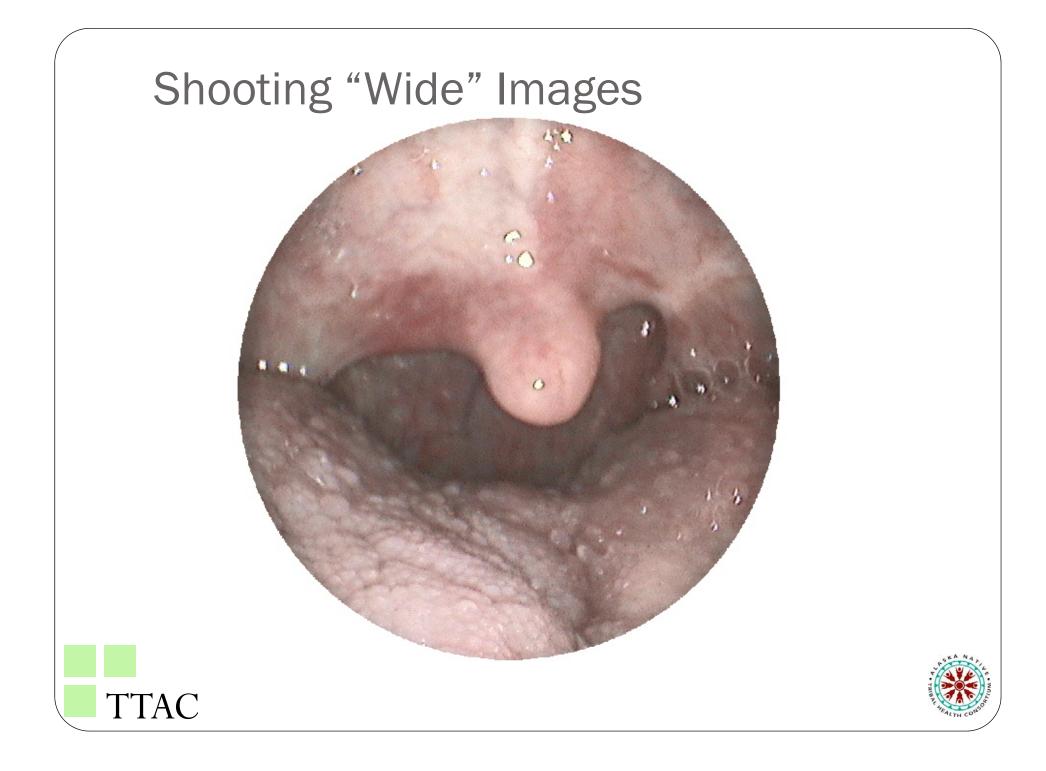




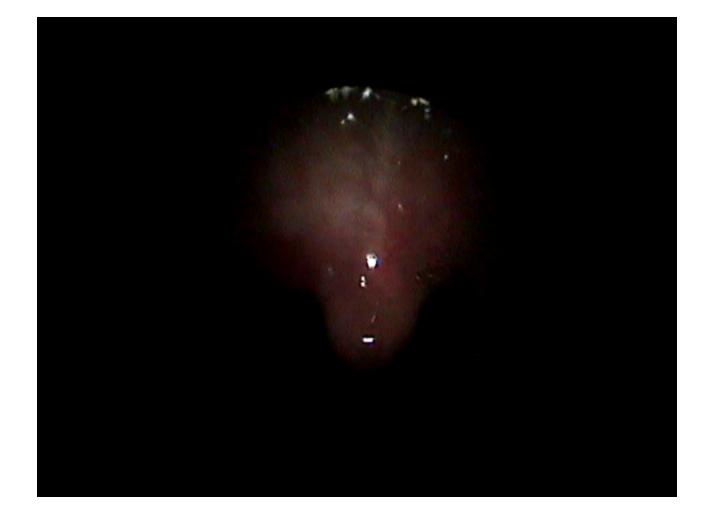








## Shooting "Wide" Images







#### Color Accuracy and Wide Images





#### Color Accuracy and Wide Images







#### **Color Accuracy**







#### **Color Accuracy**







# Summary

# Summary

- Program requirements should drive purchasing decisions
- Video otoscopes vary widely in features, performance, and cost
- Testing these devices can be challenging due to the variations with each manufacturer's product





# Toolkit

- A toolkit on video otoscopes is available at the Telehealth Technology Assessment Center's website – <u>www.telehealthtac.org</u>
- Includes more information, additional comparison data, and will have labeled sample images available for review





## Questions?



Kirt J Beck TTAC Director kjbeck@TelehealthTAC.org Main: 907.729.4703





For additional information, please visit our website at <u>www.TelehealthTAC.org</u>

Additional resources for telehealth program development can be found at <u>www.telehealthresourcecenters.org</u>





82