Novel Retinal Lesion in Ebola Survivors, Sierra Leone, 2016

Technical Appendix 1
SL Retinal Image Grading Form
*Required 1. Reviewer * <i>Mark only one oval.</i>
□ P S
□ C P
□ J B
□ R D
2. Enter Retinal Image Number *
3. Select which eye * <i>Mark only one answer.</i>
Left Skip to question 5. Right Skip to question 4.
Right Eye
4. Is there any view of the right fundus that can be classified? * Mark only one answer.
Yes Skip to question 7.
No, probable lens opacity obscuring fundal view Stop filling out this form
No, probably due to another cause other than cataract Stop filling out this form.

Left Eye

5. Is there any view of the left fundus that can be classified? * *Mark only one answer.*

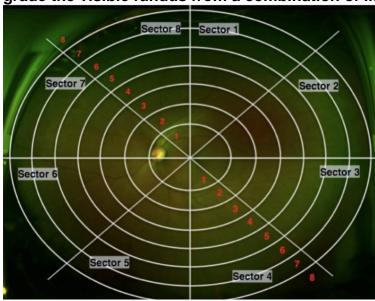
	stion 6.
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→ No, probable lens opacity obscuring fundal view Stop filling out this form.

No, probably due to a cause other than cataract Stop filling out this form.

Left Eye Grading Visible Fundus

If there are several images available look at them both as the combination of both images might show more areas of the retina than one image alone. In which case, grade the visible fundus from a combination of images available.



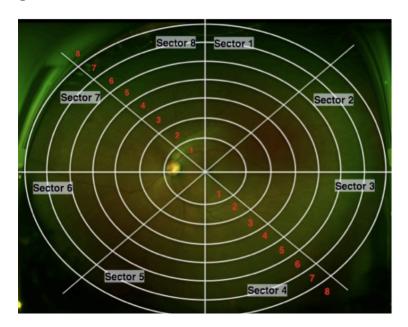
6. Grade the degree of visible retina * Mark only one oval per row.

		1 :	2	3	4	5	6	7	8
Sector 1	\subseteq	\mathcal{L}	\mathcal{L}	\mathcal{L}	\mathcal{X}	\mathcal{L}	\mathcal{L}	\supset (\supset
Sector 2		\mathcal{L}	\mathcal{L}		\mathcal{L}	\mathcal{L}	\mathcal{X}	\mathcal{X}	\supseteq
Sector 3								\mathcal{L}	
Sector 4		\mathcal{L}	\mathcal{L}	\mathcal{L}	\mathcal{L}	\mathcal{L}	\mathcal{L}	\mathcal{L}	
Sector 5	\subseteq	$\supset \subset$	$\supset \subset$	\mathcal{L}	$\supset \subset$	$\supset \subset$	\mathcal{L}	\supset (
Sector 6			\mathcal{L}		\mathcal{L}	\mathcal{L}	\mathcal{L}	\mathcal{L}	
Sector 7)(\mathcal{X}	\mathcal{X}	\mathcal{L}	\mathcal{X}	\mathcal{L})(
Sector 8		\supset (\mathcal{L}	\mathcal{L}	\supset (\mathcal{L}	\supset ($\supset \subset$	\supset

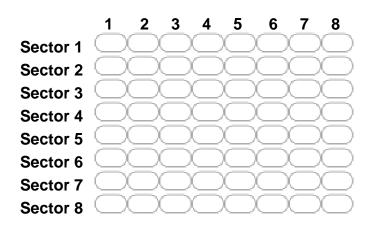
Skip to question 8.

Right Eye Grading Visible Fundus

If there are several images available look at them both as the combination of both images might show more areas of the retina than one image alone. In which case, grade the visible fundus from a combination of images available

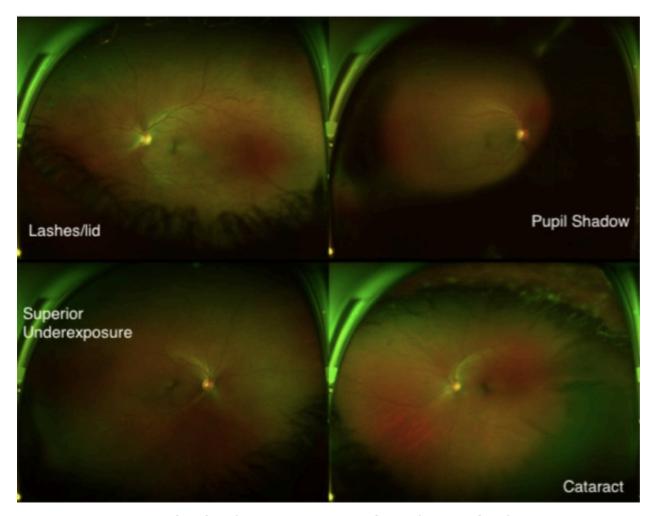


7. Grade the degree of visible retina * Mark only one oval per row.



Skip to question 8.

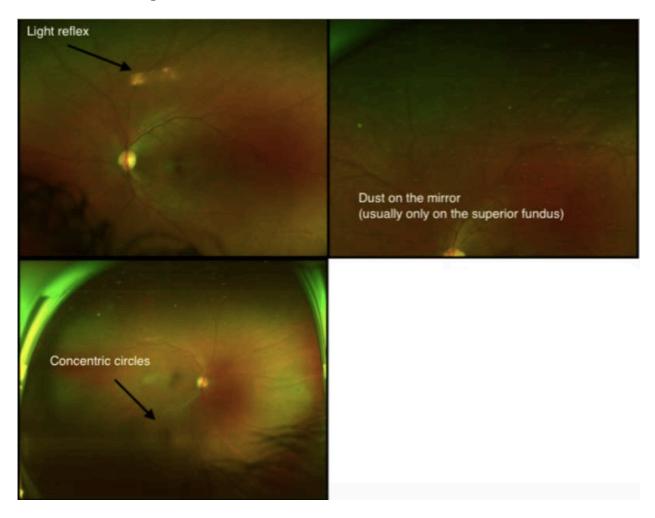
Restricted Fundal View



8. What are the contributing factors to the restricted fundal view? *Mark only one oval per row.*

	0%	25%	50%	75%	100%
Cataract					
Pupil Shadow					
Eye lashes					
Camera Underexposure					
Skip to question 9.					

Artifactual Findings



- 9. Are any of the following artifactual findings visible? Tick all that apply.
- Superficial camera dust
 Horizontal light reflex
- Concentric circles

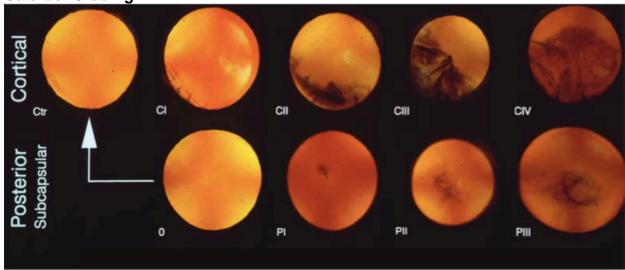
Cataract Assessment

Look carefully at the fundal image. Are there any shadows cast from media opacities, or any cortical cataract spokes?

Is there any evidence of cataract seen on the image? * Mark only one oval.

Yes, Definitely Skip to question 11.
Yes, Questionably Skip to question 11.
No Skip to question 12.

Cataract Grading



11. What type of cataract can be seen and how much of the retina does it obscure comparing to the standard images above?

Mark only one oval per row.

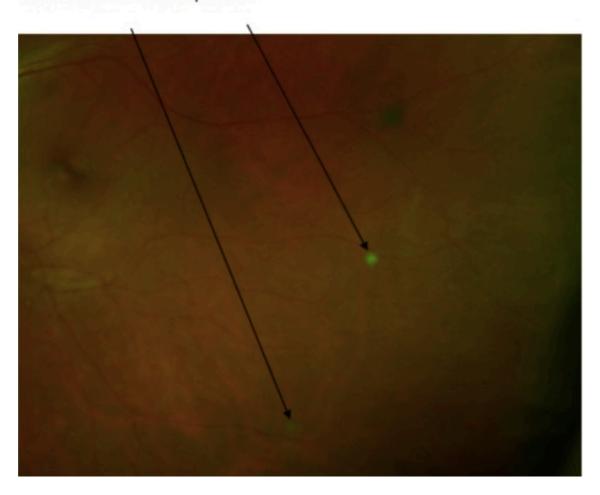
Cortical O I II III IV
Posterior subcapsular cataract O O O O
Undefinable

12. Are there any abnormalities that can be seen on the image? * Mark only one oval.
Yes, definitely
Yes, questionably
No, This looks like a normal fundus <i>Skip to question 42.</i>
Vitreous (1)
13. Are there any finding that might be from the vitreous? * Mark only one oval.
Yes
No Skip to question 21.

Are there any findings to report?

Vitreous Assessment Snowballs

Round circular vitreous opacities



14. Are there any snowballs visible? * Mark only one oval.

\bigcirc	Yes,	definitely
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Yes, questionably

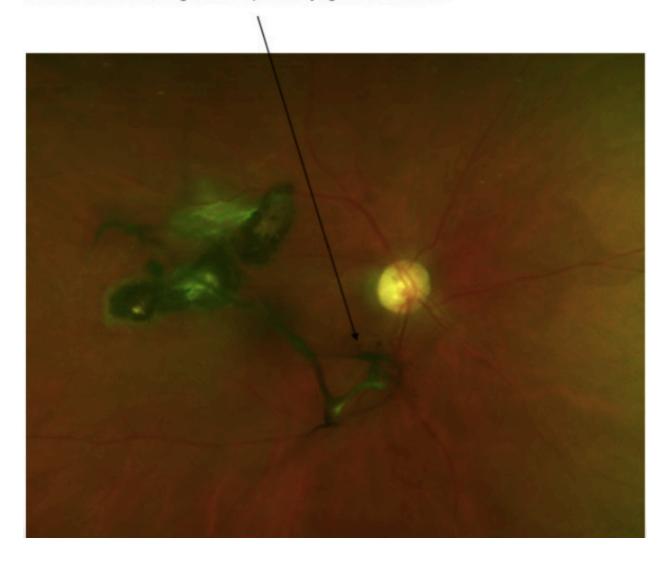
No Skip to question 16.

View insufficient to see Skip to question 16.

15. Count the number of snowballs seen <i>Mark only one oval.</i>
1
2
4
<u> </u>
8
9
<u> </u>
→ 10

Pigmented vitreous floaters

Dark vitreous floater, irregular in shape. Overlying retinal structures



16. Are there any pigmented vitreous floaters? *Mark only one oval.*

- Yes, definitely
- Yes, questionably
- No Skip to question 19.

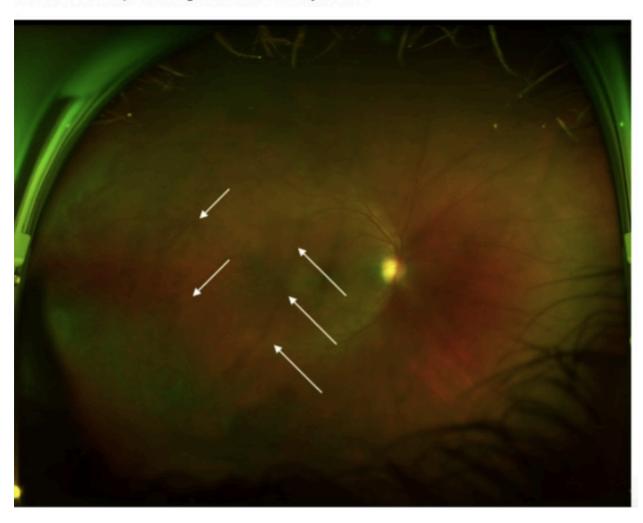
Quantifying Vitreous Floaters

17. How many separate pigmented vitreous floaters are there? Mark only one oval.
□ 1
2
□ 3
□ 4
5
6
8
9
10
→ 10
18. What is the length of the longest pigmented floater seen in disc diameters? <i>Mark only one oval.</i>
< 1 disc diameter
1 disc diameters
2 disc diameters
3 disc diameters
4 disc diameters
5 disc diameters
6 disc diameters
7 disc diameters
8 disc diameters
9 disc diameters
10 disc diameters

Vitreous Debris

Diffuse Vitreous debris

Often only obvious when 2 sequential fundal images are taken in quick succession and opacitie are seen to shift position against the stationary retina.



19. Is there any vitreous debris? <i>Mark only one oval.</i>					
	Yes, definitely				
	Yes, questionably				
	No.				

Other Vitreous Observations
20. Are there any of the following signs? <i>Tick all that apply.</i>
Weiss ring Asteroid Hyalosis No
Classification of Fundal Lesions
21. Are there any pigmented lesions? <i>Mark only one oval.</i>
Yes, definitely Yes, questionably No

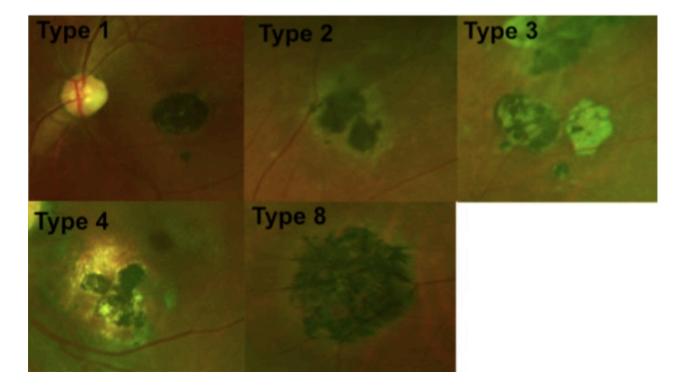
Pigmented Lesions Group 1

Look at the fundus and compare the lesions to those presented below.

- Type 1 Solid pigmented lesion
- Type 2 Pigmented lesion with a grey surrounding retinal halo
- Type 3 Pigmented lesion with pale lacunae
- Type 4 Pigmented lesion with surrounding deeper retinal involvement characterised by a yellow appearance
- Type 8 Pigmented lesion but non uniform, irregular border with linear projections following surrounding vessels

A single fundus may demonstrate more than one variety of lesion, for example you may see a type 3 lesion with surrounding grey retinal halo in which case select both type 2 and 3.

Also, select if there is any vessel tracking associated with the lesion or vitreous band adhesions



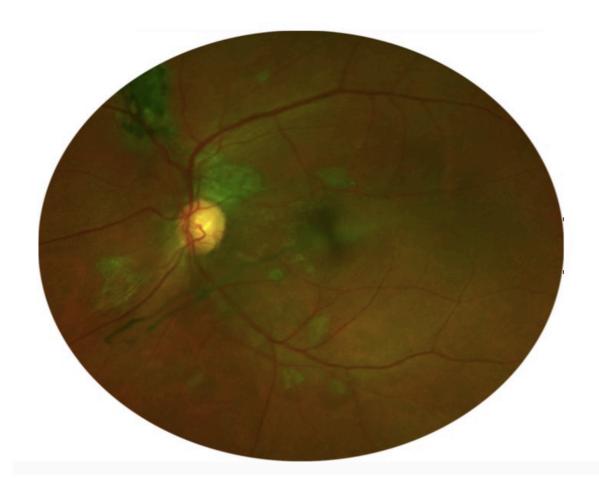
22. Tick all that apply

Mark only one oval per row.	Yes, definitely Yes, questionably
Type 1 - Solid pigmented lesion Type 2 - Pigmented with grey halo Type 3 - Pigmented with lacunae Type 4 - Pigmented with yellow atrophy Type 8 - "Spiky" pigmented lesion Is there any pigment tracking along adjacent vel Is there any associated vitreous bands?	
Type 5 Pigmented Lesions	
Atrophic lesions surrounding pigmented centre often has a darker rim	e. The edge of the atrophic lesion
Retinal image published in article J B Virus in ocular fluid during convales 2423-2	scence. N Engl J Med 2015; 372:
23. Are there any Type 5 lesions visible? Mark only one oval. Yes, definitely Yes, questionably No Skip to question 24.	

Type 6 Lesions

These lesions can appear in two forms. Here they can be seen emanating from the optic disc. Alternatively they can be seen in isolation in the peripheral fundus as demonstrated in the following question. They often are surrounded by a dark area of retina which most commonly is isolated to the lesion but in some occasions, extend more peripheral.

In all cases, they appear underneath the retinal vasculature without causing and vessel change. Occasionally large lesions can contain pigmented areas as seen in the top left.



24. Are there any Peripapillary	Type 6	Lesions	Visible?
Mark only one oval.			

Yes, definitely
Yes, questionably
No

Isolated Peripheral Type 6 Lesions

1. Small, often triangular lesions surrounded by darkened retina



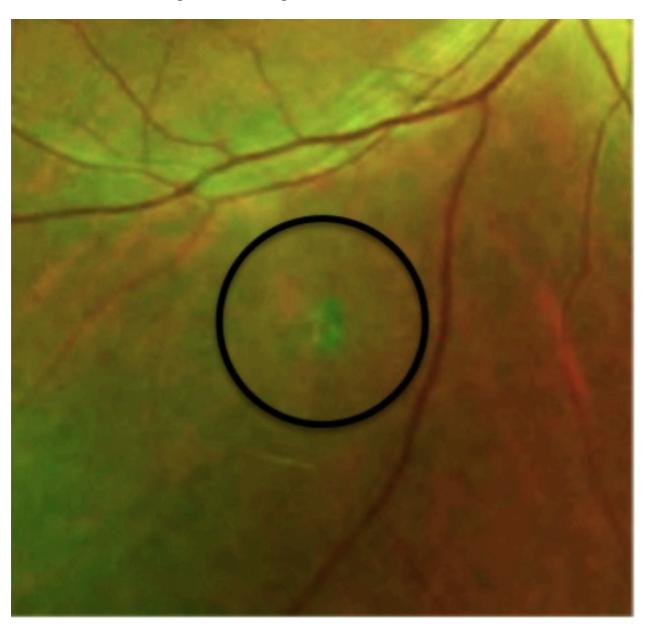
25. Are there any of Isolated Peripheral Type 6 lesions visible on the colour fundus image?

Mark only one oval.

\supset	Yes, definitely
\supseteq	Yes, questionably
	No

Type 7 Lesions

Type 7 lesions are small pigmentary disturbances. Their location is variable. They exhibit no surrounding retinal change.



26. Are there any T	Гуре 7	lesions	visible?
Mark only one ova	ıl.		

_	Yes, definitely
_	Yes, questionably
	No

Type 9 Lesions

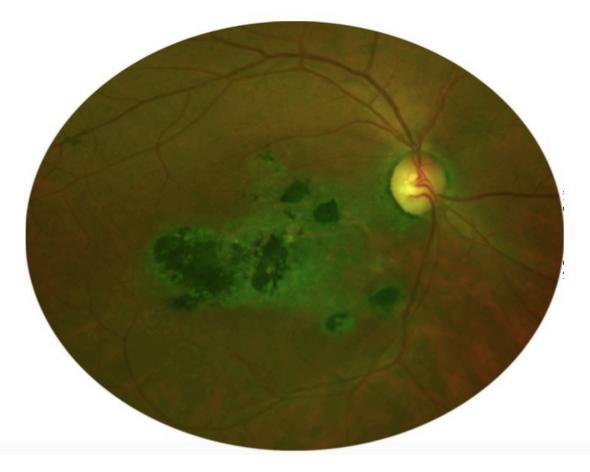
Type 9 lesions appear as pigmented bands along the retinal periphery. They are often only detected on the temporal aspect of the fundus image due to the greater temporal field of view obtained with an Optos Daytona image.



27. Are there any type 9 lesions? <i>Mark only one oval.</i>		
	Yes, definitely	
	Yes, questionably	
	No	

Type 10 Lesions

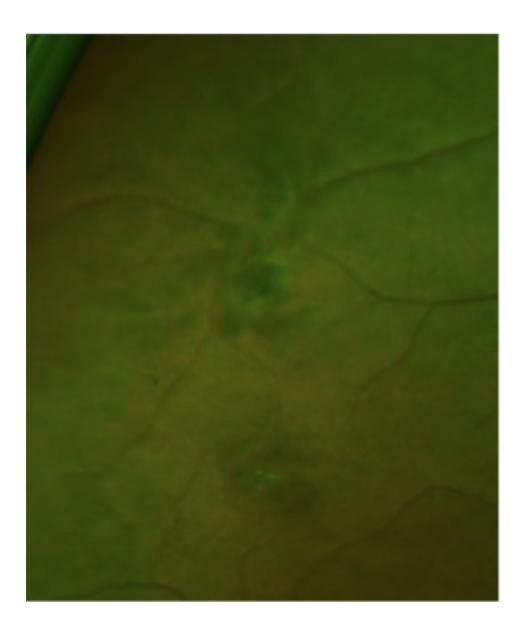
These lesions seem to appear from the optic nerve. They always involve the macula. They appear diffuse grey in colour often with a halo around the optic nerve. They frequently have pigment sections but the area of hypo fluorescence extends further than the pigmented area. They appear to have a hyper fluorescent rim at the edge of the lesion on fundus autofluorescent imaging.



28. Are there any Type 10 lesions visible? *Mark only one oval.*

Yes, definitely
Yes, questionably
No

Peripheral Pigmentary Clumping



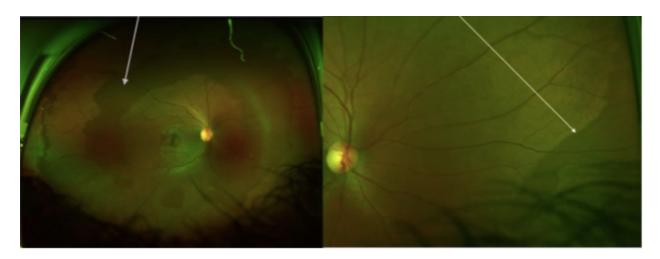
29. Are there any irregular pigmentary clumps within the peripheral that don't fit any of the lesion types? (see image above)

Mark only one oval.

Yes, definite
Yes, questionably
No

Dark Without Pressure/Peripheral Dark Without Pressure

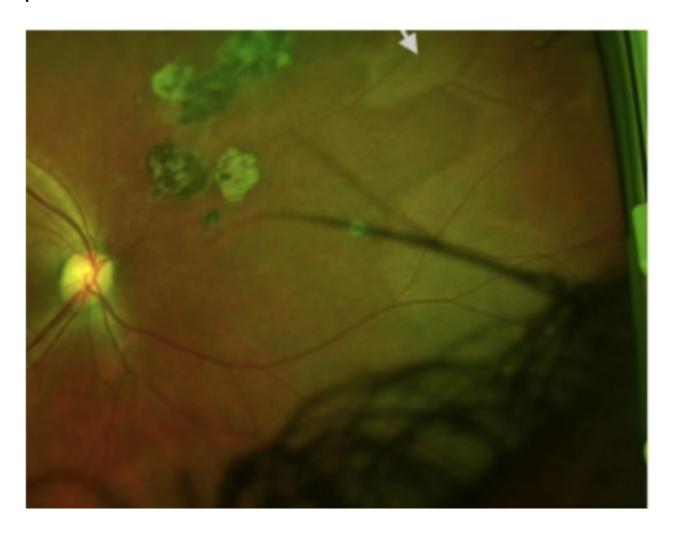
A well demarcated, geographic, dark retinal area. Often in the mid peripheral fundus but sometimes seen in the periphery. Retinal appearance on either side looks the same. There is no transitional zone.



30. Are there any areas of either of these signs? Mark only one oval.
Yes, definitely
Yes, questionably
No Skip to question 32.
31. Does the Dark without pressure area contain any lesions? <i>Mark only one oval.</i>
Yes, definitely
Yes, questionably
◯ No

Peripheral Whitening

A well demarcated peripheral LIGHTER zone of retina adjacent to what appears to be normal retina, which has a consistent colour with the rest of the posterior pole. There is no transitional zone.

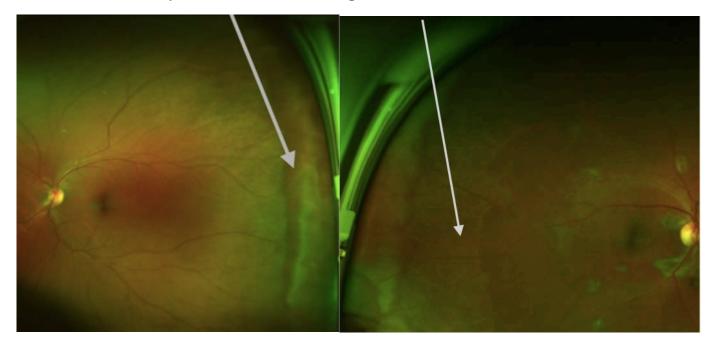


32. Are there any areas of periphe	eral whitening visible?
Mark only one oval.	

Yes, definitely
Yes, questionably
No Skip to question 33.

White Without Pressure

& associated Peripheral Retinal Glistening



Left Image - White without pressure (WWP)

33. Are there any of the above lesions?

Arrow points to the edge of the white without pressure lesion. The white area often increases in intensity before a darker border before a clear demarcation to normal retina.

Right Image - WWP associated retinal glistening.

In some eyes the area of retina adjacent to the WWP does not appear consistent with the posterior pole and instead has a patchy glistening appearance different to the solid appearance of peripheral whitening seen in the last question.

Mark only one oval per row.			
-	Yes, definitely	Yes, questionably	No
White without pressure			
WWP associated retinal glisten	ing 🔘		

White with Dark Border

This differs to the previous types as there is an intermediate dark band between the peripheral white area and normal retina



34. Are there any areas of White with Dark Border *Mark only one oval.*

Yes, definitely
Yes, questionably
No

Poorly demarcated peripheral whitening

These are ill defined peripheral changes with no clear border. They vary in intensity and are often patchy in nature



35. Are there any areas of poorly demarcated peripheral whitening? *Mark only one oval.*

Yes, definitely

Yes, questionably

No Skip to question 36.

Benign Flecked Retina

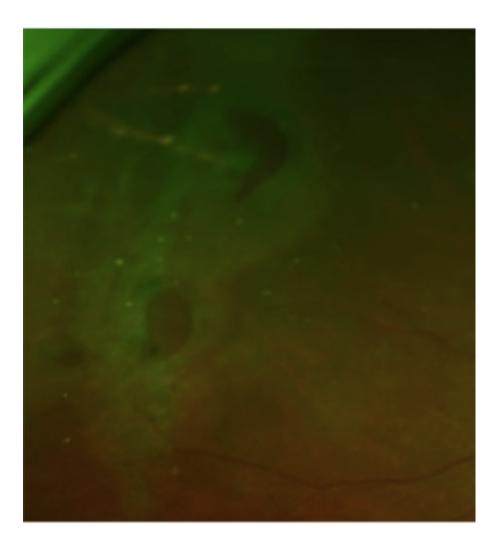
Previously described "benign flecked retina" appears as well demarcated islands of light zones in the mid peripheral retina



36.	Are there any areas of the be	enign flecked	retina in a	ny areas o	f the retina?
Ma	rk only one oval.	_		_	

)	Yes, definitely
\supset	Yes, questionably
\supset	No

Retinal Tears



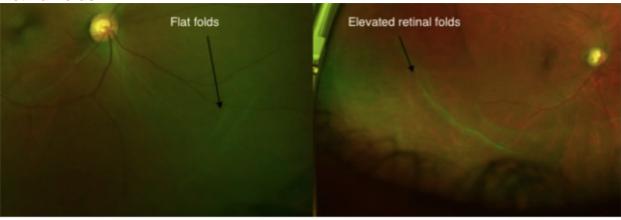
37. Are there any retinal tears visible? *Mark only one oval.*

Yes, definitely
Yes, questionably
No Skip to question 38.

Retinal Detachments

Without slit lamp confirmation, the exact depth of the images below is difficult to assess. The image on the left may be in the vitreous whereas more prominent folds seen on the right may represent retinoschisis or detachment.

Retinal folds



Tick all that app	oly.
Flat retinal	fold appearance
Appearance	e of Elevated Retinal Folds
Definite re	tinal detachment
Cheeky sp	ots suggestive of retinoschisis
◯ No	
Hemorrhages	
39. Are there an Mark only one o	ny retinal haemorrhages present? Oval.
Yes, defini	tely
Yes, quest	ionably
No Skin to	augstion 10

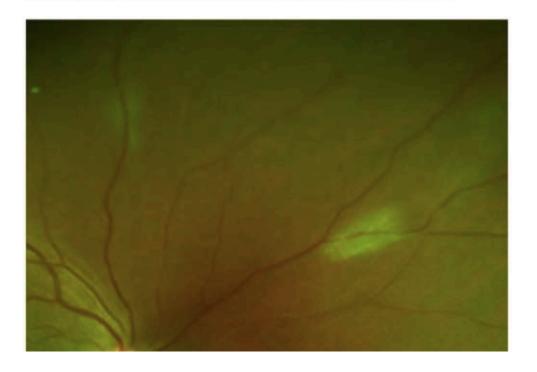
38. Is there any evidence of the following?

Neovascularisation/Vasculitis

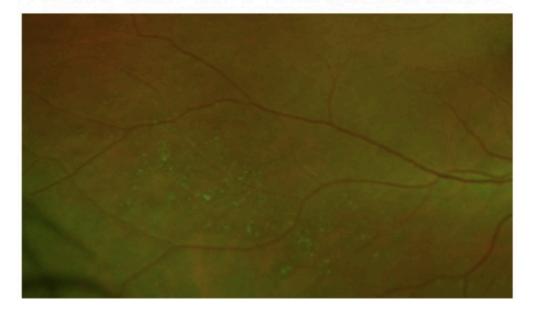
	nere any evidence of neovascularisation? Il that apply.
D	efinite New vessels at the disc
<u> </u>	efinite New vessels elsewhere
<u>_</u> Q	uestionable New vessels elsewhere
<u></u> и	one
	here any evidence of retinal vasculitis? only one oval.
	es, definitely
	es, questionably
\bigcirc N	0

Incidental retinal findings

Retinal myelinated nerve fiber layer Usually bright white streaks radiating to peripheral retina



Peripheral drusen
Small yellow dots usually outside the arcade. Some coalesce to form slightly larger areas



Snail Trail Degeneration

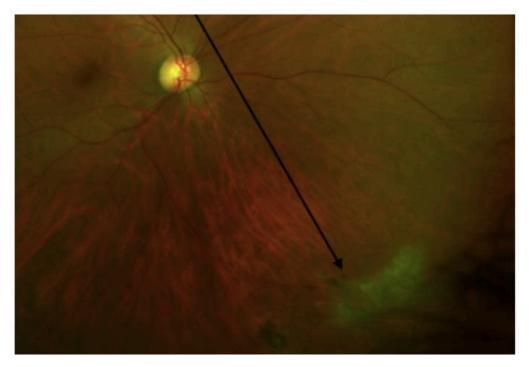
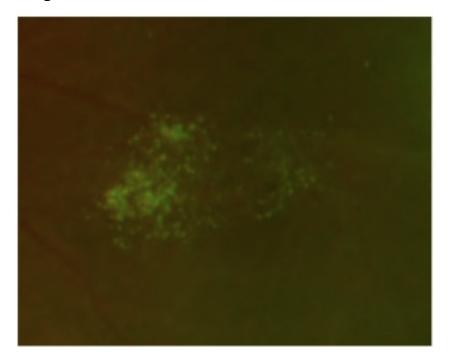
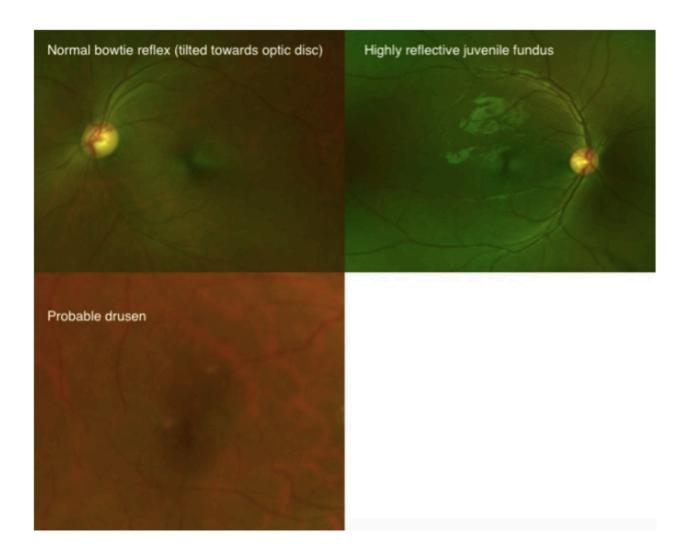


Image No 4



42. Are any of these findings visible on the retina? <i>Tick all that apply.</i>
Peripheral drusen
Myelinated nerve fibres
Snail Trail
Similar appearance to image 4
◯ No
Other:

Macula



43. Which of the following can be seen? *Tick all that apply.*

Normal bowtie reflex
Reflective Juvenile fundus
Macula hole
Macula not visible
Probable drusen