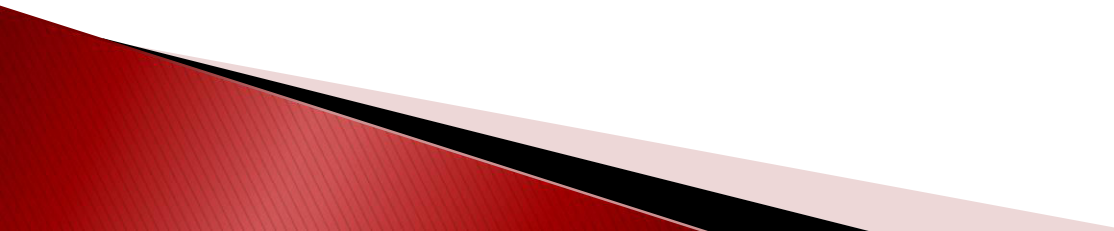


B-SCAN ULTRASONOGRAPHY

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Learning objectives

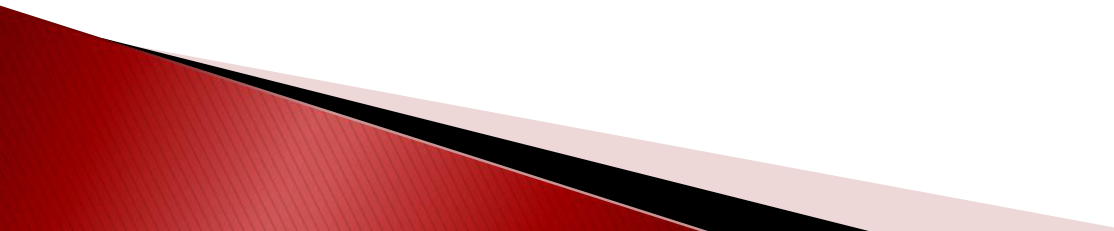
- ▶ Define B scan?
 - ▶ Which types of frequencies are used in ophthalmic ultrasound?
 - ▶ What are the indications of B scan?
- 

INTRODUCTION

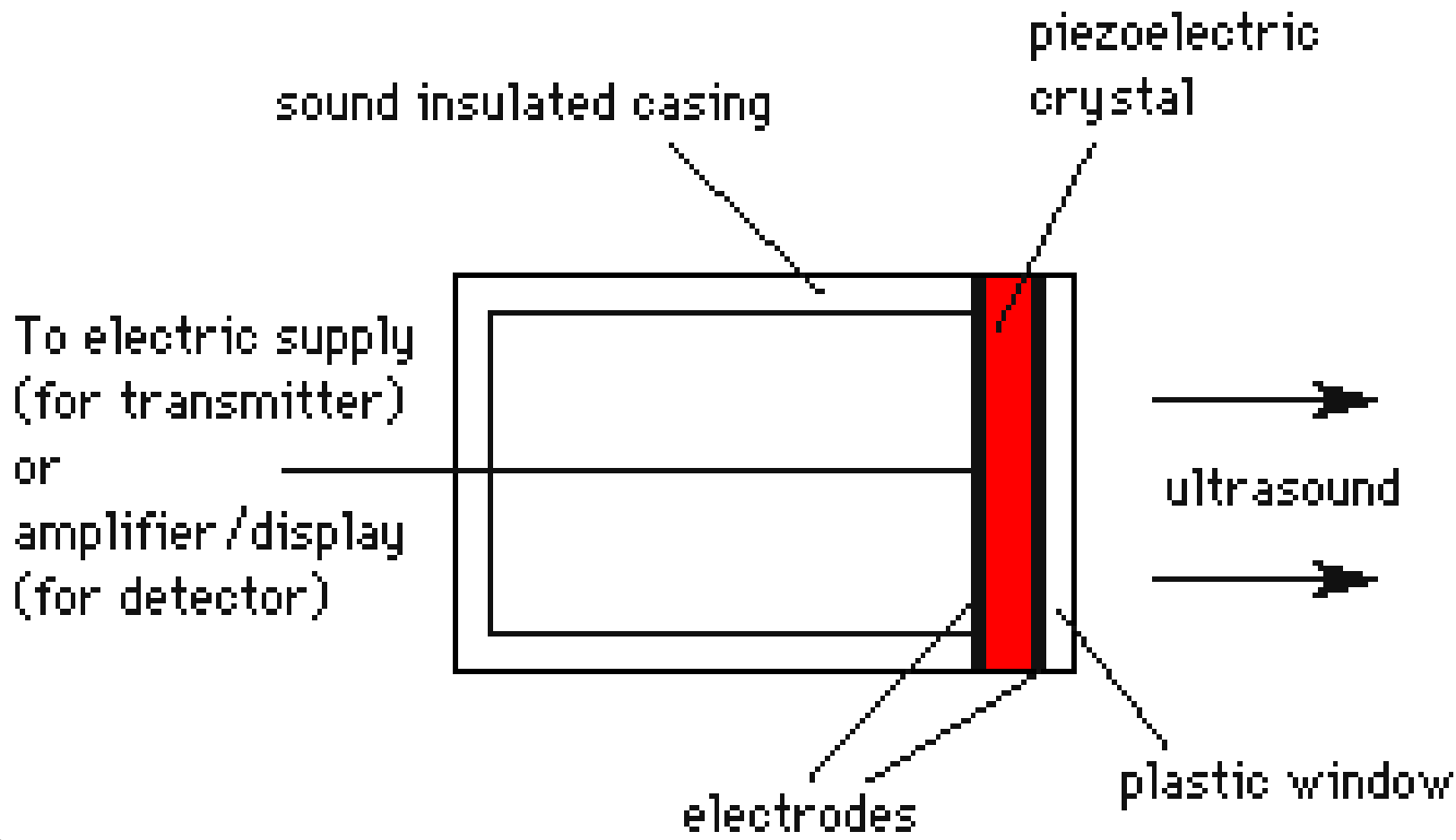
- ▶ B-scan ultrasonography is an important adjuvant for the clinical assessment of various ocular and orbital diseases.

- ◆ B- SCAN is a two dimensional imaging system which uses high frequency sound waves ranging from 8-10 MHz.

Physics

- ◆ It is an acoustic wave that consists of particles within the medium
 - ◆ Frequencies used in diagnostic ophthalmic ultrasound are in the range of 8-10 MHz
 - ◆ These high frequencies produce shorter wave lengths which allow good resolution of minute ocular and orbital structures
- 

- ◆ Multiple short pulses are produced with a brief interval that allows the returning echos to be detected, processed and displayed.
- ◆ The basis of the echo system is piezoelectric element which is a quartz or ceramic crystal located near the face of the probe



Types of frequency

- ▶ **Low frequency:** orbital tissue
- ▶ **Medium frequency :** (7 – 10 mhz)
Retinal , vitreous , optic nerve
- ▶ **High frequency :** (30 – 50 mhz) : anterior chamber up to
5mm

◆ **DISPLAY MODES: A SCAN/ B SCAN / BOTH**

Examination technique:

The patient is either reclining on a chair or lying on a couch.
The probe can be placed directly over the conjunctiva or lid



Probe positions

- ◆ **Transverse** : most common
 - ▶ Lateral extent, 6 clock hours
- ◆ **Longitudinal** : radial ,1 clock hrs.
AP diameter in Retinal tumors and tears
- ◆ **Axial**: lesion in relation to lens and optic nerve .

Image documentation modes

- ▶ They are of 2 types
 - stationary/static
 - moving/dynamic

- ▶ The images may be saved in different methods
 - ❖ Polaroid photographs
 - ❖ 35 mm photo
 - ❖ Ink prints
 - ❖ Thermal prints
 - ❖ Videotapes

Indications

▶ Anterior segment:

1. Opaque ocular media (i.e. corneal opacities)

- Pupillary membrane
- Dislocation / Subluxation lens
- Cataract / after cataract Posterior capsular tear
- Pupillary size / reaction

2. Clear ocular media

- Diagnosis of iris and ciliary body tumors

▶ Posterior segment:

1. Opaque ocular media

- Vitreous haemorrhage
- Vitreous exudation
- Retinal detachment (type / extent)
- Posterior vitreous detachment (extent)
- Intraocular foreign body (size/ site/ type)

2. Clear ocular media

- Tumour (size/ site/ post treatment follow up)
- Retinal detachment (solid / exudative)
- Optic disc anomalies

3. ocular trauma

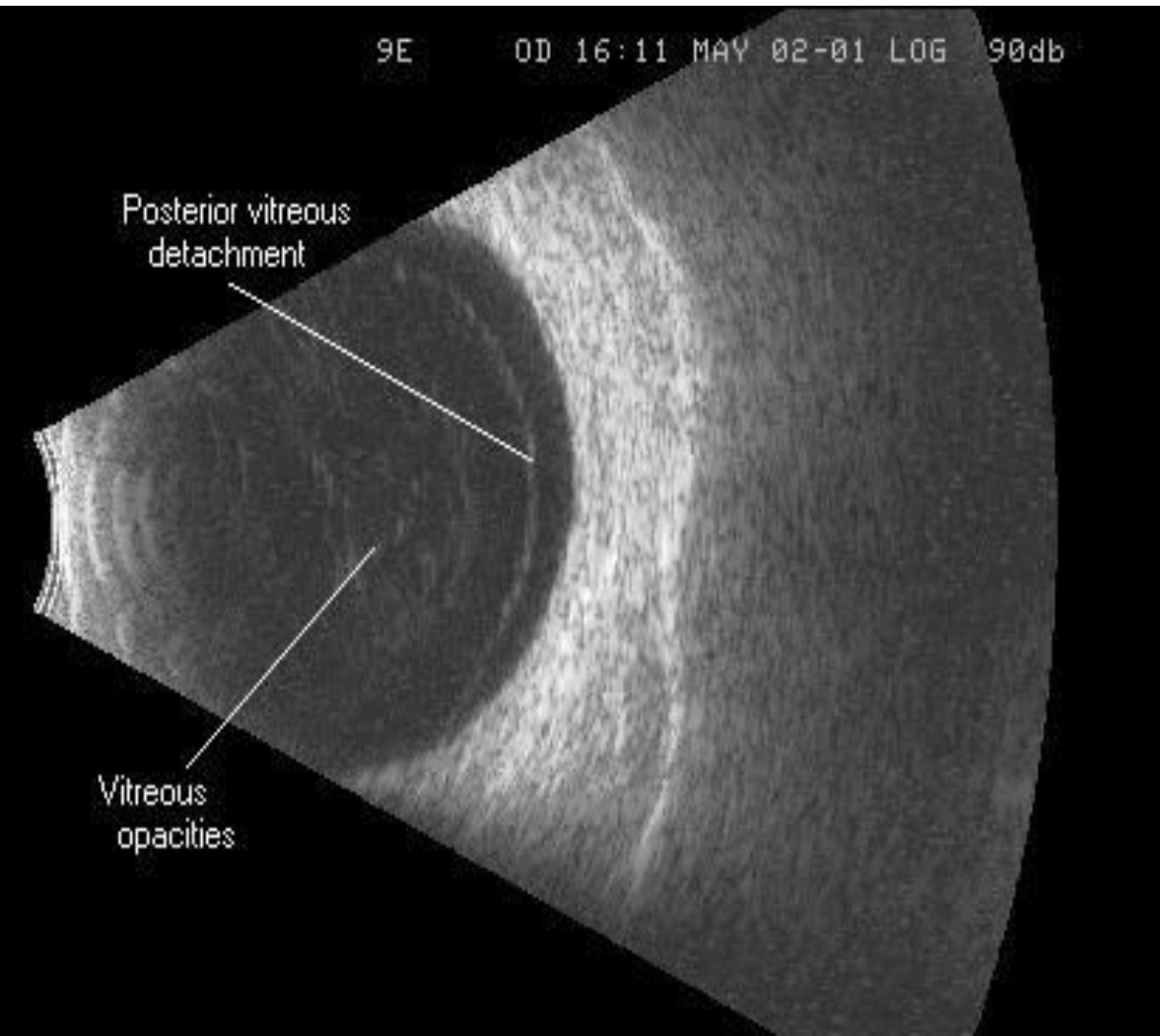
indications of b-scan in pediatric patients

Useful in the following conditions:

- ❖ Abnormal size of eye
- ❖ Abnormal shape of eye
- ❖ Congenital abnormalities
- ❖ Vitreous alterations
- ❖ Retinal detachments (type/ location)
- ❖ Ocular and orbital tumours
- ❖ Trauma

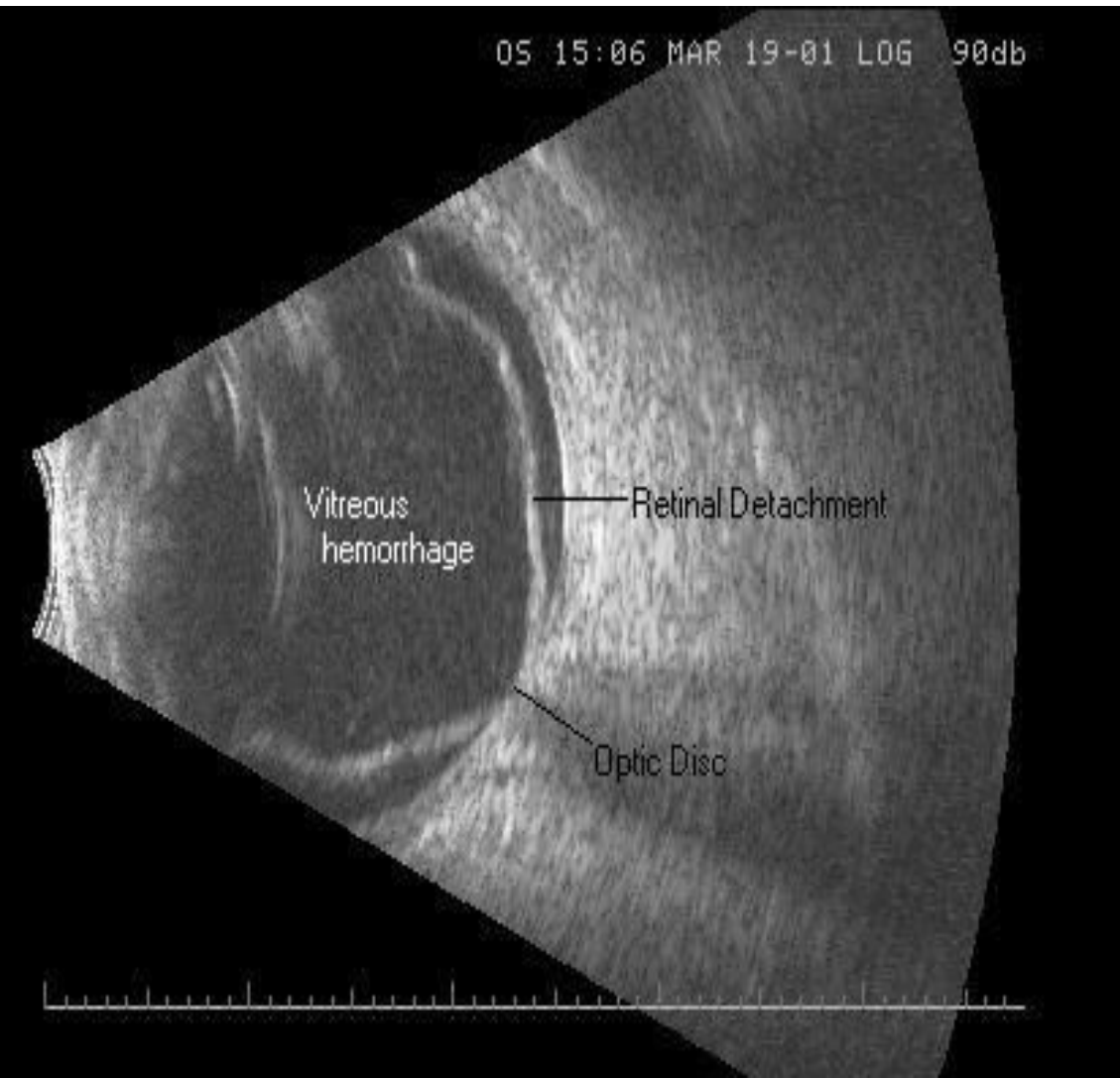
▶ ULTRASONOGRAPHIC CHARACTERISTICS

POSTERIOR VITREOUS DETACHMENT



Posterior vitreous detachment:
The detached posterior vitreous is seen as membranous lesion with no/some attachments to the optic disc

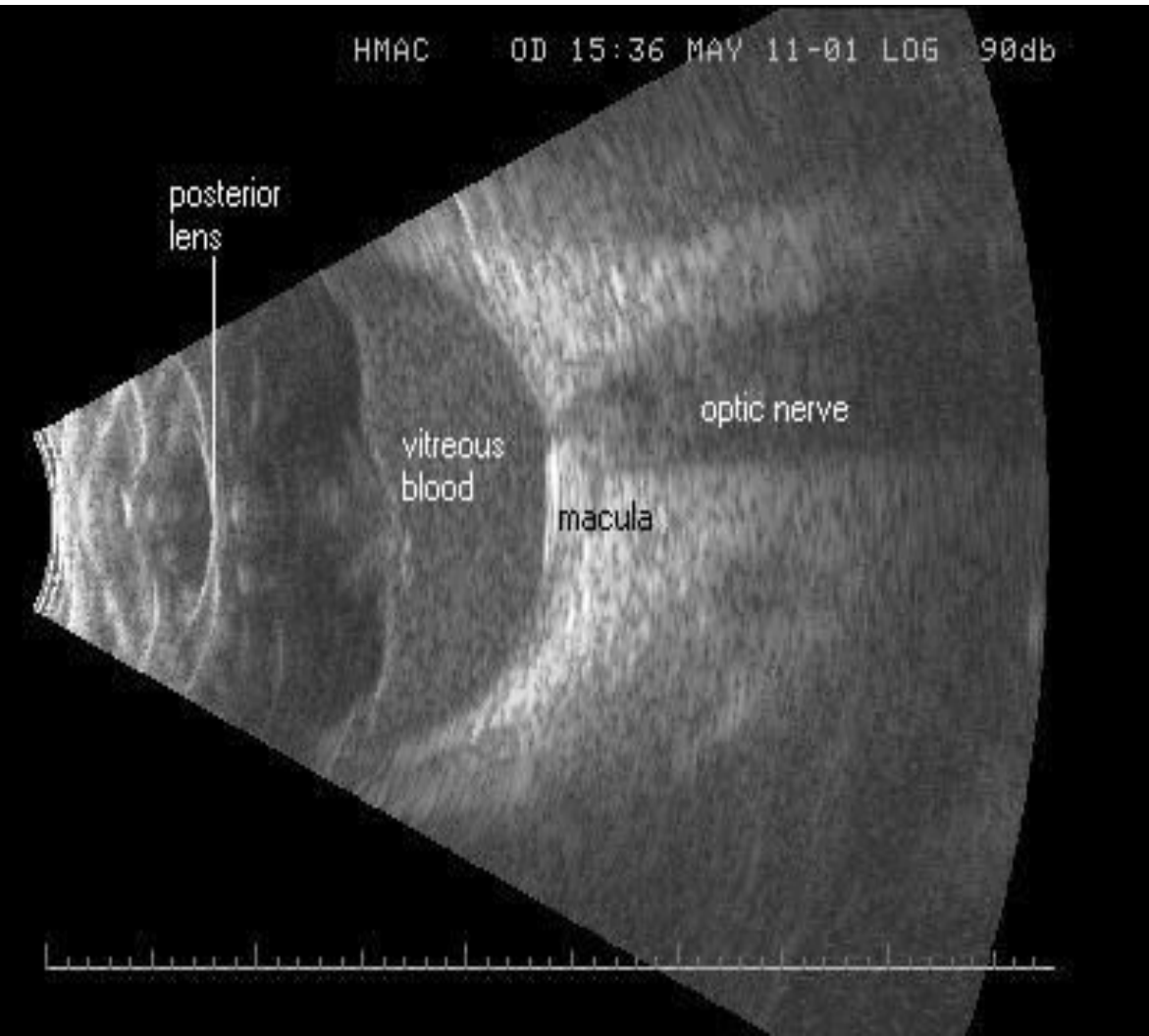
RETINAL DETACHME



The detachment produces a bright continuous, folded appearance with insertion into the disc and ora serrata.

It is to determine the configuration of the detachment as shallow, flat or bullous

VITREOUS HAEMORRHAGE

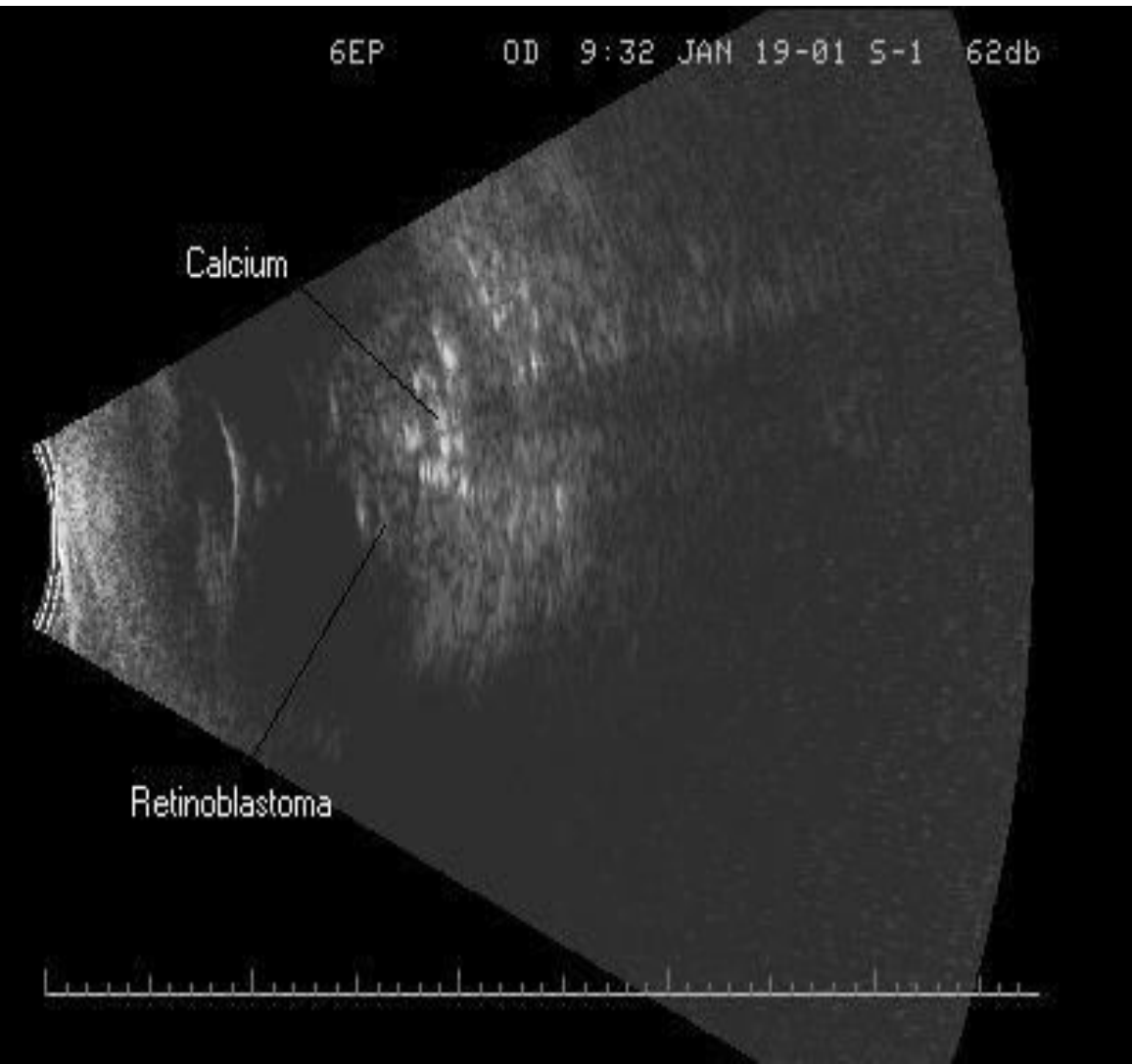


**To detect extent,
density, location
and cause**

**Fresh haemorrhage
shows dots or lines**

**Old haemorrhage
the dots gets
brighter**

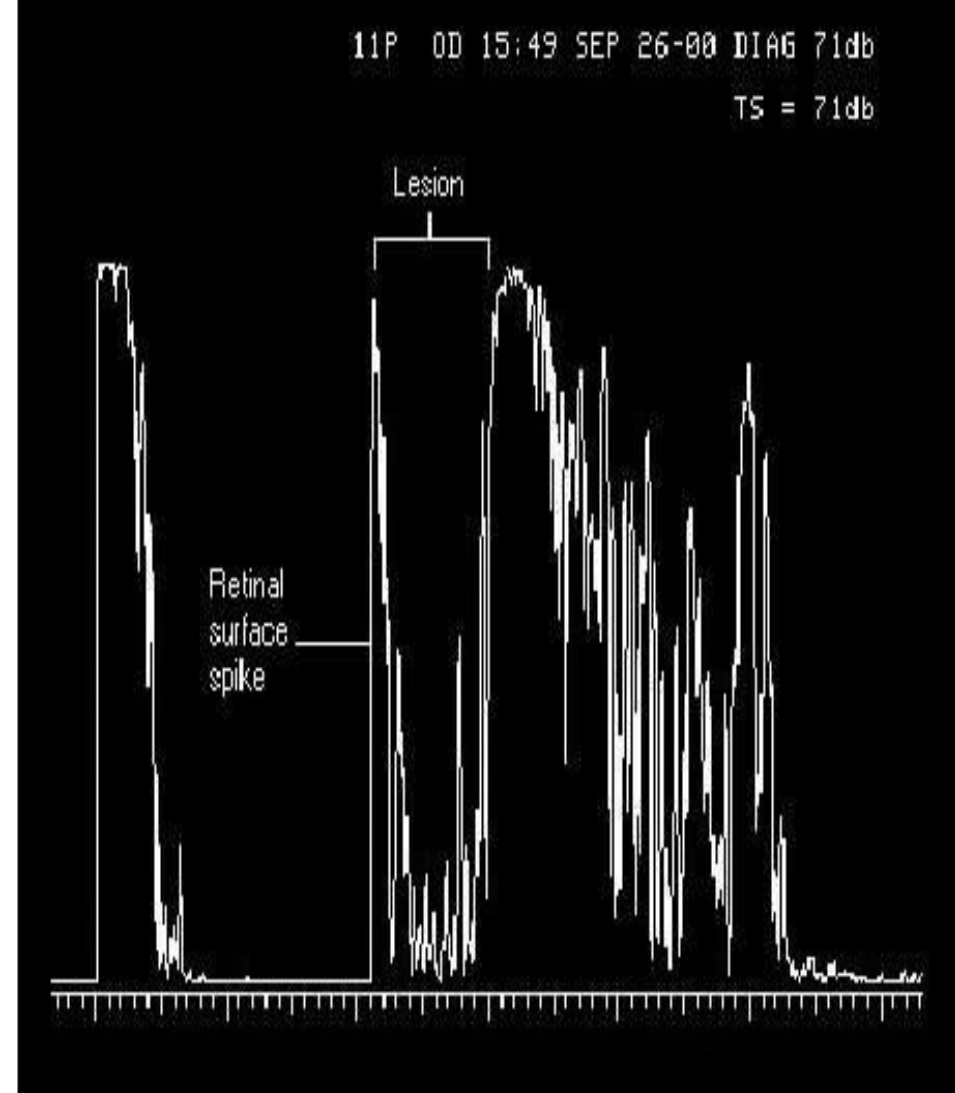
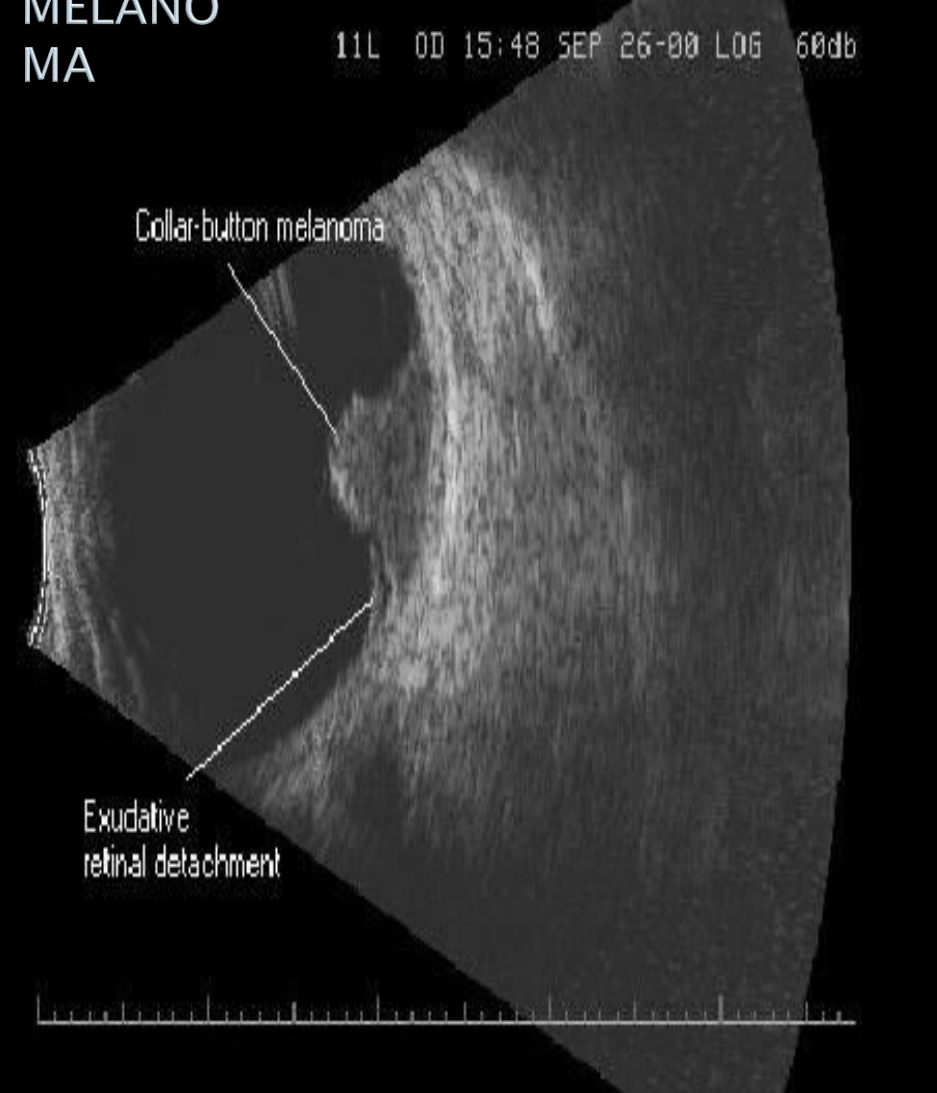
RETINOBLASTOMA



Size of the tumour

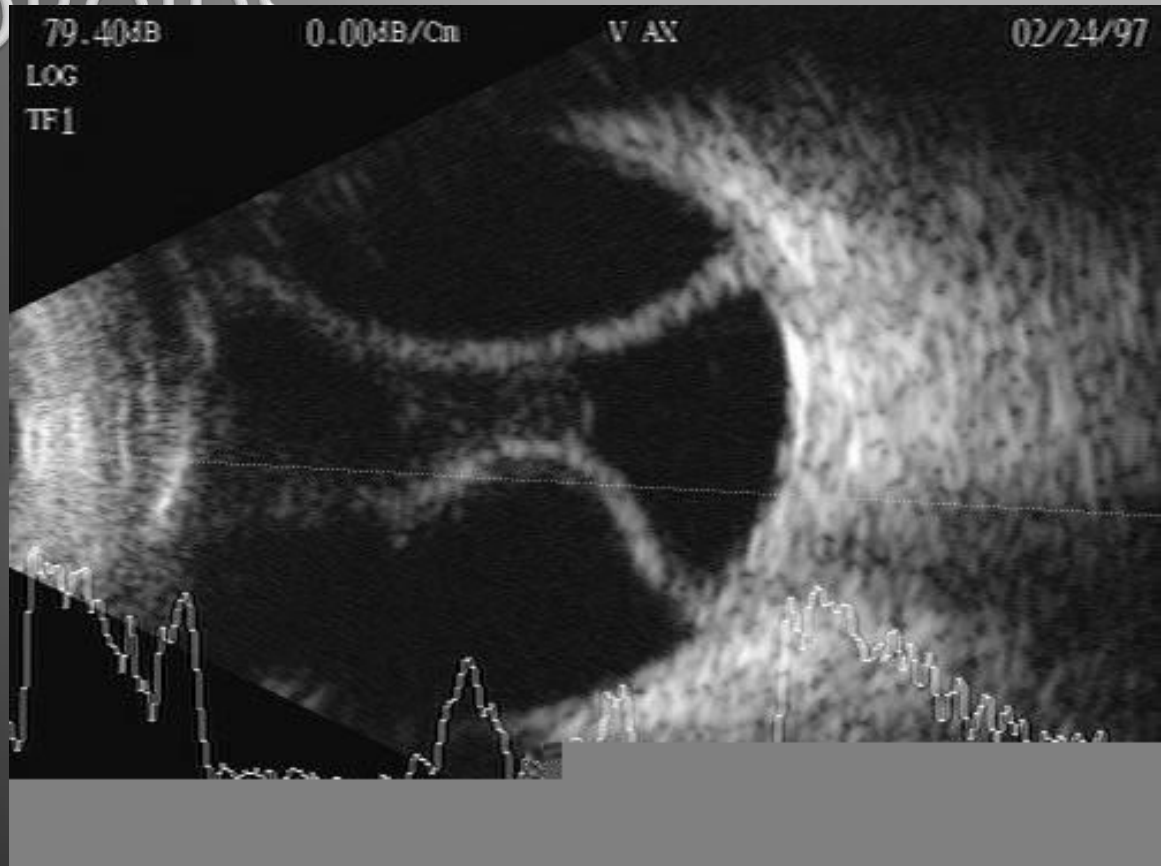
Shows irregular configuration

Calcification shows high internal reflectivity

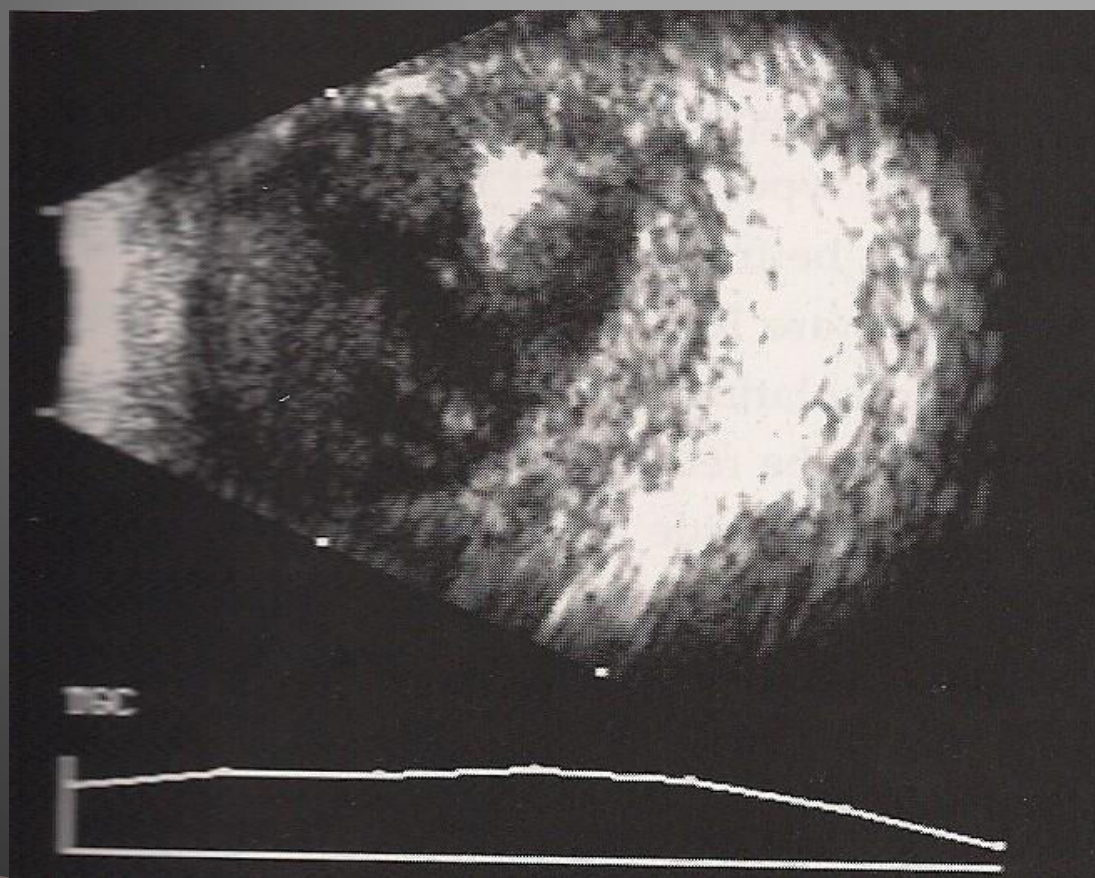


Collar button or mushroom shape. Large tumours shows acoustic hallowing

CHOROIDAL DETACHMENT KISSING CHOROIDS



INTRA OCULAR FOREIGN BODY





THANK YOU