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Dear Client,

Thank you for your trust and confidence in our technology.

tearcheck has been designed to ensure comfortable and safe use, providing reliable and convincing results.

tearcheck has been innovated to analyze the stability of the tearfilm and related signs and symptoms for dry eyes. The patented multi-functional analyzing device will surprise you in your daily practice with smart screening exams and reliable reports.

If you have any further questions, please do not hesitate to get in touch with us through our website:

https://www.esw-vision.com/contact

We would also like to invite you to share your experience and satisfaction to help us to continuously improve our products and services:

(EN): https://www.esw-vision.com

Your E-Swin Customer Service

OVERVIEW

tearcheck is intended for Dry Eye Symptom exploration and shall be used by eye care professionals authorized according to the regulations of the country in which it is used.

INDICATIONS

The **tearcheck** is indicated for all people with dry eye syndrome.

CLINICAL BENEFITS

The clinical benefit of **tearcheck** is to provide a battery of tests permitting to professional healthcare to identify the potential causes of dry eye. This allows the healthcare professional to prescribe the most adapted treatment for each patient.

» tearcheck PROVIDES THE FOLLOWING EXAMS

1. ABORTIVE BLINKING

In the abortive blinking examination, the blink pattern of all blinks is analysed over the duration of the examination (1 minute). This allows incomplete blinks to be detected, which may be the cause of incorrect tear film distribution on the ocular surface and deficient lipid secretion due to lack of pressure on the meibomian glands. As well the complete number of blinks per minute (blink rate) is calculated within the exam and displayed with the result.

2. EYE REDNESS - CONJUNCTIVAL HYPERHEMIA

This examination

- consists of images of the bulbar and palpebral conjunctiva.
- improves the contrast to improve the visibility and legibility of the superficial vascularization.

This examination will in particular make it possible to assess the hyperemia induced by the inflammatory phenomena consecutive to dry eye syndrome and to follow its evolution over the treatments delivered to the patient.

3. DEMODEX

The Demodex exam consists of an enlarged image capturing the base of the eyelashes.

The magnification factor of the image does not in itself allow direct visualization of the parasites, but it does make it possible to find and visualize the signs of the presence of the parasite.

4. NIBUT / TFSE

This examination is intended to assess the stability of the tear film.

NIBUT and TFSE are a combined exam and use the same imaging.

This exam requires the line mask to be present on the device.

4 steps will follow one another for data acquisition:

- STEP 1 The patient, on the practitioner's order, must blink twice.
- STEP 2 Data acquisition begins the moment the eyelids open. The patient should try to keep their eyes open for the duration of the acquisition.
- STEP 3 The acquisition stops after 10 seconds or if the patient blinks before this time.
- STEP 4 The practitioner then launches the calculation procedure on the basis of the acquired data. The results are then displayed on the screen.

NIBUT shows where and when the surface of the tear film ruptures. During the 10 second imaging, **tearcheck** evaluates the tear film surface 3 times per second. For better readability, the results are then grouped into 2 second increments. In addition the break-up time is calculated and displayed.

TFSE makes it possible to assess the micro-deformations appearing on the surface of the tear film. These micro-deformations reflect instability of the tear film. They are presented in number and in intensity.

During the 10 second imaging, the tear film of a healthy eye will show very few movements of low intensity.

The eye of a patient with dry eye syndrom, that is linked to a deficiancy of the lipid tear film component, shows higher micro-deformations the higher the deficiancy is.

At the same time, the evolution of frequency and intensity of these micro deformations is observed over the entire imaging period.

In the end, it thus becomes possible to group patients into 4 categories:

- CATEGORY 1 Healthy patient. Very few micro-deformations and low intensity.
- CATEGORY 2 Patients with a significant number of micro-deformations but grouped towards the end of the 10 seconds of acquisition. No matter the intensity.
- CATEGORY 3 Patients with micro-deformations of early onset but evolving very little over the rest of the acquisition time of 10 seconds
- CATEGORY 4 Patients with micro-deformations of early onset and whose number and intensity will increase over the duration of acquisition.

Generally, the higher the category, the greater the lipid deficiency. Consequently, category 4 patients will be those who present the most significant discomfort and whose evolution over time will be the most unfavorable in the absence of treatment.

In summary, compared to NIBUT, the TFSE will allow us to see the fine evolution of the behavior of the tear film over time. In other words, NIBUT presents the major events appearing on the surface of the tear film (rupture) and the TFSE shows the finer nuances of the surface of the tear film.

The TFSE therefore remains a much richer examination than the classic NIBUT.

The evolution of this examination will be particularly interesting to follow during the diffent stages of the treatment.

OVERVIEW

5. MEIBOGRAPHY

Meibography makes it possible to visualize the Meibomian glands.

The exam is done in 5 steps:

- STEP 1 Taking an IR photograph of the inner side of the lower or upper eyelid (after flipping the eyelid).
- STEP 2 Once the image has been captured, the user will mark the area where Meibomian glands are present on the screen.
- STEP 3 The Meibomian glands are automatically detected within the selected area.
- STEP 4 The practitioner remains free to adjust the proposed result by adding or subtracting areas of the image where he considers that the Meibomian glands are present or not (refining step).
- STEP 5 The image is analyzed and a ratio is established between the area represented by the glands and the overall area of the selected area.

The results are shown through two parameters:

- The rate of loss of the glands compared to an individual with all the glands present.
- The morphology of the glands present.

Note that the accuracy of this examination is determined by the selections made by the practitioner as well as by the refinement.

6. OSIE (Ocular Surface Inflammatory Evaluation)

This exam takes place in 7 steps:

- STEP 1 The practitioner will instill fluorescein on the surface of the eye.
- STEP 2 Before the examination starts, one must wait 120 seconds.
- STEP 3 An image is captured in blue light.
- STEP 4 The cornea + bulbar conjunctiva is delimited by the practitioner on the screen.
- STEP 5 The calculation is launched and the device automatically recognizes areas with residual fluorescein.
- STEP 6 The practitioner can refine the result by using the 2 cursors on the screen.
- STEP 7 A ratio between the total surface selected and the surface of the fluorescent zones is established.

The principle of this examination resides in the fact that fluorescein will remain «attached» to areas of the eyeball exhibiting surface alteration in connection with an inflammatory process in the case of dry eye syndrome.

The evaluation of these inflammatory zones is carried out 120 seconds after instilling fluorescein, the time necessary for its natural elimination through the tear ducts:

- In a healthy patient, fluorescein will have disappeared from the surface of the eyeball. There will be 0% of surface presenting a residual fluorescence.
- In a patient with dry eye syndrome, the older the condition, the more the surface of the eyeball is suffering. The fluorescein will "materialize" these suffering zones by remaining fixed there beyond 120 seconds after instillation.

The accuracy of this examination is determined both by the selections made by the practitioner but also on the use of the adjustment sliders.

7. TEAR MENISCUS

This examination takes place in 4 stages and follows the OSIE examination:

- STEP 1 A residual of the fluorescein instilled during the examination of the OSIE is present at the level of the lacrimal meniscus. A photographic acquisition of the meniscus area is carried out.
- STEP 2 An identification of the meniscus area is carried out by the practitioner by marking the area on the screen.
- STEP 3 The periphery of the iris is identified on the screen, its actual diameter being an input data previously evaluated by the practitioner.
- STEP 4 The value of the thickest measurement and the measurement below the iris centre are thus established.

The accuracy of this examination depends on the reliability of the value of the diameter of the iris entered by the practitioner.

8. EYE FITNESS TEST

The Eye Fitness Test is a questionnaire intended to be filled in by the patient. It provides an overview of the patient's eye fitness in everyday life.

PACKAGE CONTENT tearcheck







tearcheck line mask (magnetic clip-in)



tearcheck eyelid flipping tool

IMPORTANT: YOU MUST KEEP ALL THE ITEMS OF ORIGINAL PACKAGING (BOXES, PACKING BLOCKS, ETC.). The manufacturer's guarantee for parts and labour will only be valid if your device is returned in its complete original packaging. All items of original packaging in which your **tearcheck** was delivered should therefore be carefully stored.



digital pen



power supply



power cord

9







user manual

GLOSSARY



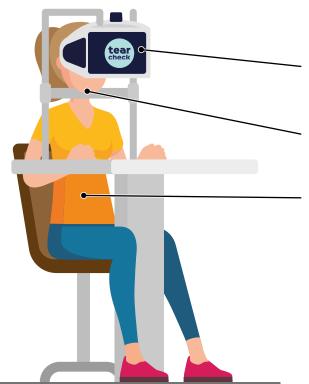




Before using **tearcheck**, read the following information carefully to ensure correct, easy and comfortable use.

» BEFORE EACH USE

INSTALL THE PATIENT



Correctly adjust the height of the device to fit patient's eyes.

The patient shall put the chin on the chinrest and push the forehead towards the forehead rest.

The patient's head should be stable and the patient shall be comfortable.

» STARTING tearcheck

STEP 1

Connect **tearcheck** to an external power supply.

Connect the power supply to mains by using the power cord provided with the device.

tearcheck will start automatically.



STEP 2

Wait for the device to initialize.



STEP 3

Login to the device by selecting the user.

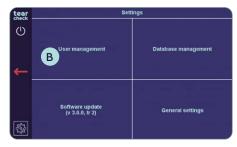
-> Follow the instruction for FIRST USE on page 16.

» FIRST USE



STEP 1

Press **Settings A** to open the Administration menu.



STEP 2

USER MANAGEMENT

At first use, there is no operator registered on the device. To start an examination, at least one operator must be created:

• Choose **User Management B**.



• Choose **New User** C

NOTE: Edit my profil is not accessible.









 Create a new operator by filling in the information fields in the New User menu.

NOTE: A virtual keyboard will appear when you touch a field **D**.

• Validate the operator creation by clicking on the **upper right icon E** .

• The new operator will appear in the operator list.

» LOGIN

To use the device, an operator must be selected.



• Choose your name in the operator list; the **password** A must be entered.

NOTE: The header fields of the operator list allow to filter operators by lastname and/or firstname and/or birthdate.

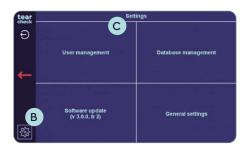
tear check Title Title Last name Rechberger First name Daniel Birthdate 8 11 1994

STEP 2

- Change title, last name, first name or birthdate if necessary.
- Upload logo E to customize reports.
- Validate the changes by clicking on the **upper right icon F**.

>> MANAGE YOUR PROFILE

Once you are logged in, you can manage your current profile.



STEP 1

- Go to **Settings B** and choose **User Management C**.
- | Variable | Variable
- Choose **Edit my profil D** (it is now accessible).

>> PATIENT MANAGEMENT

When logged in, the operator can access the patient management menu.

You can start your examination by entering a New Patient, by selecting a Registered Patient or by using Anonymous Patient.

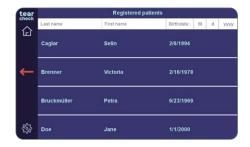


- Select **New Patient G** to create a new patient.
- Tele Title Last name * Last name * First name * First name * First name * External reference External reference External reference Address 1 Address 2 Address 2 Zip code Zip code

 Cay City
- Create a new patient by filling in the information fields in the New Patient menu.

NOTE: Last name, first name and birthdate are mandatory.

• Validate the patient creation by clicking the **upper right folder icon** H . The patient is now listed in Registered Patients.



• In the **Registered patients** list, all patients and operators will be displayed.



- Select **Registered Patient** A to start the examination of a patient already existing in your database.
- Select **Anonymous Patient** B if no patient information shall be registered. In this case also the report will not be stored at the end of the session.

» LANGUAGE SETTINGS



• Go to Settings and choose General settings C.



• Click on the pencil next to the currently selected language D.



• Choose the language **E** you wish.



• A pop-up appears, telling you that the device will restart the interface to apply the translation. Confirm with the green check mark F. No further user interaction is required.

» SHUTTING OFF THE DEVICE



• Click on the power symbol A on the left.



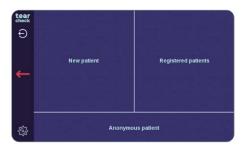
- A pop-up B appears, telling you that **tearcheck** will shut down.
- Confirm with the green check mark C to shut down.



- The pop-up D tells you that the device will shut down in a few seconds.
- You must wait 20 seconds, before unplugging the device, after the screen turned black. If the device is unplugged too quickly, it may not be able to restart properly.

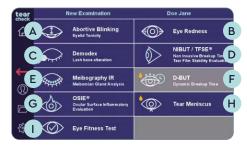


» EXAMINATION MENU



After choosing a patient, an operator can access the examinations. The information on top of each screen will guide you through each exam.

NOTE: Examinations, which are displayed in gray, are not yet accessible. Any new examinations will be provided through regular software updates. More information on how to update your software can be found on page 57.



The following exams are available:

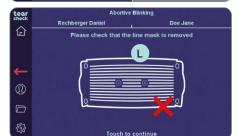
- Abortive Blinking A
- Eye Redness B
- Demodex C
- NIBUT / TFSE® D
- Meibography IR E
- D-BUT * (not yet accessible) F
- OSIE® * G
- Tear Meniscus * H
- Eye Fitness Test
- * fluorescein used for this exams

>> ABORTIVE BLINKING

The exam analyses the blinking pattern of all blinks over the period of 60 seconds to determine complete and abortive blinks and also the full number of blinks per minute (blink rate).











STEP 1

• Select Abortive Blinking examination **J** in the examination menu.

• Ensure that the LINE MASK K is removed (follow the instructions on the top of the screen), then click on the screen L to start.

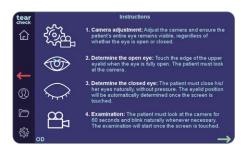


• The instructions on the screen explain the procedure that needs to be followed.

STEP 2

• Select the right or left eye and start the exam by clicking on the **tearcheck** logo M.

NOTE: The tearcheck logo will appear, if no examination has been done yet.



• The individual steps of this examination are explained in detail on this page.



STEP 3

CAMERA ADJUSTMENT

- After choosing an eye (OD = oculus dexter right eye / OS = oculus sinister left eye), adjust the camera and ensure the patient's entire eye remains visible, regardless of whether the eye is open or closed.
- The image can be adjusted by using the focus wheel A on top of the device.
- The detailed instructions for the current step can be reviewed by clicking on the info-button **B** on the top-left.

NOTE: Detailed instructions on the camera adjustment (positioning and focusing) can be found on the next page.



• To close the detailed instruction page, click anywhere on this page or click on the red arrow C to get back.

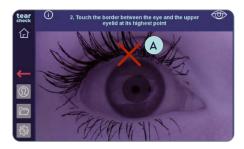
CAMERA ADJUSTMENT: POSITIONING

OPEN EYE	CLOSED EYE	SUITABLE	REASON
		NO	Eye is to far on one side, the eyelid will be difficult/impossible to detect.
	All Market States	NO	Eye is to high and there's too much space below the eye, the user can't touch the border between the eye and the upper eyelid.
		NO	Eye is to low, the eyelid will be difficult to detect, when the eye is fully closed.
		YES	Good centering, the eyelid remains visible whether the eye is closed and or open AND there is some margin below the eyelid when the eye is closed.

CAMERA ADJUSTMENT: FOCUS

The eyelid must be as sharp as possible. However, this examination is rather tolerant to a bad focus, as long as the patient is positioned correctly.





STEP 4

DETERMINE OPEN EYE

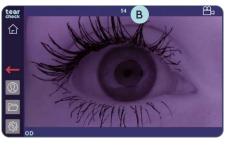
• Touch the edge of the upper eyelid when the eye is fully open, to mark the open eye (see red cross in the picture) A. The patient must look at the camera.



STEP 5

DETERMINE CLOSED EYE

• The patient must close his/her eyes naturally, without pressure. The eyelid position will be automatically determined once the screen is touched.



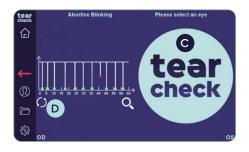
STEP 6

EXAMINATION

- The patient must look at the camera for 60 seconds and blink naturally whenever necessary. The examination will start once the screen is touched.
- The timer **B** on top shows the remaining time.



- The examination will stop, if too many blinks are detected. If this situation occurs an appropriate warning is displayed.
- The analysis screen and/or the results screen are also accessible if the examination has not taken the entire 60 seconds.



QO

STEP 8

STEP 7

ANALYSE EXAM

below the image of the eye.

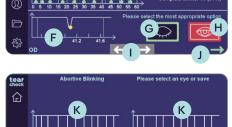
NOTE: The examination result is not yet stored.

• If abortive blinks have been detected, they need to be re-checked and confirmed. Click on one of the graphs **E** to get to the analysis screen.

• Continue with the second eye by clicking on the **tearcheck** logo C, or

restart the examination of the first eye by clicking on the redo-button D

- If no abortive blinks have been detected, the result will be available immediately.
- The graph on the bottom **F** shows the currently selected blink in more detail.
- Select completed blink (green button) **G** or abortive blink (red button) **H** for the currently selected blink.
- Switch between the blinks with the white arrows 1 on the bottom centre or select a blink by clicking on one of the points in the upper graph (only the abortive blinks are accessible).
- After reviewing and confirming abortive or completed blinks the analysis can be confirmed by clicking on the green arrow J.





STEP 9

RESULT OF ANALYSIS

- The examination results for both eyes are shown by a graph and by numbers. The result for one eye can be displayed in full-screen by clicking on one of the result previews K.
- Save the examination results of the patient by clicking on the disk icon

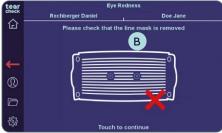
» EYE REDNESS

Eve Redness is detected by displaying the small vessels on the ocular surface.





• Select **Eye Redness** A examination in the examination menu.



STEP 2

• Ensure that the LINE MASK C is removed (follow the instructions on the top of the screen), then click on the screen B to start.





• Select the right or left eye and start the exam by clicking on the tearcheck logo D.

NOTE: The tearcheck logo will appear, if no examination has been done yet.



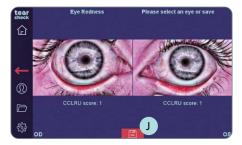
STEP 3

• After choosing an eye (OD = oculus dexter - right eye / OS = oculus sinister - left eye), click on the patient's eye to adjust the image.









- It is recommended to use the **EYELID FLIPPING TOOL E** to pull down or flip the eyelid. This can help to achieve even more revealing results.
- Capture the image of the eye by clicking on the red camera icon F.



STEP 4

ANALYSIS OF EXAM

- Select the most appropriate option (1-4) for the captured image based on the reference images G.
- The reference images can be enlarged by clicking on an image and moving the vertical bar H to the left.
- Confirm the selection by clicking on the green arrow, restart the capture by clicking on the redo-button, or delete the image by clicking on the red cross.

NOTE: The examination result is not yet stored.

• Continue with the second eye by clicking on the tearcheck logo 1.

STEP 5

RESULT OF EXAM

• Save the examination results of the patient by clicking on the disk icon J.

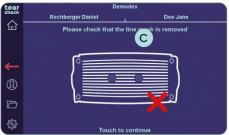
31



» DEMODEX

The **Demodex detection** is displayed by a zoom image of the eye lashes on the edge of the eyelids.









STEP 1

• Select **Demodex** A examination in the examination menu.

STEP 2

• Ensure that the **LINE MASK B** is removed (follow the instructions on the top of the screen), then click on the screen **C** to start.

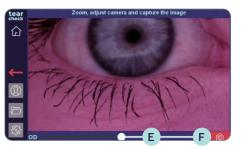


• Select the right or left eye and start the exam by clicking on the **tearcheck** logo D.

NOTE: The **tearcheck** logo will appear, if no examination has been done yet.

STEP 3

• After choosing an eye (OD = oculus dexter - right eye / OS = oculus sinister - left eye), **click on the patient's eye** to adjust the focus.



STEP 4

STEP 5

- Use the slider **E** on the bottom to zoom, adjust the image and **capture the image of the eye** by clicking on the camera icon **F**.
- The image can be adjusted by using the focus wheel G on top of the device.

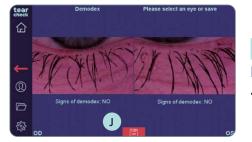


CH DY NY

- Select YES or NO (H), depending on visible signs of Demodex in the captured image.
- Confirm the selection by clicking on the green arrow, restart the capture by clicking on the redo-button, or delete the image by clicking on the red cross.



• Continue with the second eye by clicking on the tearcheck logo 1.



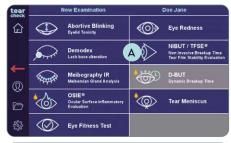
STEP 6

RESULT OF EXAM

• Save the examination results of the patient by clicking on the disk icon J.

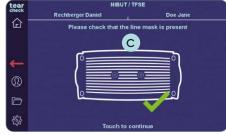
» NIBUT / TFSE®

Tearfilm Stability Evaluation (TFSE®) and **Non-Invasive Break-up-Time** (NIBUT) are a combined exam for which a 10 second video of each eye is taken.



STEP 1

• Select NIBUT/TFSE® A examination in the examination menu.









STEP 2

• Select the right or left eye and start the exam by clicking on the **tearcheck** logo D.

NOTE: The **tearcheck** logo will appear, if no examination has been done yet.



STEP 3

 After choosing an eye (OD = oculus dexter - right eye / OS = oculus sinister - left eye), click on the patient's pupil to adjust the image.



• The image can be adjusted by using the **focus wheel E** on top of the device.





STEP 4

- Instruct the patient to **blink twice to start** the recording automatically.
- A timer **F** starts counting down from 10 to 0 during the recording of the exam.



• Start the recording manually by clicking on the **eye icon G** on the bottom of the screen and then on the **green arrow H**, if the blinking cannot be detected.

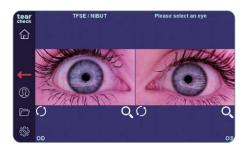
NOTE: The recording stops in both cases after 10 seconds, or if the patient blinks during the exam. The recorded eye is then shown in the exam menu.



STEP 5

• Continue with the second eye by clicking on the **tearcheck** logo 1, or **restart** the examination of the first eye by clicking on the redo-button J below the image of the eye.

NOTE: The examination result is not yet stored.



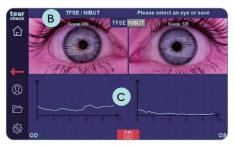
STEP 6

ANALYSE EXAM

• Each eye can now be analyzed by clicking on the image.



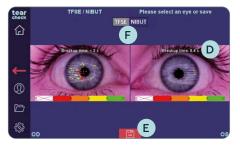
• The analysis of the image starts automatically and takes only a few seconds. During the analyses a circle of ice-blue dots A is shown in the center of the image.



STEP 7

RESULT OF ANALYSIS

• **TFSE:** The examination results for both eyes are shown by a **score** B on top of the image and a **scale** C below the image.



- NIBUT: The examination results for both eyes are shown by dots in different colours in the captured image and the calculated break-up time in seconds D.
- Store the examination results of the patient by clicking on the disk icon **E** .

NOTE: Display changes according to the selection of TFSE®/NIBUT F.

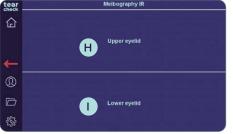
>> MEIBOGRAPHY IR

The **examination of the Meibomian Glands** shows the loss of glands through 3 types of images (real imaging, 2D image and 3D rendering).



STEP 1

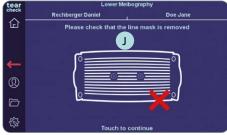
• Select Meibography IR G examination in the examination menu.



STEP 2

• Choose Upper H or Lower Eyelid I for the examination.

NOTE: It is sufficient to exam the lower eyelid.



• Ensure that the **LINE MASK J** is removed (follow the instructions on the top of the screen), then click on the screen **K** to start.





STEP 3

• Select the right or left eye and start the exam by clicking on the **tearcheck** logo L.

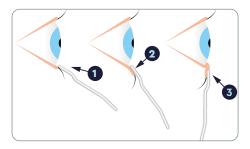
NOTE: The **tearcheck** logo will appear, if no examination has been done yet.



STEP 4

- After choosing an eye (OD = oculus dexter right eye / OS = oculus sinister left eye), **click on the patient's eyelid** to adjust the image.
- The image can be adjusted by using the **focus wheel** A on the top of the device.





STEP 5

- Use the **EYELID FLIPPING TOOL B** to flip the eyelid:
- 1 place the eyelid flipping tool below the lash line,
- 2 pull down,
- 3 push towards the eye.





STEP 6

• Capture the image of the eyelid image by clicking on the red camera icon C.

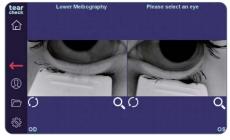


• Validate with the green check D mark or restart with the redo-button icon E.



• Continue with the second eye by clicking on the **tearcheck** logo **F**, or **restart** the examination of the first eye by clicking on the redo-button **G** below the image of the eye.

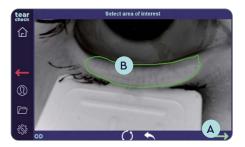
NOTE: The examination result is not yet stored.



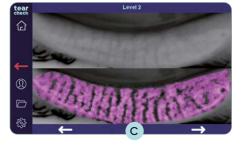
STEP 7

- Click on the image to **clip the area of interest**.
- Mark the area of interest (area with Meibomian glands) with the DIGITAL
 PEN H or with your finger directly on the screen or on the optional tablet.





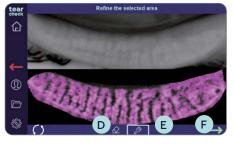
NOTE: The marking can be corrected by restarting the whole marking process or by restarting the last line (double-tap). The validation arrow (green) A can only be selected when the mark (polygon) B is closed.



STEP 8

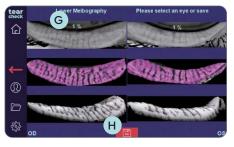
DETECTION OF MEIBOMIAN GLANDS

- After clicking the validation arrow, choose the most representative Meibomian Gland detection.
- Left and right arrows C allow to switch between the 3 suggested results.



After validating one of the suggested results, the **area of interest can be refined**:

- By removing some pixels with the rubber icon **D**.
- By adding some pixels with the brush icon **E**.
- After the refinement, proceed by clicking on the green arrow **F** .



STEP 9

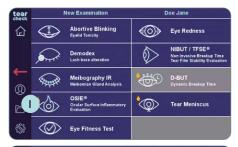
RESULT OF ANALYSIS

The examination result for both eyes is shown through a gland loss ratio **G** and a 3D greyscale rendering of the area of interest.

• Save the examination results of the patient by clicking on the disk icon (H).

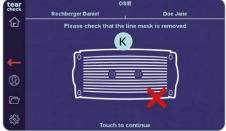


Ocular Surface Inflammatory Evaluation (OSIE®) is using blue light to detect areas on the ocular surface that are subject to an increased inflammation risk.



STEP 1

• Select **OSIE®** I examination in the examination menu.



STEP 2

• Ensure that the **LINE MASK J** is removed (follow the instructions on the top of the screen), then click on the screen **K** to start.



- Put one drop of fluorescein in each eye, and touch the screen to start the timer.

 Then wait 2 minutes to start examination.
- Follow the OSIE® process as shown on top of the screen by instilling a drop of **fluorescein** in each eye.
- Click on the screen and wait 2 minutes before capturing the image.



- A timer L appears at the top of the screen.
- Select the right or left eye and start the exam by clicking on the **tearcheck** logo M.

NOTE: The **tearcheck** logo will appear, if no examination has been done yet.



STEP 3

- After choosing an eye (OD = oculus dexter right eye / OS = oculus sinister left eye), **click on the patient's pupil** to adjust the image.
- The pupil should be centered in the image.



• Capture the image of the eye by clicking on the camera icon A.



• Validate B or restart C the capture.

NOTE: An error message will be displayed if the iris is not found due to inappropriate camera adjustment, and most likely due to bad centering of the eye in the image.



STEP 4

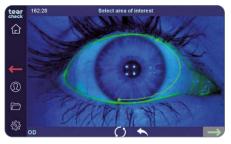
• Continue with the second eye by clicking on the **tearcheck** logo D, or restart the examination of the first eye by clicking on the redo-button E below the image of the eye.

NOTE: The timer **F** is showing how long fluorescein is already instilled. The examination result is not yet stored.



STEP 5

• Click on the image to clip the area of interest.

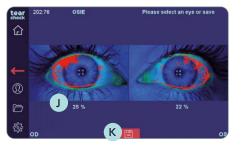


• Mark the area of interest (whole ocular surface) with the DIGITAL PEN G or with your finger directly on the screen or on the optional tablet.



- Topic check 170.92 Select area of interest check

 Topic check
- **NOTE:** The marking can be corrected by restarting the whole marking process or by restarting the last line (double-tap). The validation arrow (green) \bigcirc Can only be selected when the mark (polygon) \bigcirc is closed.



STEP 6

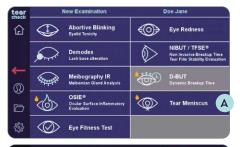
RESULT OF EXAM

The area with increased inflammation risk is indicated in red and a percentage J is showing the inflammation ratio.

• Save the examination results of the patient by clicking on the disk icon K.

» TEAR MENISCUS

Tear Meniscus height is detected by quantifying the height of the tearfilm in the middle of the lower eye lid. This will typically be run after OSIE to benefit of remaining fluorescein.



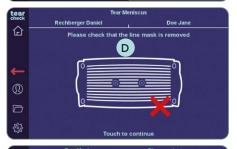
STEP 1

• Select **Tear Meniscus** A examination in the examination menu.



STEP 2

 If it has not been filled in with the patient information, fill in the eye iris diameter (in millimeter) of the patient and confirm by clicking the check mark B.



• Ensure that the **LINE MASK C** is removed (follow the instructions on the top of the screen), then click on the screen **D** to start.





• Select the right or left eye and **start the exam** by clicking on the **tearcheck** logo **E**.

NOTE: The **tearcheck** logo will appear, if no examination has been done yet.



STEP 3

• After choosing an eye (OD = oculus dexter - right eye / OS = oculus sinister - left eye), **click on the patient's pupil** to adjust the image.



• Capture the image of the eye by clicking on the camera icon **E**.



STEP 4

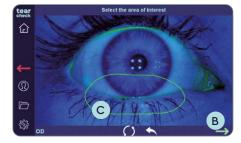
• Validate F or restart G the capture.

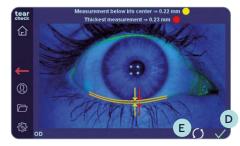
NOTE: An error message will be displayed, if the iris is not found due to inappropriate camera adjustment.

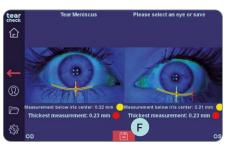


• Continue with the second eye by clicking on the **tearcheck** logo H, or **restart** the examination of the first eye by clicking on redo-button I below the image of the eye.









STEP 5

- Click on the image to clip the area of interest.
- Mark the area of interest (lower eyelid) with the DIGITAL PEN A or with your finger directly on the screen or on the optional tablet.



NOTE: The marking can be corrected by restarting the whole marking process or by restarting the last line (double-tap). The validation arrow (green) **B** can only be selected when the mark (polygon) **C** is closed.

After validation, the analyzis is done and the tear meniscus height is displayed in millimeters.

• Click on the check mark D to **confirm** or **restart** with the redo-button E icon.

NOTE: An error message will be displayed if the meniscus is not found. This can be due to an insufficient amount of fluorescein, a poor distribution of it or if the tear meniscus is too thin. Narrowing the selection may solve the issue.

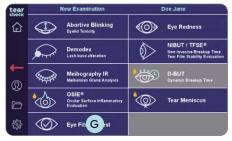
RESULT OF EXAM

Two values are calculated:

- Measurement below the iris center (yellow)
- Thickest measurement (red)
- Save the examination results of the patient by clicking on the disk icon F.

» EYE FITNESS TEST

The Eye Fitness Test is a questionnaire to evaluate the score (0-44) of subjective signs and symptoms.



tear	Eye Fitness Test		Do	e Jane		
heck	General well-being:		Yes		No	•
命	Do you feel good today?					
	Are you under medical treatment with an ophthalmologist or optometrist?					
	Are you especially sensitive to light?					
	Are you pregnant?					
	Are you using eye drops?					
0	Do you blink more frequently to help improve comfort?					
	Do you rub your eye frequently?					
	Are you wearing contact lenses?					
567	Analysis of eye fitness:	4	3	2	1	0
~~	Do you feel or notice the following		Some-	Regu-		

Driving at night		~			
	l				_
11.1 5.3.1 (0.0 1.1				/	
Using digital screens (PC, smartphone,)	~				
Watching TV		/			
	4	3	2	1	0
Do your eyes suffer in?	Never	Some- times	Regu- larly	Often	Always
Windy weather conditions		/			
Dry air or air-conditioned places		_			
			Comp	leted:	19/19
•				Н	V
֡	Watching TV Do your eyes suffer in? Windy weather conditions	Watching TV 4 Do your eyes suffer in? Never Windy weather conditions Dry air or air-conditioned places	Valtching TV 4 3 Do your eyes suffer in? Never times Windy weather conditions Dry air or air-conditioned places	Watching TV 4 3 2 Do your eyes suffer in? Never times larly Windy weather conditions Dry air or air-conditioned places	Watching TV 4 3 2 1 Do your eyes suffer in? Never Some- Regularly Windy weather conditions Dry air or air-conditioned places Completed:

tear theck	Eye Fitness Test Doe Jane					
^	Is your visual comfort affected during?	Never	times	larly	Often	Always
句	Reading		/			
	Driving at night				✓	
	Using digital screens (PC, smartphone,)	~				
←	Watching TV		✓			
ത		4	3	2	1	0
@	Do your eyes suffer in?	4 Never	Some- times	2 Regu- larly		
(I)	Do your eyes suffer in? Windy weather conditions		Some-	Regu-		0 Always

STEP 1

• Select Eye Fitness Test G in the examination menu.

STEP 2

• Start the questionnaire. The patient can enter replies directly through the tablet.

NOTE: Validation of the score is only possible, if all questions are answered.

• If required, the answers can be changed by clicking in another field.

STEP 3

• After completing all questions, click on the check mark H to get the result.

STEP 4

RESULT OF EYE FITNESS TEST

A score from 0 (severe dry eye) to 44 (normal eye) will be displayed.

The Eye Fitness Test report is automatically saved.

» OTHERS

If new or updated examinations are available, a software update will be provided.

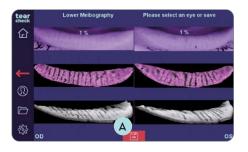
The update can be downloaded directly in your client account on gateway.esw-vision.com.

NOTE: Register your device after receipt on **gateway.esw-vision.com** to get automatic access to available software updates.



tearcheck RESULTS

>> SAVE EXAMINATION RESULTS



- When an examination is finished, save the results by clicking on the disk icon at the bottom center of the screen A.
- A message indicates that the report is saved.

>> REPORTS



STEP 1

• Examination **reports can be viewed** by clicking on the folder icon **B** on the left bar.

NOTE: This icon **B** is accessible when a patient has been selected. It is not accessible for Anonymous Patient.

There are two different options for reports available:

- Report History per Exam C
 Makes it possible to access all saved reports per patient with all details and captured images.
- Report Overview D Shows on one page an overview of the results of all exams and an interpretation of results per exam (normal/mild/moderate/severe) is submitted for information purposes only. This interpretation suggested by the tearcheck does not exempt eye care professionals to analyse each measurement. This report overview shall be used to confirm the diagnostic provided by the eye care professional.

STEP 2

• Select either Report History per Exam or Report Overview.

>> REPORT HISTORY PER EXAM



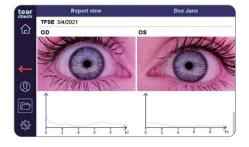
- When examinations have been saved, the **list of reports** is displayed in the **Report History** with examination date, type and export options.
- This list may be sorted by date or exam by clicking on the corresponding header **E** .



• Check the corresponding box to view reports on the screen, print reports or export to an USB device F. Select the requested reports per column and validate by clicking on the check mark G.

The selected reports will then

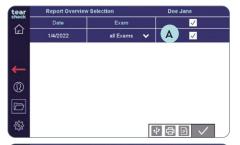
- be displayed on the screen.
- generated and sent to the remote printer, if one is available.
- generated and copied to an USB device, if one is available.



NOTE: Multiple reports can be chosen to be displayed, printed or exported. In this case, reports are displayed one after the other on the screen and printed/exported on separated pages for each exam..

tearcheck RESULTS

» REPORT OVERVIEW



• Access the report overview of all exams of one day by checking a full day in the right column (A).



• Single exams within one day can be selected by unfolding **B** all exams of one day and then ticking only the desired exams.



• Select USB export **C**, print **D** or display on the screen **E** for the selected report overview and confirm with the green check mark.



NOTE: Exams carried out within one day are displayed in one report overview. If exams from different days are selected, a separate report overview for each day will be created.



USE OF tearcheck ACCESSORIES

» LINE MASK



The **tearcheck LINE MASK** is an innovative solution to detect interruptions in the tearfilm over a wide area on the ocular surface.

The **LINE MASK** is mandatory for TFSE® and NIBUT examination.

» EYELID FLIPPING TOOL



The **tearcheck EYELID FLIPPING TOOL** is used to flip the eyelid for Meibomian Gland detection. The special tool was developed for "contact-free" imaging of the glands.

To be used for Meibograhpy and Eye Redness detection.

NOTE: all **tearcheck** accessories can be ordered by visiting **www.esw-vision.com/contact** and choosing the applicable contact for your country.



MAINTENANCE

tearcheck does not require periodic maintenance by the manufacturer.

>>> REPLACEABLE PARTS

The following part are replaceable by the user:

- The external power supply. Power supply may be ordered under the reference V040__017A00A.
- The power cord. Power cord may be ordered under the reference V040EU013A01A.

For your safety, use only replacement parts provided by the manufacturer.

» CLEANING

The **LINE MASK** cannot be cleaned. It shall be replaced when transparent areas are dirty or when scratches are visible in dark areas.

Plastic parts of **tearcheck** housing may be cleaned with a clean cloth which has been slightly moistened with water without any additional product.

Both lenses and display screen of **tearcheck** may be cleaned with a clean cloth which has been slightly impregnated with the Clean spray (never apply the clean spray directly on the device).

The chinrest and forehead stop must be disinfected by the practitioner, and under his responsibility, with products he has selected in accordance with the medical context in which he works.

The **EYELID FLIPPING TOOL** is intended for a single use and shall be discarded after each patient.

There is not sterile part or accessories required for use of the **tearcheck**.

» DATA BASE MANAGEMENT



STEP 1

• Click on **Database Management** A in the Settings menu







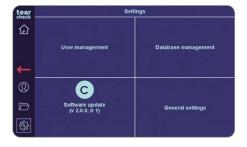
It is possible to **RESTORE** or to **BACKUP** the **tearcheck** Database.

STEP 2

- To backup the database, insert a USB key/device B and click on Backup Database: a binary file named "tear_check_database.backup" will be copied on the USB key/device.
- To **restore database**, insert the **USB key/device B** with file named "tear_check_database.backup" and click on Restore Database: your current database will be erased.



>> SOFTWARE UPDATE



STEP 1

- Click on **Software Update** C in the Settings menu
- Insert a valid **USB key/device B** , the software update is starting automatically.
- A message is displayed when the update was successful and invites to reboot the device.

MAINTENANCE

» WARNING AND MESSAGES



DATABASE MESSAGES

AT STARTUP

- In case of a **database corruption** when the user starts the device, a message A is displayed to the user.
- The user may erase the database if a recent backup is available.
- User will be asked to confirm database deletion.



• Otherwise, the user may **backup the database** and send a copy to the manufacturer. If possible, the corrupted database will be repaired.



Database management
Check

Check

Restore datal

B

Cup database

DURING DATABASE BACKUP

- During the database backup, this message indicates that the **USB stick is probably disconnected or unusable**.
- In this case retry the backup with another USB stick.

Trying to achieve a backup while no USB stick is present will generate this message B.
The user should retry after checking the connected USB stick.



Database management Compared to the compared



DURING DATABASE RESTORE

- If the **USB stick is disconnected** during a database restore, the following message **C** will be displayed.
- The user shall retry with another USB stick.

- Trying to **restore a database without connecting an USB stick** will generate this message D.
- The user shall retry after connecting a USB stick.

- If the software is **unable to find a valid database file** on the USB stick, this message **E** will appear.
- The user shall check the content of the USB stick.

MESSAGES DURING SOFTWARE UPDATE



- If **no USB stick** is connected during the attempted **software update**, the following message (A) will appear.
- The user shall try again after connecting a USB stick.

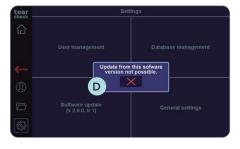
MAINTENANCE



- If the software is **unable to find a valid update file** on the USB stick, this message **E** will appear.
- The user shall check the content of the USB stick.



- An attempt to update the device with an **outdated update file** will generate this message **B** .
- The user shall contact the manufacturer to get the latest update package.



- If the current version of software is too old with regards to the to latest version, the following message C appears.
- The user shall install the new software updates as soon as they are available. If a user has disregarded several software updates, it is likely that an update in one step is impossible D. In this case, the user shall contact the manufacturer.



• If an update package is available on the USB stick, the following message

E will be displayed if the file is corrupted.

MESSAGES GENERATED DURING AN EXAM



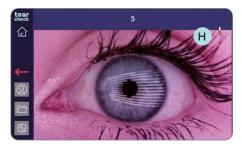
- During image processing the following message **F** may appear, meaning that **captured data may not be processed**.
- The user shall retry to perform the exam.
- In case of failure, the user shall contact the manufacturer.

MESSAGES DURING REPORT DOWNLOAD



- When a user is attempting to save a report on a USB stick, the following message G will appear if no USB stick is connected or it does not work properly.
- The user shall retry using another USB stick.

TEMPERATURE WARNING



- If the temperature symbol H is displayed, the processor slows down to avoid overheating.
- Verify that you use **tearcheck** in environmental conditions compliant to specifications.



SUPPORT

» TECHNICAL SERVICE



If technical support is required please contact your **tearcheck** distribution partner or contact our service department through our contact form on **www.esw-vision.com**

» COMMERCIAL SERVICE



For user assistance, please contact your **tearcheck** distribution partner or our commercial service through our contact form on **www.esw-vision.com**

» ERROR MESSAGES



If **tearcheck** is blocked, plug-off the device and dis-connect the power cord. Restart the device again. If the device remains blocked, please contact our technical service.

» TRAINING



Training is **not required** to use the product.



» MARKING

REF: tearcheck	Reference of the tearcheck device.
SN	Unique serial number of the tearcheck device.
E-SWIN Rue des Côtes d'Orval ZA de la Prévôté 78550 Houdan – FRANCE	Year of manufacture of your device and address of the manufacturer.
③	It is compulsory to refer to the instructions in the user manual.
<u> </u>	This symbol invites the reader to consult the operating instructions for any information necessary for proper use of the device.
	Electromedical Equipment of Class II rating
	Device must be used indoors.
<u></u>	Keep the device dry.
类	Keep away of light and heat.
LOT	The batch number of the product is indicated next to this logo.
♦•	Connector Polarity
===	Direct Current

+5°C +35°C	Respect the upper and lower temperature limits indicated next to this logo.
93%	Atmospheric pressure Limits
760 hPa	Relative humidity Limits
<u>^</u>	Global safety mark for electronical devices.
IP 20	Device is protected against solid foreign bodies of 12,5 mm in diameter or more (IP rating).
IP 4X	Device is protected against solid foreign bodies of 1 mm in diameter or more (IP rating).
A	Waste Electrical and Electronic Equipment
CE	Device is compliant to European regulation
c SL °us	UL recognized part
EFFICIENCY LEVEL VI	Energy Star efficiency classification
MD	This equipment is a medical device
(01)01234567891011(17)200528(10)123456789	Examples for unique device identifier

>> SPECIFICATIONS

Energy Source	100-240V 50-60Hz external power supply
DC power supply input caracteristic	12V DC 5A
Dimensions (L x W x H)	240 × 195 × 190 mm (active part only)
Weight	Active part: 1800 g Fastening and chinrest: 1900 g
Shipping Dimensions (L x W x H)	815 × 520 × 355 mm
Shipping Weight	12.5 kg
Maximum Power Consumption	60 W max
Temperature (Working)	+5 to +35 °C
Temperature (Storage)	-5 to +65 °C
Relative Humidity (Non-Condensing)	30 to 93%
Atmospheric pressure (use)	760-1060 hPa
Atmospheric pressure (storage and transport)	760-1060 hPa
Applied parts	Chinrest and Forehead stop

» RECYCLING AND PROCESSING



Instructions for the treatment of used products: the WEEE (Waste Electrical and Electronic Equipement) Directive 2020/96/CE has been implemented to ensure that the products are recycled by using the best techniques for treatment, recovery and recycling, and thus to contribute to the protection of environment and human health.

Your product has been designed and manufactured with components and high quality materials that can be recycled and reused.

E-Swin SAS is affiliated to an eco organization that is responsible for collecting and processing of end-of-life products.

>> GUIDANCE AND MANUFACTURER'S DECLARATION

RADIO FREQUENCY EMISSIONS

tearcheck incorporates a radio frequency transmitter at 2.5 GHz.

ELECTROMAGNETIC EMISSIONS

tearcheck is intended for use in the electromagnetic environment specified below. The user of tearcheck should ensure that it is used in such environment.

EMISSIONS TEST	COMPLIANCE	ELECTROMAGNETIC ENVIRONMENT - GUIDANCE
RF emissions CISPR 11	Group 1	tearcheck uses RF energy only for its internal function. Therefore, its radiated emissions are very low and are not likely to cause interference in nearby electronic equipment.
RF emissions CISPR 11	Class B	tearcheck is suitable for use in all establishments, including
Harmonic emissions IEC 61000-3-2	Class A	domestic establishments and those directly connected to the public low voltage power supply network that supplies
Voltage fluctuations / Flicker emissions IEC 61000-3-3	Passed	buildings uses for domestic purpose.

FOR YOUR SAFETY

- No modification of this equipment is allowed, only use the power supply and accessories delivered with the device.
- Never use **tearcheck** if damaged, never use in case of a functional anomaly appearing on the touchscreen, or following a fall.
- This device can only be repaired with special tools. For any problem after delivery please contact us in our website on www.e-swin-pro.com
- USB port of **tearcheck** is dedicated to connection of an USB stick. Connection of other devices is strictly prohibited.
- Contraindications: there is no contraindications in the use of tearcheck.

ELECTROMAGNETIC IMMUNITY

tearcheck is intended for use in the electromagnetic environment specified below. The user of tearcheck should ensure that it is used in such environment.

IMMUNITY TEST	IEC60601 TEST LEVEL	COMPLIANCE LEVEL	ELECTROMAGNETIC ENVIRONMENT - GUIDANCE
Electrostatic Discharge (ESD) IEC 61000-4-2	± 8 kV contact ± 15 kV air	± 8 kV contact ± 15 kV air	Floors should be wood, concrete or ceramic tile. If floors are covered with synthetic material, the relative humidity should be at least 30%
Electrical fast transient / burst IEC 61000-4-4	± 2 kV 100 kHz	± 2 kV 100 kHz	Mains power quality should be that of a typical public low voltage power supply network.
Surge IEC 61000-4-5	± 1 kV differential mode ± 2 kV common mode	± 1 kV differential mode ± 2 kV common mode	Mains power quality should be that of a typical public low voltage power supply network.
Voltage dips, short interruptions and voltage variations on power supply input lines IEC 61000-4-11	0 % U _T for 0.5 cycle at 0,45,90,135,180,225,270,315° 0% U _T for 1 cycle at 0° 70% for 25/30 cycle at 0° 0% for 250/300 cycle, any angle	0 % U _T for 0.5 cycle at 0,45,90,135,180,225,270,315° 0% U _T for 1 cycle at 0° 70% for 25/30 cycle at 0° 0% for 250/300 cycle, any angle	Mains power quality should be that of a typical public low voltage power supply network. If the user of the device requires continued operation during power mains interruption, it is recommended that device be powered from an uninterruptible power supply or a battery.
Power frequency (50/60Hz) magnetic field IEC 61000-4-8	30 A/m	30 A/m	Power frequency magnetic fields should be at levels characteristics of a typical location of a typical location connected to public low voltage power supply network.
NOTE: U _T is the AC ma	ains voltage prior to application of t	he test level.	
Conducted RF • IEC	3\/rms	3Vrms	

80 MHz to 2.7 GHz 80 MHz to 2.7 GHz NOTE 1: At 80 MHz and 800 MHz, the higher frequency range applies.

150 kHz to 80MHz

6 V for ISM band

3Vrms

3V/m

Conducted RF • IEC

Radiated RF • IEC

61000-4-6

NOTE 2: These guidelines may not apply in all situations. Electromagnetic propagation is affected by absorption an reflection from structures, objects and peoples.

6 V in ISM bands between 150

150 kHz to 80MHz

kHz to 80MHz

3V/m

- a Field strengths from fixed transmitters, such as base stations for radio (cellular/cordless) telephones and land mobile radios, amateur radio, AM and FM radio broadcast and TV broadcast cannot be predicted theoretically with accuracy. To assess the electromagnetic environment due to fixed RF transmitters, an electromagnetic site survey should be considered. If the measured field strength in the location in which the Device is used exceed the applicable RF compliance level above, the Device should be observed to verify normal operation. If abnormal performance is observed, additional measures may be necessary, such as reorienting or relocating the Device.
- b Over the frequency range 150 kHz to 80 MHz, field strength should be less than 3 V/m.

RECOMMENDED SEPARATION BETWEEN PORTABLE AND MOBILE RF COMMUNICATION EQUIPMENT AND **tearcheck**

GUIDANCE AND MANUFACTURER'S DECLARATION - IMMUNITY TO PROXIMITY FIELDS FROM RF WIRELESS COMMUNICATIONS EQUIPMENT

The Device is intended for use in an electromagnetic environment in which radiated RF disturbances are controlled. The customer or user of the Device can help prevent electromagnetic interference by maintaining a minimum distance between portable and mobile RF communication equipment (transmitters) and the Device, as recommended below, according to the maximum output power of the communications equipment

TEST FREQUENCY (MHz) SERVICE SERVICE MODULATION POWER (MHz) DISTANCE (M) TEST LEVEL (V/m)		Immunity test:		IEC 61000-4-3			
385 380 -390 TETRA 400 18 Hz 1,8 0,3 27 450 430-470 GMRS 460, FRS 460	FREQUENCY		SERVICE a)	MODULATION b)	POWER		TEST LEVEL
450 430–470 GMRS 460, FRS 460 ± 5 kHz deviation 1 kHz sine 710 745 704–787 LTE Band 13, 17 Pulse modulation b) 2 0,2 0,3 9 810 870 800–960 GSM 800/900, TETRA 800, iDEN 820, CDMA 850, LTE Band 5 18 Hz 1720 1845 1700–1990 GSM 1800; CDMA 1900; GSM 1900; DECT; LTE Band 1, 3, 4, 25; UMTS 1990 2450 2400–2570 Bluetooth, WLAN, 802.11 b/g/n, RFID 2450, LTE Band 7 WI AN 802. 11 a/n Pulse modulation b) 2 0,3 28 Pulse modulation b) 2 0,3 28 Pulse modulation b) 2 0,3 28	385	380 –390	TETRA 400		1,8	0,3	27
745 704-787 LTE Band 13, 17 Pulse modulation b) 217 Hz 0,2 0,3 9 810 810 800-960 GSM 800/900, TETRA 800, iDEN 820, CDMA 850, LTE Band 5 18 Hz 2 0,3 28 930 1720 GSM 1800; CDMA 1900; GSM 1900; DECT; LTE Band 1, 3, 4, 25; UMTS 1990 Pulse modulation b) 2 0,3 28 2450 2400-2570 Bluetooth, WLAN, 802.11 b/g/n, RFID 2450, LTE Band 7 Pulse modulation b) 2 0,3 28	450	430-470	GMRS 460, FRS 460	± 5 kHz deviation	2	0,3	28
745 704-787 LTE Band 13, 17 217 Hz 0,2 0,3 9 810 810 870 800-960 GSM 800/900, TETRA 800, iDEN 820, CDMA 850, LTE Band 5 930 1720 1845 1700-1990 GSM 1800; CDMA 1900; GSM 1900; DECT; LTE Band 1, 3, 4, 25; UMTS 1990 2450 2400-2570 Bluetooth, WLAN, 802.11 b/g/n, RFID 2450, LTE Band 7 9 Pulse modulation b) 217 Hz 2 0,3 28 Pulse modulation b) 217 Hz 2 0,3 28 Pulse modulation b) 217 Hz 2 0,3 28 Pulse modulation b) 2 0,3 28 Pulse modulation b) 2 0,3 28	710						
780 810 870 800-960 GSM 800/900, TETRA 800, iDEN 820, CDMA 850, LTE Band 5 930 1720 1845 1700-1990 GSM 1800; CDMA 1900; GSM 1900; DECT; LTE Band 1, 3, 4, 25; UMTS 1990 20,3 28 Pulse modulation b) 217 Hz 20,3 28 Pulse modulation b) 217 Hz 20,3 28 Pulse modulation b) 217 Hz Pulse modulation b) 217 Hz Pulse modulation b) 217 Hz Pulse modulation b) 22 9,3 28 Pulse modulation b) 217 Hz Pulse modulation b) 22 9,3 9 Pulse modulation b) 23 9 Pulse modulation b) 24 9 9 9 9 9 9 9 9 9 9 9 9 9	745	704-787	LTE Band 13, 17		0,2	0,3	9
870 800-960 GSM 800/900, TETRA 800, iDEN 820, CDMA 850, LTE Band 5 1720 1720 GSM 1800; CDMA 1900; GSM 1900; DECT; LTE Band 1, 3, 4, 25; UMTS 1990 2400-2570 Bluetooth, WLAN, 802.11 b/g/n, RFID 2450, LTE Band 7 Pulse modulation b) 2 0,3 28 28 2240 2400-5800 WLAN 802 11 a/n Pulse modulation b) 2 0,3 28 28 29 29 20 3 28 29 20 3 28 29 20 3 28 29 20 3 28 29 20 3 28 29 20 3 28 29 20 3 29 20 3 29 20 3 29 20 3 29 20 3 29 20 3 20 3	780			217 112			
930 1720 1845 1700–1990 GSM 1800; CDMA 1900; GSM 1900; DECT; LTE Band 1, 3, 4, 25; UMTS 1990 2450 2400–2570 Bluetooth, WLAN, 802.11 b/g/n, RFID 2450, LTE Band 7 Pulse modulation b) 217 Hz 2 0,3 28 Pulse modulation b) 217 Hz	810						
930 1720 1845 1700–1990 GSM 1800; CDMA 1900; GSM 1900; Pulse modulation b) 2 0,3 28 1990 2450 2400–2570 Bluetooth, WLAN, 802.11 b/g/n, RFID 2450, LTE Band 7 900 Pulse modulation b) 2 0,3 28 Pulse modulation b) 2 0,3 28 Pulse modulation b) 2 0,3 28	870	800-960			2	0,3	28
1845 1700–1990 GSM 1800; CDMA 1900; GSM 1900; 217 Hz 2 0,3 28 1990 2450 2400–2570 Bluetooth, WLAN, 802.11 b/g/n, RFID 2450, LTE Band 7 217 Hz 2 0,3 28 5500 5100–5800 WLAN 802 11 a/n Pulse modulation b)	930		15 21 (62 6) 63 (11 (63 6) 21 2 5 4 (14 6)	.02			
1845 1700-1990 DECT; LTE Band 1, 3, 4, 25; UMTS 217 Hz 2 0,3 28 1990 2450 2400-2570 Bluetooth, WLAN, 802.11 b/g/n, RFID 2450, LTE Band 7 217 Hz 2 0,3 28 5240 Pulse modulation b) Pulse	1720						
1990 2450 2400-2570 Bluetooth, WLAN, 802.11 b/g/n, Pulse modulation b) 2 0,3 28 5240 5500 5100-5800 WLAN 802.11 a/n Pulse modulation b) Pulse modulation b) 0 2 0 3	1845	1700-1990			2	0,3	28
2450 2400-2570 RFID 2450, LTE Band 7 217 Hz 2 0,3 28 5240 Pulse modulation b) 0.2 0.3 9	1990						
5500 5100–5800 WI AN 802 11 a /n Pulse modulation b) 0.2 0.3 9	2450	2400-2570			2	0,3	28
5500 5100-5800 WLAN 802 11 a/n	5240						
	5500	5100-5800	WLAN 802 .11 a/n		0,2	0,3	9
5785	5785			<u>_</u>			

NOTE If necessary to achieve the IMMUNITY TEST LEVEL, the distance between the transmitting antenna and the ME EQUIPMENT or ME SYSTEM may be reduced to 1 m. The 1 m test distance is permitted by IEC 61000-4-3.

- a) For some services, only the uplink frequencies are included.
- b) The carrier shall be modulated using a 50 % duty cycle square wave signal.
- c) As an alternative to FM modulation, 50 % pulse modulation at 18 Hz may be used because while it does not represent actual modulation, it would be worst case.

TO AVOID ELECTROMAGNETIC SUSCEPTIBILITY ISSUES ON THE **tearcheck** AND ITS SURROUNDED DEVICES, USER SHALL FOLLOW THE FOLLOWING RULES FOR INSTALLATION

WARNING: Use of this equipment adjacent to or stacked with other equipment should be avoided because it could result in improper operation. If such use is necessary, this equipment and the other equipment should be observed to verify that they are operating normally.

WARNING: Use of accessories, transducers and cables other than those specified or provided by the manufacturer of this equipment could result in increased electromagnetic emissions or decreased electromagnetic immunity of this equipment and result in improper operation.

WARNING: Portable RF communications equipment (including peripherals such as antenna cables and external antennas) should be used no closer than 30 cm (12 inches) to any part of **tearcheck**, including cables specified by the manufacturer. Otherwise, degradation of the performance of this equipment could result.

LIGHT EMISSION

tearcheck is classified in the no risk group in term of light emission according to IEC60601-2-57:2011. There is no need for skin or eye protection of patient neither operator.

Maximum light emission versus wavelength:

WAVELENGTH	MAXIMUM EXPOSURE
White spectrum	$< 2.8 \ 10^5 \ W \ m^{-2} \ sr^{-1}$
Blue light (465 nm)	< 10 ⁵ W m ⁻² sr ⁻¹
Near Infrared light (850 nm)	< 3200 W m ⁻² on cornea

Exposure uniformity: better than ± 20 % in the eye plane limited by camera field of view.

Light emission area is shown as the yellow area in the picture below:



tearcheck is intended to be used by authorized people only. User shall log out from its session to avoid use of the device by unauthorized people.

CAUTION: Use of controls or adjustments or performance of procedures other than those specified herein may result in hazardous radiation exposure.

Adjustements allowed to the user are image focusing and chinrest vertical movement.

Warning label according to IEC60601-2-57:2011:

IEC 60601-2-57:2011
Exempt Risk Group
Continuous emission
Maximum Exposure:
< 280000 Wim 1/sr in white spectrum
(wavelength from 400 to 780 nm)
< 100000 Wim 1/sr at 465 nm wavelength
< 3200 Wim 1/sr at 485 nm wavelength

SEPARATION FROM MAINS

If needed **tearcheck** shall be separated from mains by disconnecting the IEC C7 plug from external power supply. The power cord must remain accessible during use of the product.

>> STANDARDS

CERTIFICATION

E-SWIN SAS, the company that is the exclusive manufacturer of the device **tearcheck** has been awarded an ISO 13485:2016 certification.

» CONFORMITY

E-SWIN hereby declares that **tearcheck** meets the essential requirements of the 93/42/EEC directive Annex II, article 3.

WARRANTY

CONTACT

Your device is guaranteed for professional use.

The term of this guarantee is associated with legislation in force in each country.

Any error in connection, any incorrect handling, any use of the device other than for dry eye analysis and, in general, any use of the device which fails to observe the conditions described in this manual will invalidate the guarantee.

The company E-Swin SAS will not accept liability for any accident arising from failure to observe the instructions contained in this manual, or from differences in the information provided by the labelling or the touch screen of **tearcheck**.

The manufacturer's guarantee for parts and labor will only be valid if the device is returned in all the items of its original packaging (boxes, packing blocks, etc.).

All the packaging in which your **tearcheck** was supplied should therefore be carefully stored.



For more information visit: www.esw-vision.com

NOTES



E-MIU

ZA de la Prévôté Rue des Côtes d'Orval 78550 Houdan FRANCE 01 30 46 37 61





