Supplementary Online Content

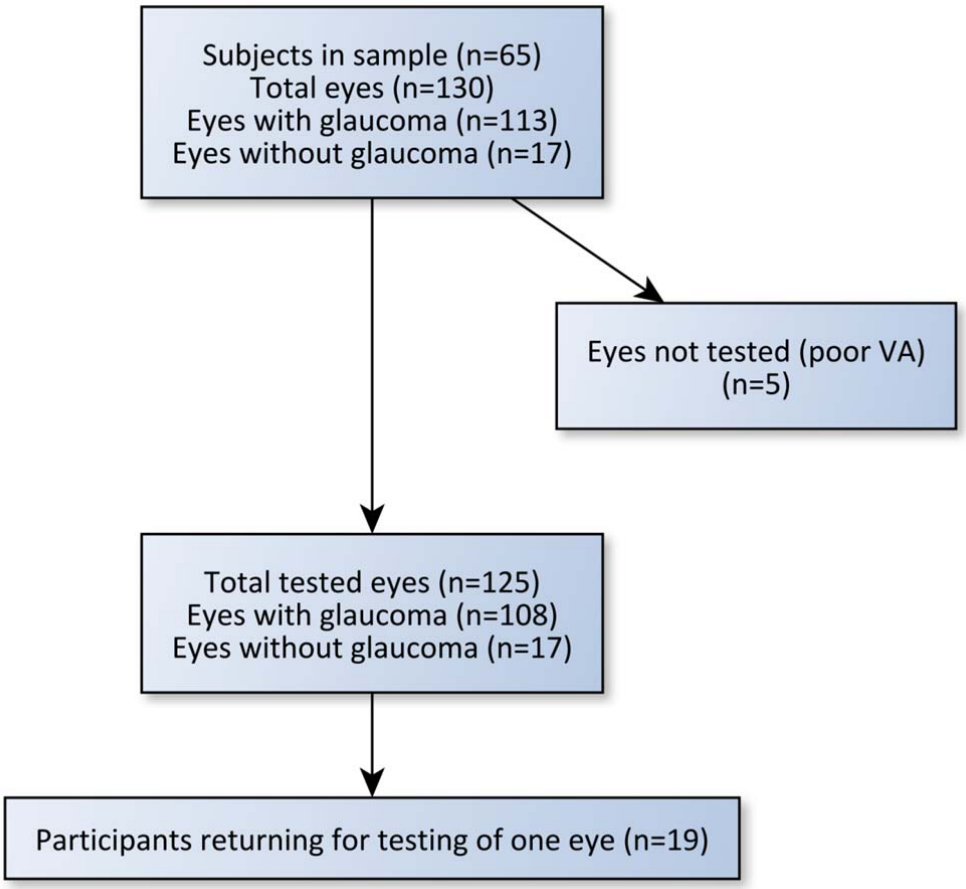
Patel DE, Cumberland PM, Walters BC, et al; the Optimal Perimetric Testing in Children (OPTIC) study group. Comparison of quality and output of different optimal perimetric testing approaches in children with glaucoma. *JAMA Ophthalmol*. Published online December 28, 2017. doi:10.1001/jamaophthalmol.2017.5898

eFigure 1. Flowchart of participants at initial and follow-up visit

eFigure 2. Bland-Altman plot of Octopus and Humphrey MD values for Octopus MD better than -6, in glaucomatous eyes with good EBAR ratings in both tests

eTable. Examiner-Based Assessment of Reliability (EBAR) scoring system

This supplementary material has been provided by the authors to give readers additional information about their work.



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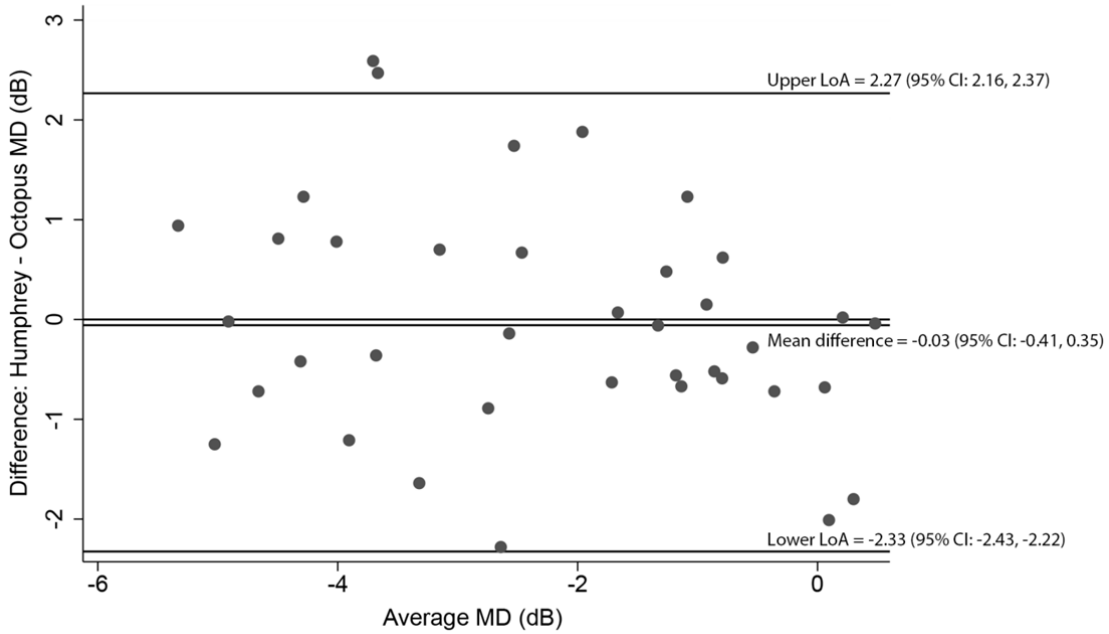

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eTable 1. Examiner Based Assessment of Reliability (EBAR) scoring system

'Good' rating: Compliance with testing is good. The participant is able to maintain good central fixation and respond promptly. They may have some fixation losses at times, but are able to understand and comply well with test instructions. General behaviour allows a comprehensive assessment and overall, visual field outcome is expected to represent true visual field size/sensitivity.
'Fair' rating: Compliance with testing is mostly good. The participant may have moderate fixation losses with some variability in responses. They are able to understand test instructions and their general behaviour allows for moderate co-operation. They may show evidence of fatigue that affects performance and respond to the noise of stimulus presentation at times. Overall, visual field outcome is expected to be able to detect gross defects, but may over/under-estimate true visual field size/sensitivity.
'Poor' rating: Compliance with testing is poor. The participant demonstrates very high fixation losses or searching for stimuli. They may be unable to ignore the sound of stimulus presentation and therefore produce high false positive responses. They may also demonstrate highly variable responses, with a possible lack of understanding of test instructions. Overall, test performance is not expected to represent true visual field size/sensitivity and results will be unable to rule-in or rule-out visual field defects.