Group I	Place of anatomical origin: Retina e.g. Opercula *YAG Vitreolysis: Almost always possible*
Group II	Place of anatomical origin: Posterior vitreous membrane e.g. Weiss ring, fibrotic membranes *YAG Vitreolysis: Almost always possible*
Group III	Place of anatomical origin: Vitreous stroma e.g. Clouds, globuli, strings of condensated vitreous collagen *YAG Vitreolysis: Several laser sessions might be necessary dependant on the amout of condensated vitreous material*
Group IV	Place of anatomical origin: Posterior lens capsule e.g. Iatrogenic origin due to can opener YAG capsulotomy *YAG Vitreolysis: Almost always possible*
Group V	Place of anatomical origin: The classification of floaters using their anatomical origin does not make sense for this group. Because many diverse vitreous opacities are being observed dependant on their inflammatory, degenerative or traumatic genesis e.g. Intravitreal bleedings, infiltrates, asteroid hyalosis, amyloid hyalosis, foreign bodies etc. *YAG Vitreolysis:* ***Almost never possible***