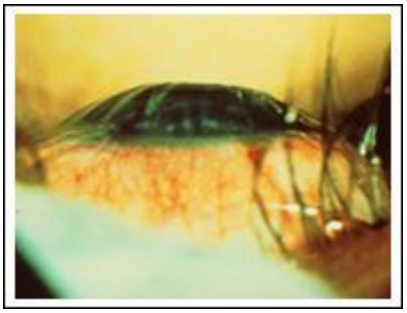
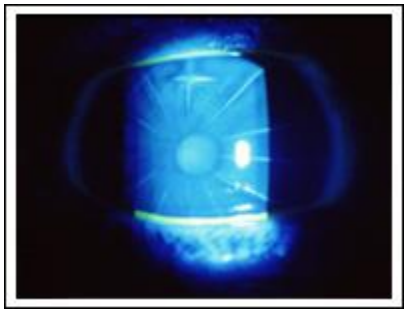
FITTING GUIDE: NewVision

Selecting The Patient

NewVision is indicated for plateau shaped corneas due to LASIK, RK or other surgical procedures. Its proprietary design will contour to the patients corneal irregularity thus producing a well centered physical fit.





Pre-Fitting Examination

Corneal topography and an updated patient RX is ideal for initial trial lens fitting. However manual post operative keratometry readings are acceptable. Determine the flatter K reading and amount of corneal astigmatism. In addition, you want to observe the limbal size of the cornea and any corneal pathology. Excessive SPK could be a contraindication in wearing NewVision.

DIAMETER / CORNEA SIZE	
Diameter	Cornea Size
10.2mm	11.0mm - 12.0mm corneas
10.7mm	12.1mm or greater corneas

Choosing Base Curve

A NewVision base curve is determined by the patient's corneal shape, in particular its flatness and corneal toricity.The greater the cylinder the steeper you need to fit the lens. As a general rule, the base curve is fit steeper than the flat "K" by 1 to 2 diopters. Newvision's mid-periphery is 4 diopters steeper than the central base curve. This curve works very well in aligning with plateau shaped corneas, however, a steeper or flatter curve maybe ordered.

Calculating Lens Power

Because the lenses are fit steeper that the flat "K", minus power needs to be added to manifest refraction's sphere power. However, we highly recommend over-refracting a trial lens for an accurate power determination.

Center Thickness

Center thickness is a function of lens design and should be calculated by the laboratory.

Patient Care

Patient follow up care should be at 1 week, 2 weeks and or as needed. It is recommended that the patient wear their lenses a minimum 4 hours prior to their office visit. At all visits, special attention should be paid to lens movement, lens position and corneal health. A lens that does not move may be unacceptable and cause unsatisfactory lens seal off.

The Ideal Fit

Ideally the lens should center and move freely with the blink. However, there may be less movement than with a conventional lens design. Although a minimum of 1 mm of movement is suggested for good tear exchange, less movement is acceptable if the cornea is clear. There is no ideal fluorescein pattern since all compromised corneas are unique to themselves. Corneal bearing can be present anywhere under the lens. However, if the lens has movement with acceptable centration and the cornea is healthy you will have a good acceptable fit.