

Reverse Geometry/CLASIKcn™ for Post-Surgical Corneas

Fitting Reference Chart

Fitting Summary: The reverse geometry design is recommended for patients who have flat central corneal curvatures combined with steep peripheral corneal curvatures following refractive surgery. These lenses can be fit with the use of corneal topography or a diagnostic fitting set. The fitter is looking to achieve a centrally positioned fit with an aligned fluorescein pattern. The fluorescein pattern should be evaluated when the lens is in the central position which may require the lens to be manually centered. The central fit and peripheral fit are controlled individually. The fitter is looking first at the central pattern to determine if a base curve adjustment is required and then at the mid-periphery and peripheral pattern to determine if the reverse curve requires an adjustment. Considering that post-refractive corneas are irregular due to their surgical history, not all acceptable fits will be textbook.

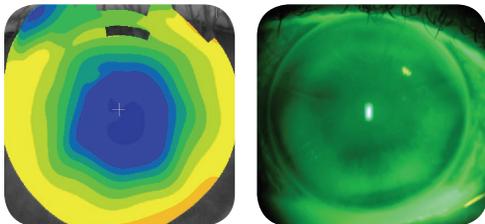


CLASIKcn is a reverse geometry, front surface multifocal option that has the same fitting characteristics as the single vision reverse geometry design.

Key fitting characteristics:

- Good centration
- Alignment fluorescein pattern
- Comfortable
- Good visual endpoint

Ideal Reverse Geometry fit:



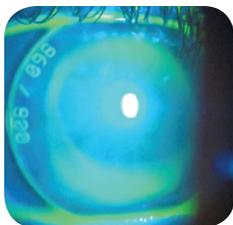
ARTOptical
contact lens, inc.

Reverse Geometry Troubleshooting



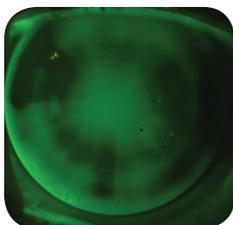
Findings: Touch over part of the central ablation zone and pooling in mid-periphery and periphery of lens indicating an overall flat fit.

Adjustment: Steepen base curve and reverse curve by a minimum of .75D and adjust peripheral curves accordingly.



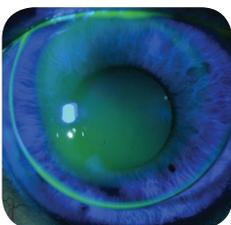
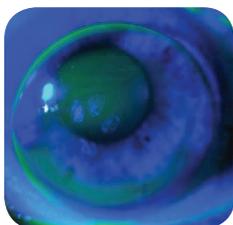
Findings: Central bearing and mid-peripheral bearing indicating a flat base curve and steep reverse curve.

Adjustment: Steepen base curve by a minimum of .75D and flatten reverse curve by a minimum of .75D.



Findings: Central pooling with bubbles and some areas of harsh mid-peripheral bearing indicating both a steep base curve and reverse curve.

Adjustment: Flatten base curve and reverse curve by a minimum of .75D. The very periphery is acceptable and should not be flattened along with the reverse curve.



Findings: The photo on the left is decentered inferiorly with the lower edge below the lower limbus. The photo on the right is the same lens with the photo taken immediately after blink. It would be difficult to determine appropriate changes based solely off the photo on the left but the photo on the

right demonstrates a fit that has good central alignment with a steep mid-periphery/reverse curve.

Note: If a lens is stuck in an inferior position, the lower lid can be used to push the lens to a more central position to help determine what adjustments would be appropriate.