

1 FIND THE CENTRAL BASE CURVE AND THE FITTING CURVE

- Use the fitting chart to select the base curve and fitting curve radius of the initial diagnostic lens based on the average central-K readings from keratometry or central 3 mm sim-Ks from topography
- Verify optical alignment with the central cornea using slit lamp with high molecular weight fluorescein, if available

AVERAGE CENTRAL-K	CENTRAL BASE CURVE	FITTING CURVE
41.00 to 42.99	8.6	8.6
43.00 to 46.99	8.2	8.6
47.00 to 49.99	7.8	8.4
50.00 to 52.99	7.4	8.4
53.00 to 55.99	7.0	8.2
56.00 to 58.99	6.6	8.2
59.00 to 61.99*	6.2	8.2
62.00 to 64.99*	5.8	7.8
65.00 to 67.99*	5.4	7.8

*Not included in diagnostic set.

2 DETERMINE THE NOVAKONE® IT FACTOR (INDEX OF THICKNESS)

Increase or decrease the central thickness of the lens to create more optical stability and manage differing levels of corneal irregularity.

- **5 IT Factors:** 0, 1, 2, 3, 4
- **IT Factor 0** = 0.35 mm CT
- **Each IT Factor increases by 0.10 mm CT**

3 ASSESS THE FITTING CURVE (PARACENTRAL)

- Assess the lens fit using a slit lamp
- The fitting curve should demonstrate typical fitting characteristics of a standard soft lens fit
- Excellent physical fit will result in **0.5 mm to 1.0 mm of movement on blink**

4 CALCULATE FINAL LENS POWER

Perform an over-refraction and compensate for vertex distance and lens rotation, if necessary.

- Dx lenses have no actual cylinder power
- All Dx lenses are designed with Dual Elliptical Stabilization™ to provide rotational stability and with orientation marks at 3 and 9 o'clock

5 ORDER THE PRESCRIPTION LENS

Combine the over-refraction with the power of the diagnostic lens to determine the final Rx. Specify the central base curve, IT Factor, and fitting curve with any required adjustments.

ASSESSING THE LENS FIT

ASSESS WITH OR WITHOUT FLUORESCEIN

Use the chart to inform and adjust the fit.

†Items in green represent observations/solutions visible with fluorescein.

OBSERVATION	SOLUTION
Fluctuating mires	Reassess the central base curve
Stable but poor mires	Increase to the next-higher IT Factor
Poor acuity/crisp mires	Reassess the central base curve
Poor acuity/poor mires	Increase the IT Factor
No lens movement and/or impingement	Flatten the fitting curve 0.2 mm in Rx lens
Excessive lens movement and/or edge lift	Steepen the fitting curve 0.2 mm in Rx lens
Excessive central touch†	Evaluate the next-steeper central base curve Dx lens
Excessive pooling†	Evaluate the next-flatter central base curve Dx lens

FITTING WITH FLUORESCEIN

If high molecular weight fluorescein is available, notice feather touch over the apex, plus tear exchange.



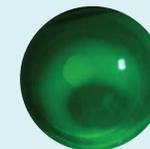
STEEP

Excessive tears (pooling)



ACCEPTABLE

Adequate tears with light inferior feather touch



FLAT

Lack of tears over cone

FITTING TIPS



Central base curve selection is based on K readings. In order to optimize the lens fit alignment, adjust the fitting curve.



Discontinue corneal GP or hybrid lens wear for at least 1 week prior to fitting NovaKone®.



Consider fitting one eye at a time in situations where cessation of the habitual correction method (eg, GPs) is not practical.



Typically, the more central the cone, the lower the IT Factor required, and the more decentered the cone, the higher the IT Factor required.



Changing IT Factor or central base curve in the Rx lens usually alters the optics and generally requires an additional over-refraction. Use caution when ordering IT Factors other than those observed via diagnostic fitting.



NovaKone® is designed with a standard 15.0-mm diameter. Patients with an HVID smaller than 11.0 mm or larger than 13.0 mm may require a different lens diameter. Add 3.0 mm to the HVID to determine custom NovaKone® diameters.

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NOVAKONE®

Soft Contact Lenses for Keratoconus

HAVE ADDITIONAL QUESTIONS OR NEED MORE INFORMATION ABOUT FITTING NOVAKONE®? CONTACT CONSULTATION AT 1-800-253-3669.