



Zenlens<sup>®</sup>

*scleral lenses*

MAKE EVERY FIT STRAIGHTFORWARD  
3-STEP IN-OFFICE INSTRUCTIONS

**BAUSCH+LOMB**

## MEASURE THE PATIENT'S HORIZONTAL VISIBLE IRIS DIAMETER (HVID) TO CHOOSE A LENS DIAMETER

- If HVID is 11.7 mm or less, the 14.8-mm or 16.0-mm diameter lens is recommended
- If HVID is greater than 11.7 mm, the 15.4-mm or 17.0-mm diameter lens is recommended

## CHOOSE A LENS SHAPE BASED ON THE PATIENT'S CORNEAL SHAPE

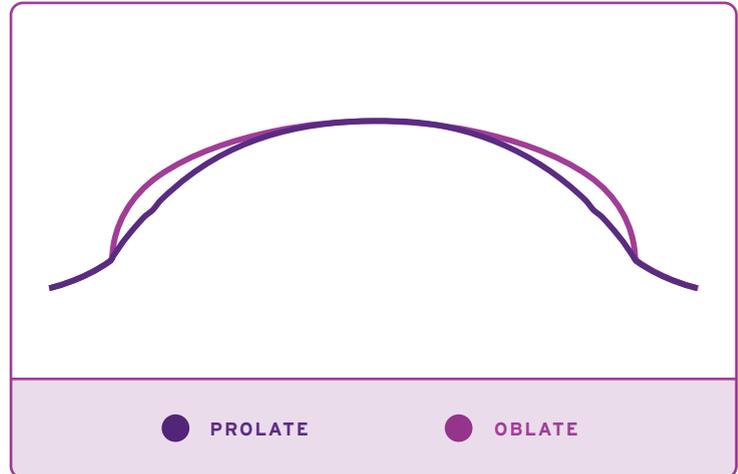
While the SAGs in both geometries are identical, the oblate lenses have a flatter base curve. Choose an oblate lens when a patient's apex is in the mid-periphery instead of the center of the cornea.

### YOU MAY USE THE PROLATE DESIGN FOR PATIENTS WITH:

- Keratoconus
- Ocular surface disease

### YOU MAY USE THE OBLATE DESIGN FOR PATIENTS WITH:

- Postgraft
- Post refractive surgery
- Corneal marginal degenerations



## CHOOSE THE APPROPRIATE DIAGNOSTIC LENS

SUGGESTED STARTING LENSES BASED ON DIAMETER, CORNEAL SHAPE, AND FIT SET DESIGN:

- **14.8-mm:** 14.8 Z3
- **15.4-mm:** 15.4 Z11
- **16.0-mm prolate:** 16.0 Z2 or ZT2\*
- **16.0-mm oblate:** 16.0 Z14 or ZT14\*
- **17.0-mm prolate:** 17.0 Z9 or ZT9\*
- **17.0-mm oblate:** 17.0 Z21 or ZT21\*

\*ZT refers to toric APS fit set.



**SPHERICAL FIT SET**

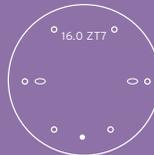


**TORIC FIT SET**

## CONFIRM LENS DIAMETER

EVALUATE LIMBAL DRILL DOT POSITION

When the lens is manually centered, limbal drill dots should land on or up to 0.5 mm outside the limbus.



## TIPS:

- If you are having difficulty identifying the limbal dots, add fluorescein to the front of the lens to help them stand out.
- Apply lens with the black drill dot at 6:00.

## GOOD CLEARANCE AND SCLERAL ALIGNMENT COME FROM ASSESSING ALL OF THE FOLLOWING ELEMENTS

**Note:** Clearances shown are target clearances shortly after lens insertion. Make adjustments to achieve target clearances based on your initial clearance observations. For more assessment tips, see page 15 of the Zenlens® fitting guide.

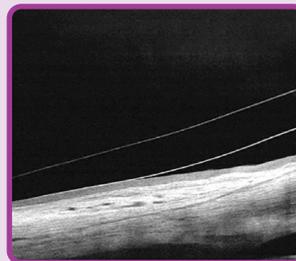


### PROPER CENTRAL VAULT

The central clearance should represent a **1:1 ratio between the diagnostic lens and the saline chamber.**

The central thickness (CT) of each diagnostic lens based on diameter is:

- **14.8-mm and 15.4-mm lenses:** 250 microns
- **16.0-mm and 17.0-mm lenses:** 350 microns\*



### LIMBAL CLEARANCE

The limbal clearance should be **between 75 and 125 microns for all diameters.**

An OCT image may be helpful to gain an accurate measurement of limbal clearance.

\*After 3-4 hours, a fully settled lens should be 100-150 microns less than initial central clearance.

## SCLERAL ALIGNMENT

- **Assess each quadrant of the lens to identify any edge lift, blanching, or impingement.**
- **You may need to utilize a toric APS to ensure proper landing of the lens on the sclera.**
  - Toric APS lenses contain 180 microns of toricity (flat 3, steep 3—each step is 30 microns)
  - When observing the toric APS lens on the eye, document the axis of the hash marks (flat meridian) to share with consultation
- **All lenses can be ordered flatter or steeper.**

**If you observe decentration, consider using a Bi-Elevation™ design.**



Scan code to see the Bi-Elevation™ fitting guide for more details.

## FINALIZE THE PRESCRIPTION BY PERFORMING AN OVER-REFRACTION

- If cylinder is present in the over-refraction, or if you don't obtain best-corrected visual acuity once the over-refraction is completed, perform keratometry over the lens to check for lens flexure. Contact your fitting consultant for support.
- If you are considering utilizing front toric or multifocal optics and ordering a lens with a toric APS, use a toric APS diagnostic lens from your fitting set and note rotation.

Keep in mind that all diagnostic lenses are -2.00D SPH

Is the lens flexing?	Is the landing zone alignment uniform in the primary meridians?	Solution
YES	YES	<b>Request Flex Control Factor of 1</b> Adds 100 microns of thickness
YES	NO	<b>Request Toric APS</b> Flatten or steepen APS by different amounts in each meridian
NO	YES	<b>Request Front Toric Rx Design</b> Offers dual elliptical stabilization
NO	NO	<b>Request Toric APS</b> Document the lens rotation. Perform new OR if cylinder is still present; order front toric design with toric APS

**BE SURE TO HAVE RX,  
ADD POWERS, AND  
HVID (IF AVAILABLE)  
READY TO GO  
WHEN YOU PLACE  
YOUR ORDER!**

You can specify the necessary contact lens prescription or have our consultants calculate it for you from the over-refraction.

# ZENLENS® SCLERAL LENS MARKINGS



## DX SPHERICAL APS

- Six evenly spaced limbal drill dots at the beginning of the landing zone (LCC)
- Laser-etched Dx number for positive ID



## DX TORIC APS

- Six limbal drill dots at the beginning of the landing zone (LCC)
- Two hash marks at 0° and 180° meridian
- Black limbal drill dot at 270° base
- Laser-etched Dx number for positive ID

All diagnostic lenses are -2.00D SPH

Lens thickness is 250 microns for 14.8-mm and 15.4-mm lenses

Lens thickness is 350 microns for 16.0-mm and 17.0-mm lenses

When the lens is manually centered, limbal drill dots should land on or up to 0.5 mm outside the limbus

**IF YOU'RE HAVING TROUBLE SEEING THE LIMBAL DRILL DOTS, ADD FLUORESCEIN TO THE FRONT SURFACE OF THE LENS**



## RX SPHERICAL APS

- Black limbal drill dot on right lens OD (shown)
- No limbal drill dots OS
- Laser-engraved ID at 90° matches the order number



## RX TORIC APS

- Two hash marks at 0° and 180° meridian will align to the corresponding axis of scleral toricity on the eye
- Black limbal drill dot at 270° base OD (shown)
- Two black limbal drill dots at 270° base OS
- Laser-engraved ID at 90° matches the order number



## RX FRONT TORIC

- Two hash marks at 0° and 180° meridian
- Black limbal drill dot at 270° base OD (shown)
- Two black limbal drill dots at 270° base OS
- Laser-engraved ID at 90° matches the order number

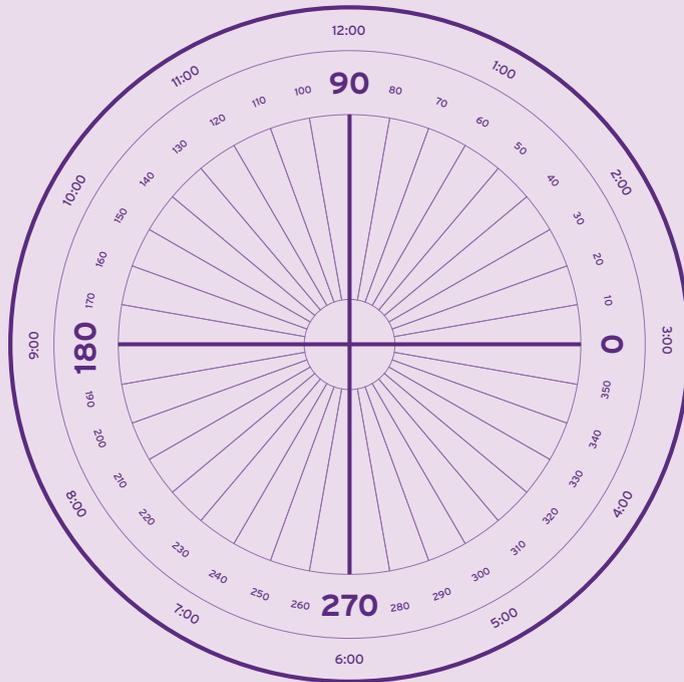
OD lenses end in 10

OS lenses end in 20

# ZENLENS® AXIS WHEEL

REFERENCE THE ZENLENS® AXIS WHEEL  
WHEN NOTING LENS ROTATION AND  
DESIGNING LENSES WITH:

- MicroVault™ technology
- Multifocal optics



**QUESTIONS?** BAUSCH + LOMB  
EXPERT CONSULTANTS CAN HELP.



**Call 800-253-3669,**  
Monday through Friday,  
8:00 AM to 7:00 PM EST



**Email** your order anytime to  
[svp.consultation@bausch.com](mailto:svp.consultation@bausch.com)



**Fax** your order anytime to  
**800-899-5612**

## **Important Safety Information for Gas Permeable and Customized Soft Contact Lenses**

### **WARNINGS:**

#### **Patients should be advised of the following warnings pertaining to contact lens wear:**

- Problems with contact lenses and lens care products could result in serious injury to the eye. It is essential that patients follow their eyecare practitioner's directions and all labeling instructions for proper use of lenses and lens care products, including the lens case. Eye problems, including corneal ulcers, can develop rapidly and lead to loss of vision.
- Daily wear lenses are not indicated for overnight wear, and patients should be instructed not to wear lenses while sleeping. Clinical studies have shown that the risk of serious adverse reactions is increased when daily wear lenses are worn overnight.
- Studies have shown that contact lens wearers who are smokers have a higher incidence of adverse reactions than nonsmokers.
- If a patient experiences eye discomfort, excessive tearing, vision changes, or redness of the eye, the patient should be instructed to immediately remove lenses and promptly contact his or her eyecare practitioner.

### **CONTRAINDICATIONS:**

#### **Do not use when any of the following conditions exist:**

- Acute or subacute inflammation or infection of the anterior chamber of the eye
- Any eye disease, injury or abnormality, other than keratoconus, PMD, that affects the cornea, conjunctiva or eyelids
- Severe insufficiency of lacrimal secretion (dry eye)
- Corneal hypoesthesia (reduced sensitivity), if not aphakic
- Any systemic disease that may affect the eye or be exaggerated by wearing contact lenses
- Allergic reactions of ocular surfaces or adnexa that may be induced or exaggerated by wearing contact lenses or using contact lens solutions
- Allergy to any ingredient in a solution which is to be used to care for contact lenses
- Any active corneal infection (bacterial, fungal or viral)
- Red or irritated eyes

### **ADVERSE EFFECTS:**

#### **The following problems may occur with the use of contact lenses:**

- Eyes stinging, burning, itching, irritation or other eye pain
- Comfort is less than when the lens was first placed on the eye
- Feeling of something in the eye such as a foreign body, scratched area
- Excessive watering (tearing) of the eye
- Unusual eye secretions
- Redness of the eyes
- Reduced sharpness of vision (poor visual acuity)
- Blurred vision, rainbows, or halos around objects
- Sensitivity to light (photophobia)
- Dry eyes