PREMIUM ACCOMMODATING

Provides patients with an active range of vision for today's active lifestyles.¹

OPTICS

DELIVERS EXCELLENT

DISTANCE AND INTERMEDIATE

ACUITY THROUGH ACCOMMODATION 1

This aberration-optimized (AO) IOL delivers 100% of the light, 100% of the time for excellent contrast sensitivity and minimized issues with halos and glare.²

Unlike standard presbyopia-correcting lenses that split light or elongate the focal point, Crystalens® AO IOL is an advanced accommodating lens that utilizes

one distinct point and changes position and functional power within the capsular bag to deliver clear, crisp vision for nighttime driving and low-light activities.^{3,4}

The advanced AO optic also delivers uniform power center to edge for consistent results,⁵ and is not sensitive to decentration.⁶

BAUSCH+LOMB



Accommodating Posterior Chamber IOL

AO1UV order number AO1UV-XXXX AO2UV order number AO2UV-XXXX



LEARN MORE AT bauschsurgical.com



MODEL NUMBER	AO1UV (non-preload)	AO2UV (non-preload)
OPTIC DESIGN	Plate with hinge haptics Biosil (Silicone Elastomer) Aspheric, aberration-free, biconvex	Plate with hinge haptics Biosil (Silicone) Aspheric, aberration-free, biconvex
OPTIC SIZE	5mm	5mm
LENGTH	11.5mm	12.0mm
OPTICAL BIOMETRY Optical A-constant* ACD	119.1 5.61mm	119.1 5.61mm
OTHER FEATURES	Refractive index at 35°C: 1.43	Refractive index at 35°C: 1.43
DIOPTER RANGE	+17 to +30-D in 0.50-D increments	+10 to +24-D in 0.5-D increments

^{*} A-constant values are suggested as a guideline. Physicians should calculate lens power based on optimization of their experience and preference with IOL technology.



Find B+L IOL surgical instruments online at www.StorzEye.com

Crystalens® Inserter System

FOR INSERTING LENS MODEL AO1UV and AO2UV RECOMMENDED INCISION SIZE 2.8mm-3.0mm TYPE OF ACTION Push-type COMMENTS Single-handed delivery. Disposable.



- Crystalens Directions for Use.
- 2. Ang R, Martinez G, Cruz E, Tiongson A, Dela Cruz A. Prospective evaluation of visual outcomes with three presbyopia-correcting intraocular lenses following cataract surgery. Clin Ophthalmol. 2013;7:1811-23.
- 3. Packer M. Optical characteristics and quality of vision: an objective comparison between refractive and diffractive intraocular lens (IOL) types. Presented at American Society of Cataract and Refractive Surgery (ASCRS); May 6-10, 2016; New Orleans, LA.
- 4. Santhiago MR, Netto MV, Barreto J Jr, et al. Wavefront analysis, contrast sensitivity, and depth of focus after cataract surgery with aspherical intraocular lens implantation. Am J Ophthalmol. 2010;149(3):383-389.
- 5. Altmann GE, Nichamin LD, Lane SS, Pepose JS. Optical performance of 3 intraocular lens designs in the presence of decentration. J Cataract Refract Surg. 2005;31:574-585.
- Johansson B, Sundel in S, Wikberg-Matsson A, Unsbo P, Behndig A. Visual and optical performance of the Akreos® Adapt Advanced Optics and Tecnis Z9000 intraocular lenses: Swedish multicenter study. J Cataract Refract Surg. 2007;33(9):1565-1572.

Indications and Important Safety Information for Crystalens® posterior chamber accommodating IOL

INDICATIONS: The Crystalens® posterior chamber accommodating intraocular lens (IOL) is intended for primary implantation in the capsular bag of the eye for the visual correction of aphakia secondary to the removal of a cataractous lens in adult patients with and without presbyopia. Crystalens provides approximately one diopter of monocular accommodation which allows for near, intermediate, and distance vision without spectacles.

WARNINGS: The safety and effectiveness of the Crystalens® AO IOL has not been established in patients with preexisting conditions. Careful preoperative evaluation and sound clinical judgement should be used by the surgeon to decide the risk / benefit ratio before implanting a lens in a patient with conditions as outlined in the Crystalens® AO IOL Directions for Use. Unlike most other IOLs, the Crystalens AO IOL optic has hinges connecting it to the haptic; please see adverse events section below for more information.

PRECAUTIONS: Do not resterilize this intraocular lens by any method. Do not store lenses at temperatures over 45°C (113°F). Do not implant this lens in the anterior chamber or the ciliary sulcus.

ADVERSE EVENTS: The incidence of adverse events experienced during the clinical trial was comparable to or lower than the incidence reported in the historic control ("FDA grid") population. As with any surgical procedure, risk is involved. Vaulting is a post-operative adverse event where the Crystalens AO IOL optic hinges move into and remain in a displaced configuration. If vaulting occurs, please see Directions for Use for a detailed listing of symptoms, information regarding diagnosis, potential causes, and sequelae. Physicians should consider the characteristics of each individual vaulting case prior to determining the appropriate treatment. Data on long-term follow-up after treatment of vaulting is not available.

ATTENTION: Refer to the Directions for Use labeling for a complete listing of indications, warnings and precautions, clinical trial information, etc.

CAUTION: Federal (USA) law restricts this device to the sale by or on the order of a physician.