

# enVista<sup>®</sup> Toric

Hydrophobic Acrylic IOL

MONOFOCAL TORIC

enVista<sup>®</sup> Toric is a proven standard in monofocal performance, delivering predictable outcomes with exceptional rotational stability.<sup>1,2</sup>



ABERRATION-FREE  
**OPTIC**

AVAILABLE TO TREAT  
**<1D OF  
ASTIGMATISM**  
AT THE CORNEAL PLANE <sup>2</sup>

**94.4%** OF EYES  
HAD **≤5°** OF LENS ROTATION <sup>2,3</sup>

Uniform in power from center to edge across the principle meridian, enVista<sup>®</sup> Toric is less sensitive to the effects of decentration and tilt.<sup>5</sup>

The IOL's unique fenestration holes facilitate with intraoperative lens manipulation, allowing for both clockwise and counterclockwise manipulation when positioning the lens in the capsular bag.

The TruSight<sup>®</sup> advanced optic (AO) with SureEdge<sup>®</sup> design is glistening-free and scratch-resistant based on nanoindentation study.<sup>1</sup> AccuSet<sup>®</sup> haptics deliver 300% more radial compression than traditional hydrophobic IOLs.<sup>1,4</sup>

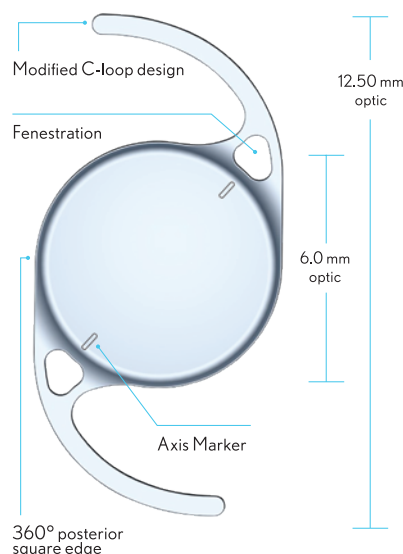
enVista<sup>®</sup> TORIC  
HYDROPHOBIC ACRYLIC IOL

**BAUSCH + LOMB**

## HYDROPHOBIC ACRYLIC IOL

MX60PT order number MXUPTCCC+XXX

MX60ET / ETE order number MXUETCCC+XXX / ETEUCCC+XXX



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MODEL NUMBER	MX60PT (preload)	MX60ET / ETE (non-preload)
OPTIC DESIGN	One-piece Hydrophobic acrylic Aspheric, aberration-free, biconvex, posterior-surface toric	One-piece Hydrophobic acrylic Aspheric, aberration-free, biconvex, posterior-surface toric
OPTIC SIZE	6mm	6mm
LENGTH	12.5mm	12.5mm
HAPTICS	Modified C, fenestrated	Modified C, fenestrated
OPTICAL BIOMETRY	Optical A-constant* ACD Surgeon Factor	119.1 5.61mm 1.85mm
APPLANATION BIOMETRY	Applanation A-constant* ACD Surgeon Factor	118.7 5.37mm 1.62mm
OTHER FEATURES	Glistening free Refractive index: 1.53 at 35° C UV absorbing Sharp 360° square posterior edge	Glistening free Refractive index: 1.53 at 35° C UV absorbing Sharp 360° square posterior edge
DIOPTR RANGE	+6 D to +30 D in 0.5-D increments	+6 D to +30 D in 0.5-D increments
CYLINDER POWERS IOL PLANE	1.25, 2.00, 2.75, 3.50, 4.25, 5.00, 5.75	MX60ET: 1.25, 2.00, 2.75, 3.50, 4.25, 5.00, 5.75 ETE: 1.25, 1.50, 2.00, 2.50, 3.00, 3.50, 4.25, 5.00, 5.75

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

**STORZ**<sup>®</sup>  
Ophthalmic Instruments

Find B+L IOL surgical equipment  
online at [www.StorzEye.com](https://www.StorzEye.com)

## Storz<sup>®</sup> BLIS Inserter System



**FOR INSERTING LENS MODEL** MX60ET; +6D to +30D with X1 cartridge; +6D to +30D with X0 cartridge

**RECOMMENDED INCISION SIZE** BLIS-X1 2.4mm or less; BLIS-X0 2.2mm-2.6mm

**TYPE OF ACTION** Screw-type

**COMMENTS** Controlled delivery. Reusable. Sterilization required.

## INJ100 Delivery System



**FOR INSERTING LENS MODEL** MX60PT

**RECOMMENDED INCISION SIZE** 2.2mm-2.6mm

**TYPE OF ACTION** Silicone tip push-type

**COMMENTS** Single-handed delivery. Disposable.

1. Data on file. Bausch & Lomb Incorporated.
2. enVista toric directions for use. Bausch & Lomb Incorporated; NY.
3. Stephenson D., Astigmatism Correction with New Spherical Aberration Neutral Monofocal Toric IOL with Intraoperative Wavefront-Aberrometry, presented ASCRS 2019.
4. Bozokova D, Pagnouille C, Jerome C. Biomechanical and optical properties of 2 new hydrophobic platforms for intraocular lenses. J Cataract Refract Surg. 2013; 29:144-1414.
5. Altmann GE, Nichamin LD, Lane SS, Pepose JS. Optical performance of 3 intraocular lens designs in the presence of decantation. J Cataract Refract Surg. 2005 March;31(3):574-85.

**ENVISTA<sup>®</sup> TORIC  
CALCULATOR**



## Indications and Important Safety Information for enVista<sup>®</sup> Toric IOL

**INDICATIONS:** Indicated for primary implantation in the capsular bag of the eye in adult patients for the visual correction of aphakia and corneal astigmatism following removal of a cataractous lens for improved uncorrected distance vision.

**WARNINGS:** Physicians considering lens implantation in patients with pre-existing conditions, or in the event of surgical difficulties at the time of cataract extraction, should weigh the potential risk/benefit ratio. Rotation of enVista<sup>®</sup> toric IOL away from the intended axis can reduce the astigmatic correction. Misalignment greater than 30° may increase postoperative refractive cylinder.

**PRECAUTIONS:** Do not attempt to resterilize this lens. Do not use if the packaging is damaged or if there are signs of leakage. Do not store lenses at temperatures over 43°C (109°F) or lower than 0°C (32°F). Do not reuse the lens. Safety and effectiveness of the enVista<sup>®</sup> toric IOL have not been substantiated in patients with conditions and intraoperative complications as outlined in the enVista<sup>®</sup> toric IOL Directions for Use.

**ADVERSE EVENTS:** As with any surgical procedure, risk is involved. Potential adverse events accompanying cataract or implant surgery may include, but are not limited to, the following: corneal endothelial damage, infection (endophthalmitis), retinal detachment, vitritis, cystoid macular edema, corneal edema, pupillary block, cyclitic membrane, iris prolapse, hypopyon, transient or persistent glaucoma, acute corneal decompensation, toxic anterior segment syndrome (TASS). Secondary surgical interventions include, but are not limited to: lens repositioning, lens replacement, vitreous aspiration or iridectomy for pupillary block, wound leak repair, and retinal detachment repair.

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

**ATTENTION:** This is not all you need to know. Please refer to the Directions For Use labeling for a complete listing of indications, full risk and safety information, clinical study information, etc.