



# Multifocal-19™

Fitting and Information Guide



## Base Curve Table

Flat K	Base Curve
39.00 to 39.25	8.08
39.50 to 39.75	7.99
40.00 to 40.25	7.90
40.50 to 40.75	7.80
41.00 to 41.25	7.72
41.50 to 41.75	7.63
42.00 to 42.25	7.54
42.50 to 42.75	7.46
43.00 to 43.25	7.38
43.50 to 43.75	7.30
44.00 to 44.25	7.22
44.50 to 44.75	7.14
45.00 to 45.25	7.07
45.50 to 45.75	7.00
46.00 to 46.25	6.92
46.50 to 46.75	6.85



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## See Near, Far, and In-Between

- +1.75 ADD Power
- Up to +2.25 ADD with Front Aspheric
- Crisp, Sharp Distance Vision
- Excellent for Previous Gas Perm Wearers

**Patient Selection:** Select patients with a +2.50 or less ADD power. Take central K readings, refraction, and topography if available. Determine which is the non-dominant eye. To increase the ADD power, over-plus the dominant eye by +.25 and the non-dominant eye by +.50 on early presbyopes, and up to +1.00 or more for advanced presbyopes.

**If More ADD Power Is Needed:** Assuming you have achieved a good fit that translates well and you have pushed the plus as much as possible in both eyes, then you may need to add a front reverse aspheric curve to boost the ADD power. Order an e-.5 front surface to boost the "ADD" power by about +.50.

### Desired Fit:



### Tight Fit:



### Loose Fit:



### If Indicated Lens is Too Tight:

Flatten the Base Curve by ½ diopter

### If Indicated Lens is Too Loose:

Steepen the Base Curve by ½ diopter

### Example:

CK's: R: 43.00/44.00 (Dom)

L: 44.00/46.00 (Non-Dom)

Spectacle-Rx: -3.00

Eccentricity Value = .52

Spectacle-Rx: -3.00

Eccentricity Value = .48

R: Suggested Base Curve: 7.38

Dominant Distance Power: -5.50

L: Suggested Base Curve: 7.22

Non-Dom Distance Power: -5.25

For further fitting details refer to the MF-19™ Quick Fit Guide or contact one of our knowledgeable consultants.

# Multifocal-19™

## Quick Fit Guide



### Supply the following data to order MF-19™ Lenses:

1. Central keratometry readings (manual/auto)
2. Corneal eccentricity (if available) and brand of topographer
3. Refraction
4. ADD power
5. Dominant and non-dominant eye

**Base Curve and Optic Zone:** Upon dispensing, the base curve or optic zone should display 2-4mm of central clearance that progresses to a 2mm band of touch at around 8 mm's.

**Mid-Peripheral Zone:** The mid-peripheral band of touch is a result of fitting the lens steeper than flat central K. Though the central base curve is steeper than the central cornea the overall sagittal depth of the lens is equal to that of the cornea.

**Peripheral Zone:** Aspheric and multifocal lenses utilize a "true" aspheric peripheral curve for perfect lift. If more or less edgelifit is required, the base curve may need to be flatter or steeper. If you feel the central base curve is fit correctly then you may order a high or extra high edgelifit.

**Diameter:** 10.0 diameter performs best.

**Over Plus Non-Dominant Eye:** To assure maximum ADD power we suggest to over-plus the non-dominant eye based on the ADD power required.

#### Add Power:

+1.75 to +2.00  
+2.25 to +2.50  
+2.75 to +3.00

#### Over Plus Amount:

+.50 to +.75  
+.75 to +1.00  
+1.25 to +1.50

### Lens Dispensing Procedure:

1. Insert the lenses and wait 10 to 15 minutes for them to settle down or until the patient stops tearing.
2. Observe the lenses with the slit lamp to check lens position and movement.  
**Lenses should center and move well.**
3. Insert fluorescein and observe the pattern comparing it to the description below:

#### Fluorescein Pattern Check List:

- 2-4mm central clearance
- 1-2mm of touch that becomes progressively darker in the 8mm central area
- .8 to 1mm wide mid-peripheral alignment ring
- Adequate peripheral edgelifit
- 2-3mm movement on the blink

4. Over-refract the distance vision in the dominant eye. To enhance the near vision an over-refraction of -.25 is preferred.
5. Over-refract the distance vision in the non-dominant eye. To enhance the near vision an over-refraction of at least -.50 in the is preferred.

**Note:** Any plus over refraction for distance will decrease the ADD power by the same amount or more.

6. To over-refract near vision have the patient gradually look down to read while trying to keep their chin up. Stand by their side to be sure the lens translates up to the near or ADD portion of the lens.
7. If acceptable, dispense the lenses.
8. If more ADD power is needed, make sure the lens is not riding inferior. The lens must position central to superior. If the lenses ride low, when the patient looks down to read, the lens moves further up into the distance zone instead of the near zone.
9. If possible, a follow-up should be done within one week. Schedule it towards the end of the wearing schedule.

**CAUTION:** Advise the patient to contact you immediately if they experience red, swollen eyes and/or distorted vision.

### Follow-Up Check List:

1. Check lens position & movement with the slit lamp.
2. Over-refract with the lenses on.
3. Check the fluorescein pattern.
4. Remove the lenses and measure the central K readings.
5. Check the refraction to see if it is stable.
6. Take topography maps if available.
7. If results are acceptable, schedule the patient for an annual follow-up.
8. If results are unacceptable, send a completed Contex Troubleshooting Form along with axial and tangential topography maps (or the data below) to Contex for assistance.

### Supply the following data to re-order MF-19™ lenses:

- Pre and post-wear K readings
- Pre and post-wear refraction
- Over-refraction with lenses on
- Pre and post axial and tangential maps
- Lens position (central, superior, inferior, temporal, nasal and how many mm's)
- Description of fluorescein pattern
- Wearing schedule

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