Staff Continuing Education

Refraction, High Technology Lens Implants & LRI, Supporting our Hearing Program

Friday, May 6, 2016

Presented by James N. McManus, M.D. & Jason K. Darlington, M.D.

Refraction

Providing our patients with a quality Refraction is a key component of providing excellent eye care at The Eye Institute.

Defining a quality refraction:

Determining a patient's correct eyeglass prescription, the first time – without the need for the prescription (or eyeglasses) to be remade.

Refraction

Providing our patients with a quality Refraction is a key component of providing excellent eye care at The Eye Institute.

-2.00 -1.00 x 078

-2.25 -0.75 x 091

+2.50 ADD OU

Refraction

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THE EYE INSTITUTE FOR MEDICINE & SURGERY

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Refraction

Providing our patients with a quality Refraction is a key component of providing excellent eye care at The Eye Institute.

A quality refraction is a prescription that is well tolerated by the patient, does not cause headaches, or double vision, and optimizes the patient's visual potential.

Quality refractions should be filled at the Optical at The Eye Institute.

Refraction

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- The first step to a quality refraction is ensuring that previous eyeglasses are read accurately.

- In some cases it may be prudent to check manual lensometry reading against the auto-lensmeter. An example of when to do so would be if the prescription you measure is different than the last Rx and the patient denies getting new glasses.

Refraction

Providing our patients with a quality Refraction is a key component of providing excellent eye care at The Eye Institute.

An accurate auto-refraction is also a key component to determining an optimal refraction.

The autorefraction is not a fully accurate final Rx; rather it is a tool designed to provide the refractionist with additional information to help determine the direction in which to move, in order to achieve an optimal prescription.

Refraction

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Be wary of any substantial changes in axis or cylinder; if you are finding that such a change appears necessary, you may want to recheck – or have a colleague recheck – the previous eyeglass prescription.

Never rely on eyeglasses read be someone else or assume that previous readings are correct without checking them.

Refraction

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Please remember that generally speaking*, only relatively small changes will be tolerated by patients due to *habituation*.

We do not want to provide a theoretical improvement that is not going to be well tolerated…

Refraction

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Please remember – small changes for small improvements in vision, slightly larger changes for greater improvements in vision.

Beware of changes that DO NOT improve vision measurably.

Refraction

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Myopic Patients – Remember to “push plus…” Myopes love minus…

When refracting eyes individually, the patient may request much more minus than he or she can tolerate with binocular vision.

Refraction

Providing our patients with a quality Refraction is a key component of providing excellent eye care at The Eye Institute.

The final check of the accuracy of your refraction MUST be with both eyes open/neither occluded.

This is a key check to minimize or prevent errors. Errors such as excessive minus or provoked double vision will become noticeable with both eyes open.

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Refraction

Providing our patients with a quality Refraction is a key component of providing excellent eye care at The Eye Institute.

Add powers – people rarely will tolerate a *lesser* add power, if they have been using that power for a long period of time.

(People do not age in reverse…).

Do not assume add powers based upon age…

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Refraction

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Add powers – Look at key factors….

Ask patients to show you how/where they hold items they read (how far away they are held).

Be careful to explain that you want to know where they want to hold items to be read, not where they can see them…

Refraction

Providing our patients with a quality Refraction is a key component of providing excellent eye care at The Eye Institute.

The final step – compare what you believe to be the correct refraction to the eyeglasses that the patient is currently wearing. Ask the patient which seems more clear and which they prefer…

This is another key tip for preventing errors.

IOLs & LRI

High technology lens implants vs. a basic lens implant at the time of cataract surgery.

Why are high technology lens implants sometimes recommended by our cataract surgeons?

IOLs & LRI

To understand the value of high-technology lens implants, we first have to differentiate the goals and expectations of a patient selecting a basic lens implant vs. a patient selecting a high technology lens implant.

IOLs & LRI Comparison

		NEAR READING	INTERMEDIATE COMPUTER/SPORTS	DISTANCE DRIVING/TELEVISION
TECNIS MULTIFOCAL	+2.75		X	X
	+3.25 +4.00	X		X
CRYSTALENS Accommodative			X	X
TRULIGN Accommodative			X	X
TORIC				X
BASIC				Possibly only one plane of vision may be optimized, though if astigmatism is present, spectacle correction will still be required.
LRI		Correcting astigmatism will enhance vision at all distances, depending upon which lens is implanted.		

IOLs & LRI

Basic IOL

Patient Goal: to see well with eyeglasses following cataract surgery.

High Technology IOL

Patient Goal: to see very well with substantially reduced dependence on eyeglasses (or without eyeglasses in most situations) following cataract surgery.

IOLs & LRI

Advantages of achieving reduced dependency without eyeglasses after cataract surgery:

* Achieve optimal vision while free from eyeglasses… especially beneficial for people who are active, who engage in sports and other outdoor pursuits.

* Also a great benefit for people who reside in assisted living facilities and nursing homes as misplaced eyeglasses or a frequent occurrence and a great frustration for the resident, as well as family members.

IOLs & LRI

Advantages of achieving reduced dependency without eyeglasses after cataract surgery (continued):

* With a typical pair of eyeglasses costing between $300 - $500 and the frequency with which eyeglasses are replaced, over a period of years, a typical patient no longer requiring a distance prescription or bifocals may save many thousands of dollars over the course of their lifetime.

IOLs & LRI

High technology lens implants and advanced techniques for vision correction.

A full array of options at The Eye Institute.

* Tecnis Multifocal
* Crystalens
* Trulign
* Toric
* LRI

IOLs & LRI

Tecnis Multifocal

A true multifocal lens implant designed to provide optimized distance, intermediate and near vision

Add Powers: +2.75, +3.25, +4.00

IOLs & LRI

Crystalens

An accommodative lens implant designed to provide optimized distance and intermediate vision.

IOLs & LRI

Toric IOL

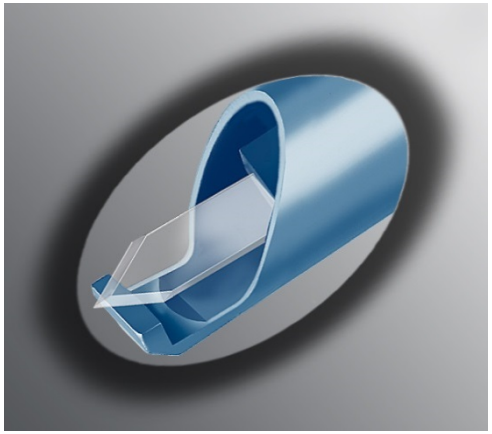
Toric lens implants are designed to correct for astigmatism while optimizing distance vision.

IOLs & LRI

LRI - Limbal Relaxing Incisions

A precise, predictable, and time-tested method of correcting small to intermediate amounts of visually significant astigmatism.

Requires a high degree of surgical skills while employing a precise instrument-a diamond blade.



LRI can be performed simultaneous to cataract surgery, following cataract surgery, or in scenarios where the patient is phakic, to help the patient achieve more clear vision without the need for eyeglasses.

IOLs & LRI

What's the bottom line?

The vast majority of patients who decide to have high-technology lens implants or LRI, and who have realistic goals of what can be achieved through the use of these implants and techniques achieve the vision correction they are seeking with a reduced or eliminated need for eyeglasses.

The result?

An enhanced quality of life and greater independence.

Supporting our Hearing Program

An outstanding, cost effective service provided by our Practice

Kassandra Smythe – a talented hearing specialist and a true patient advocate, focused on the well-being and best interests of her patients.

A convenient service.

Low relative cost to patients.

Supporting our Hearing Program

An outstanding, cost effective service provided by our Practice

Hearing Aids are an important purchase – in terms of the investment made as well as their ability to positively impact a patient's quality of life..

A patient and their family members can rest assured knowing that their care is being provided in a true medical facility under physician direction – as compared with certain commercial venues.

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When should we screen patient's hearing?

- Over Age 50
- Diabetics regardless of age
- Patients with a history of macular degeneration, glaucoma or cataracts
- Patients who mention or who appear to have hearing loss.
- Patients whose family member accompanying them makes mention of a possible hearing loss.

Supporting our Hearing Program

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- What if a patient has a history of having a hearing specialist already?
- Ask the patient if he or she is getting the results that they desire from their current hearing specialist…

Questions?