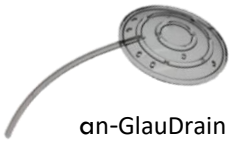
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# an-Fo-X IOL

## Focus eXtended

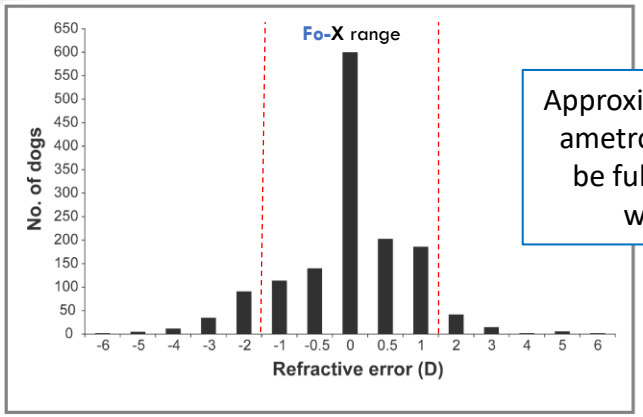


**The World's First Canine IOL**
**with eXtended Depth of Focus**

**+39.5 to +42.5 Diopter**

The Fo-X IOL is a innovative solution for all your patients - including hyperopic and myopic!

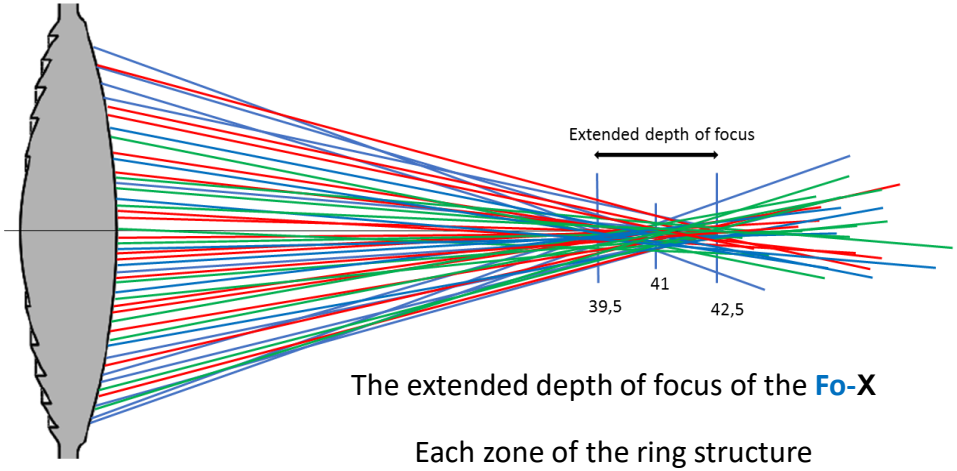
Available in sizes 10, 11, 12, 13, 14mm




Approximately 80% of ametropic dogs can be fully corrected with **Fo-X**

Figure 1—Histogram of the distribution of refractive errors of eyes among 1,440 dogs evaluated during routine CERF examinations conducted from 1991 through 2006.
(Kubai et al. AJVR, Vol 69, No. 7, July 2008; modified )

**Fo-X** is a monofocal D+41.0 lens with an enhanced depth of focus of D +1.5 on one side and D -1.5 on the other.




The extended depth of focus of the **Fo-X**

Each zone of the ring structure covers the full focus range

The **Fo-X** combines the proven and successful design of **an-vision**'s IntraOcular Lenses with a innovative new optic design.

## Benefits of EDoF Technology for Canines

- Most myopic and hyperopic dogs can be fully corrected with the **Fo-X** intraocular lens.
- Now an additional 44% of your patients have a chance of full correction.
- Emmetropic patients benefit with improved nearsight.
- The lens design compensates for possible displacement in cases of incomplete viscoelastic aspiration.
- 360° posterior barrier to delay onset of PCO.

JAVMA AVMA

### Refractive error of canine cataract patients following implantation with three types of intraocular lenses

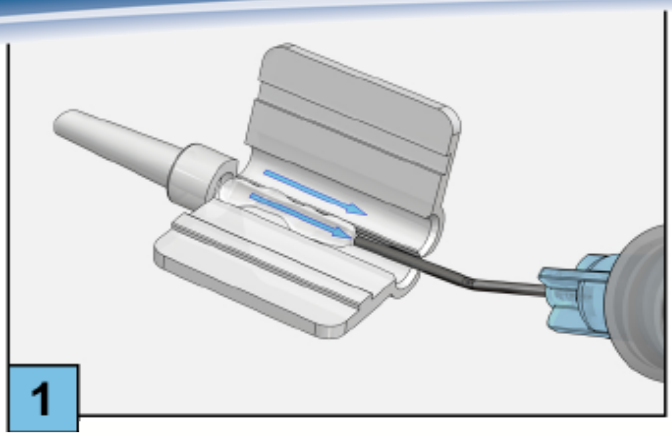
Mihal Kaminsky, DVM, DACVO[1]*; Allison Hoffman, DVM, DACVO[1]; Ron Ofri, DVM, PhD, DECVO[2]; Kricket Konrade, DVM, MS, DACVO[1]; Liat Gantz, BOptom, PhD, FAAO[3]

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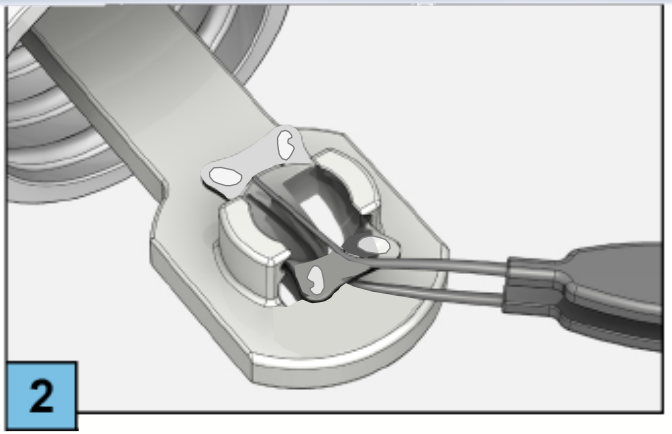
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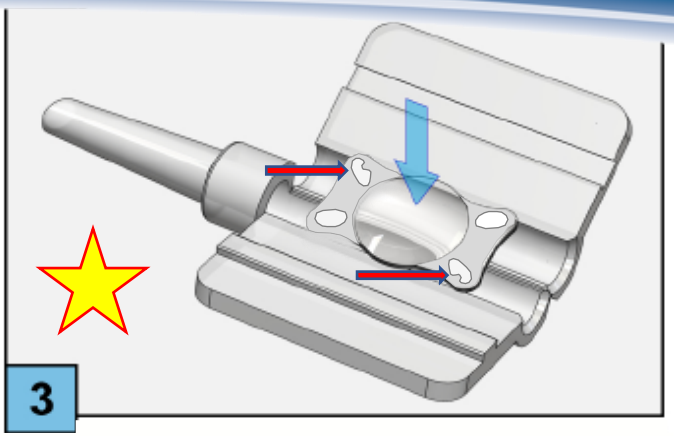
Scan to View Publication



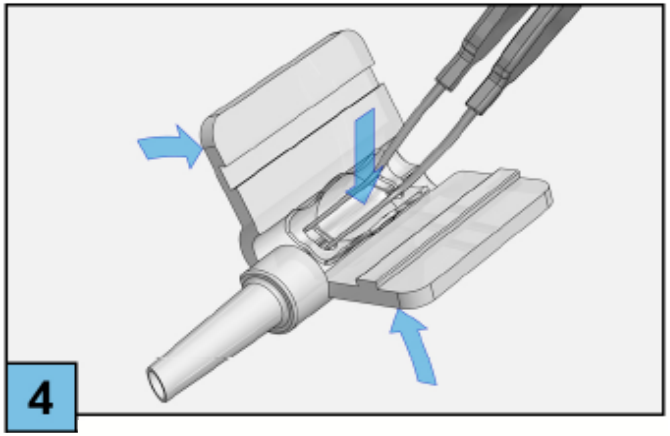

Apply two lines of viscoelastic, preferably an-bfh 1.8% or 2.2% along the channel of the cartridge. Do not touch the tip of the cartridge.



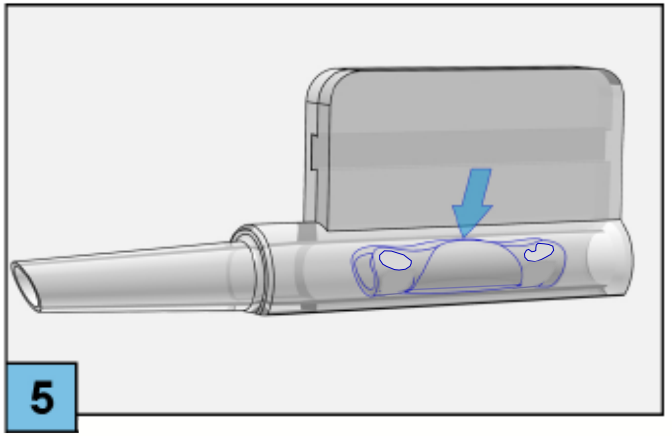

Gently remove the lens from the lens holder using forceps with fine rounded tips. Do not let the lens dry up. Do not use the fluid from the bottle for ocular irrigation.




Place the lens in the center of the open cartridge. Note the alignment of the marked haptics as shown in the image above.




Hold optic down and center the IOL on the loading deck of the cartridge. Close the cartridge, ensuring not to clamp the lens within the wings.




Check the position of the lens within the channel of the closed cartridge. Haptic must not reach up into the closed wings. Inject additional viscoelastic into the rear of the cartridge as well as into the tip.




Injector with loaded cartridge ready for implantation.