

Customer account number:

Patient name:

RIGHT EYE

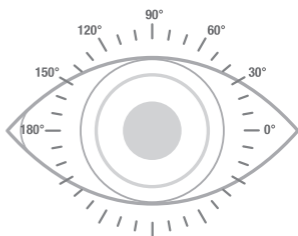
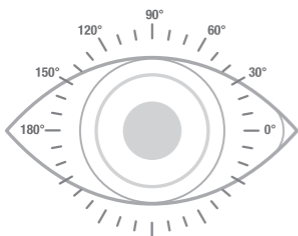
LEFT EYE

SERIAL NUMBER OR TRIAL LENS PARAMETERS

STABILIZATION AXIS

CLEARANCE EVALUATION WITHIN 10 MINUTES AFTER INSERTION

WRITE DOWN YOUR OBSERVATIONS



OVER REFRACTION

Please send your request to:
orders@laboratoire-lcs.com



AKS™

AirKone Scleral

Scleral Lens

EXAMPLE SENT BY EMAIL TO LCS LABORATORY

AKS™ AirKone Scleral Scleral Lens	
Customer account number: <u>DR MARIE - LYON</u>	
Patient name: <u>DUPONT Jean</u>	
RIGHT EYE	LEFT EYE
SERIAL NUMBER OR WEARED LENS PARAMETER	
AKS TORIC 16,50 3900 / +1,00	AKS TORIC 16,50 4700 / -7,00
STABILIZATION AXIS	
20°	150°
CLEARANCE EVALUATION	
100 µm	400 µm
WRITE DOWN YOUR OBSERVATIONS	
<ul style="list-style-type: none"> • Contact au Limbe • Pinguecula Nasal +++ • Temporal + 	<ul style="list-style-type: none"> • Fuite en Supérieur • Contact au bord du greffon • Ring Nasal +
OVER REFRACTION	
+1,50 8/10	-2,50 (-1,50) ₅ 7/10
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WWW.LABORATOIRE-LCS.COM	

CALCULATED PARAMETERS OF THE PRESCRIBED LENS

RIGHT EYE : AKS TORIC 16.50 / 4000 / L+4 / +2.50

PG3 at 350° / PG1 at 180° / Stab Axis 20°

LEFT EYE : AKS ATD 16.50 / 4400 / C+6 / L0 at 150° / ATD 0/0/+5 /

-9.50(-1.50)₅ PG1 at 170°

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