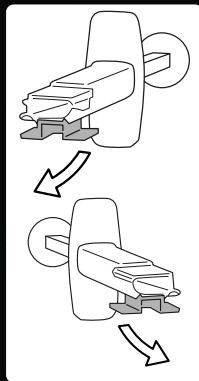
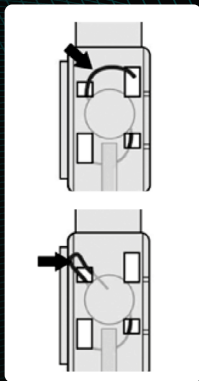


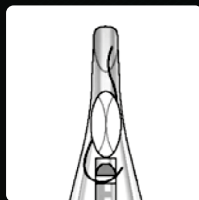
✗ DO NOT



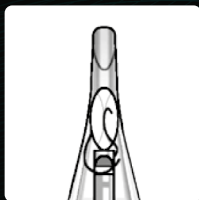
✗
Do not twist laterally when removing the lens stage



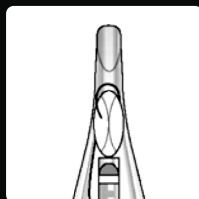
✗
Do not use if a haptic becomes deformed or protrudes



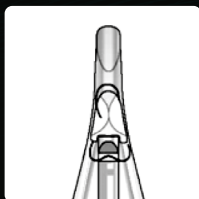
✗
Do not use if the leading haptic becomes twisted or extends forward



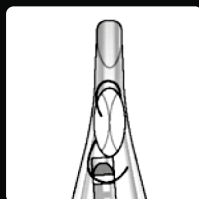
✗
Do not use if the leading haptic becomes bent or stretched out



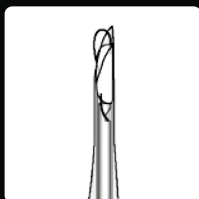
✗
Do not use if the trailing haptic extends out



✗
Do not use if the plunger passes above or under the lens optic or bends the optic irregularly



✗
Do not use if the plunger has moved too far towards the left or right side



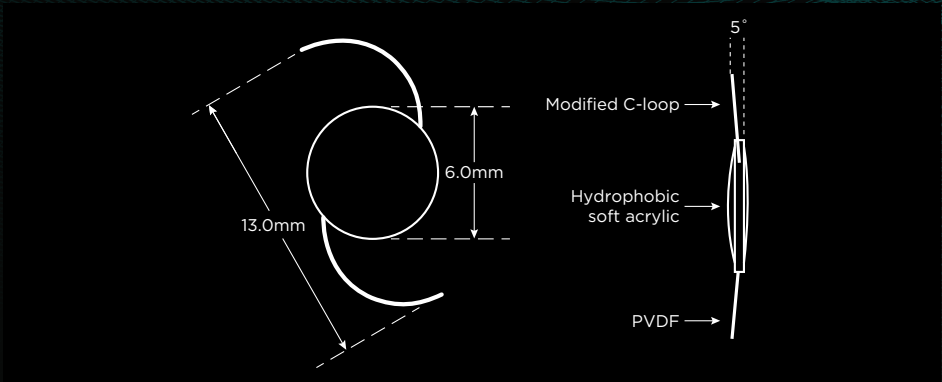
✗
Do not use if the lens becomes exposed at the nozzle tip before insertion

TECHNICAL SPECIFICATION

www.avansee.eu

Model		PN6A	PU6A	PN6AS	PU6AS
Colour		Yellow	Clear	Yellow	Clear
Material	Optic	Hydrophobic soft acrylic			
	Haptic	PVDF			
UV filter		✓	✓	✓	✓
Blue light filter		✓		✓	
Overall / Optic length		13mm / 6mm			
Spherical Aberration (SA)		-0.04µm			
Configuration of lens / haptic		Biconvex / Modified C-loop			
Recommended incision size	+6.0 to +26.0D	2.8mm sclera cornea 3.0mm cornea		2.4mm sclera cornea 2.6mm cornea	
	+26.5 to +30.0D	3.0mm sclera cornea 3.2mm cornea			
Power range		+ 6.0 to +30.0 dioptre: +6.0 to +10.0 dioptre (1.0D increments) +10.0 to +30.0 dioptre (0.5D increments)		+ 6.0 to +26.0 dioptre: +6.0 to +10.0 dioptre (1.0D increments) +10.0 to +26.0 dioptre (0.5D increments)	
A-Constant (Ultrasound)*		118.7			
Optimised IOL Constants (Optical)*	Haigis	a0 = 1.57 a1 = 0.40 a2 = 0.10			
	HofferQ	pACD = 5.64			
	Holladay	Sf = 1.85			
	SRK/T	119.0			
	SRK II	119.3			
	Barrett	LF = 1.88 DF = 5			

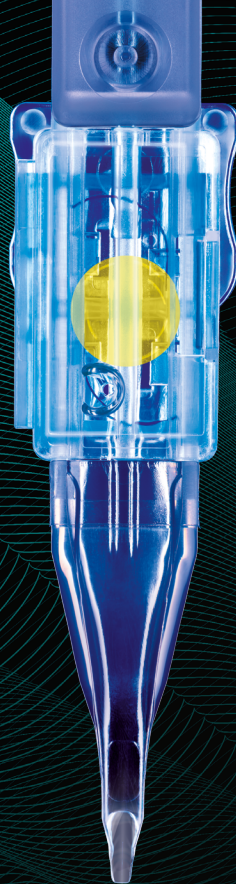
*A-constants are presented as a starting point (reference value) for the lens power calculation. When calculating the exact lens power it is recommended that calculations should be performed individually based on equipment used and operating surgeon's own experience.



IOL, intraocular lens; OVD, ophthalmic viscosurgical device; UV, ultraviolet.
Reference: 1. AvanseePreset Package Insert.
Date of preparation: June 2025 | IOL25 00004a



avanseeTM preset



A GUIDE TO
USING AVANSEE
PRESET

The AvanseePreset intraocular lens (IOL) is placed in the capsular bag and is designed for implantation after extracapsular cataract extraction or phacoemulsification of cataracts.¹



INSTRUCTIONS FOR USE

In a sterile environment, the circulating nurse opens the blister packaging, and either the scrub nurse or surgeon removes the Avanse™Preset.

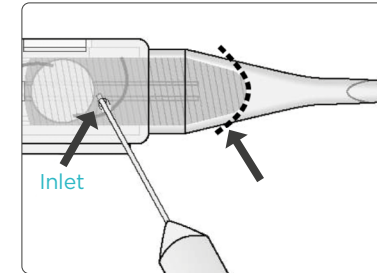


PREPARATION

Avanse™Preset is prepared for insertion in 3 simple steps:

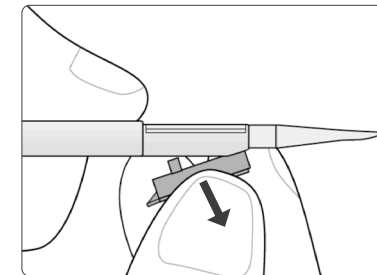
1 Injecting the ophthalmic viscosurgical device (OVD)

Insert the OVD needle deeply, **only into the inlet** and inject the OVD up to the dashed line as shown, filling the nozzle and covering the entire lens optic. Inject at least **0.15ml** of OVD, using an OVD needle with a 25 gauge or greater. **The OVD must be injected before removing the lens stage.**



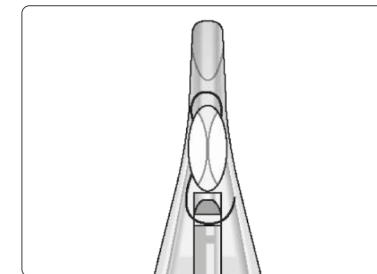
2 Removing the lens stage

Supporting the main injector body, remove the lens stage slowly away from the main body towards the nozzle tip.



3 Positioning the lens for insertion

Push the plunger at a slow constant rate to move the IOL forward, stopping at the point when the IOL optic is rolled and its edges make secure contact. **Once the plunger is advanced, the IOL must be inserted into the eye within 20 seconds.**



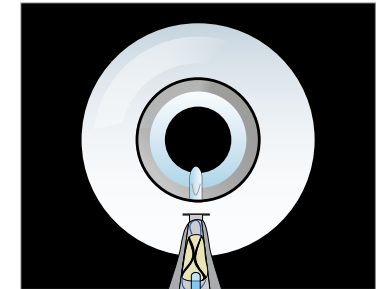
Failure to push the plunger until the edges of the lens make secure contact will increase the likelihood of unsuccessful lens injection.

For best results, all 3 preparation steps should flow continuously, without interruption.

IMPLANTATION

1 Insertion

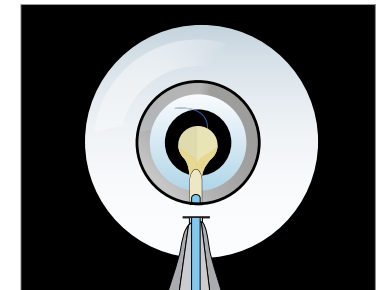
Insert the nozzle tip until the bevel (open part of the nozzle) completely penetrates the anterior chamber.



2 Release

Push the plunger ahead at a constant rate and release the IOL inside the capsular bag.

Continue to push the plunger until the trailing haptic is completely released.



3 Completion

Check the lens positioning and remove the nozzle from the eye.

The trailing haptic MUST be released into the eye before the removal of the injector from the eye.

