

Customer account number:

Patient name:

OBSERVATIONS ☐ **AT INSERTION** ☐ **AFTER 1HR OR MORE**

RIGHT EYE

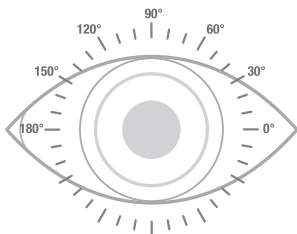
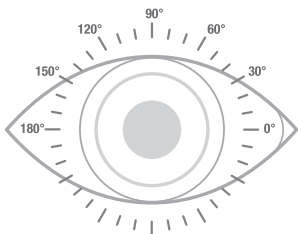
LEFT EYE

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

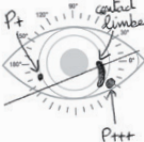
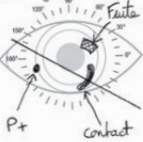


AKS™


AirKone Scleral

Scleral Lens

Customer account number: DR MARIE - LYON
 Patient name: DUPONT Jean

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 • Pinguicula Nasal +++ • Temporal + 	<ul style="list-style-type: none"> • Fuite en Supérieur • Contact au bord du greffon • Ping Nasal + 
OVER REFRACTION	
+1,50 8/10	-2,50 (-1,50) _s 7/10

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 **LCS**

WWW.LABORATOIRE-LCS.COM



You can use our fitting software iAdapt

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)_s PG1 at 170°

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