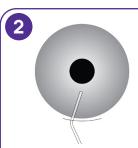
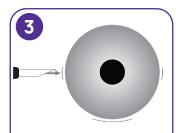


Perform a main incision 0.1 mm larger than the optic diameter of the lens at 90° of the enclavation axis



Constrict the pupil; then introduce viscoelastic material, sodium hyaluronate (e.g. ArtiVisc or ArtiViscPlus)



Make a side port of 1.2 mm on either side of the main incision. The side ports must be in line with the haptics



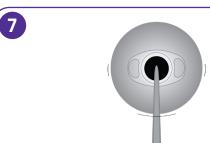
Turn the IOL upside down and coat it with viscoelastic prior to implantation to facilitate easy insertion



Introduce the lens into the anterior chamber through the main incision



Rotate the lens 90 degrees and align with the enclavation axis using the ARTISAN® Lens Manipulator

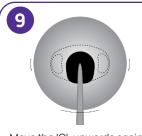


Insert the Artisan implantation forceps through the main incision, firmly grasp the IOL at the center of the optic

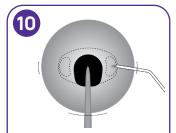




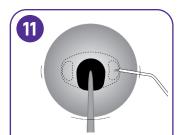
Carefully move the IOL through the non-constricted pupil



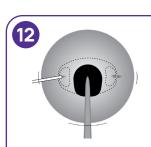
Move the IOL upwards against the iris to facilitate enclavation and choose a side of the lens to enclavate



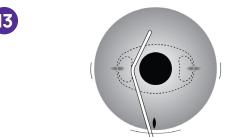
Insert a cannula (for example 25 G) through one of the paracenteses, while securely holding the optic with the implantation forceps



Sufficient iris tissue must be placed through the haptic slot to ensure adequate lens stability



Repeat the previous steps at the other side of the lens. Make sure the lens is well centered and verify the amount of iris tissue which is enclavated



Perform an iridotomy or iridectomy outside the periphery of the IOL. Remove all viscoelastic from the eye. Also flush out viscoelastic from underneath the IOL and close the main incision

