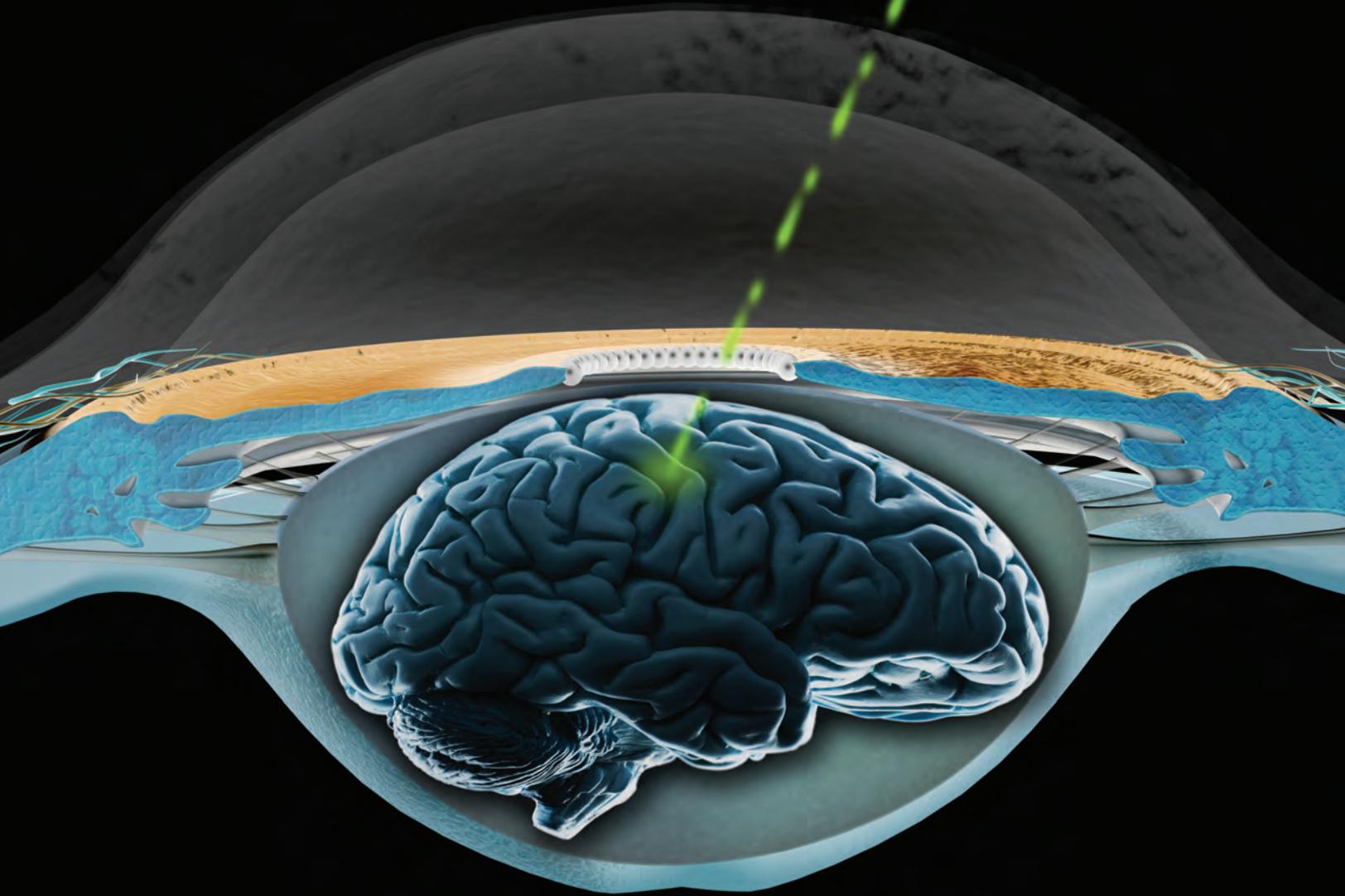


FEMTOSECOND LASER CATARACT TECHNOLOGY

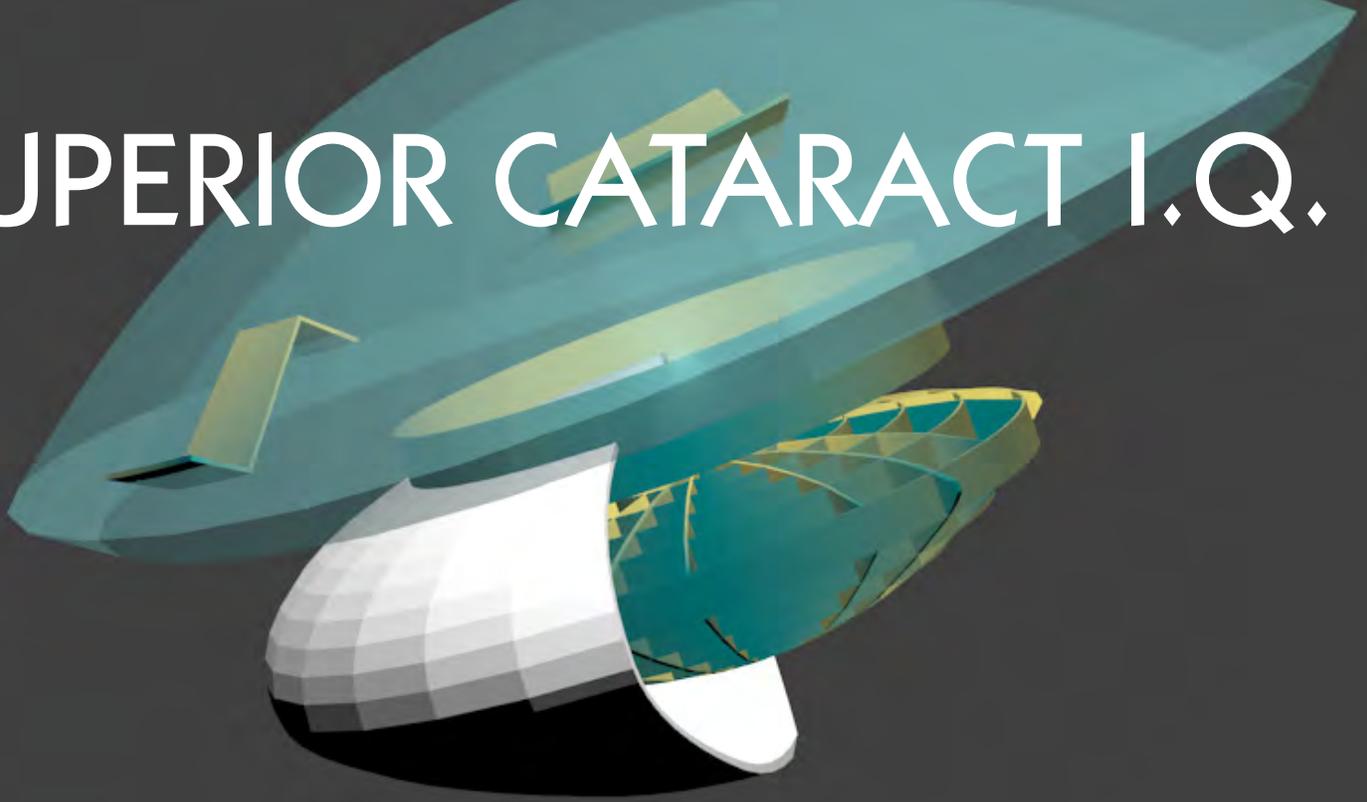
JUST GOT SMARTER.



LENSAR™

CATARACT LASER WITH AUGMENTED REALITY

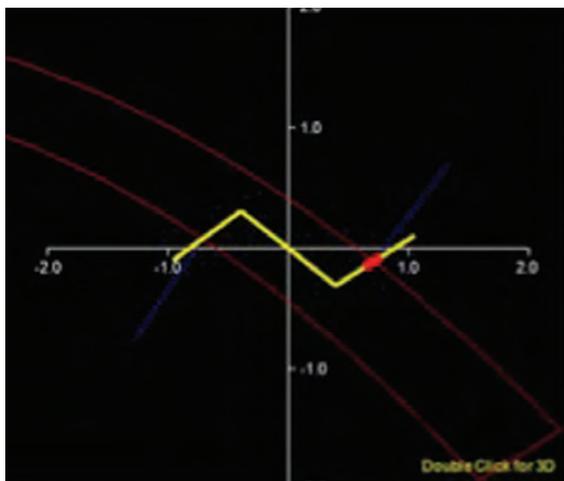
# SUPERIOR CATARACT I.Q.



The most exciting development in cataract surgery in decades is now available for your practice. Only LENSAR's Augmented Reality™ technology provides you with a reconstructed 3-D view of the relevant anterior segment. This ensures that every laser pulse is precisely placed, giving you confidence and peace-of-mind.

The revolutionary LENSAR™ Laser System offers a more intelligent approach to cataract surgery, featuring:

- **Precise Incisions:** Now with a full range of corneal and lenticular incisions
- **Efficient Cataract Removal:** Through accurate imaging and precise laser delivery
- **Easy Integration:** Ergonomically designed for procedural efficiency
- **Surgeon Control:** Intuitive user interface facilitates confident automated treatment planning



## Smart Corneal Incisions

The LENSAR Laser System is now approved for a full range of corneal incisions. And with the proprietary real-time imaging from Intelligent Incisions™, you can expect a new level of laser accuracy in your corneal incisions. Surgeon-controlled parameters allow you to create full and partial thickness, single-plane and multi-plane cuts in the cornea for:

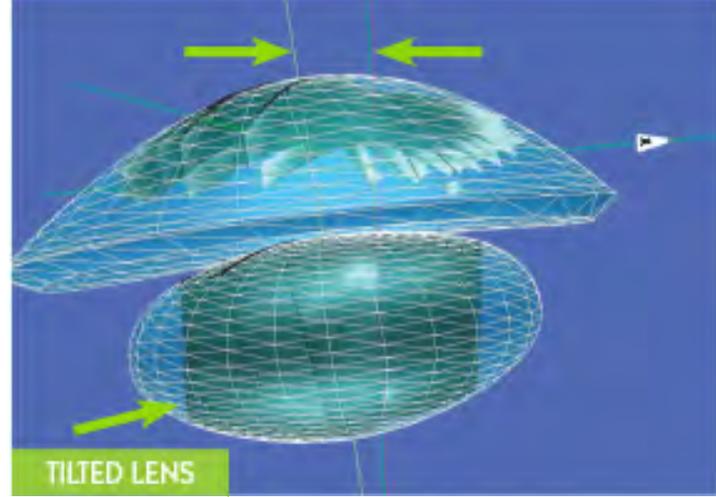
- Accurate paracentesis and entrance incisions
- Precise arcuate incisions

*Surgeon-controlled parameters and Intelligent Incisions ensure precise corneal incisions.*

## Intelligent Imaging

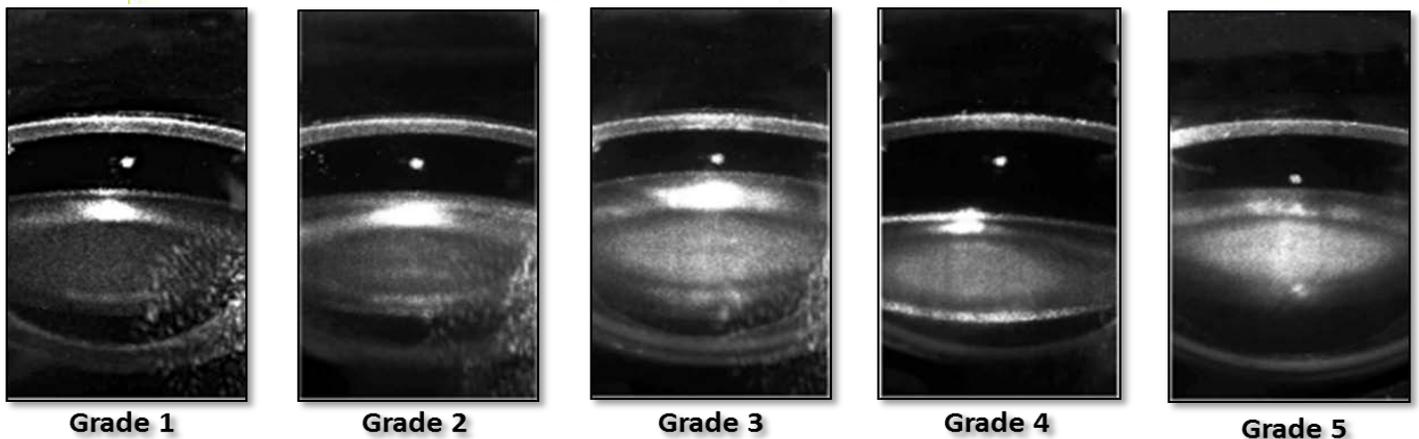
Finally, a femtosecond laser based in reality. LENSAR's proprietary Augmented Reality system collects an unprecedented spectrum of biometric data. Then, using optical ray-tracing, a process by which light waves propagate through a sequence of refractive surfaces, Augmented Reality reconstructs an accurate 3-D model of the eye. It also:

- Scans at varying rates, ensuring optimal contrast to capture all relevant ocular structures within the anterior segment
- Accurately measures through all densities of the nuclei
- Provides an enhanced depth of field of ocular structures and, thanks to superluminescent diode (SLD) imaging, generates an in-focus image from the anterior cornea to the posterior lens capsule



*LENSAR's proprietary imaging technology allows the LENSAR Laser System to intelligently detect even the smallest amount of tilt from the optical axis of the lens, which can affect capsulotomies and laser placement.*

Images of all densities of nuclei

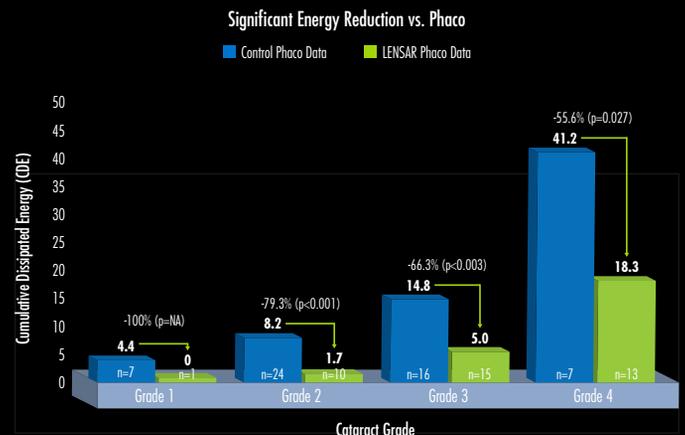


## Brilliant Femtosecond Laser Technology

LENSAR Laser System's precise imaging and laser placement ensures accurate incisions and effective cataract fragmentation, making cataract surgery more efficient for you.

- Precise laser placement and lens tilt detection results in perfect capsulotomies nearly all of the time<sup>1</sup>
- Surgeon-selectable treatment patterns and efficient nuclear disassembly allow for:
  - Easier lens removal of even the densest nuclei
  - Up to a 100% reduction in ultrasonic energy<sup>1</sup> compared to conventional phacoemulsification

*Results from the assessment of different patterns and algorithms show the reduction in CDE as compared to conventional phacoemulsification*



# SUPERIOR CHOICE

The intelligent design of the LENSAR Laser System marries an intuitive user interface with a powerful, precision femtosecond laser technology to provide the ultimate in patient outcomes and experience.

Deployable laser head can be moved into operative docking area for treatment, and retracted post-treatment to maximize space

Automatic procedure planning, using patient-specific and surgeon-preferred parameters, reduces overall OR time

User-friendly and customizable graphic interface for easy staff integration and reduced suction times

Low-pressure suction ring immobilizes the eye with a small increase in IOP and an immediate return to baseline

Fluid-filled interface maintains the integrity of the cornea and ensures patient comfort

Joystick control for easy patient-to-laser docking

Small laser footprint, designed to fit in a standard operating room



Visit [www.LENSAR.com](http://www.LENSAR.com) for the latest insights and information.

1. Data on file. LENSAR, Inc.

The LENSAR Laser System — fs 3D (LLS-fs 3D) is intended for use in patients undergoing cataract surgery for removal of the crystalline lens. Intended uses in cataract surgery include anterior capsulotomy, laser phacofragmentation, and the creation of full and partial thickness single-plane and multi-plane arc cuts/incisions in the cornea, each of which may be performed either individually or consecutively during the same procedure.

Laser Capsulotomy, laser phacofragmentation and/or corneal incisions surgery is contraindicated in patients: who are of pediatric age, whose pupils will not dilate or remain dilated to a diameter greater than that of the intended treatment and for capsulotomies and/or laser phacofragmentation with intended diameters of less than 4 mm or greater than 7 mm, who have existing corneal implants, who have previous corneal incisions that might provide a potential space into which the gas produced by the procedure can escape, who have conditions that would cause inadequate clearance between the intended capsulotomy cut and the corneal endothelium, such as: hypotony, uncontrolled glaucoma, who have corneal disease or pathology that precludes transmission of light at the laser wavelength or causes distortion of laser light, such as: corneal opacities, residual, recurrent, active ocular or uncontrolled eyelid disease or any corneal abnormalities (including endothelial dystrophy, guttata, recurrent corneal erosion, etc.) in the eye to be treated, ophthalmoscopic signs of keratoconus (or keratoconus suspect) in the eye to be treated, a history of severe dry eye that has not responded to therapy, a history of herpes zoster or herpes simplex keratitis.

Potential contraindications are not limited to those included in the list.

WARNING: The safety and effectiveness of this laser have NOT been established in patients with diabetic retinopathy, a history of treated glaucoma, or prior intraocular surgery.

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