

THE FINEST OPHTHALMIC IMAGING

2022 Catalog



TABLE OF CONTENTS

CLASSIC BIO LENSES	8-10
DIGITAL SERIES BIO LENSES	11
CLASSIC SLIT LAMP LENSES	14-15
SUPER SERIES SLIT LAMP LENSES	16-17
DIGITAL SERIES SLIT LAMP LENSES	18-19
GONIO LENSES	26-29
SURGICAL GONIO & MIGS LENSES	30
RETINA LASER LENSES	34-37
ANTERIOR & MID-VITREOUS LENSES	38-41
DIRECT CONTACT LASER LENSES	42
VOLK®1 SINGLE-USE LASER & GONIO LENSES	46-47
INDIRECT VITRECTOMY LENSES	50-51
AUTOCLAVABLE INDIRECT VITRECTOMY LENSES	52
AUTOCLAVABLE SURGICAL BIO LENSES	53
HIGH RESOLUTION (HR) DIRECT VITRECTOMY LENSES	54-55

DIRECT VITRECTOMY LENSES (SELF STABILIZING)	56-57
VOLK®1 SINGLE-USE SURGICAL BIO & DIRECT VITRECTOMY LENSES	58-60
SURGICAL ACCESSORIES	61
MERLIN® SURGICAL SYSTEM	62-63
ROLS® & ROLS® INFINITY REINVERTER	64
VISTAVIEW®	68-71
PICTOR PRESTIGE™	72
PICTOR PLUS®	73
STANDARD VOLK ACCESSORIES	74
RESEARCH LENSES	75
CASES AND PERSONALIZATION	76-77
FAQS	78-81
CLEANING GUIDE	82
WARRANTY INFORMATION	83
ORDERING INFORMATION	84



CLASSIC BIO LENSES

Volk Optical pioneered the double-aspheric lens design, a breakthrough innovation where both surfaces of the lens are aspheric, resulting in exceptional image quality, clarity, and stereopsis to provide clear views across the entire lens, all the way to the periphery. The combination of Volk's patented double-aspheric optical design in conjunction with the highest quality glass materials, proprietary anti-reflective (A/R) coating, and timeless manufacturing and inspection processes developed by Dr. David Volk and perfected over time, make Volk's Classic Series lenses the leading standard in the ophthalmic industry.

CLASSIC SERIES	FIELD OF VIEW	IMAGE MAG	LASER SPOT MAG	WORKING DISTANCE	RING DIAMETER	PRIMARY APPLICATION
Macula Plus® 5.5	36° / 43°	5.50x	0.18x	80 mm	63.2 mm	Ultra-high resolution viewing of posterior pole
14D	36° / 47°	4.30x	0.23x	75 mm	57.4 mm	High magnification viewing of posterior pole
15D	36° / 47°	4.11x	0.24x	72 mm	57.4 mm	High magnification viewing of posterior pole
20D	46° / 60°	3.13x	0.32x	50 mm	55.4 mm	General diagnosis and treatment
Pan Retinal® 2.2	56° / 73°	2.68x	0.37x	40 mm	57.4 mm	General diagnosis and treatment
25D	52° / 68°	2.54x	0.39x	38 mm	50.1 mm	Mid-peripheral diagnosis and treatment
28D	53° / 69°	2.27x	0.44x	33 mm	45.9 mm	Small pupil diagnosis and treatment
30D Small	44° / 57°	2.09x	0.48x	31 mm	34.9 mm	Small profile lens for ease of use within the orbit
30D	58° / 75°	2.15x	0.47x	30 mm	48.3 mm	Small pupil diagnosis and treatment
40D	69° / 90°	1.67x	0.60x	20 mm	45.3 mm	Retinal examination and diagnosis at the far periphery
DIGITAL SERIES	FIELD OF VIEW	IMAGE MAG	LASER SPOT MAG	WORKING DISTANCE	RING DIAMETER	PRIMARY APPLICATION
Digital ClearMag	38° / 49°	3.89x	0.26x	60 mm	51.9 mm	Detailed optic disc and posterior pole examination
Digital ClearField	55° / 72°	2.79x	0.36x	37 mm	51.9 mm	Mid and far-peripheral retinal examination

Macula Plus[®] 5.5



VMP5.5

PRIMARY APPLICATION

Ultra-High Magnification View of the Central Retina

- Excellent stereo imaging for diagnosis of macular abnormalities in diseases like agerelated macular degeneration
- Highest magnification BIO lens facilitates examination of geriatric patients
- Lens adapter provides stability for extended working distance

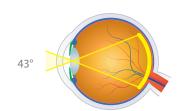


5.50x IMAGE MAG 0.18x

LASER SPOT MAG

0.23x

IMAGE SPOT MAG



14**D**



V14LC

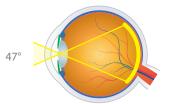
PRIMARY APPLICATION

High Magnification Viewing of the Posterior Pole

- High magnification provides excellent imaging of the macula and optic disc
- + Detailed view of the optic disc facilitates glaucoma screening examination
- + The only single-aspheric BIO lens design, it still remains in our portfolio for those users who are accustomed to this design

36°/47°

4.30x
IMAGE
MAG



15D



V15LC

PRIMARY APPLICATION

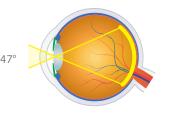
High Magnification Viewing of the Posterior Pole

- + High magnification allows thorough examination of the macula and optic disc
- + Double-aspheric design provides enhanced clarity, even at the periphery
- + Detailed view of the optic disc facilitates targeted central retinal examination such as glaucoma screening



4.11x





20D





V20LC

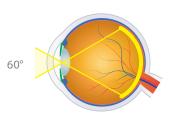
PRIMARY APPLICATION

Industry Standard General Diagnostic Lens

- + Perfect balance of magnification and field of view makes this lens the most popular choice for general diagnostic exams.
- Dynamic examination allows viewing of the peripheral retina while a primary position gaze enables a central retinal exam
- + Also available in autoclave sterilizable (ACS*) design (see page 53) or single-use design (see page 58)



3.13x IMAGE MAG O.32x
LASER
SPOT MAG



Pan Retinal® 2.2





VPRC

PRIMARY APPLICATION

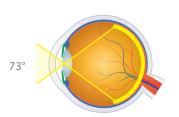
Excellent for General Diagnosis and Treatment

- + Balance of magnification and field of view for general diagnosis with 20% wider field than the 20D allowing for a quick general exam
- + Allows clear visualization up to the peripheral retina during dynamic examination to quickly examine and identify peripheral retinal tears, hemorrhages and other defects
- + Examine through small pupils

56°/73°

2.68x

O.37x
LASER



25D



V25LC

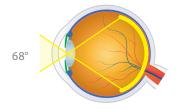
PRIMARY APPLICATION

Mid-Peripheral Diagnosis and Treatment

- Provides approximately 15% wider field of view than the 20D, which extends from the central to the mid-peripheral retina
- + Smaller diameter facilitates manipulation within the orbit and is perfect for those doctors with smaller hands

52°/68° FIELD OF VIEW

08° 2.54x OF IMAGE MAG O.39x LASER SPOT MAG





AVAILABLE IN 7 DIFFERENT COLORS (shades may vary)

28D





V28LC

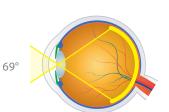
PRIMARY APPLICATION

Ideal for Fundus Scanning

- + Wide field capability enables visualization past the mid-periphery to equator and viewing to the far-periphery during a dynamic exam
- + Optical design and lens power make it ideal for small pupils
- + Small profile and short working distance enable easy lens manipulation for fast examination/
- + Most widely used for ROP and peripheral retinal defects
- + Available in autoclave sterilizable (ACS^{*}) design (see page 53) or single-use design (see page 58)

53°/69° FIELD OF

2.27x IMAGE MAG



30D Small

V30SC

PRIMARY APPLICATION

Small Pupil and Pediatric Examination

- + Optical design delivers high resolution views through a small pupil
- + Small profile lens for ease of use within the orbit during examination making it ideal for babies and children
- + Provides similar field of view as the 20D
- + Commonly used in ROP screening

44°/57° FIELD OF

2.09x IMAGE

0.48xLASER

0.47x

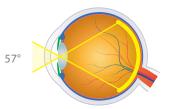
LASER

SPOT MAG

0.44x

LASER

SPOT MAG



30D



V30LC

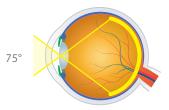
PRIMARY APPLICATION

Small Pupil and **Pediatric Examination**

- + Optical design delivers high resolution views through a small pupil
- + Dynamic BIO exam yields a field of view of the peripheral retina
- + Small profile enables quick and easy examination, enhancing patient comfort and cooperation

58°/75° FIELD OF

2.15x IMAGE



40D



V40LC

10

PRIMARY APPLICATION

Low Mag Scanning out to the Far-Peripheral Retina

- + Widest field of view available in a BIO lens allowing views to the far peripheral retina
- + Great for small pupil and pediatric exam
- + Wide field of lens allows for a rapid exam perfect for patients who have trouble sitting still

69°/90° FIELD OF

1.67x IMAGE MAG

0.60xLASER SPOT MAG



DIGITAL SERIES BIO LENSES

The Digital Series BIO lenses are a result of Volk's spirit of innovation and undying commitment to optical excellence. The Digital Series incorporates advanced optical lens design to minimize distortion and enhance stereopsis coupled with low dispersion glass to reduce chromatic aberrations. The Digital Series lenses have advanced A/R coatings to reduce reflections and glare up to 50% more than traditional coatings. These collective advancements result in high resolution imaging & superior optical clarity.

CLASSIC SERIES	FIELD OF VIEW	IMAGE MAG	LASER SPOT MAG	WORKING DISTANCE	RING DIAMETER	PRIMARY APPLICATION
Macula Plus® 5.5	36° / 43°	5.50x	0.18x	80 mm	63.2 mm	Ultra-high resolution viewing of posterior pole
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DIGITAL SERIES	FIELD OF VIEW	IMAGE MAG	LASER SPOT MAG	WORKING DISTANCE	RING DIAMETER	PRIMARY APPLICATION
Digital ClearMag	38° / 49°	3.89x	0.26x	60 mm	51.9 mm	Detailed optic disc and posterior pole examination
Digital ClearField	55° / 72°	2.79x	0.36x	37 mm	51.9 mm	Mid and far-peripheral retinal examination

Digital ClearMag Next Gen 14D/15D



VDGTLCM

PRIMARY APPLICATION

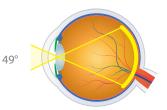
High Resolution Exam of the Posterior Pole

- + Designed specifically for high magnification and detailed examination of the macula and optic disc, this lens is perfect for detecting and monitoring subtle changes in disc morphology
- + High resolution view of the central retina



3.89x IMAGE

0.26xLASER SPOT MAG



Digital ClearField Next Gen 20D





VDGTLCF

PRIMARY APPLICATION

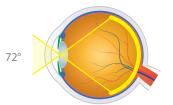
High Resolution Retinal Exam

- + 20% wider field of view than the Classic 20D lens, this lens is the perfect choice for peripheral retinal examinations to diagnose retinal detachments
- + High resolution view from the central to the mid and far-peripheral retina, even through small pupils



2.79x IMAGE

0.36xLASER





AVAILABLE IN 7 DIFFERENT COLORS (shades may vary)



CLASSIC SERIES SLIT LAMP LENSES

The Volk Classic Series started the revolution of slit lamp fundus examination with lenses from this series considered the industry gold standard. The double-aspheric lens design combined with proprietary A/R coating and timeless manufacturing & inspection processes developed by Dr. David Volk and perfected over time result in exceptional image quality, clarity, and stereopsis to provide clear views across the entire lens, all the way to the periphery.

The Classic trinity of the 60D, 78D, and 90D double-aspheric lenses are designed to enable various levels of retinal examination ranging from detailed high-magnification macular visualization to far-peripheral and small pupil exams.

CLASSIC SERIES	FIELD OF VIEW	IMAGE MAG	LASER SPOT MAG	WORKING DISTANCE	RING DIAMETER	PRIMARY APPLICATION
60D	68° / 81°	1.15x	0.87x	13 mm	34.9 mm	High Magnification View of the Posterior Pole
78D	81° / 97°	0.93x	1.08x	8 mm	34.9 mm	General Diagnosis and Laser Treatment
90D	74° / 89°	0.76x	1.32x	7 mm	25.8 mm	Pan Retinal Exam and Small Pupil Examination
SUPER SERIES	FIELD OF VIEW	IMAGE MAG	LASER SPOT MAG	WORKING DISTANCE	RING DIAMETER	PRIMARY APPLICATION
Super 66®	80° / 96°	1.0x	1.0x	11 mm	34.5 mm	High Magnification View of the Central Retina
SuperField®	95° / 116°	0.76x	1.32x	7 mm	30.0 mm	Wide Field Small Pupil Pan Retinal Examination
Super VitreoFundus®	103° / 124°	0.57x	1.75x	4-5 mm	26.7 mm	Ultra Wide Field Small Pupil Pan Retinal Scanning
SuperPupil® XL	103° / 124°	0.45x	2.20x	4 mm	23.6 mm	Ultra Wide Field Small Pupil Pan Retinal Scanning
DIGITAL SERIES	FIELD OF VIEW	IMAGE MAG	LASER SPOT MAG	WORKING DISTANCE	RING DIAMETER	PRIMARY APPLICATION
Digital High Mag®	57° / 70°	1.30x	0.77x	13 mm	33.0 mm	High Resolution, High Magnification Retinal Examination
Digital 1.0x Imaging Lens	60° / 72°	1.0x	1.0x	12 mm	31.1 mm	Digital Slit Lamp Photography
Digital Wide Field®	103° / 124°	0.72x	1.39x	4-5 mm	34.9 mm	High Resolution Small Pupil Retinal Examination

INSIGHT

Lens power is commonly measured in 'diopters' (eg. 90 diopters). Generally, an increase in diopter power results in a wider field of view and lower magnification. Conversely, the lower the diopter number, the lower the field of view and higher the magnification.

However, the size and design of the lens also play a role in performance. While the 90D theoretically should have a wider field of view, due to the 90D being smaller in size than the 78D, the field is essentially "cropped" in the 90D to allow for a small lens size. As a result, the 78D has both wider field and higher magnification than the 90D, despite its lower dioptric value.

When Dr. David Volk developed the first fundoscopy lenses, the smaller size of the 90D was found to be the most widely accepted by doctors since it allowed for easier manipulation within the orbit and provided undilated exam ability leading it to become the most popular lens choice and establishing its place as the industry gold standard for slit lamp exams.

60D



V60C

PRIMARY APPLICATION

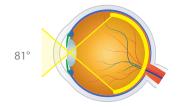
High Magnification View of the Posterior Pole

- High magnification lens for detailed optic disc and macula imaging
- High magnification enables detection of small defects and subtle changes in retinal abnormalities
- + Ideal diameter for use in the orbital area
- Dilation is required to obtain optimum retinal imaging

68°/81°

1.15x

O.87x
LASER
SPOT MAG



78D



PRIMARY APPLICATION General Diagnosis and Laser Treatment

Laser Treatment

 Optimally designed for use within range of motion of all slit lamps

+ Ideal balance of magnification and field of view

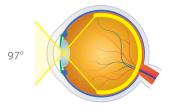
- Offers clear and large views of the central midretinal regions
- Dilation is required to obtain optimum retinal imaging
- + Ideal general lens for doctors who regularly cater to populations prone to glaucoma and other posterior pole abnormalities





3x 1.08x





90D

V90C

V78C



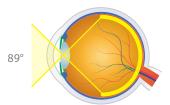
Pan Retinal Exam and Small Pupil Examination

PRIMARY APPLICATION

- Original 90D lens that started the slit lamp fundus examination revolution and the industry gold standard
- + Small diameter ring is ideal for dynamic fundoscopy and easy manipulation within the orbit
- Optical profile makes it easy to use an ideal training lens for new students and residents
- + Outstanding general diagnostic lens for pan retinal examination
- + Can be used on small pupils and patients who do not accommodate dilation







AVAILABLE IN 7 DIFFERENT COLORS (shades may vary)

SUPER SERIES SLIT LAMP LENSES

Volk's commitment to optical excellence resulted in development of the 2nd generation of slit lamp lenses - The Super Series. The Super Series lenses combine advanced double-aspheric lens designs with high-grade glass and improved proprietary manufacturing processes to further enhance optical clarity and augment stereopsis for 3D-like viewing. The Super Series lenses were introduced with functionality in mind and cater to the full diagnostic spectrum from high-magnification stereoscopic capabilities to wide field peripheral viewing as well as unsurpassed small pupil visualization to enable undilated, wide-field exams.

CLASSIC SERIES	FIELD OF VIEW	IMAGE MAG	LASER SPOT MAG	WORKING DISTANCE	RING DIAMETER	PRIMARY APPLICATION
60D	68° / 81°	1.15x	0.87x	13 mm	34.9 mm	High Magnification View of the Posterior Pole
78D	81° / 97°	0.93x	1.08x	8 mm	34.9 mm	General Diagnosis and Laser Treatment
90D	74° / 89°	0.76x	1.32x	7 mm	25.8 mm	Pan Retinal Exam and Small Pupil Examination
SUPER SERIES	FIELD OF VIEW	IMAGE MAG	LASER SPOT MAG	WORKING DISTANCE	RING DIAMETER	PRIMARY APPLICATION
Super 66®	80° / 96°	1.0x	1.0x	11 mm	34.5 mm	High Magnification View of the Central Retina
SuperField®	95° / 116°	0.76x	1.32x	7 mm	30.0 mm	Wide Field Small Pupil Pan Retinal Examination
Super VitreoFundus®	103° / 124°	0.57x	1.75x	4-5 mm	26.7 mm	Ultra Wide Field Small Pupil Pan Retinal Scanning
SuperPupil® XL	103° / 124°	0.45x	2.20x	4 mm	23.6 mm	Ultra Wide Field Small Pupil Pan Retinal Scanning
DIGITAL SERIES	FIELD OF VIEW	IMAGE MAG	LASER SPOT MAG	WORKING DISTANCE	RING DIAMETER	PRIMARY APPLICATION
Digital High Mag®	57° / 70°	1.30x	0.77x	13 mm	33.0 mm	High Resolution, High Magnification Retinal Examination
Digital 1.0x Imaging Lens	60° / 72°	1.0x	1.0x	12 mm	31.1 mm	Digital Slit Lamp Photography
Digital Wide Field®	103° / 124°	0.72x	1.39x	4-5 mm	34.9 mm	High Resolution Small Pupil Retinal Examination

"EXCELLENT FIELD OF VIEW & MAGNIFICATION

The Volk Super 66 and SuperField lenses are amongst my favorite lenses. The Super 66 provides excellent magnification and stereopsis for examining the subtle details of my patient's optic nerve head and macula. The SuperField is the perfect complement to my 90D lens as it provides a wider field view out towards the periphery with the same magnification. I recommend both lenses to my residents and fellows as the optical clarity and views are excellent. I also tend to use the Digital Wide Field when I need to go even further out to the periphery."

- Donny W. Suh, MD, FAAP, MBA, FACS

Pediatric Ophthalmology and Strabismus, Gavin Herbert Eye Institute (GHEI) & Children's Hospital of Orange County (CHOC), UC Irvine, Irvine, CA, USA

Super 66®





VSFNC

PRIMARY APPLICATION

PRIMARY APPLICATION

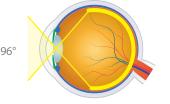
High Magnification Viewing of the Central Retina

- + Optical design enables 3D discernment of subtle macular and optic disc details with high magnification
- + 1.0x magnification simplifies optic disc ratio measurement
- + Seamless upgrade from the 78D

80°/96° FIELD OF

1.0x IMAGE

1.0x LASER



SuperField®



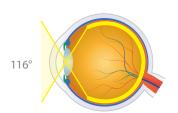
Wide Field Small Pupil Pan Retinal Examination

- + The 'Super 90D' same magnification as the 90D with a wider field of view enabling both posterior pole and pan retinal examinations
- + Provides dynamic, high resolution viewing to the periphery
- + Combines a wide field of view with a comfortable working distance and magnification
- + Can be used on small pupils and patients who do not accommodate dilation

95°/116° FIELD OF



1.32x LASER SPOT MAG



Super VitreoFundus®



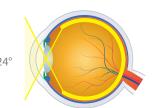
Ultra Wide Field Small Pupil Pan **Retinal Examination**

- + Wide field of view with views past the vortex
- + Excellent small pupil capability through a 3-4 mm pupil
- + Ideal for quick undilated screening exams
- + A shorter working distance will enable the full wide field of view capability of this lens

103°/124° FIELD OF

0.57xIMAGE MAG

1.75x LASER SPOT MAG



VSVF

SuperPupil® XL



VSPXL

PRIMARY APPLICATION

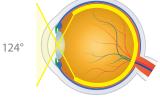
PRIMARY APPLICATION

Ultra Wide Field Small Pupil Pan **Retinal Examination**

- + Optimal small pupil capability through a pupil as small as 2-3 mm
- + Excellent for funduscopy through a miotic pupil
- + Wide field views past the vortex

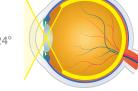
103°/124° FIELD OF VIEW

2.20x LASER SPOT MAG





+ Most popular choice for quick undilated screening exams



AVAILABLE IN 7 DIFFERENT COLORS (shades may vary)

DIGITAL SERIES SLIT LAMP LENSES

Volk has taken double-aspheric lenses to the next level with our 3rd Generation slit lamp lenses: The Digital Series. Similar to the Digital BIO lenses, the digital slit lamp series incorporates advanced optical lens design to minimize distortion and enhance stereopsis coupled with low-dispersion glass to reduce chromatic aberrations. The digital series lenses are equipped with advanced A/R coatings to reduce reflections and glare up to 50% more than traditional coatings. These collective advancements result in high resolution imaging & superior optical clarity to produce detailed views of the retina that were previously unattainable at the slit lamp.

Whether you're looking for a wider field of view or higher magnification, Volk's Digital Series slit lamp lenses have you covered. The Digital Wide Field*, Digital High Mag*, and Digital 1.0x Imaging Lens offer the highest image resolution available.

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Super VitreoFundus®	103° / 124°	0.57x	1.75x	4-5 mm	26.7 mm	Ultra Wide Field Small Pupil Pan Retinal Scanning
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Digital Wide Field®	103° / 124°	0.72x	1.39x	4-5 mm	34.9 mm	High Resolution Small Pupil Retinal Examination

18

"THE BEST OF TWO WORLDS!

The Volk Digital Wide Field lens is such an amazing all-rounder lens to use in my retinal practice. It presents me with the best of two worlds – not only does it provide an exceptional wide field view of the peripheral retinal pathology without peripheral aberrations allowing me to see a crystal clear and focused image throughout the entire examination, it also preserves the magnification needed to conduct a thorough exam. The superior optical quality and high resolution of the this lens make it very reliable in detecting pathology that I hardly need to use contact 3-mirror lenses in my busy vitreoretinal clinic as I have full confidence in

making an accurate diagnosis with the Volk Digital Wide Field lens. It is very easy to use on un-dilated pupils and patients with small pupils and my trainees find it very comfortable to hold and use while examining their patients as well.³³

- Maged Habib, MD Consultant Ophthalmologist & Vitreoretinal Surgeon, Sunderland Eye Infirmary, Honorary Clinical Senior Lecturer, Biosciences Institute, Newcastle University, United Kingdom

Digital High Mag® 3rd Generation 60D



VDGTLHM

PRIMARY APPLICATION

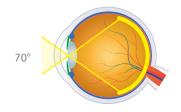
High Resolution, High Magnification Retinal Examination

- + High magnification, along with outstanding stereopsis, provide detailed stereo views of the optic disc, the optic nerve, and the retinal nerve fiber layer making this lens ideal for glaucoma screening
- + Image magnification of 1.30x is the highest magnification available in a non-contact slit lamp lens

57°/70° FIELD OF VIEW



O.77x
LASER
SPOT MAG



Digital 1.0x Imaging Lens



VDGTL1

PRIMARY APPLICATION

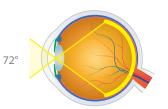
Digital Slit Lamp Photography

- Unique glass surface curvature and coating minimize photographic distortion and reflections
- + 1.0x magnification simplifies optic disc ratio measurements
- + High-index, high resolution glass provides improved stereopsis and image clarity
- + Perfect lens for photography at the slit lamp

60°/72°

1.0x IMAGE MAG

1.0x LASER SPOT MAG



Digital Wide Field®3rd Generation 90D



VDGTLWF

PRIMARY APPLICATION

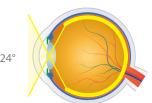
High Resolution Small Pupil Pan Retinal Examination

- 40% more field of view than the Classic 90D, the widest field of view available in a noncontact lens
- Allows crystal clear, distortion-free views spanning from central retina to the periphery, including ora serrata under dynamic viewing
- + Enhanced double-aspheric design paired with high-index glass ensures highest resolution stereo image, even through small pupils
- A shorter working distance will enable appreciation of the full wide field of view capability of this lens









"OUTSTANDING RESOLUTION



I keep a Volk Digital High Mag Lens in my coat pocket whenever I'm in clinic. I think of it as a 'poor man's OCT' because of the outstanding resolution and stereopsis it provides. Its image rivals that of many contact lenses, yet without the inconvenience and patient discomfort. More importantly, the non-contact design preserves the corneal surface for any diagnostic testing needed later that day.³³

- Carl C. Awh, MD FASRS

19

President, Tennessee Retina & Former President of ASRS, Nashville, TN, USA



AVAILABLE IN 7 DIFFERENT COLORS (shades may vary)



OUR GENERATIONS

From the Classic 20D, 78D and 90D lenses, Volk's lenses have evolved through the second generation (Super Series) to the current, third generation (Digital Series) for the highest quality retinal imaging available.

1ST

GENERATION



20D: Most popular lens for general BIO exams

90D: Most popular lens for examination at the slit lamp and great for small pupils

78D: Complements the 90D but with higher magnification for central retinal examination

2ND

GENERATION



Pan Retinal 2.2: 22% wider field of view than the 20D

SuperField®: 30% wider field of view than the 90D

Super 66®: Complements the 90D, but with a higher magnification to use for central retinal examination 3RD

GENERATION



Digital ClearField: Highest resolution diagnostic BIO lens

Digital Wide Field®: Ultimate 90D power lens with 40% wider field of view than the 90D

Digital High Mag®: The highest magnification and finest resolution lens for detailed central retinal views.

KEEP AN EYE OUT FOR OUR SEASONAL

LIMITED EDITION PINK LENSES

THINK PINK

ADD A POP OF COLOR TO YOUR COLLECTION



AVAILABLE IN 20D, 78D, 90D, SUPERFIELD & DIGITAL WIDE FIELD

21

Follow us on Instagram 🧿 @volkoptical to hear about seasonal launches



A Clear Solution

Even in the new normal

Choose your ClearPod™

Choose the right ClearPod for your lens to ensure the best fit and working distance to enjoy the enhanced visualization of your Volk lens, just the way you remember!







Digital Wide Field®



SuperField[®]

LIFT THE FOG -

The unique shield has carefully designed wing and flange features to efficiently direct warm currents of air away from your optical path.

THE PERFECT FIT, -**EVERYTIME**

The ledge on the inside of your ClearPod is designed to act as a back-stop to guide your lens into the right position.

JUST CLIP AND GO

Optimized shape and fit allows you to securely clip your lens while enabling you to maintain your natural grip.

ELEGANT AND ERGONOMIC

The flange is designed to balance optimal fog diversion while accommodating the right working distance.



"PREVENTS FOGGING AND A GREAT TEACHING AID

The ClearPod is a perfect solution to prevent non-contact lenses from fogging up. I strongly recommend this device to every ophthalmologist examining a mask-wearing patient, allowing a normal examination of the retina. Even without COVID, I think this is a great tool for teaching medical students and residents ophthalmoscopy techniques, as the flange guides and supports to better accommodate the proper working distance."

- Francesco Comacchio. MD

Ophthalmologist, Hospital of Merano-Südtirol, Italy



Designed with Doctors FOR DOCTORS

We realize the importance of clear visualization to provide a confident and accurate diagnosis. We also recognize that no one understands this problem better than you.

Therefore, to combat this new problem, we worked with experts like you to design and develop the ClearPod. Developed in collaboration with Dr. Jeremy Wingard and Dr. Bradley **Sacher**, the patent-pending ClearPod results in a fog-minimizing solution that is practical, simple and effective.





Freedom from Fogging FOR EFFICIENT EXAMS

As facemasks became commonplace with COVID-19, the inconvenience of fogging lenses came with it, compromising your view and slowing down your

fundus exams.

The ClearPod diverts fog away from your lens surface, giving you ample time to conduct detailed exams without having to interrupt care.



Crystal Clear Views UNINTERRUPTED!

Experience uninterrupted visualization during your retina examination with the Volk ClearPod and reclaim the Volk clarity you remember and trust.

No more asking patients to remove their masks, dealing with messy tape, or using solutions that erode your lens coatings!



GONIO LENSES

Volk's Gonio Lenses are the industry standard for performing static, dynamic, and indentation gonioscopy. Our G-Series lenses (G-1, G-2, G-3, G-4, and G-6) are made entirely of glass optics and each lens is hand-made and 100% inspected using timeless and perfected craftsmanship techniques, resulting in the unmatched optical clarity.

The No-Flange Gonio lenses are designed for maximum patient comfort and minimized corneal wrinkling during dynamic exams and the Flanged Gonio lenses provide optimal stability and control during laser procedures.

The G-3 is a versatile all-purpose lens for central, equatorial and peripheral views out to the ora seratta in addition to anterior chamber angle viewing and the G-4 or G-6 are an essential in every glaucoma specialist's portfolio for uninterrupted views of the angle.

LENS	MIRROR ANGLES	IMAGE MAG	LASER SPOT MAG	CONTACT DIAMETER	PRIMARY APPLICATION
	ANGLES	MAG	MAG	DIAMETER	APPLICATION
G-1 Gonio	62°	1.50x	0.67x	15 mm	Detailed Viewing of the Trabecular Meshwork
G-1 Gonio, No Flange	62°	1.50x	0.67x	8.4 mm	Detailed Viewing of the Trabecular Meshwork
G-2 Gonio	60° / 64°	1.50x	0.67x	15 mm	Detailed and a Broad View of the Anterior Chamber
G-2 Gonio, No Flange	60° / 64°	1.50x	0.67x	8.4 mm	Detailed and a Broad View of the Anterior Chamber
G-3 Gonio (Goldmann Style)	60° / 66° / 76°	1.06x	0.94x	15 mm	View of the Iridocorneal Angle/ Mid-peripheral/Peripheral Retina/Retinal Image from the Equator to the Ora Serrata
G-3 Gonio, No Flange	60° / 66° / 76°	1.03x	0.97x	11.4 mm	View of the Iridocorneal Angle/ Mid-peripheral/Peripheral Retina/Retinal Image from the Equator to the Ora Serrata
G-3 Gonio Mini, No Flange	60° / 66° / 76°	1.0x	1.0x	9.6 mm	View of the Iridocorneal Angle/ Mid-peripheral/Peripheral Retina/Retinal Image from the Equator to the Ora Serrata
3 Mirror, No Flange	60° / 66° / 76°	0.90x	1.11x	15.7 mm	View of the Iridocorneal Angle/ Mid-peripheral/Peripheral Retina/Retinal Image from the Equator to the Ora Serrata
3 Mirror, ANF+	60° / 66° / 76°	0.90x	1.11x	18.1 mm	View of the Iridocorneal Angle/ Mid-peripheral/Peripheral Retina/Retinal Image from the Equator to the Ora Serrata
G-4 Gonio	4x64°	1.0x	1.0x	15 mm	Examination of the Trabecular Meshwork
G-4 Gonio, No Flange (Sussman & Posner Style)	4x64°	1.0x	1.0x	8.1 mm	Examination of the Trabecular Meshwork
G-4 High Mag Gonio	4x64°	1.50x	0.67x	15 mm	Magnified Detailed Viewing of the Trabecular Meshwork
G-4 High Mag Gonio, No Flange	4x64°	1.50x	0.67x	8.1 mm	Magnified Detailed Viewing of the Trabecular Meshwork
Mini 4-Mirror	4x62°	0.9x	1.11x	15 mm	Easy Manipulations within the Orbit to View Trabecular Meshwork
G-6 Gonio, No Flange	6x63°	1.0x	1.0x	8.1 mm	Panoramic View of the Anterior Chamber without Rotation

"QUICK AND EASY ANGLE VIEWING

The Volk G4 is an easy all-around lens to view the angle. It is easy to insert and quickly obtain a good view. It allows you to efficiently and effectively view the angle without requiring any rotation and is comfortable to the patient.

- Rachel N. Brackley, OD FAAO

Pennsylvania College of Optometry at Salus University, Philadelphia, PA, USA

G-1 Gonio



Flange: **VG1** (shown) No Flange: **VG1NF**

PRIMARY APPLICATION

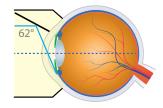
1-Mirror, All-Glass Design to View Trabecular Meshwork

- + High magnification (1.50x) enables detailed viewing of the trabecular meshwork
- + All-glass design provides superior clarity and durability
- Requires rotation to view all quadrants of the angle
- + Not recommended for SLT as lens does not have total internal reflection. We recommend a Volk Rapid SLT® or SLT lens instead (page 39)

62°
MIRROR

1.50x

O.67x LASER SPOT MAG



G-2 Gonio



Flange: **VG2** (shown)

No Flange: **VG2NF**

PRIMARY APPLICATION

2-Mirror, All-Glass Design to View Anterior Chamber

- + High magnification (1.50x) combined with dual mirror angles (60°/64°) allows for both a detailed and a broad view of the anterior chamber
- + All-glass design provides superior clarity and durability
- + Requires rotation to view all quadrants of the angle
- + Not recommended for SLT as lens does not have total internal reflection. We recommend a Volk Rapid SLT® or SLT lens instead (page 39)

60°/64° MIRROR ANGLES

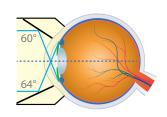
60°/66°/76°

ANGLES

1.50x IMAGE MAG O.67x
LASER
SPOT MAG

0.94x

LASER



G-3 Gonio



Flange: **VG3** No Flange: **VG3NF** (shown)

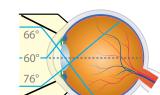
Gonio MiniNo flange: **VG3MININF** (shown)

Available in mini version for pediatric and patients with small orbits

PRIMARY APPLICATION

3-Mirror, All-Glass Design for Anterior, Peripheral, and Equatorial Viewing (Goldmann-style Lens)

- + 60° mirror provides a view of the iridocorneal angle to visualize the trabecular meshwork
- + 66° mirror provides a retinal image from the equator to the ora serrata
- + 76° mirror provides a view of the midperipheral/far-peripheral retina
- Central lens enables clear viewing of the posterior pole
- Available in two formats: flanged (can be used for laser, however, not compatible with SLT) and no flanged (recommended for routine gonioscopy without indentation)



1.06x

IMAGE

"MY GO-TO GONIO LENS



The Volk G3 is one of my go-to gonioscopy lenses. The flange is great for stabilizing the lens, especially for challenging patients who squeeze their lids or move their eyes. In addition to gonioscopy, the G3 is phenomenal for retina evaluation. I love the magnified stereo image you can get during slit lamp examination of the retina. It allows me to view the retina from posterior pole to ora seratta. I always use my G3 gonio lens when I need a better look at a retinal lesion. I recommend the G3 to all my students.

- Lloyd Pate, OD ABCMO Clinical Associate Professor University of Houston, College of Optometry, Houston, TX, USA GONIO

GONIO

3-Mirror



No Flange: **V3MIR** (shown)

G-4 Gonio

Flange:

VG4 (shown)

No Flange.

Small Ring

(25.5 mm) VG4SNF

No Flange,

Large Ring

(28.5 mm): VG4LNF ANF+ Flange V3MIRANF+

No Flange,

Extended Handle:

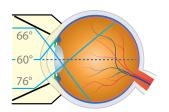
VG4HAN2 (shown)

PRIMARY APPLICATION

3-Mirror, Acrylic Design for Anterior, Peripheral, and Equatorial Viewing (Goldmann-style Lens)

- + 3-mirror design provides the same anterior chamber angle, central, equatorial, and peripheral retinal views as our G-3 Gonio lenses, but in a light-weight acrylic design while still providing Volk quality optics
- + Advanced no fluid (ANF+) flange only requires a coupling fluid during laser procedures
- + Not recommended for SLT. We recommend a Volk Rapid SLT® or SLT lens instead (page 39)

60°/66°/76° 0.90x 1.11x MIRROR IMAGE LASER ANGLES MAG SPOT MAG



PRIMARY APPLICATION

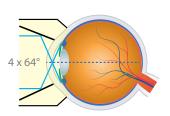
4-Mirror, All-Glass Design (Sussman-Style Lens) to View Anterior Chamber Angle

- + 4-mirror design allows for comprehensive examination of the trabecular meshwork in four quadrants with minimal lens rotation
- Enables a quick exam with maximum patient comfort
- + Available with a large ring (28.5 mm), a small ring (25.5 mm) for petite hands, or a 2-position handle Posner style (right/left handed) for additional support
- No Flange/No Fluid version is ideal for dynamic and indentation/compression gonioscopy
- + Not recommended for SLT. We recommend a Volk Rapid SLT® or SLT lens instead (page 39)

4x64°
MIRROR

1.0x 1.0x

IMAGE LASER
MAG SPOT MAG







FLANGES & FLUID

Flange versus No-Flange

A flanged element offers better stability on the cornea and is also less prone to the patient blinking off the lens. We always recommend a flanged lens for any laser procedures. A no-flanged lens has a smaller contact area and is shaped to comfortably conform to the curvature of the corneal surface to minimize corneal wrinkling during dynamic exams such that use of coupling gel is not required. As a result, this enables you to perform a quicker and simpler exam. You can also perform scleral indentation/compression for angle closure glaucoma diagnosis with an appropriate no-flange gonio lens (indentation can be performed with G-4, G-6; not G3 or 3 Mirror).

G-4 High Mag Gonio



No Flange, Small Ring (25.5 mm): VG4HMSNF (shown)

No Flange, Large Ring (28.5 mm): VG4HMLNF

No Flange, Extended Handle: VG4HMHAN2 (shown)

PRIMARY APPLICATION

4-Mirror, All-Glass Design for Magnified Anterior Chamber Angle Viewing

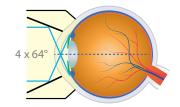
- + 50% more image magnification than our classic G-4 Gonio enables more detailed viewing of the trabecular meshwork in four quadrants
- Available with a large ring (28.5 mm), a small ring (25.5 mm) for petite hands, or a 2-position handle - Posner style (right/left-handed) for additional support
- No Flange/No Fluid version is ideal for dynamic and indentation/compression gonioscopy

4x64°
MIRROR
ANGLES

1.5x

O.67x

LASER
SPOT MAG



Mini 4-Mirror



V4MANF+ (shown)

PRIMARY APPLICATION

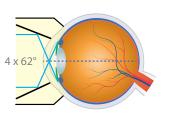
4-Mirror, Acrylic Design for Anterior Chamber Angle Viewing

- + Smaller, lighter-weight design facilitates easy manipulations within the orbit
- Excellent choice for small anatomies, narrow palpebral fissures, pediatric examinations, and more
- Advanced no fluid (ANF+) flange does not require coupling fluid during routine gonioscopy

4x62° MIRROR ANGLES

O.90x

1.11x LASER SPOT MAG



6x63°
MIRROR

1.0x

1.0x LASER

29

G-6 Gonio

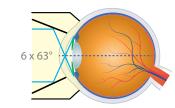


No Flange, Large Ring (28.5 mm): **VG6LNF** (shown)

PRIMARY APPLICATION

6-Mirror, All-Glass Design for 360° Angle Viewing

- Six closely-aligned mirrors create a 360° panoramic view of the anterior chamber and eliminate the need for dynamic gonioscopy/ rotation
- No Flange/No Fluid design allows for quick exams and enables indentation/compression for angle closure glaucoma detection
- Available with a large ring (28.5 mm) or a 2-position handle (right/left handle) -Posner-Style (right/left handle)



Fluid versus No-Fluid

Extended Handle

VG6HAN2 (shown)

A coupling fluid/gel should always be used with flanged lenses. Commonly used fluids include Goniovisc, Gonak, Refresh Celluvisc, Genteal or any comparable solution. No flange (NF) lenses have a small corneal contact area and do not require a contact fluid with these lenses with the one exception of the glass G-3 no-flange lens or the acrylic 3-Mirror no flange lens. Some doctors prefer to use artificial tears for no flanged lenses. Volk's ANF+ (Advanced No Fluid) lenses have also been designed to have a unique flange that does not require the use of a coupling fluid except when laser procedures are carried out.

SURGICAL **GONIO LENSES**

Volk's Surgical Gonioprism lenses leverage the same proprietary optical design and manufacturing principles as Volk's diagnositic lenses. Each surgical gonio lens is designed and tested in partnership with numerous surgeons resulting in the best optical clarity, maximum visualization, surgeon & microcope friendly ergonomics, and optimized for patient comfort.

LENS	IMAGE MAG	CONTACT DIAMETER	HANDLE LENGTH	PRIMARY APPLICATION
VVG Lens	1.20x	10.2 mm	84 mm	Direct Views for Micro-Invasive Glaucoma Surgery (MIGS) and all Intraoperative Gonio Procedures
Surgical Gonio Lens	1.20x	10.3 mm	75 mm	Direct Views for Intraoperative Gonio Procedures

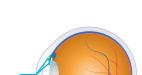
Volk Vold Gonio (VVG) Lens



PRIMARY APPLICATION

Direct Views for Micro-Invasive Glaucoma Surgery (MIGS) and all Intraoperative Gonio Procedures

- + Thornton-style stabilization ring provides maximum control of the globe
- + Floating ring design minimizes corneal pressure to prevent anterior chamber distortion
- + Visualizes angle in primary phaco position with minimal microscope and head adjustments
- + Designed in collaboration with Dr. Steven Vold and refined with doctors across the world to ensure maximum usability
- Sterilizable by either steam autoclave or ethylene oxide (ETO)



1.20x

IMAGE MAG

Surgical Gonio Lens



Direct Views for Intraoperative Gonio Procedures

- + Lightweight titanium handle and chip resistant lens design with adjustable lens orientation
- + Enables clear visualization of the angle for surgery
- + Lens design enables comfortable positioning against the cornea
- + Lens position can be adjusted relative to the handle: for left hand and right hand or center position allowing freedom of movement
- + Applicable for MIGS procedures
- + Sterilizable by either steam autoclave or ethylene oxide (ETO)



1.20x

IMAGE MAG

"SUPERB VISUALIZATION

The Volk surgical gonioprism allows superb visualization of the angle and conforms well to the cornea with minimal coupling agent. The handle is well sized to fit under the increasing size of microscope stacks and the ability to rotate the lens allows additional surgical freedoms while maintaining positional comfort."

- J. Morgan Micheletti, MD Cataract, Refractive, & Anterior Segment Surgeon Berkeley Eye Center, Houston, Texas, USA

VOLK VOLD GONIO LENS

MICRO-INVASIVE **GLAUCOMA SURGERY**

A Revolution in MIGS

For maximum control, clearer angle image, and minimal corneal pressure, choose the Volk VVG Lens for Micro-Invasive Glaucoma Surgery (MIGS) and other intraoperative surgical gonio procedures.





Stabilize and Control the Globe with Thornton-style fixation ring





Withstands Repeat Sterilization compatible with both steam and gas sterilization

SPECIFICATIONS





Freedom

"STABILITY FOR MIGS

Ring

The floating lens and stabilizing Thornton Ring assist you with rotating the eye so you can easily visualize the trabecular meshwork... and stabilize for perfect visualization."

- Michael S. Berlin, MD

Director of Glaucoma Institute oF Beverly Hills, West Hollywood, CA, USA



RETINA LASER LENSES

Volk's range of indirect contact Retina Laser lenses are fabricated with world class optics designed to deliver crystal-clear visualization and precise delivery of laser energy for treating the retina. Our laser lenses are ergonomically designed keeping both the practitioner and patient in mind for efficient and comfortable procedures.

LENS	FIELD OF VIEW	IMAGE MAG	LASER SPOT MAG	CONTACT DIAMETER	PRIMARY APPLICATION
HR Wide Field	160° / 165°	0.50x	2.0x	16.5 mm	Wide Field of View for Pan Retinal Examination and Laser Treatments
Super Quad® 160	160° / 165°	0.50x	2.0x	Flange 16.5 mm NF 15.7 mm	Wide Field of View for Pan Retinal Examination and Laser Treatments
QuadrAspheric®	120° / 144°	0.51x	1.97x	Flange 15.5 mm ANF+ 15.5 mm NF 13.6 mm	Wide Field View for Pan Retinal Examination & Laser in Small Pupils
Area Centralis®	70° / 84°	1.06x	0.94x	Flange 15.5 mm ANF+ 15.5 mm NF 13.5 mm	High Magnification Examination and Treatment of the Posterior Pole
HR Centralis	74°/ 88°	1.08x	0.93x	15.5 mm	High Magnification for Small Pupil Posterior Pole Treatment
Super Macula® 2.2	60° / 78°	1.49x	0.67x	15.5 mm	High Magnification Examination and Treatment of the Posterior Pole
TransEquator®	110° / 132°	0.70x	1.44x	Flange 15.5 mm ANF+ 15.5 mm NF 13.2 mm	Mid-Peripheral Diagnosis and Focal/Grid Laser Therapy
Equator Plus®	114° / 137°	0.44x	2.27x	ANF+ 15.5 mm NF 13.6 mm	Small Pupil Diagnosis and Treatment
Quad Pediatric	100° / 120°	0.55x	1.82x	10.0 mm	ROP and Other Pediatric Conditions
PDT Laser	115° / 137°	0.67x	1.50x	15.5 mm	Photodynamic Therapy

"WIDE FIELD VIEWS FOR PRP

The HR Wide Field lens provides excellent views of the peripheral retina and in conjunction with proper patient gaze instructions, enables me to apply PRP just anterior to the ora serrata. In addition, the compact and light-weight size of this lens simplifies manipulation of the lens within the orbit leading to shortened procedure times and is especially helpful and comfortable for patients with narrow palpebral fissures. The high refractive index of the lens also reduces the aberrations associated with any lens system. The optical design of the lens also enables simple optical alignment enabling easy visualization and is forgiving to small movements, allowing for excellent image quality during PRP. The HR Wide Field is my go-to lens for delivery of PRP in proliferative retinal diseases and for detailed evaluation of the peripheral retina.

- K. V. Chalam, MD Professor & Director of Retina Loma Linda University School of Medicine, Loma Linda, CA, USA

CONTACT OPTIONS

Flanged version provides optimal stability on the cornea during laser procedures and is the recommended contact element for laser treatment. A coupling fluid should be used with flanged lenses.

No flange (NF) versions have a smaller corneal contact area than flanged versions. It is necessary to use a contact fluid with this version. Non-flanged lenses are not recommended for use with laser due to lack of flange for stability and should only be used for diagnostic examination.

ANF+ flanged version is designed to provide optimal stability without the need for a contact fluid during diagnostic examination. ANF+ flange versions are recommended for diagnostic examination. Should you choose to do laser with ANF+ lenses, a coupling fluid must be used.

Regular flanged lenses are recommended for laser procedures.

ALL LASER PROCEDURES WITH ANY VOLK CONTACT LENS MUST USE A COUPLING FLUID

HR Wide Field



Flange: VHRWF

PRIMARY APPLICATION | PRP

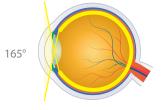
Wide Field of View for Pan Retinal Examination and Laser Treatments

- + Same field of view and image magnification as the classic favorite Super Quad® 160, but at half the size and half the weight
- + Advanced low-dispersion glass reduces chromatic aberrations and ensures excellent imaging to the ora serrata
- + Most popular lens for PRP

160°/165° FIELD OF

O.50x

2.0x
LASER
SPOT MAG



Super Quad® 160



Flange: VSQUAD160 (shown)

No Flange: VSQUAD160NF

ANF+ Flange:

VQFLANF+

PRIMARY APPLICATION | PRP

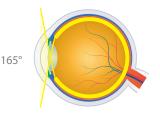
Wide Field of View for Pan Retinal Examination and Laser Treatments

- + Wide field views for complete retinal imaging out to the ora serrata
- + Excellent for PRP and other laser treatments out to the far-peripheral retina
- Flanged version recommended for laser for optimal stability on cornea

160°/165°

O.50x IMAGE MAG

2.0x LASER SPOT MAG



QuadrAspheric®



Flange: **VQFL** (shown)

No Flange: **VQFLNF**

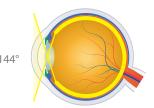
PRIMARY APPLICATION | SMALL PUPIL PRP Wide Field View for Pan Retinal

Examination and Laser Treatments in Small Pupils

- + High resolution imaging of the peripheral retina with small pupil capability for patients who do not accommodate dilation well
- Excellent general diagnostic and laser treatment lens
- Flanged version recommended for laser for optimal stability on cornea



O.51x IMAGE MAG 1.97x
LASER
SPOT MAG



Area Centralis®



Flange: **VAC** (shown)

No Flange: VACNF ANF+ Flange: VACANF+

PRIMARY APPLICATION | FOCAL/GRID

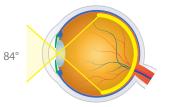
High Magnification Examination and Treatment of the Posterior Pole

- + Ideal for focal/grid laser treatment
- + High magnification image of the posterior pole with expanded field of view
- Flanged version recommended for laser for optimal stability on cornea

70°/84°

1.06x

0.94x LASER SPOT MAG



LASER

LASER

HR Centralis



Flange **VHRC**

PRIMARY APPLICATION | FOCAL/GRID

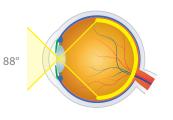
High Magnification Examination and Treatment of the Posterior Pole in **Small Pupils**

- + Low-dispersion glass and advanced doubleaspheric design produces a high resolution view out to the peripheral retina
- + Excellent capability with pupils as small as 4 mm

74°/88° FIELD OF

1.08x IMAGE MAG

0.93xLASER SPOT MAG



VQPED

PRIMARY APPLICATION | PRP

Retinopathy of Prematurity and **Pediatric Diagnosis and Treatment**

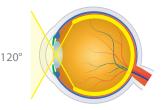
- + Patented double aspheric glass optics provide enhanced imaging with wide field views
- + Miniaturized contact diameter provides optimal comfort and stability for diagnosis and treatment of ROP and other infant conditions
- + Excellent for treatment of patients with narrow palpebral fissures



FIELD OF

0.55xIMAGE MAG

1.82x LASER SPOT MAG



Super Macula[®] 2.2



PRIMARY APPLICATION | FOCAL/GRID

High Magnification Examination and Treatment of the Posterior Pole

- + Highest magnification imaging of the posterior pole of any indirect contact lens
- + Excellent detail and distortion free visualization for critical evaluation of the optic nerve head and
- + Flange is designed to provide optimum stability and control on the cornea needed to manipulate tall lens body

60°/78° FIELD OF VIEW

110°/132°

FIELD OF

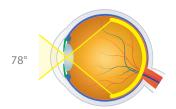
1.49x IMAGE MAG

0.67xLASER SPOT MAG

1.44x

LASER

SPOT MAG



0.70x

IMAGE

MAG

PDT Laser

Quad Pediatric



Flange: VPDT

PRIMARY APPLICATION

Photodynamic Therapy

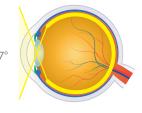
- + Delivers maximum laser spot size for treatment of the choroidal neovascular membranes
- + Ideal combination of magnification and field of view to facilitate PDT procedures
- + Optimized A/R coating for 689 nm wavelength used for PDT procedures to treat retinal neovascularization, tumors, etc.





1.50x

37



TransEquator®



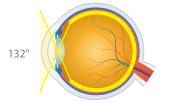
No Flange

ANF+ Flange: VTENF **VTEANF+**

PRIMARY APPLICATION | PRP & FOCAL/GRID

and Focal/Grid Laser Therapy

+ Wide field of view past the equator for pan retinal imaging and treatment



Mid-Peripheral Retinal Diagnosis

- + Perfect balance whether you are treating retinal tears at the mid-periphery or performing focal/ grid laser procedures at the posterior pole
- + Excellent substitute for Rodenstock pan fundus lens

Equator Plus®



ANF+ Flange: **VEPANF**+ (shown)

No Flange: **VEPNF**

PRIMARY APPLICATION | PRP

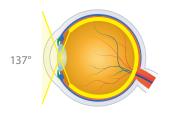
Small Pupil Diagnosis and Treatment

- + High resolution wide field imaging with small pupil capability
- + Ergonomic, smaller lens body designed for increased freedom of maneuverability within the orbit, ideal for patients with deep-set eyes

114°/137° FIELD OF

0.44xIMAGE

2.27x LASER **SPOT MAG**





FLAWLESS OPTICS Unmatched Precision

ANTERIOR & MID-VITREOUS LENSES

Volk's range of Anterior and Mid-Vitreous lenses are specially crafted for laser treatment of the anterior segment and vitreous pathologies. Experience precision, clarity, high-resolution and aberration free viewing with excellent stereo imaging using our laser lenses. All these laser lenses have been carefully designed with the best experts in the industry to ensure efficient and comfortable laser procedures.

LENS	IMAGE MAG	LASER SPOT MAG	CONTACT DIAMETER	PRIMARY APPLICATION
Singh MidVitreous	1.16x	0.86x	15.5 mm	Laser Treatment of Vitreous Floaters
Rapid SLT®	1.0x	1.0x	15.0 mm	SLT Procedures
Selective Laser Trabeculoplasty (SLT)	1.0x	1.0x	14.4 mm	SLT Procedures
Capsulotomy	1.57x	0.64x	15.5 mm	Laser Capsulotomy Procedures
Blumenthal Iridotomy	1.54x	0.65x	13.9 mm	Far Periperal Laser Iridotomy Procedures
MagPlus Iridectomy Lens	1.60x	0.63x	15.5 mm	Laser Iridotomy Procedures
Iridectomy	1.70x	0.59x	15.5 mm	Magnified Laser Iridotomy Procedures
Blumenthal Suturelysis	2x-3x	0.50x-0.33x	1.1 mm	Suturelysis Procedure

Singh MidVitreous

Laser Treatment of Vitreous Floaters

PRIMARY APPLICATION

laser application

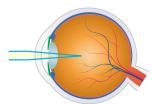
treatment of floaters + Provides clear context regarding location of floaters and relative position with respect to the lens and retina, contributing to safe and confident

+ Superior depth of focus provided by this lens allows visualization of the entire vitreous chamber from the posterior lens to the retina for the

+ Unique flanged contact element provides stability during laser procedures and is ideal for patients with small palpebral fissures

1.16x IMAGE

0.86xLASER SPOT MAG



VSMV

LASER COMPATIBILITY

Capsulotomy, Iridectomy, and Iridotomy lenses are suitable for argon, diode and YAG laser treatments.

SLT & Rapid SLT lenses can be used for ALT and MLT per the following laser compatibility for each procedure: Selective Laser Trabeculoplasty (SLT): Q-switched frequency doubled Nd:YAG 532 nm Argon Laser Trabeculoplasty (ALT): Argon laser 488/514 nm

Multipulse Laser Trabeculoplasty (MLT): Diode laser 810 nm

Rapid SLT®

VMSLT

PRIMARY APPLICATION SLT Procedures

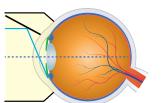
- + Four-mirror design with total internal reflection reduces the time taken for the SLT procedure by half
- + Simultaneously visualize of all quadrants of the trabecular meshwork minimizing the need to rotate the lens
- + 1.0x magnification maintains laser spot size and power density and the treatment size
- + Broadband A/R coating

PRIMARY APPLICATION

SLT Procedures

1.0x IMAGE MAG

1.0x LASER SPOT MAG



Selective Laser Trabeculoplasty (SLT)



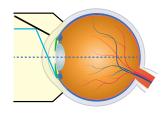
+ Large internally reflective facet provides excellent view of the angle

+ 1.0x magnification maintains laser spot size and power density at the treatment site

1.0x IMAGE

1.0x LASER

39



VSLT



UNMATCHED PRECISION Enhances Confidence

LASER

LASER

Capsulotomy



VCAPS

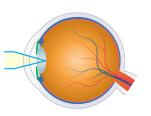
PRIMARY APPLICATION

Laser Capsulotomy Procedures

- + Enables precise focusing of the laser beam at the posterior lens capsule for post-cataract/secondary cataract treatment
- + Superior optical design provides tight focus to minimize pitting and damaging the IOL
- + Laser Window provides a protective barrier for internal imaging components

1.57x IMAGE MAG

0.64xLASER SPOT MAG



Iridectomy



VIRID

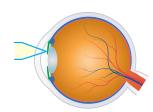
PRIMARY APPLICATION

Laser Iridotomy Procedures

- + Provides high magnification view of the iris through the top-hat style 'button'
- + Button design ensures precise placement of the laser beam
- + Lens surface provides a clear plano view of surrounding iris to help identify and orient desired treatment location
- + Laser beam should be aimed at center of circular button for effective laser transmission

1.70x IMAGE MAG

0.59xLASER SPOT MAG



Blumenthal Iridotomy



VBIRID

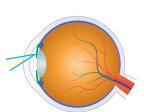
PRIMARY APPLICATION

Far Periperal Laser Iridotomy Procedures

- + Unique lens button allows access to the farthest peripheral iris for laser placement and superior optical quality for sharply focused laser spots
- + Specially designed shallow contact element allows corneal indentation to open the angle and flatten the peripheral iris
- + Improved lens peformance uses lower energy for less iris tissue damage and post laser inflammation
- + Larger lens housing aids manipulation and allows more oblique viewing. Ideal for deep-set eves

1.54x IMAGE

0.65xLASER



VBSL

Blumenthal Suturelysis



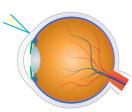
PRIMARY APPLICATION

Suturelysis Procedures

- + Unique tip of lens designed to alleviate compressive force on cornea for visualization and removval of deep seated sutures, increasing patient comfort
- + Lens surface and tip magnify view 2x to 3x facilitating clear visualization of all sections of the suture
- + High magnification enables treatment of deep seated sutures
- + Unique design facilitates visualization through thick Tenon's layer or a subconjunctival hemorrhage

2x-3x

0.50x - 0.33xLASER



MagPlus Iridectomy



VMPIRID

40

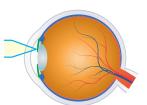
PRIMARY APPLICATION

Laser Iridotomy Procedures

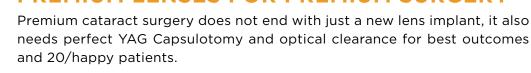
- + Mag Plus lens derives its name from the large magnification button within the lens body which is perfect for practitioners who prefer a large working space to work with
- + Larger offset viewing area delivers superior clarity and resolution with large laser spot size
- + Laser Window protects imaging element from contamination ensuring precise laser spot placement
- + Silvered indent on lens ring helps orient the button towards the right clock position
- + Laser beam should be aimed at center of circular button for effective laser transmission

1.60x IMAGE MAG

0.63xLASER



"PREMIUM LENSES FOR PREMIUM SURGERY



In my 100% premium cataract practice, I take advantage of the optical superiority (visibility) of Volk Capsulotomy lenses to perform exact YAG Capsulotomy with zero implant pitting (due to excellent focus) and minimal laser energy (safety).

Since we have a worldwide referral base of complex corneas and cataracts, I can also use these lenses to perform YAG Capsulotomy through previous radial keratotomy and scarred corneas (which otherwise take longer and higher energy to get through in between scarred areas). Additionally, I have had great success in immobilizing the eye during YAG Capsulotomy in Nystagmus cases.

The Volk Iridectomy Lens is extremely helpful in ICL surgery, especially for narrow angles allowing use of minimal energy and accurate lens placement with minimal inflammation.

I feel Volk lenses should be a necessary inclusion in the full spectrum Keratotomy-Lenticulo-Refractive surgical practice."

- Arun Gulani, MD FAAO

41

Founding Director & Chief Surgeon, Gulani Vision Institute, Jacksonville, FL, USA

DIRECT CONTACT LASER LENSES

Volk's fundus laser lenses provide high resolution and magnified views of the fundus for treatment of the posterior pole. These lenses are designed with features to eliminate reflections and the fundus laser lenses have a proprietary Laser Window for optimal laser beam transmission and imaging element protection.

LENS	FIELD OF VIEW	IMAGE MAG	LASER SPOT MAG	CONTACT DIAMETER	PRIMARY APPLICATION
Centralis Direct®	22° / 26°	0.90x	1.11x	15.5	Direct upright image for posterior pole laser treatments
Fundus Laser	35° / 40°	1.25x	0.80x	15.5	High magnification view for posterior pole laser treatments
Fundus Laser 20 mm	25° / 30°	1.44x	0.70x	20.0	Highest magnification view for posterior pole

Centralis Direct®

Treatm



Flange: ANF+ Flange: VCD (shown) VCDANF+

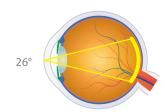
PRIMARY APPLICATION

Direct Image Viewing and Treatment of the Posterior Pole

- Provides direct upright image of the posterior segment of the eye
- + Highest laser spot size of laser lenses
- + High profile design eliminates filament reflection
- Optimized aspheric corneal contact design for improved fit and maneuverability

22°/26° FIELD OF

O.90x IMAGE MAG 1.11x LASER SPOT MAG



Fundus Laser



Flange: **VFUNDUS**

PRIMARY APPLICATION

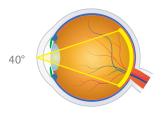
Direct Image Viewing and Treatment of the Posterior Pole

- Patented double-aspheric glass optics provide enhanced imaging
- + Superior high magnification viewing and treatment of the optic nerve head and macula
- Laser Window ensures optimal laser beam transmission and protects imaging element from contamination ensuring precise laser spot placement

35°/40° FIELD OF

1.25x

O.80x LASER SPOT MAG



Fundus Laser 20mm



Flange: VFUNDUS20

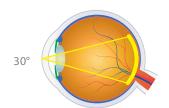
PRIMARY APPLICATION

Direct Image Viewing and Treatment of the Posterior Pole

- Highest magnification viewing and treatment of the optic nerve head and macula
- Laser Window ensures optimal laser beam transmission and protects imaging element from contamination ensuring precise laser spot placement
- + Large 20 mm contact element is designed to sit under the patient's eyelid and provides superior stability during laser treatment

25°/30° FIELD OF

1.44x IMAGE MAG O.70x LASER SPOT MAG



SINGH MIDVITREOUS

Superior Focus & Stability for Laser Vitreolysis Procedures

Clearer Visualization. Better Treatment.

How the Singh MidVitreous Brings Together Unmatched Imaging and Ergonomics for Optimum Laser Floater Removal/Vitreolysis Procedures

Floaters are translucent vitreous strands that move randomly and lazily across the visual field and obstruct vision. While floaters are generally harmless and self-correct, in approximately 30% of cases, floaters reoccur frequently, obstructing the direct line of sight which adversely

impacts everyday tasks like reading and can potentially even be dangerous in situations such as driving.

ingh MidVitreou

Floaters are caused by contraction and solidification of collagen within the vitreous. Floaters are known to be symptomatic of vitreous traction which may lead to retinal detachment/tears or could be a side effect of cataract surgery. However, any sudden increase in the number, size or frequency of floaters must be reported to an eye care specialist to rule out possibly sight threatening conditions. The usage of YAG laser in ophthalmology has been around for decades in procedures such as Iridotomy and Capsulotomy. However, its application and acceptance in the floater treatment space is relatively new owing to the intricacies involved in visualizing and treating the floater. It is critical to know where the floater(s) are placed relative to the retina so that the surgeon is confident that it is at a safe distance and the laser convergence zone is not incident on the retina causing unwanted damage. Laser floater treatment as an outpatient treatment is helping improve the quality of vision in patients that may not be qualified for a complete vitrectomy.

Perfect Visualization is Key to Safer Procedures and Better Patient Outcomes

Designed in collaboration with Dr. Inder Paul Singh, the Volk Singh MidVitreous lens provides enhanced depth of focus and best-in-class optics to eliminate vitreous strands or opacities in the mid-vitreous. The crisp stereo visualization and depth of focus that the lens provides helps plan efficient laser placement while the precise

focusing ability helps keep the laser energy low, leading to safer, more effective laser procedures.

"Visualization is the most important aspect when you are treating anywhere in the eye. The key is to know exactly where the floater is relative to the retina and the ocular lens in order to safely fire the laser," says Dr. Inder Paul Singh from The Eye Centers of Racine and Kenosha when asked what was the critical factor when performing LFR procedures. "The pristine images that I acquire through the Volk Singh MidVitreous lens is truly second to none. The depth of field is amazing and allows me to visualize all the way from vasculature at the retina to the surface of the cornea with the same lens. Often times, I am able to visualize problematic floaters using the Volk lens at the laser which I couldn't during the slit lamp examination," Dr. Singh adds.

Visualizing and treating such symptomatic floaters improves patient outcomes and provides a better visual experience for the surgeon. Oftentimes, the patient is asked to look in different directions in order to coax the floater into the field of view. It is important to have the lens stay stable on the eye during this procedure without slipping or forming air bubbles within the coupling fluid. The contact element of the Singh MidVitreous has been carefully designed to provide optimum control and fit over the patient's cornea to prevent blink reflex, while ensuring patient comfort. The size of the lens allows for streamlined manipulation of the lens and laser, leaving comfortable working space for the doctor between the laser and the patient's eye. The small lens size also makes the lens optimal for use in patients with small eyes. An over-all combination of superior optics and ergonomics, the Singh MidVitreous enhances laser floater treatments.



INDER PAUL SINGH, MD

Eye Centers of Racine and Kenosha

Dr. Singh is the leading opinion on laser floater removal. He also specializes in glaucoma treatment such as SLT and MIGS procedures. He is an expert in other anterior eye laser surgeries such as capsulotomy and iridotomy.

RAPID SLT®

Four Views are Better Than One

Volk's Rapid SLT® lens cuts down Selective Laser Trabeculoplasty (SLT) procedure time by almost 50% and minimizes the need for lens rotation.

The Rapid SLT is the newest addition to the laser lens family from Volk Optical. Specially designed for Selective Laser Trabeculoplasty (SLT), this innovative lens incorporates four total internal reflective surfaces instead of just one – which has been the industry standard – until now. The large reflective surfaces provide four amazing and simultaneous views of the trabecular meshwork and iridocorneal angle.

SLT has emerged as a widely accepted treatment choice for addressing increased Intraocular Pressure (IOP) in patients with glaucoma. Using a Q-switched, frequency doubled, 532 nm Nd:YAG laser, SLT is considered to be less disruptive than Argon Laser Trabeculoplasty (ALT). This technique 'selectively' targets pigmented cells that have a greater ability to absorb the laser than the surrounding structures, thereby being considered a relatively safer procedure.

Until now, special laser lenses with a contact element and a single reflective element to facilitate viewing the trabecular meshwork were used as the standard in this procedure. However, these types of lenses require rotation on the patient's eye to view and target the entire trabecular meshwork. This procedure is often cumbersome for doctors as they must balance rotating

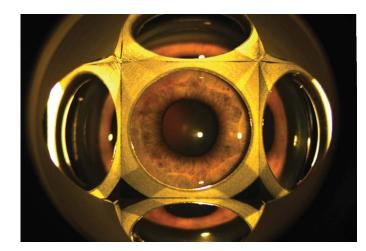


Figure 2. A view through the Rapid SLT lens with a 6x magnification on the slit lamp. Four large and clear views of the trabecular meshwork can be obtained without rotating the lens.



Figure 1. The new Rapid SLT lens from Volk is the first of its kind, employing multiple reflective surfaces for SLT procedure.

the lens while simultaneously stabilizing the lens firmly on the cornea. For patients, this method increases discomfort due to the time the lens remains on the eye, as well as the rotation, which induces blink reflex in many patients.

Efficient Procedure, Lesser Strain

With four spectacular views available through the Rapid SLT (Figure 2), doctors can carry out the SLT procedure with just a minimal one-time adjustment of the lens, resulting in reduced procedure time by almost 50%. The number of laser spots targeted on the eye is also reduced, owing to a clear, high resolution, 360° view of the angle.

"This lens is very comfortable for both doctor and patient and provides excellent resolution imaging. After the first round of laser, I only need to rotate it just about one and a half clock hours to complete the SLT procedure," says Douglas Ripkin, MD; glaucoma and anterior segment specialist at the Cole Eye Institute, Cleveland Clinic.

This enhances patient comfort, owing to a quicker procedure and reduced lens rotation. The 1.0x image magnification provides an optimally intuitive view of the angle, while the 1.0x laser magnification helps keep the laser spot profile accurate. "I also use this lens for quick dynamic gonioscopy to examine the angle because of its contact design," adds Ripkin.

Nathan Lighthizer, O.D., F.A.A.O, the Assistant Dean of Clinical Care Service and Director of Continuing Education at the Oklahoma College of Optometry highlights the functional convenience provided by the four views of the Rapid SLT. "The Rapid SLT lens has been a tremendous addition to our clinic and specifically for SLT procedures in our patients with glaucoma. The new lens has allowed us to reduce our SLT times significantly. The four mirrors

of the Rapid SLT lens drastically diminish the need to rotate the lens while performing the SLT procedure, making the procedure more efficient, while at the same time also helping to reduce glare and bubble formation during the procedure which can limit views of the anterior chamber angle anatomy. From the very experienced doctors who have done thousands of procedures, to the students and resident doctors who are early in their experience with SLT, all have commented on the great views achieved with the Rapid SLT lens and the efficiency that it brings to the procedure. It has now become our lens of choice for SLT procedures," states Lighthizer.

An Easy Transition

According to John McCall Jr., O.D., who collaborated on the design of the rapid SLT, not only does the Rapid SLT speed up the procedure time but also results in more efficient laser spot placement. "What I found, as well as my partners have, is that we use about 25% fewer laser shots with the Rapid SLT. That is 25% lesser millijoules fired into the eye than we used to before, making the procedure safer," says McCall.

He also highlights the importance of the smaller contact design element of the lens, "With this flange, it is easy on the patient while providing adequate suction through the whole procedure. It is also easier to get off of the eye."

This feature is particularly beneficial when treating patients with small palpebral fissures or flaccid eyelids who are more prone to blinking the lens off the eye.

Overall, starting with the application of lens on the patient's eye, through administering the laser, to removing the lens off the eye, the Rapid SLT enhances ease of use at each step of the treatment.

The prevalence of glaucoma continues to increase, bringing an increased need for timely intervention. The Rapid SLT enables an easy transition from diagnosis to treatment for O.D.s, thanks to the nearly 360° view of the angle, analogous to the four mirror gonioscopy

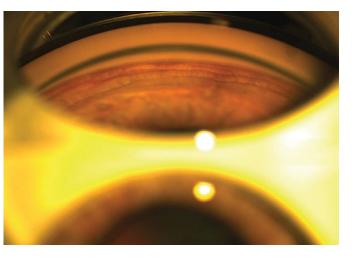


Figure 3. Appreciate the smallest of details with the high-resolution optics of the Rapid SLT. Shot on 16x zoom on the slit lamp.

technique mastered by every O.D. The Rapid SLT's views enable better-informed diagnosis and treatment. For O.D.s traveling to licensed states for treatment days, the reduced procedure time translates directly to an ability to treat more patients with each visit.

Conclusion

As evidenced by the images provided by Vadym Pecherii, Ophthalmologist and laser surgeon at the Zinitsa Ophthalmic Center, Ukraine (Figures 2 & 3), the Rapid SLT is a prime example of Volk's dedication to high resolution imaging. He describes the lens as providing a comprehensive look into the angle from an overall four-view examination, to being able to notice minuscule details with the slit lamp setting at 40x magnification.

Volk's promise of unmatched imaging quality combined with enhanced ease of use, increased patient comfort, and reduced procedure time makes the Rapid SLT a lens every glaucoma specialist will look forward to adding to their collection!



DOUGLAS RIPKIN, MDCole Eye Institute, Cleveland Clinic

Ripkin specializes in the care of advanced glaucoma, including bypass and MIGS shunt devices, glaucoma laser surgery and cataract surgery.



JOHN A. MCCALL, JR., OD Crockett Eye Clinic

A past President of the American Optometric Association, McCall specializes in general optometry and laser treatments for glaucoma management.



NATHAN R. LIGHTHIZER, OD, F.A.A.O
Oklahoma College of Optometry

Lighthizer serves as the Assistant Dean of Clinical Care Services and the Chief of Specialty Care Clinic among other roles.

SINGLE-USE LASER & GONIO LENSES



Experience unmatched image quality and focusing capability with Volk's Single-Use Laser and Gonio lenses. Single-use lenses are perfect for routine examination, laser treatments, and surgical procedures.

Volk's single-use lenses are pre-sterilized and individually packaged in a Tyvek* pouch. Single-use lenses are sold in boxes of 10. These single-use lenses minimize the risk of infection and cross-contamination and reduce the cost and time associate with reprocessing.

LENS	MIRROR ANGLES	IMAGE MAG	LASER SPOT MAG	CONTACT DIAMETER	PRIMARY APPLICATION
Volk®1 Single-Use Capsulotomy	N/A	1.57x	0.63x	14.2	Laser Capsulotomy Procedures
Volk®1 Single-Use Iridotomy	N/A	1.70x	0.59x	14.2	Laser Iridotomy Procedures
Volk®1 Single-Use SLT	63°	1.0x	1.0x	14.8	SLT Procedures, Static and Dynamic Gonioscopy
Volk®1 Single-Use 3-Mirror Gonio	60° / 66° / 76°	1.0x	1.0x	8.1	Gonioscopy and Examination of Anterior Chamber Angle and the Central, Equatorial, & Peripheral Retina
Volk®1 Single-Use 4-Mirror Gonio	4x63°	1.0x	1.0x	8.1	Static and Dynamic Gonioscopy

Volk®1 Single-Use Capsulotomy



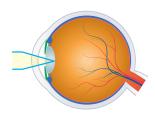
PRIMARY APPLICATION Laser Capsulotomy Procedures

+ Facilitates accurate laser beam focus on the posterior lens capsule

N/A	
MIRROR ANGLES	

1.57x IMAGE

0.63xLASER



VCAPSD10

Volk®1 Single-Use Iridotomy



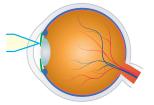
PRIMARY APPLICATION

Laser Iridotomy Procedures

+ Magnified view of the peripheral iris enables precise laser placement for iridotomy procedures

N/A MIRROR ANGLES 1.70x IMAGE

0.59xLASER SPOT MAG



LASER COMPATIBILITY

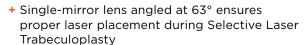
Volk®1 Single-Use SLT



VSLTD10

PRIMARY APPLICATION

SLT Procedures, Static and **Dynamic Gonioscopy**

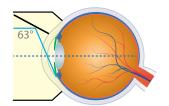


- + Single-use SLT lens can also be used for ALT and other trabeculoplasty procedures
- + Used for visualization in XEN® Gel Stent procedures





LASER



Volk®1 Single-Use **3-Mirror Gonio**



V3MIRD10

PRIMARY APPLICATION

Gonioscopy and Examination of Anterior Chamber Angle and the Central, Equatorial, & Peripheral Retina

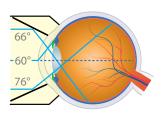
- + 60° mirror provides a view of the iridocorneal angle
- + 66° mirror provides a retinal image from the equator to the ora serrata
- + 76° mirror provides a view of the midperipheral/peripheral retina
- + Central mirror provides a view of the central retina

60°/66°/76° MIRROR ANGLES

1.0x IMAGE MAG



1.0x



Volk®1 Single-Use 4-Mirror Gonio



PRIMARY APPLICATION

Static and Dynamic Gonioscopy

+ Four-mirror design allows for comprehensive examination and treatment of the trabecular meshwork with minimal lens rotation

4x63° MIRROR ANGLES

1.0x IMAGE LASER

V4MIRD10

SINGLE-USE

QUALITY

Volk optics deliver unmatched Eliminate any potential for imaging and focusing capabilities with minimal glare for retinal and anterior chamber examinations, laser treatments, and surgical procedures

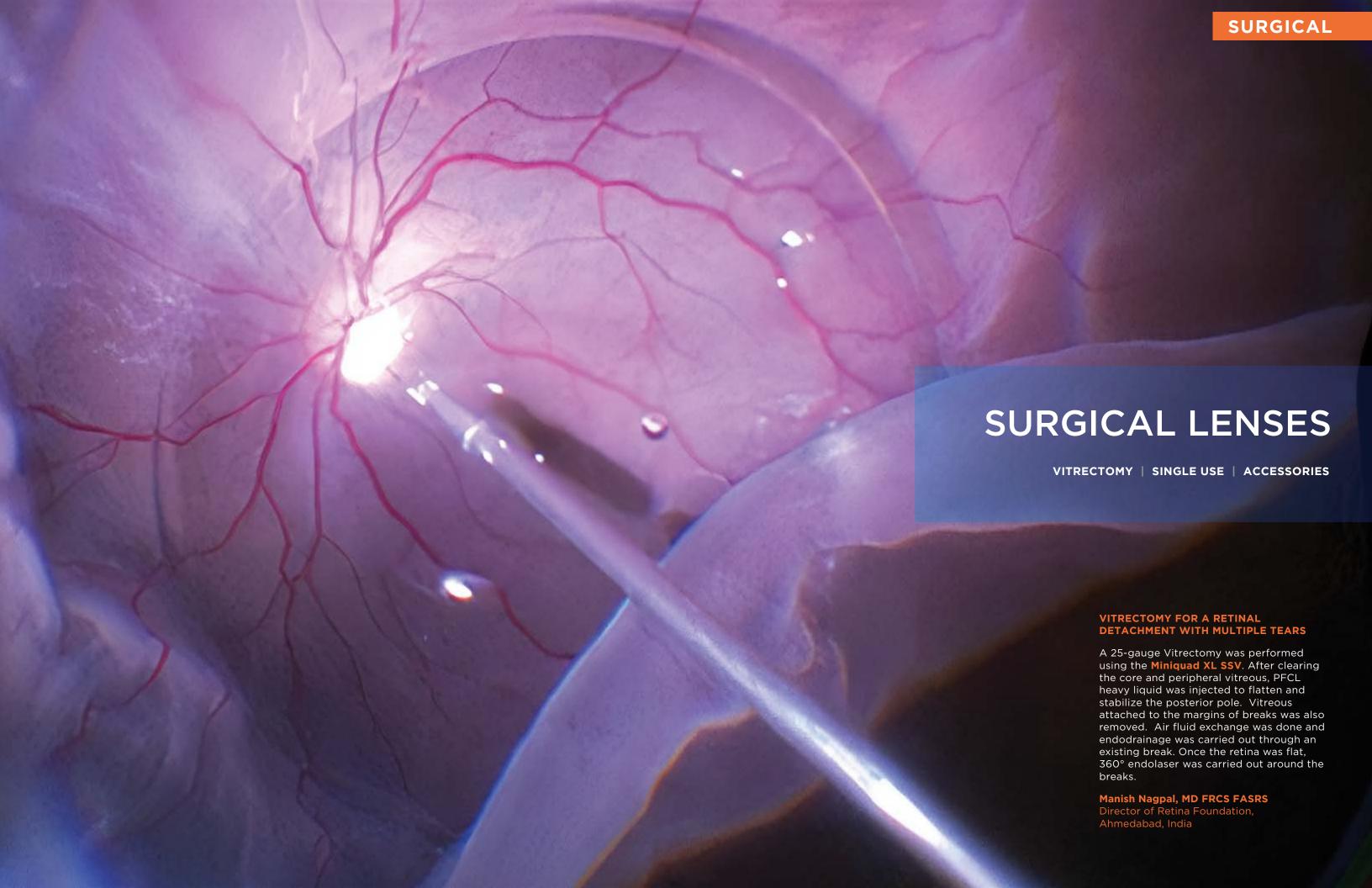
♥ ASSURANCE

cross-contamination of transmissible diseases & lower Hospital Acquired Infection score

♥ CONVENIENCE

Do away with cumbersome and costly intra-facility reprocessing of reusable medical devices by mitigating bulk lens reprocessing effort, time and cost

All Volk® Single-Use Lenses are pre-sterilized and packaged in individually sealed Tyvek® pouches Sold in boxes of 10 lenses



INDIRECT VITRECTOMY LENSES

Volk offers a suite of vitrectomy lenses over a range of optical profiles, designed to cater to the full spectrum of vitrectomy procedures with the highest quality Volk optics for the best surgical visualization.

LENS	FIELD OF VIEW	IMAGE MAG	CONTACT DIAMETER	PRIMARY APPLICATION
HRX Vit Lens	130° / 150°	0.43x	11.35 mm / SSV 16.0 mm	Far-Peripheral Indirect Vitreoretinal Procedures
Mini Quad® XL	112° / 134°	0.39x	11.35 mm / SSV 16.0 mm	Indirect Viewing and Treatment of Peripheral Retinal Disorders
Mini Quad®	106° / 127°	0.39x	11.35 mm / SSV 16.0 mm	Indirect Viewing and Treatment of Peripheral Retinal Disorders
DynaView	95° / 127°	0.39x	8.08 mm	Treatment of Retinopathy of Prematurity
Central Retinal	73° / 88°	0.71x	11.35 mm / SSV 16.0 mm	High Magnification Indirect Viewing and Treatment of the Central Retina
Super Macula®	64° / 77°	1.03x	11.35 mm	Highest Magnification Indirect Viewing and Treatment of the Central Retina

HRX Vit Lens



VHRXVIT VHRXVITSSV Self Stabilizing (shown)

PRIMARY APPLICATION

Far-Peripheral Indirect Vitreoretinal **Procedures**

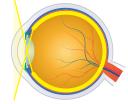
- + High index glass delivers widest field, distortion-free retinal views of any surgical lens
- + Small profile ring facilitates instrument manipulation and surgical procedures
- + Available in standard and patented self-stabilizing contact (SSV*) options for best ergonomics
- + Ideal for retinal detachments, PVR, giant retinal tears and works seamlessly in fluid and air filled eyes
- + Available in autoclave sterilizable design (see page 52)

130°/150° 0.43x FIELD OF VIEW

150°



IMAGE



Mini Quad® XL



VMQXLVIT (shown)

50

VMQXLVITSSV Self Stabilizing

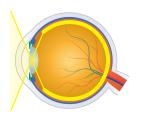
PRIMARY APPLICATION

Indirect Viewing and Treatment of **Peripheral Retinal Disorders**

- + Wide field of view of the entire retina including the ora serrata
- + Ideal for retinal detachments, giant retinal tears, PDR, including diabetic cases requiring endolaser to the periphery
- + Available in standard and self-stabilizing contact (SSV*) options for best ergonomics

112°/134° FIELD OF

0.39xIMAGE



"CRYSTAL CLEAR VISIBILITY & STABILITY



The Volk HRX and MiniQuad XL are my absolute go-to lenses for all my vitrectomy procedures. The wide-field view offered by these lenses allows for crystal clear visibility through all mediums such as fluid, air, PFCL, or silicon oil. Vitrectomy is all about The View and these contact lenses provide the best possible view to operate and to get optimum, distortion-free video footage for teaching and academics. Complex cases such as Retinal Detachments with PVR, Giant Retinal Tears, and Diabetic Tractional Detachments have become easier to manage as the Mini Quad XL and HRX lenses provide a seamless view of the extreme periphery to do a thorough clean-up and flatten the retina effectively. The self-stabilizing (SSV) component adds superb stability to this

lens and I don't need any ring or assistant to support it for me. The only time I shift to another lens is when I want to do fine work on the macula like epiretinal membrane peeling or ILM peeling, which is when I move to the Volk Flat SSV lens for that part of the procedure to get the best magnified stereoscopic view of the macula."

> - Manish Nagpal, MD FRCS FASRS Director of Retina Foundation, Ahmedabad, India

Mini Quad®



VMQVIT (shown)

VMQVITSSV Self Stabilizing

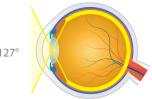
PRIMARY APPLICATION

Indirect Viewing and Treatment of Peripheral Retinal Disorders

- + Wide field of view of the entire retina including the
- + Smaller ring facilitates manipulation within the orbit
- + Ideal for retinal detachments. PDR and giant retinal
- + Available in standard and self-stabilizing contact (SSV[®]) options
- + Available in autoclave sterilizable design (see page 52)

106°/127° FIELD OF

0.39x



DynaView



VDVVIT

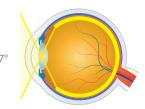
PRIMARY APPLICATION

Treatment of Retinopathy of Prematurity

- + Enhanced design provides wide field imaging out to the ora serrata
- + Minified housing facilitates extension of instruments
- + Reduced contact size ideal for pediatric examination and treatment such as bilateral retinal detachment, vitreous hemorrhage, ROP

95°/127° FIELD OF

0.39xIMAGE



Central Retinal



VCRLVIT

VCRLVITSSV Self Stabilizing

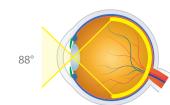
PRIMARY APPLICATION

High Magnification Indirect Viewing and Treatment of the Central Retina

- + High resolution, high magnification imaging to the equator
- + Ideal for epiretinal membranes, diabetic membranes, vitreo macular traction, macular holes, submacular surgeries, and other small detail procedures of the central retina
- + Available in standard and self-stabilizing contact (SSV[®]) options
- + Available in autoclave sterilizable design (see page 52)

73°/88° FIELD OF VIEW

0.71x IMAGE



Super Macula®



VSMACVIT

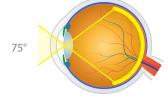
PRIMARY APPLICATION

Highest Magnification Indirect Viewing and Treatment of the **Central Retina**

- + High resolution, highest magnification imaging of the central retina
- + Provides excellent magnification for fine peeling of epiretinal membrane as well as ILM. Ideal for macular holes, vitreo macular traction, and submacula surgeries
- + 2x field of view compared to plano/concave direct image lenses

64°/77° FIELD OF

1.03x IMAGE



AUTOCLAVABLE INDIRECT VITRECTOMY LENSES

LENS	FIELD OF VIEW	IMAGE MAG	CONTACT DIAMETER	PRIMARY APPLICATION
HRX ACS®	130° / 150°	0.43x	11.38 mm / SSV 16.0 mm	Widest Field Views for Vitreoretinal Procedures
Mini Quad® ACS®	106° / 127°	0.48x	11.38 mm / SSV 16.0 mm	Peripheral Indirect Vitreoretinal Procedures
Central Retinal ACS®	73° / 88°	0.71x	11.38 mm / SSV 16.0 mm	High Magnification Indirect Vitreoretinal Procedures

HRX ACS®



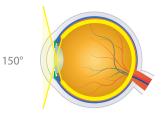
VHRXVITSSVACS VHRXVITACS Self Stabilizing (shown)

PRIMARY APPLICATION

Widest Field Views for **Vitreoretinal Procedures**

- + Superior high-index glass design ensures widest field views of any vitrectomy lens
- + Advanced aspheric design provides unmatched high resolution imaging
- + Ideal for retinal detachments, PDR and giant retinal tears
- + Steam sterilizable for reduced processing time

130°/150° FIELD OF



Mini Quad® ACS®



VMQVITSSVACS VMQVITACS Self Stabilizing (shown)

PRIMARY APPLICATION

Peripheral Indirect Vitreoretinal Procedures

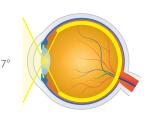
- + Steam sterilizable for reduced processing time
- + Smaller ring facilitates manipulation within the
- + Ideal for retinal detachments, PDR and giant retinal tears

106°/127° FIELD OF

0.48xIMAGE

0.43x

IMAGE

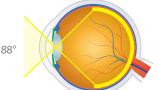


High Magnification Indirect Vitreoretinal Procedures

- + High resolution, high magnification imaging to the equator
- + Ideal for epiretinal membranes, diabetic membranes, vitreo macular traction, macular holes, submacular surgeries, and other small detail procedures of the central retina

73°/88°

0.71xIMAGE MAG



AUTOCLAVABLE SURGICAL BIO LENSES

Combine the optical excellence of Volk lenses with the comfort of reduced processing time in a surgical environment with the autoclavable lens line.

LENS	FIELD OF VIEW	IMAGE MAG	LASER SPOT MAG	WORKING DISTANCE	RING DIAMETER	PRIMARY APPLICATION
20D ACS®	46°/60°	3.13x	0.32x	50 mm	55.4 mm	Industry Standard Diagnostic Lens in an Autoclavable Format
28D ACS®	53° / 69°	2.27x	0.44x	33 mm	45.9 mm	Fundus Scanning Lens in an Autoclavable Format

20D ACS[®]



V20LCACSPV

PRIMARY APPLICATION

Industry Standard Diagnostic Lens in an Autoclavable Format

- + Steam sterilizable for use in a surgical environment
- + High quality Permaview™ glass withstands the rigors of repeated sterilization
- + Perfectly corrected for field curvature, astigmatism, and aberrations

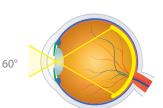
46°/60° FIELD OF VIEW

3.13x IMAGE

0.32x

LASER

SPOT MAG



28D ACS



V28LCACSPV

PRIMARY APPLICATION

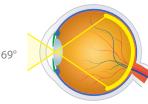
Fundus Scanning Lens in an **Autoclavable Format**

- + Steam sterilizable for use in a surgical environment
- + High quality Permaview™ glass withstands the rigors of repeated sterilization
- treatment including LIO (Laser Indirect Ophthalmoscope)

53°/69° FIELD OF

2.27x IMAGE

0.44xLASER SPOT MAG



Central Retinal ACS®

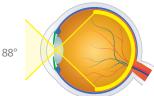


VCRLVITSSVACS VCRLVITACS Self Stabilizing (shown)

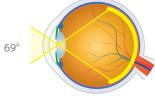
PRIMARY APPLICATION

+ Steam sterilizable for reduced processing time

FIELD OF VIEW



- + Excellent for small pupil diagnosis and



HIGH RESOLUTION (HR) DIRECT VITRECTOMY LENSES

Volk's High Resolution Direct Image lenses utilize a high-index glass to deliver superior image quality. This robust glass type is highly resistant to the rigors of continued steam sterilization and will not deteriorate or discolor.

Volk's No Stabilizing Ring (NSR) range of lenses allow suitable stability without the need for suturing or stabilizing rings. Two of the lenses in the group are also available in a no suture ring design. The profiles of these two lenses allows them to stabilize suitably without the need for an additional stabilizing ring.

LENS	FIELD OF VIEW	IMAGE MAG	CONTACT DIAMETER	PRIMARY APPLICATION
HR Direct 1x	30°	1.0x	11.2 mm	Direct Image Vitreoretinal Surgery of the Central Retina
HR Direct Bi-Concave	45° (Mid Field, Fluid) 30° (AFX, Air)	0.49x (Mid Field, Fluid) 1.0x (AFX, Air)	11.2 mm	Wide Field and AFX (Air Fluid Exchange) Direct Image Vitreoretinal Surgery
HR Direct High Mag	20°	1.35x	11.2 mm	High Magnification Direct Image Vitreoretinal Surgery of the Central Retina
HR Direct 20° Prism	40° (Offset 20°)	0.53x	11.2 mm	Off Axis Wide Field Direct Image Vitreoretinal Surgery



A case of sub ILM blood collection in which the ILM was peeled to expose the blood, followed by aspiration. The blood is partly whitish in color due to de-hemoglobinization which occurs over time. A Flat SSV Lens was used for this procedure.

- Image courtesy of Dr. Manish Nagpal, Ahmedabad, India

HR Direct 1x





1X (NSR)

VHRD1XACS
No Stabilizing Ring:
VHRD1XNSRACS

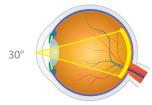
Stabilizing Ring:

PRIMARY APPLICATION

Direct Image Vitreoretinal Surgery of the Central Retina

- High-index glass delivers highest resolution direct image of the central retina
- + Highly suited for repeated steam sterilization with no material degradation
- + Standard design fits all major suture rings
- Unique optional no stabilizing ring (NSR) design available
- + Ideal for visualizing the posterior pole in ILM peeling

30° FIELD OF VIEW 1.0x



HR Direct Bi-Concave



VHRDBCACS

PRIMARY APPLICATION

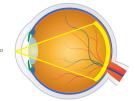
Wide Field and AFX (Air Fluid Exchange) Direct Image Vitreoretinal Surgery

Direct Image Vitreoretinal SurgeryHigh-index glass in a bi-concave design delivers

- highest resolution imaging for wide field and AFX procedures

 + Ideal for visualizing fundus through an air filled
- Highly suited for repeated steam sterilization with no material degradation
- + Standard design fits all major suture rings

45° (Mid Field) 0.49x (Mid Field) 30° (AFX) 1.0x (AFX) FIELD OF IMAGE



HR Direct High Mag



HIGH MAG



HIGH MAG (NSR)

Stabilizing Ring: VHRDHMACS No Stabilizing Ring: VHRDHMNSRACS

PRIMARY APPLICATION

High Magnification Direct Image Vitreoretinal Surgery of the Central Retina

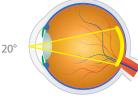
- High-index glass delivers highest resolution, high magnification of the central retina
- + Best suited for detailed work of the macula
- + Highly suited for repeated steam sterilization with no material degradation
- + Standard design fits all major suture rings
- Unique optional no stabilizing ring (NSR) design available

1.35x

IMAGE

20°

FIELD OF



HR Direct 20° Prism



VHRD20PACS

PRIMARY APPLICATION

Off Axis Wide Field Direct Image Vitreoretinal Surgery

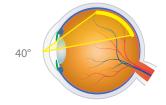
- + High-index glass delivers highest resolution off axis (20°) direct image retinal views
- Improved design delivers wider field (40°) off axis views
- Highly suited for repeated steam sterilization with no material degradation
- + Ideal for visualizing the posterior peripheral fundus through direct imaging

40° (Offset 20°)

FIELD OF

VIEW

O.53x



DIRECT VITRECTOMY **LENSES**

SELF STABILIZING (SSV)

Volk's Surgical Vitrectomy lenses were developed in collaboration with Dr. K.V Chalam and are available in 7 designs to meet all the visualization needs of a retina surgeon. The SSV® (self-stabilizing) contact element eliminates the need for sutures or rings and provides excellent stability. The compact lens design provides greater spatial access without interfering with instruments.

LENS	FIELD OF VIEW	IMAGE MAG	CONTACT DIAMETER	PRIMARY APPLICATION
Direct Image Flat SSV® (ACS®)	30°	0.92x	11.9 mm	Routine Direct Image Vitreoretinal Surgery of the Central Retina
Direct Image High Mag SSV® (ACS®)	28°	1.50x	11.9 mm	High Magnification Direct Image Vitreoretinal Surgery of the Central Retina
Direct Image Mid Field SSV® (ACS®)	40°	0.50x	8.0 mm	Wide field of view for pan retinal examination and laser treatments
Direct Image 15° Prism SSV® (ACS®)	30° (15° Offset)	0.90x	11.9 mm	Off Axis Direct Image Vitreoretinal Surgery
Direct Image 30° Prism SSV® (ACS®)	30° (30° Offset)	0.90x	10.0 mm	Off Axis Direct Image Vitreoretinal Surgery
Direct Image 45° Prism SSV® (ACS®)	30° (45° Offset)	0.90x	10.0 mm	Off Axis Direct Image Vitreoretinal Surgery
Direct Image AFX SSV® (ACS®) (Air Fluid Exchange - Air Filled Eye)	30°	0.82x	11.9 mm	Direct Image Vitreoretinal Surgery During Air Fluid Exchange Procedures

Direct Image Flat SSV® ACS®

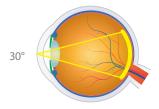


VFLATSSVACS

PRIMARY APPLICATION

Routine Direct Image Vitreoretinal Surgery of the Central Retina

- + Delivers high resolution direct image of the central
- + Steam sterilizable for reduced processing time
- + Most popular lens for high resolution macula work such as epiretinal membrane peeling and ILM peeling



0.92x

IMAGE

1.50x

IMAGE

0.50x

IMAGE

30°

FIELD OF

VIEW

28°

FIELD OF

Direct Image High Mag SSV® ACS®



Direct Image Mid

Field SSV® ACS®

VFHMSSVACS

PRIMARY APPLICATION

High Magnification Direct Image Vitreoretinal Surgery of the Central Retina

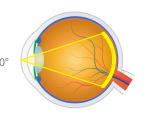
- + Delivers high resolution, high magnification direct image of the central retina
- + Steam sterilizable for reduced processing time
- + Ideal for detailed work of the macula with high magnification like macular holes, membrane peeling, tractional retinal detachments

PRIMARY APPLICATION

Wide Field Direct Image **Vitreoretinal Surgery**

- + Bi-concave design provides widest field available in a direct image lens
- + Can be used for air/gas exchange procedures
- + Steam sterilizable for reduced processing time

40° FIELD OF



Direct Image 15° Prism SSV® ACS®



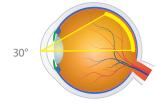
VPRISMSSVACS

PRIMARY APPLICATION Off Axis Direct Image

- + Design delivers 15° off axis retinal views
- + Steam sterilizable for reduced processing time
- + Ideal for direct visualization of the mid-peripheral

30° (15° Offset) FIELD OF VIEW

0.90xIMAGE



Direct Image 30° Prism SSV® ACS®



V30PRISMSSVACS

PRIMARY APPLICATION

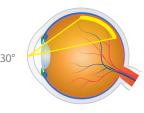
Vitreoretinal Surgery

Off Axis Direct Image **Vitreoretinal Surgery**

- + Design delivers 30° off axis retinal views
- + Steam sterilizable for reduced processing time
- + Ideal for direct visualization of the posterior peripheral fundus

30° (30° Offset) FIELD OF VIEW

0.90xIMAGE MAG



Direct Image 45° Prism SSV® ACS®



V45PRISMSSVACS

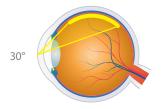
PRIMARY APPLICATION Off Axis Direct Image

Vitreoretinal Surgery

- + Design delivers 45° off axis retinal views
- + Steam sterilizable for reduced processing time
- + Ideal for direct visualization of the posterior peripheral fundus

30° (45° Offset) FIELD OF

0.90xIMAGE



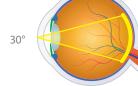
Direct Image AFX SSV® ACS®



PRIMARY APPLICATION

Direct Image Vitreoretinal Surgery During Air Fluid Exchange Procedures

- + Delivers high resolution central retinal imaging
- + Steam sterilizable for reduced processing time
- + Ideal for Air Fluid exchange procedures



VAFXSSVACS

0.82xFIELD OF IMAGE

30°

VMFSSVACS

SINGLE-USE **SURGICAL BIO LENSES**



Volk*1 Single-Use Surgical BIO lenses combine high-quality optics that Volk is known for and the convenience of pre-sterilization into a ready-to-use design. Volk's single-use surgical BIO lenses enable convenient pre- and post-operative examination and laser treatment.

These single-use lenses minimize the risk of infection and crosscontamination and reduce the cost and time associate with reprocessing.

Single-use lenses are pre-sterilized and individually-packaged in a Tyvek* pouch. Single-use lenses are sold in boxes of 10.

SINGLE-USE DIRECT VITRECTOMY **LENSES**

369

30°

30°

25°

33° (Offset 30°)



LENS

Volk®1 Single-Use Flat Standard

Volk®1 Single-Use Flat SSV®

Volk®1 Single-Use Magnifying

Volk®1 Single-Use Wide Field

Volk®1 Single-Use Bi-Concave

Volk®1 Single-Use 30° Prism

Available in six popular designs, these lenses deliver high resolution direct-image retinal views for all vitrectomy procedures. Designed in collaboration with Dr. K.V. Chalam, the SSV® (self-stabilizing) contact design element eliminates the need for sutures or rings. They are packaged individually in easy-to-open single-use Tyvek* pouches and are boxed in quantities of 10 lenses. These single-use lenses minimize the risk of infection and cross-contamination and reduce the cost and time associate with reprocessing.

PRIMARY

APPLICATION

Routine Direct Image Vitreoretinal Surgery of

the Central Retina

Routine Direct Image Vitreoretinal Surgery of

the Central Retina

High Magnification Direct Image Vitreoretinal

Surgery of the Central Retina

Wide Field Direct Image Vitreoretinal Surgery

Direct Image Vitreoretinal Surgery During

Air Fluid Exchange

Off Axis Direct Image Vitreoretinal Surgery

Volk®1 Single-Use 20D



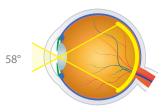
V20LCD10

PRIMARY APPLICATION

Industry Standard Diagnostic Lens in a Single-Use Format

- + Perfectly balanced magnification and field of view make this lens ideal for general diagnostic examination
- + Provides excellent views of the optic disc and macula
- + Anti-reflective coating greatly reduces distracting glare

58° FIELD OF



Volk®1 Single-Use 28D



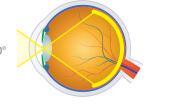
V28LCD10

PRIMARY APPLICATION

Fundus Scanning Lens in a Single-Use Format

- + Excellent for wide field examination and treatment through a small pupil
- + Compatible with LIO (Laser Indirect Ophthalmoscope)
- + Excellent lens for ROP rounds to reduce infection risk in high-risk babies







"SAFE & EFFICIENT

Since the reports of using reusable lenses during Retinopathy of Prematurity (ROP) screening rounds were linked to infection transmission and serious adverse outcomes in the NICU, I have explored different options to maintain sterile equipment for use during my ROP screening rounds. I feel that the quality and field-of-view of the Volk Single-Use 28D lens is equivalent to the standard and I currently use a separate Volk Single-Use 28D lens for each infant during ROP screening rounds to reduce the risk of infection transmission between infants being examined. I have found that using Volk Single-Use 28D lenses for ROP screening rounds is more efficient than following a protocol to disinfect and reuse standard lenses between infants being screened."

- S. Grace Prakalapakorn, MD, MPH

Pediatric Ophthalmologist, Durham, NC, USA

Volk®1 Single-Use Flat Standard



PRIMARY APPLICATION

IMAGE MAG

1.0x

0.92x

1.50x

0.50x

0.80x

10x

Routine Direct Image Vitreoretinal Surgery of the Central Retina

14.8 mm

16.0 mm

14.8 mm

14 8 mm

14 8 mm

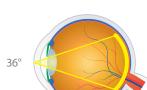
14.8 mm

- peeling
- + Silicone ring base





+ Ideal for visualizing the posterior pole in ILM



VFD10

Volk®1 Single-Use Flat Self Stabilizing **SSV**®



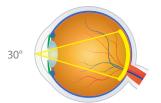
VFLATSSVD10

PRIMARY APPLICATION

Routine Direct Image Vitreoretinal Surgery of the Central Retina

- + Ideal for visualizing the posterior pole in ILM peeling
- + Patented SSV (self-stabilizing) feet for maximum stability and greater access for instrumentation when working closer to the center axis.

30° FIELD OF 0.92xIMAGE



SURGICAL

SURGICAL

SURGICAL ACCESSORIES

Volk®1 Single-Use Magnifying



VMD10

PRIMARY APPLICATION

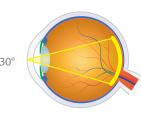
High Magnification Direct Image Vitreoretinal Surgery of the Central Retina

- + Ideal for detailed macular work due to high 1.50x magnification
- + Silicone ring base

30° FIELD OF

48°

FIELD OF



1.50x

IMAGE

0.50x

IMAGE

0.80x

IMAGE

1.0x

IMAGE

Volk® Single-Use Wide Field



PRIMARY APPLICATION

Wide Field Direct Image Vitreoretinal Surgery

- + Ideal for wide field imaging of the posterior pole
- + Silicone ring base

VWFD10

Volk®1 Single-Use Bi-Concave



VBCD10

PRIMARY APPLICATION

Direct Image Vitreoretinal Surgery During Air Fluid Exchange

- + Ideal for air-fluid exchange procedures
- + Silicone ring base

33° (Offset 30°)

FIELD OF

25°

FIELD OF VIEW

Volk®1 Single-Use 30° Prism

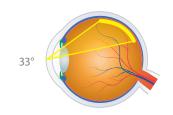


V30PD10

PRIMARY APPLICATION

Off Axis Direct Image **Vitreoretinal Surgery**

- + Ideal for direct visualization of the posterior peripheral fundus
- + Silicone ring base



Suture Ring

VSRS2

PRIMARY APPLICATION

Provides a Stable Lens Platform During **Vitreoretinal Surgery**

- + Premium surgical implant grade titanium for optimal durability and ease of sterilization
- + Larger radius provides enhanced functionality and safety during
- + Compatible with all Volk direct and indirect contact vitrectomy lenses (except SSV® styles)



PRIMARY APPLICATION

Infusion of Saline Solution Beneath the Lens During **Vitreoretinal Surgery**

- + Flushes blood and debris providing a clear view during surgery
- + Autoclave sterilizable for reduced processing time
- + Ideal for diabetic surgery



PRIMARY APPLICATION

Holding and Stabilization of Lenses During **Vitreoretinal Surgery**

- + Holds vitrectomy lenses stably to assist during vitreoretinal
- + Malleability allows user to bend the handle to suit their
- + Autoclave sterilizable for reduced processing time

DynaView Vit, Mini Quad Vit: VVITHAN-LG

Central Retinal Vit, HRX Vit, Super Macula Vit, Mini Quad XL Vit, Central Retinal ACS®, HRX ACS®, Mini Quad® ACS®: VVITHAN-MQXL

Sterilization Tray



Large Tray: **VSCB**

Small Tray: VSCA

PRIMARY APPLICATION

Sterilization of Ophthalmic Lenses

- + Autoclave safe and approved for use with ETO
- + Small tray (2.7" x 1.5" x 1.25") houses Volk surgical and smaller indirect and slit lamp lenses
- + Large tray (6" \times 2.5" \times 1.25") houses the largest Volk lenses and accessories including vitrectomy handles