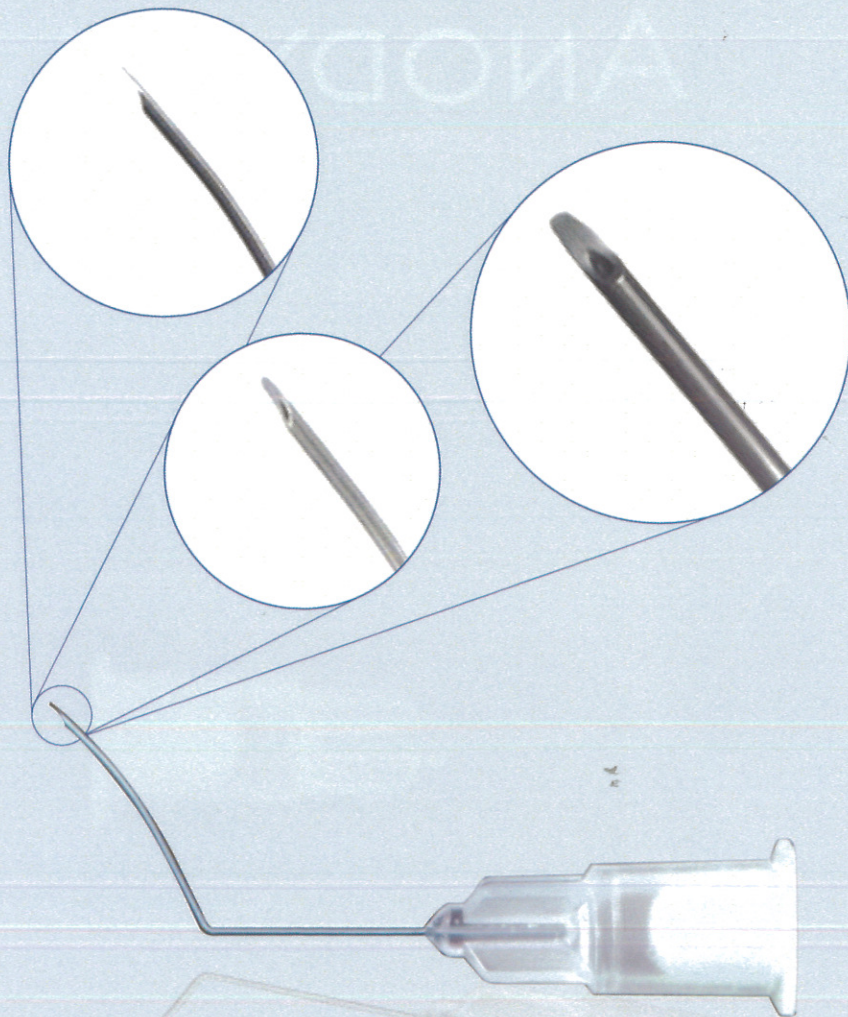
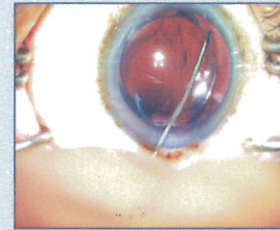


PALAY IOL EXCHANGE CANNULA

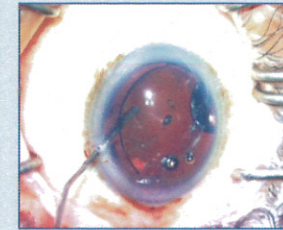


- 30 gauge cannula
- Thin, blunt tip greatly reduces risk of puncture or tear of the capsule.
- Allows for a more aggressive dissection of the capsule from the IOL.
- Ergonomically designed to mimic the anterior curve of the IOL.

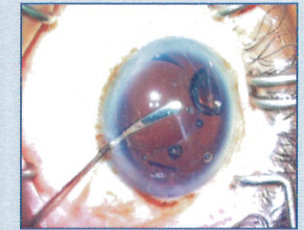
DR. PALAY'S IOL EXCHANGE TECHNIQUE



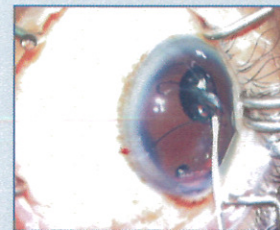
The thin tip of the Palay intraocular exchange cannula is used to dissect the anterior capsule from the intraocular lens. Viscoelastic is injected through the cannula to expand the capsular bag.



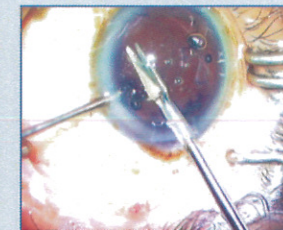
Viscoelastic is injected underneath the intraocular lens and the optic is partially prolapsed out of the capsular bag.



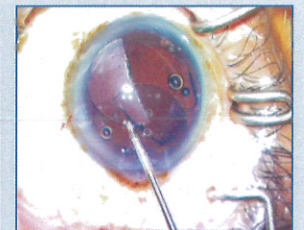
A flat spatula (Koch) is used to prolapse the entire optic out of the capsular bag.



The haptics are rotated out of the capsular bag with a hook (Lester hook).



The optic is grasped with forceps and cut in half with scissors.



Each half of the intraocular lens is removed with forceps.