

# Fitting Card

## SPHERICAL LENSES

Boston® XO<sub>2</sub>  
 Boston XO®  
 Boston EO®  
 Boston ES®

### Corneal Astigmatism Factors



Select Diameter and Choose Recommended Base Curve

#### Corneal Astigmatism

0.00 to .050 D  
 0.75 to 1.25 D  
 1.50 to 2.00 D  
 2.25 to 2.75 D  
 3.00 to 3.50 D

#### 9.2mm Diameter

0.50 D flatter  
 0.25 D flatter  
 on flat "K"  
 0.25 D steeper  
 0.50 D steeper

#### 9.6mm Diameter

0.75 D flatter  
 0.50 D flatter  
 0.25 D flatter  
 on flat "K"  
 0.25 D steeper

(Relative to flat "K")

### Minus Lens Center Thickness



Suggested Center Thickness

Lens Power	Plano	-1.00	-2.00	-3.00	-4.00	-5.00	-6.00	-7.00	-8.00
<b>Standard Design:</b>									
Boston® XO <sub>2</sub> & Boston XO®	0.18	0.17	0.16	0.15	0.14	0.13	0.13	0.13	0.13
Boston EO® & Boston ES®	0.18	0.17	0.16	0.15	0.14	0.13	0.12	0.11	0.10
<b>Thin Design:</b>									
Boston EO® & Boston ES®	0.15	0.14	0.13	0.12	0.10	0.10	0.10	0.10	0.10
<b>Ultra Thin Design:</b>									
Boston ES®	0.14	0.13	0.12	0.10	0.08	0.08	0.08	0.08	0.08

# Fitting Card

Boston EO<sup>®</sup> ENVISION<sup>®</sup>



**Select 9.6mm Initial Diameter**  
(Available in 9.3-10.3 mm)

**Determine  
Flat K  
(in Diopters)**

39.75	40.50	41.25	42.00	42.75	43.50	44.25	45.00	45.75	46.50	47.25	48.00	48.75	49.50
to	to	to	to	to	to	to	to	to	to	to	to	to	and
40.25	41.00	41.75	42.50	43.25	44.00	44.75	45.50	46.25	47.00	47.75	48.50	49.25	above



**Recommended Base Curve**  
(Available in 8.3-7.0 mm)

**Corneal  
Astigmatism  
≤ 1.50D**

**Corneal  
Astigmatism  
> 1.50D**

8.3	8.2	8.1	8.0	7.9	7.8	7.7	7.6	7.5	7.4	7.3	7.2	7.1
8.2	8.1	8.0	7.9	7.8	7.7	7.6	7.5	7.4	7.3	7.2	7.1	7.0

Trial Fitting Recommended

## Minus Lens Center Thickness



**Suggested Center Thickness**

**Lens Power**

**Thickness**

Plano	-1.00	-2.00	-3.00	-4.00	-5.00	-6.00	-7.00	-8.00
0.18	0.17	0.16	0.15	0.14	0.13	0.12	0.11	0.10

Important: This lens has a clinically precise bisppheric back surface which already includes proper peripheral flattening to optimize the corneal fit.

**NO MODIFICATION SHOULD BE MADE TO THE BACK SURFACE, AS IT WOULD COMPROMISE CLINICAL PERFORMANCE.**

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RPL0244