



Single Vision

Frequently Asked Questions:

- **Why Eye-Kraft?**
 - Eye-Kraft has invested in the state of the art equipment and leading lens designers to provide the latest in lens technology. This, coupled with our commitment to outstanding service and quality makes the choice is clear.
- **Why Digital?**
 - With traditional lenses compromises have to be made and population averages have to be used. With Digital production the lenses can be designed after we know the specifics of the Rx, PD, fitting height, frame shape, etc.
 - All patients will see improved vision, however, patients with higher powers, higher cyls, or oblique axis (off the 90 or 180 axis) will see the most improvement in vision over traditional lenses
 - Digital production can also be made to the .01 Diopter, increasing the accuracy
- **Why is backside production of Digital lenses better?**
 - On traditional lenses the process begins with a molded, semi-finished lens where the front side of the lens has the progressive design and the rest of the Rx is ground on the back side
 - With Digital lenses the entire prescription and progressive design is ground on the backside leaving the front spherical. This brings the Rx closer to the eyes and allows the design to be optimized for the individual prescription
 - All of Eye-Kraft digital production is back-side. This includes all the ZEISS and DLS lenses
- **How should DLS Single Vision lenses be fit?**
 - Single Vision Digital lenses should be fit just like a progressive *including* the fitting height to the center of the pupil, monocular distance PD
- **Why is a fitting height required on a DLS Single Vision Lens?**
 - Because of the level of customization, compensating for the prescription requires the precision of knowing where the pupil sits in the design. This maximizes your patients optical experience.
- **Why is the Rx on the Optimized lens different than what I ordered?**
 - When examining a patient through the Phoroptor, the Patient's eyes are very close to the lens and they are looking directly through the center of the lens
 - In real life the lenses are in a frame, set farther from the eye, pantoscopic tilt is induced, and the patient is looking through the whole lens.
 - The adjustment (compensation) that is made to the prescription is to replicate the same great vision the patient experienced in the examining room.
 - A separate sheet will be provided with each pair of lenses showing the prescribed Rx and the Compensated Rx