Ocular Posner Diagnostic and Surgical Gonioprism

<table>
<thead>
<tr>
<th>Product Code/ Handle Style</th>
<th>Image Mag</th>
<th>Contact OD</th>
<th>Lens Height</th>
<th>Handle Length</th>
<th>Static Gonio FOV</th>
</tr>
</thead>
<tbody>
<tr>
<td>OPDSG Round</td>
<td>.94x</td>
<td>9mm</td>
<td>12.8mm</td>
<td>78.8mm</td>
<td>80°</td>
</tr>
<tr>
<td>OPDSG-2 Hexagonal</td>
<td>.94x</td>
<td>9mm</td>
<td>12.8mm</td>
<td>72.2mm</td>
<td>80°</td>
</tr>
<tr>
<td>OPDSG-3 Ergonomic (shown)</td>
<td>.94x</td>
<td>9mm</td>
<td>12.8mm</td>
<td>92.8mm</td>
<td>80°</td>
</tr>
</tbody>
</table>

Designed with: Ronald E. Posner, M.D., Mentor, OH
Reference: Ophthalmology Times Vol. 4, No. 6, p. 8, June 1979
Optometric Management Vol. 35, No. 6, June 2000

Design

- The Posner Diagnostic and Surgical Gonioprism is a four mirror goni lens for static and dynamic gonioscopy which requires no gonioscopic solution for optical interface.
- The lens consists of a highly polished truncated pyramid with a plano anterior viewing surface over four mirrors inclined at 64°.
- The mirrored surfaces are silvered and double coated with a proprietary coating to prevent peeling and damage under normal daily use.
- The posterior surface of the lens has a base curve of 41.5D and a diameter of 9mm.
- The lens is easily positioned and maneuvered by an aluminum handle set at 35°.

Technique

- Gonioscopy can be accomplished using one of two methods.
- Observation is begun in the inferior angle using the superior mirror.
- Next, lower the slit lamp beam to the inferior mirror to check the superior angle.
- Finally, with the beam horizontal and tilted, observe the angle near the 180° meridian.
- Alternately, place the gonioscope on the eye with the mirrors arranged obliquely (diamond position). In this orientation, nearly all of the angle can be observed.
- With the slit lamp beam vertical, simply move the slit lamp from right to left across the two superior mirrors.
- Next, lower the beam and move the slit beam from left to right across the two inferior mirrors.
- Complete observation of the angle can be quickly achieved.
- Very minimal rotation of the lens (11° in either direction) is needed to view the small sections of angle which were missed during the initial sweep.
- Because of the light weight and small size of this goni lens, it is easily applied to the eyes of small children and individuals with narrow palpebral fissures.
- Deliberate compression with the gonioprism (dynamic gonioscopy) gives the observer a certain amount of control over the iris configuration.
- In an eye with a relatively narrow angle, deeper structures can be visualized by flattening the periphery of the iris gonioscopically.
- It is also used to distinguish between true peripheral anterior synechiae and simple apposition of the iris to the cornea.
- The center axis may be used to view the posterior pole and disc.
- Evaluation of the anterior chamber angle may be made prior to and immediately following surgery for narrow angle glaucoma.
- The goni lens must be sterilized for surgical use.
- The goni lens is applied to the cornea with balanced salt solution or a visco-elastic solution as an optical interface.
- The slit beam of the microscope is used for illumination and the angle is observed.
Cleaning

Rinse: Immediately upon removal from patient's eye, thoroughly rinse in cool or tepid water.
Wash: Place a few drops of mild soap on a moistened cotton ball. Gently clean with a circular motion.
Rinse: Thoroughly rinse in cool or tepid water, then dry carefully with a non-linting tissue.
Then: Proceed with either disinfection or sterilization instructions.

Disinfection

Soak In:  
<table>
<thead>
<tr>
<th>GLUTARALDEHYDE</th>
<th>OR</th>
<th>BLEACH</th>
</tr>
</thead>
<tbody>
<tr>
<td>2% or 3.4% aqueous solution</td>
<td>Temperature per manufacturer instructions</td>
<td>10% solution mixed at:</td>
</tr>
<tr>
<td>Minimum exposure time = 20 minutes</td>
<td></td>
<td>1 part bleach to 9 parts water</td>
</tr>
</tbody>
</table>

Caution To avoid damage to the lens, do not exceed recommended exposure time.

Then:  
Rinse lens thoroughly to remove disinfection solution.
3 cycles of 1 minute, with cool or tepid water is recommended.
Dry carefully and place in a dry storage case.

NOTE This lens is known to be compatible with: Ascepti-Wipe, Cavi-cide, Cidex, Cidex OPA, DisCide Wipe, Enviro-cide, and Opti-Cide

Caution If used on an ulcerated cornea, lens must be STERILIZED before next procedure.

Sterilization

<table>
<thead>
<tr>
<th>AUTOCLAVE</th>
<th>STERRAD</th>
<th>STERIS SYSTEM 1</th>
<th>ETO</th>
<th>ETO Parameters</th>
</tr>
</thead>
<tbody>
<tr>
<td>NO</td>
<td>NO</td>
<td>YES</td>
<td>YES</td>
<td>Minimum Time</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Per manufacturer instructions</td>
<td>See Right</td>
<td>Temperature</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Aeration Time</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>1 hour</td>
<td>130°F (54°C)</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>12 hours</td>
<td></td>
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</tbody>
</table>

WARNING Never Steam Autoclave or Boil listed lenses.
Never soak in Alcohol, Acetone or Other Solvents.

For information on compatibility with alternative product care methods, contact Customer Service.