



Frequently Asked Questions:

- **Why Eye-Kraft?**
 - Eye-Kraft has invested in the state of the art equipment and has partnered with leading lens designers to provide latest in lens technology and the best quality possible to our customers
- **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 lenses be fit?**
 - The same way traditional lenses are. Monocular distance PD, Fitting Height to the center of the pupil
 - Single Vision Digital lenses should be fit just like a progressive including the fitting height to the center of the pupil, monocular distance PD
- **What fitting height is chosen for the fixed designs?**
 - Order the lenses the normal way you do and the lab will pick the correct fixed fitting height (i.e. if 18 is the fitting height, the 17mm fixed option would be used). If the lens is a variable height, the height would be exactly what was ordered.
- **Why is variable fitting height better than the fixed?**
 - The lens is able to be optimized for the perfect amount of distance, intermediate, and near (i.e. 18mm fitting height in a fixed lens would use a 17mm fixed option which would not give the patient as much of the intermediate as is possible)
- **Why is the Rx on the Optimized lens different than what I ordered?**
 - When examining a patient through the Phoropter, 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
- **Which lenses should I use?**
 - DLS Advanced for the customer looking for an Optimized and Variable Digital Lens
 - Excellent converter from other premium freeform/digital PALs
 - DLS Pro for the customer looking for an Optimized but fixed Digital lens and is a little more price conscious
 - Great converter from premium conventional and freeform PALs
 - DLS Lens for the customer that is price conscious but wants a good value
 - Easy upgrade from conventional Progressives