

## ***PerfectCapsule® Detailed Surgical Procedure***

- **Create a short and steep (<1.5mm) 2.8-3.0 mm clear cornea incision at the limbus.**
- Capsulorrhexis round and 4.5mm (<5mm).
- Cortical cleaving hydrodissection and, where possible, twice rotate lens 360°; then perform phacoemulsification as usual and perform meticulous cortical clean up.
- Fill AC with Healon or Provisc (medium chain). **No viscoelastic in capsular bag.**
- Fold PerfectCapsule, using two McPherson style forceps
  - Grasp PerfectCapsule with McPherson forceps from distal end; then use other McPherson to fold and hold the device.
- Insert Perfect Capsule sideways into AC as close to anterior capsule as possible, then turn upright and, while using a cannula to hold it down, release the McPherson-style forceps to open the device.
- Place another instrument on flange of PerfectCapsule to hold the device in place when pulling the McPherson-style forceps out through the incision.
- Use minimal additional viscoelastic in AC to tamponade PerfectCapsule onto the anterior capsule.
- Aggressively irrigate BSS through irrigation tubing of the PerfectCapsule to remove any viscoelastic between device and anterior capsule.
- With a cannula (thru incision or paracentesis) press the PerfectCapsule against the capsule, center it over the capsulorrhexis using a forward/backward/sideways motion, **ensure the rhexis is entirely within the suction ring of the device.**
- Apply vacuum by pulling the plunger of the VacLok syringe - wait for seal to occur: **note bubbles moving in the suction ring and up the vacuum tube** - lock plunger into open position .....beware of attracting iris.
- **Verify capsule seal by gentle manipulation...rhexis should move with the device...and its shape should remain unchanged**
- **Avoid undue manipulation as this may dislodge the device.**
- Check seal by inflating the capsule with colored BSS through the irrigation tubing - **note fluid extending 360 ° to the equator of the capsular bag.**
- Inject colored irrigating solution into capsular bag through the irrigation tubing, using a 20cc luer lock syringe. **Maintain a steady flow/pressure throughout the irrigation cycle to maintain bag inflation.**
- Continuously monitor for loss of vacuum/leakage during irrigation cycle (in the unlikely event that this happens stop irrigating and flush with BSS).
- Flush the capsular bag with BSS through the irrigation tubing
- Release vacuum.
- Inflate capsular bag with viscoelastic injected through the outflow channel of the device.
- **Gently dislodge the PerfectCapsule;** if necessary, push the tip of a cannula against the proximal end of the suction ring.
- Pull the PerfectCapsule out through the incision, taking care the device is above the iris.
- Implant the IOL as usual.
- Administer antibiotics and steroids as appropriate.