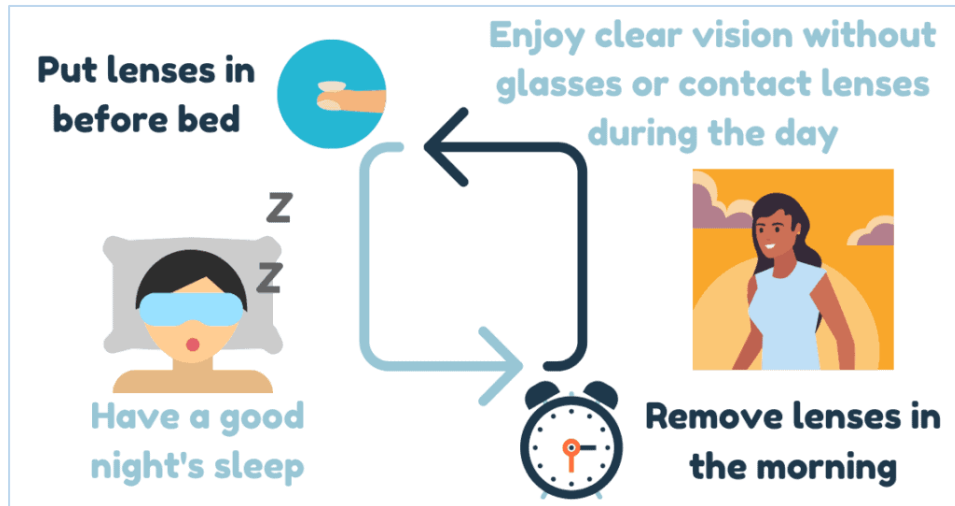


## Overnight Vision Correction



*See you in the morning!*

Overnight Vision Correction is a non-surgical program designed to correct vision. Custom-made retainers are worn while sleeping to gradually adjust the shape of the cornea. This correction addresses refractive errors and ensures sharp vision throughout the day, eliminating the need for surgery, glasses, or daily wear contact lenses. Imagine these retainers as like those worn overnight to align teeth.

Overnight Vision Correction is a safe, effective, and reversible method that helps slow the progression of myopia, providing an alternative to refractive surgery.

Since 2004, advancements in technology have allowed for precise corneal scanning and topographic analysis, enabling the creation of customized corneal moulding lenses. These lenses achieve a controlled and accurate reduction in the eye's optical imperfections. Ongoing developments in lens materials ensure the safety of overnight contact lens wear. Continuous improvements in retainer design allow for individualized customization, expanding the range of correctable prescriptions. It's important to note that while the cornea is mouldable, it returns to its original shape if lens wear is discontinued. Hence, the lenses are worn every night to maintain the achieved correction.



## Is OVC for you?

Many individuals opt for Overnight Vision Correction (OVC) primarily to enjoy clear vision throughout the day without the inconvenience of glasses or contact lenses. Optometrists often suggest OVC as the primary component of a myopia control program due to its efficacy. These lenses involve a higher degree of customization. OVC not only enhances confidence and balance but also provides the freedom to engage in sports and leisure activities without concerns about breaking or losing glasses or contact lenses.

## Why would You Benefit from Overnight Vision Correction?

- Children (improved confidence, glasses and contact lens free all day).
- Sports (water and ball sports: increased field of view, no glasses).
- Dusty or dirty work environments (Mining / Sugar / Cattle).
- People who find spectacles and conventional contact lenses inconvenient.
- Those who need to have a certain degree of uncorrected vision to satisfy their employers, or a licensing body (police, marine pilots).

## Is Overnight Vision Correction Suitable for Everyone?

Before determining suitability for Overnight Vision Correction (OVC), a thorough assessment is necessary, considering the collective complexity of factors such as corneal shape, prescription, accommodative ability, binocular vision function, prescription stability, and patient expectations. OVC can correct most prescriptions ranging between +5.00 to -8.00 with or without regular astigmatism up to -3.00. To ascertain individual suitability, our orthokeratologist conducts a comprehensive eye examination. It's important to note that eye diseases, recurrent allergies, immune deficiencies, and more complex issues may influence your suitability for OVC.

## What to Expect at your Initial Assessment?

After scheduling your appointment, you'll receive an email containing a link to our Welcome to the Office Questionnaire. It's important to complete this online a couple of days prior to your appointment. Remember to cease wearing any current contact lenses for 1 week prior to your appointment. Wear your current glasses and bring your contact lenses and if available their boxes. During the initial assessment, we'll determine your current refractive error, measure your current glasses prescription, and record your current contact lens prescription to evaluate for any progression.

The assessment includes a comprehensive eye examination with pre-assessments conducted by our technicians. This involves 200-degree laser scans of your retinas, cross-sectional mapping of your maculae, autorefractometry, corneal topography, retinal true-colour photography, and intra-ocular pressure assessment. Subsequently, our optometrist will perform a refraction, pre-treatment anterior segment assessment (including cornea and tear film evaluation, intra-ocular lens assessment, and conjunctival examination, and upper eyelid eversion), internal eye health assessment, and binocular vision assessment.

With all these details, our optometrist will discuss your ocular health, covering important aspects such as Glaucoma, Cataracts, Pterygia, Presbyopia, and Macular Degeneration. Additionally, they will assess your suitability for OVC and/or explore alternative or supplementary treatment options.

### What comes next?

Most individuals receiving this handout have been informed that they are suitable candidates for Overnight Vision Correction (OVC) or Myopia Control. A second appointment is necessary to acquire four repeatable, high-quality, and well-centred corneal topography maps for each eye. These scans may take numerous attempts to acquire: they are analysed for repeatability with the scan closest to the average of the four selected as our baseline topography. Baseline topography maps are the key to precise vision correction.

Supplementary maps are obtained in the four primary directions of gaze to create a composite map. These composite maps play a crucial role in all future decisions regarding the custom retainer design both now and for future changes. The precision of these maps, achieved through a computerised custom design process, is essential for ensuring clear vision with OVC.

The mapping process typically takes 10-30 minutes, depending on factors such as how well you can keep your eyes fixed in one place, how wide you can keep them open, and the stability of your tear film. Lubrication drops may be necessary during this process.

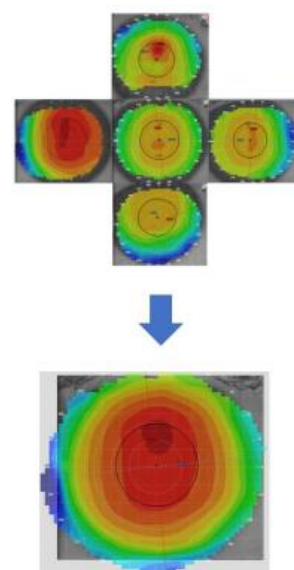
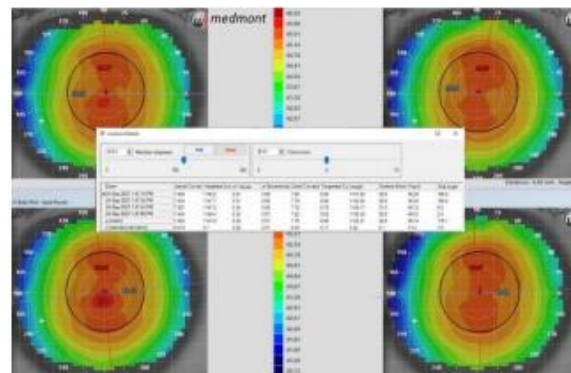
If appropriate, a closest match corneal retainer lens from our trial lens stock of over 100 retainers may be placed on your eye to provide you awareness of the comfort of the lens on eye. A refraction is performed with this retainer lens insitu to identify any residual refractive error. Leaving these lenses on your eyes for 5-10 minutes also allows you to appreciate the speed in which they can improve your vision.

After this experience, you will have the opportunity to commence the OVC program. Once you confirm your readiness to proceed with OVC, our optometrist can design your retainers. The initial payment for the OVC program is required before your first retainer set is ordered. Monthly ongoing payments keep you in the plan with all solution, review consultations, standard consultations and regular lens replacements included in the program. (Visual fields and vision therapy are not included).

For those considering myopia control with OVC, a referral will be provided for obtaining axial length measurements with our friendly local ophthalmologist. Myopia control measurements are repeated at 4 to 6-month intervals to monitor for any progression of the myopia.

### What is the “Overnight Vision Correction Program”?

Overnight lens wear entails a small level of risk, primarily the risk of infection, which, if left untreated, can potentially result in vision loss. However, extensive literature reviews indicate that Overnight Vision Correction (OVC) is considered safe when strict protocols, including proper hygiene practices, diligent lens care cleaning methods, regular eye health maintenance, and annual lens replacement, are adhered to. To minimise the risk of vision loss, we emphasise regular eye health reviews, ensuring a consistent supply of the correct lens care products and ocular lubricants, and providing at least annual retainer replacement. This proactive approach allows us to address any minor issues promptly before they escalate into major infections or inflammations.



Over time your retainer can warp due to repeated crimping on removal, temperature changes, deposits and lens cleaning/rubbing. Minor changes in the shape of the retainer affect both your vision and the corneal shape. Wearing a retainer that has warped creates an irregular corneal surface. Simply replacing the old lens with a new one doesn't work. The new lens drops into the form created by the warped lens and vision doesn't improve. A 6-10-week washout period is required to allow your cornea to return to its original shape. During this time, your prescription changes every day for the first 2-3 weeks as your corneal shape returns to normal. We need to see you every second to third day to adjust the temporary daily wear contact lenses to allow you to maintain clear vision through this time. This is both costly and time consuming and is not included in the OVC Program. Annual retainer replacement prevents this from becoming an issue.

Our OVC Program represents a long-term commitment between Buck & Todd Optometrists and you. Designed to deliver the best possible eye care while maintaining excellent visual acuity through Overnight Vision Correction year after year, the program costs vary depending on the complexity of the prescription being corrected and eye conditions such as allergies. Individual factors such as prescription, corneal shape, desired outcomes, dry eye, frequent allergy, systemic medications and vision correction versus vision correction with myopia control can contribute to different plans. Program costs are personalised, and the frequency of required visits may differ from one individual to another.

By participating in the program, we commit to providing you with optimal care, and in turn, commit you to maintaining that care. This collaborative effort ensures the ongoing success and safety of your Overnight Vision Correction experience. If our doors are open, they are open to you for OVC review whether that be scheduled, or you have a concern or problem such as a sore eye or blurry vision.

### Our OVC care program includes:

- Initial retainers and annual retainer replacement.
- Management any corneal infections, inflammation, conjunctivitis, or other anterior eye pathology.
- Eye checks every 4 months for the first year and 6-monthly thereafter. (Myopia Control 4-monthly ongoing).
- Annual comprehensive eye health evaluation. (Evaluations which involve ocular health maintenance outside anterior OVC ocular care will be bulk billed to Medicare).
- 3-month warranty for each set of retainers. Warranty does not cover loss, but it does cover breakage and replacement due to parameter changes. All lenses replaced under warrant including broken lenses must be returned to the practice.
- Any extra visits required relating to lens wear issues. (Sore eyes, blurred vision).
- Training for insertion and removal: Do's and don'ts of lens handling, lens care, solutions, and hygiene.
- All consultations required to ensure effectiveness of the prescribed retainers.

**NOTE:** In the first-year reviews are usually scheduled:

- After first night early in the morning. (1<sup>st</sup> appointment of the da.
- After the second and third nights in the morning (1st appointment of the day).
- At 1 and 2 weeks in the late afternoon.
- At 1 month and 3 months early to mid-morning.
- Every 4 months up to the annual review early to mid-morning.

Subsequent years we schedule 6 monthly reviews.

- Any disposable contact lenses required to allow you to transition through the first week of wear as the retainer effect builds to full refractive correction.
- Lens sucker and annual lens sucker replacement.
-

- All contact lens care and maintenance solutions required to enable you to maintain your lenses from each appointment to the next. These are provided in packs and available for collection at our front counter every 3 months. The packs are designed to last the 3 months if used properly. If you finish a product such as the drops used in the lens during insertion, usually due to use for dry eye issues at other times of the day, before you are due for your next 3-month supply pack, you will be responsible for the cost.

### Your program does not include:

- Any glasses required. Glasses may be required for reading due to binocular co-ordination issues or presbyopia or for correction of small residual degrees of astigmatism which due to your corneal topography we are unable to eliminate. Some wearers also choose to leave their retainers out for 2-3 days at a time for things such as camping or nights out. This results in a decline in the amount of vision correction which a low powered set of glasses can correct.
- Medications/drops for which a prescription is required or those that can only be provided by a pharmacist.
- Vision Therapy.
- 4 to 6 monthly Axial length measurements. (Myopia Control Only).
- Dry eye maintenance or other procedures not associated with OVC.
- Spare retainers. (Spare retainers can be purchased within the 3-month warranty window at a discount of 15% otherwise full retail cost applies).

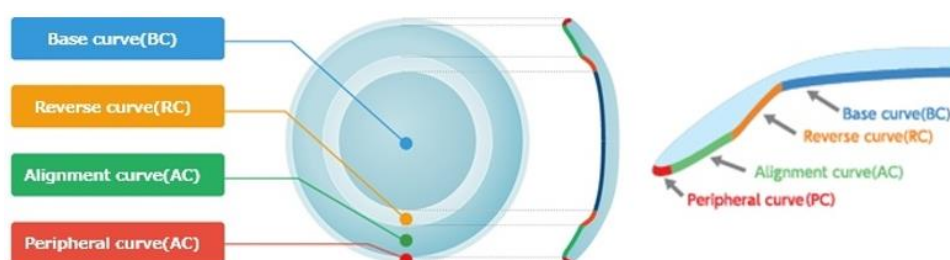
### Your Guide to how the process will unfold:

#### Day 1. Hygiene, Insertion, Removal, Lens Handling, Lens Care.

We have ordered your lenses and after 2 weeks in manufacturer and transport they are in practice and ready for you for wear. But first there are a few points of order to be discussed.



- **Hygiene.** Contamination of contact lenses can result from a range of factors, including dirty hands, unclean cases, using the wrong solution, putting lenses in your mouth, and the reuse of solution. Failure to adhere to proper hygiene practices can pose a serious risk to your vision. We will guide you through the simple but necessary hygiene procedures that should be followed **every time** you handle your lenses. This guidance is crucial in maintaining the cleanliness and safety of your contact lenses, helping to preserve your vision and eye health.
- **Insertion.** These retainers differ from standard contact lenses due to the reverse curve they possess, which generates the necessary suction forces for corneal reshaping. To ensure their effectiveness, it's crucial to avoid bubbles or deposits in the reverse curve. Incorrect placement can cause discomfort, necessitating removal and re-insertion. Your optometrist will provide guidance on the appropriate solution for lens insertion and the



correct insertion procedure. Following these instructions is vital for the comfort and success of the reshaping process.

- **Removal.** If you cannot remove the lenses, you cannot proceed with this treatment. Various techniques exist for lens removal, but not all techniques work for everybody. We recommended you try them all to determine which ones work best for you. A suction device for removal over the long term causes less lens warping and maintains better vision. These need to be drained and air dried after each use as they can become a source of contamination. We replace these suckers every time we replace your retainers. Keep in mind that these devices can be lost or wear out. Therefore, knowing alternative techniques is essential.



**Do not go to the emergency department seeking lens removal.**

- **Lens Care.** Initially, to keep things simple, we supply you with sufficient care solutions to cover the first few days. After 3-nights we provide you all the solutions required to care for your lenses for 3 months. We will regularly revisit the care and maintenance procedures, ensuring you have the necessary tools to maintain your retainers at 100% efficiency. This ongoing support is crucial for the success and effectiveness of the Overnight Vision Correction program.

**Day 2. You have slept in the retainers overnight for the first time.**

Congratulations, you're making excellent progress on your journey. If possible, indulge in some extra sleep as your appointment isn't until 8:15 AM or 8:30 AM. We aim to examine you shortly after waking to get the most accurate results. Upon waking remove your lenses as you were shown on day 1. Take a moment to appreciate the remarkable improvement in your vision without glasses – a genuine WOW moment. However, it's essential to note that the first night's progress typically only takes us halfway toward our change target and may not last the entire day.



During your appointment, we'll meticulously assess the response to the OVC, including topography, unaided vision, slit lamp evaluation with fluorescein staining (yes, more of that now familiar yellow dye). Additionally, we'll determine a best spherical refraction and, if necessary, you'll be provided with soft 1-day disposable contact lenses for clear vision throughout the day. Remember to remove these lenses an hour before the retainers go back in. We will provide instructions if needed.

**Bring your retainers to every appointment.** While a lot of the time we won't need to review them, it's often helpful for any troubleshooting to have them on hand. And a friendly reminder – **Don't ever leave them in the car.**

**Day 3. Just repeat of day 2 but with 75- 100% effect.**

Now that your vision should be approximately 75% of the way toward our target, things should be considerably improved. The positive effects are likely to last for a significant portion of the day.

It's important to note that often, a 2 to 3-nights of wear response is necessary to discern a pattern of change. This duration allows us to ensure that the original corneal lens retainer is effectively creating the desired change in the correct position. Your continued presence and collaboration during this phase are integral to the success of the process.

### Day 3. Another Groundhog Day experience but now the retainers should be giving 90- 100% effect.

If your topography maps and vision changes are showing the appropriate response to the first few nights of wear, solutions adequate for the first 3 months of wear are provided and the cleaning and maintenance procedure re-explained. Appointments are made for review in the afternoon at the end of 7 nights wear and 14 nights wear.

#### If the plan goes astray?

The execution of even the most well-thought-out plans can encounter hiccups. Should any issues arise – whether it be the retainers riding high, low, nasal, temporal, inadequate treatment zones, epithelial loss from debridement, allergic reactions, or eye discomfort – our Optometrist will take prompt and appropriate action. Occasionally, achieving the desired results may take a bit longer, and we may use the phrase "sitting on our hands for a few more days" to emphasize the importance of ensuring consistency before making any adjustments. We will want to observe your insertion technique and evaluate the retainers on eye. Retainer parameter changes are never taken spontaneously, evaluation for consistency is the key. A short washout period may be required if the retainers have not been locating as predicted.

In certain instances, modifications may involve a new lens, changes in solutions, a review of handling procedures, or even a pharmacy prescription. The introduction of a new lens may lead to a washout period, preventing it from settling into the patterns of its predecessor too quickly. Throughout this transitional phase, if needed, we provide support on your journey back to your prescription glasses, using disposable soft contact lenses.

Visual changes occur rapidly in the initial weeks, prompting frequent examinations and, if necessary, lens adjustments. Subsequently, a stabilization period unfolds at a slower pace over the following weeks. The frequency of initial reviews within the program varies depending on the degree of visual error.

### Day 7 to 14 ( 1-2 weeks of wear).

During these appointments, our focus is on evaluating the retained visual acuity in the afternoon. We aim to understand whether you maintain clear vision throughout the day or if the positive effects are diminishing. To accurately gauge this, these assessments are scheduled later in the day, typically around 4:00pm.

If, during both visits, the sustained effect is not as expected, it may prompt us to consider ordering new retainers with a bit more "push." This adjustment falls within the parameter change warranty system, allowing us to fine-tune the treatment to ensure optimal and consistent results.

### 1 Month.

Following the initial month, maintaining excellent vision and comfort is typically the norm. During this review, our primary focus is on checking the lenses for deposits and assessing your eyes for any signs of allergies to solutions or adverse reactions to lens wear.

As you progress, you might find yourself tempted to leave your retainers out occasionally. Skipping a night may still allow you to maintain most of the day with clear vision, but by evening, you may notice a decline. If you decide to skip two nights, your vision won't return to its original state, nor will it be fully corrected; it's likely at approximately 75% of the full correction. **Your glasses from before the OVC won't be of assistance in such situations.** For these instances, you might want to consider prescription glasses or daily disposable lenses, which can provide clear vision during the occasional 2-3-night breaks from wearing your retainers. These items are not included in the program; they can be purchased to address the anticipated vision degradation that may occur when the lenses are not worn.

### 3 Months – 6 Months – 9 Months – 12 Months.

After the initial month, scheduled reviews are necessary at months 3, 6, 9, and 12. At each consultation, fresh solutions are exclusively provided. At the 12-month review, new retainers are ordered. These replacements are seamlessly swapped for your old lenses. You'll wear them for 1-2 weeks, and a follow-up appointment at month 13 is essential to ensure the new lenses align with the intended outcomes.

Moving forward, subsequent appointments are booked at month 18 and continue a 6-month cycle thereafter. Each anniversary marks the initiation of a process where new lenses are ordered and exchanged. The cost of annual replacements is comprehensively covered within your monthly plan fees, providing you with consistent and hassle-free access to the latest and most effective vision correction technology.

### Ongoing solutions.

The recommended solution for eye care depends on your eye health. We typically use Biotrue™ for retainers, but if you have signs of allergy or conditions like hay-fever or eczema, a hydrogen-peroxide system may be suggested. This system neutralizes to water, reducing the chance of allergic reactions. Unfortunately hypo-allergenic preservative free peroxide systems like AO Sept™, Soleko™ and Oxysept™ involve higher costs.

Your package of solutions is available at our reception counter every three months. This is given to you either at review appointments or you are welcome to come in the practice and collect your package.

Solution bundles are listed on the next page. These vary according to the expected usage for each 3-month period.

### Other essential information / FAQs.

#### Health Fund Rebates.

Health funds may cover a portion of the cost of the retainers, our OVC program price starts at \$850.00 per pair. This amount is eligible for a rebate, depending on your Health Fund and policy level. You can obtain an invoice or receipt from us to submit to your health fund for reimbursement. There are no health fund rebates on any of the services or solutions which fall within the OVC program.

#### Medicare rebates.

There are no Medicare rebates available for the OVC program. Any services provided simultaneously that do allow a Medicare rebate will be bulk billed to Medicare. You will not be entitled to a rebate as you will not be charged a fee.



**medicare**

#### What if I have allergies or Dry Eye?

OVC is suitable for eyes with allergies, dry eyes, and eczema, but special attention is needed for the lens disinfection solutions. Our Optometrist will regularly assess your eyes and eyelids for allergy signs. If you begin the program with an allergy, we'll opt for a hydrogen peroxide system for lens care instead of the standard Biotrue™ system.



The drops provided for lens insertion may not be sufficient for both dry eye management and lens insertion needs. Any drops needed for dry eye treatment are not included in the program.



## Solution Bundles.

3 and 9 months.

6 and 12 Months.

<p><b>Biotrue</b></p> <p>1 Biotrue Value Pack</p>  <p>1 Progent Pack</p>  <p>3 Evolve Carmellose</p> 	<p><b>Biotrue</b></p> <p>1 Biotrue Value Pack</p>  <p>1 Progent Pack</p>  <p>3 Evolve Carmellose</p>  <p>1 DMV sucker</p> 
<p><b>Soleko</b></p> <p>1 Soleko Platinum pack</p>  <p>2 Bottles of Lens Plus</p>  <p>1 Progent Pack</p>  <p>3 Evolve Carmellose</p> 	<p><b>Soleko</b></p> <p>1 Soleko Platinum pack</p>  <p>2 Bottles of Lens Plus</p>  <p>1 Progent Pack</p>  <p>3 Evolve Carmellose</p>  <p>1 DMV Sucker</p> 
<p><b>Oxysept</b></p> <p>1 Oxysept Value pack</p>  <p>2 Bottles of Lens Plus</p>  <p>1 Progent Pack</p>  <p>3 Evolve Carmellose</p> 	<p><b>Oxysept</b></p> <p>1 Oxysept Value pack</p>  <p>2 Bottles of Lens Plus</p>  <p>1 Progent Pack</p>  <p>3 Evolve Carmellose</p>  <p>1 DMV sucker</p> 

### What if I lose or break a retainer?

If you break a lens, return it to the practice for a replacement within the 3-month warranty period; beyond that, a fee applies. Lost lenses are not covered by any warranty. If you lose a lens, you are responsible for the replacement cost. Typically, replacement lenses take about 2 weeks for delivery to the practice.

### OVC Program Cost.

The procedure involves complicated lens designs and possibly multiple lens changes, making initial costs higher than regular contact lens correction but less than refractive surgery.

Ongoing maintenance requires monthly debits to access program benefits.

Upfront costs vary based on prescription, corneal topography, and the purpose of Orthokeratology (e.g., myopia control). Myopia control incurs additional fees due to more frequent initial lens replacements.

Before starting any vision care program at Buck & Todd Optometrists, a \$185.00\* initial consultation, covering comprehensive eye health, prescription assessment, and corneal topography, is mandatory. The minimum program registration period is 12 months, and opting out within this period still incurs 12 months of fees.

### OVC Program

Includes all OVC consultations, all solutions bundled provided at 3 monthly intervals, annual retainer replacement. You're eligible for 10% off Dry Eye Therapy if required.

Level:	1	2	3	4
	Myopia to -4.00 with < 1.00 D astigmatism and < 20 microns elevation variation at an 8mm chord. (No allergies)	Myopia > -4.00 and/or astigmatism > -1.00 (corneal = spectacle) and/or elevation variation at 8mm chord > 20 microns. (Level 1 plus Allergies).	Hyperopia and/or requiring a central toric back optic zone. (Level 2 plus Allergies).	Presbyopic correction Level 3 plus Allergies.
Upfront Establishment Cost	\$1,400.00	\$1,650.00	\$1,950.00	\$2,400.00
Monthly Debit Costs	\$145.00	\$165.00	\$195.00	\$195.00
Replacement Retainer Costs (per retainer)	\$425.00	\$490.00	\$585.00	\$650.00
1st Year Costs	\$3,140.00	\$3,630.00	\$4,290.00	4,740.00
Subsequent Years Costs	\$1,740.00	\$1,980.00	\$2,340.00	\$2,340.00

### Myopia Control Program (Children 8-18 years).

Included all OVC consultations, Myopia control consultations, graphical analysis of progression of Axial length vs Age matched norms, all solution bundles, 9 monthly retainer replacements. The patient is eligible for 10% off Vision Therapy and Dry Eye Therapy if required. Also, a 10% discount available on reading glasses if required.

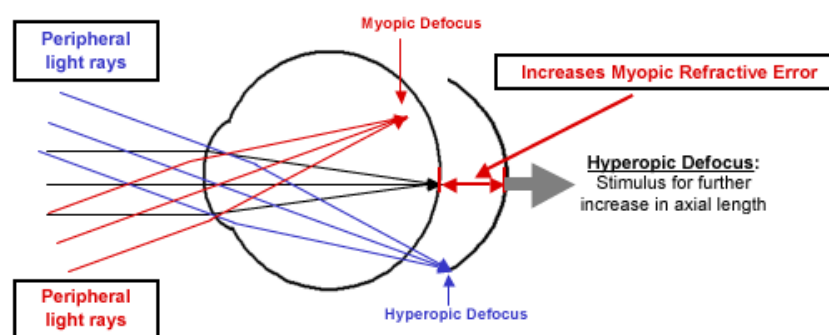
Level:	1	2	3	4
	Myopia to -4.00 with <1.00 D astigmatism and < 20 microns elevation variation at an 8mm chord (No allergies).	Myopia > -4.00 and/or astigmatism > -1.00 (corneal = spectacle) and/or elevation variation at 8mm chord > 20 microns (Level 1 plus Allergies).	Requiring a central toric back optic zone (Level 2 plus Allergies).	Level 3 + Allergy
Upfront Establishment Cost	\$1,960.00	\$2,310.00	\$2,730.00	\$3,360.00
Monthly Debit Costs	\$203.00	\$231.00	\$273.00	\$273.00
Replacement Retainer Cost (per retainer)	\$425.00	\$490.00	\$585.00	\$650.00
1st Year Costs	\$4,396.00	\$5,082.00	\$6,006.00	\$6,636.00
Subsequent Years Costs	\$2,436.00	\$2,772.00	\$3,276.00	\$3,276.00

All these prices are subject to changes with CPI and increases in scheduled fees. Fees current as per July 2022.

## Myopia Control and OVC.

Myopia, or near-sightedness, affected 1.6 billion people globally in 2010, and the pre-COVID estimate for 2022 was 2.5 billion. By 2050, it's expected that 50% of the world's population will be near-sighted, with 10% having high-risk myopia (> -6.00 dioptres). The COVID pandemic has accelerated myopia, especially due to increased screen time. This poses health risks, including retinal detachments, macular degeneration, and glaucoma in adulthood. Recent literature focuses on combating myopia, with Orthokeratology (OVC) showing the most stability in slowing myopia progression.

Slowing myopia progression is done by manipulating the "shell of vision."



Other interventions include outdoor activities, low-dose atropine, bifocal glasses, and vision therapy. OVC research indicates an 80% reduction in eye elongation, addressing progressive near-sightedness in children and young adults. For more information visit our website.

## When should you cease OVC.

OVC can be used throughout your entire life. Its modifiable and reversible nature allows adjustments for any prescription changes resulting from aging. Typically, 80% of myopia progression halts by the age of 25. If you are considering a more permanent surgical correction, we advise maintaining OVC correction until at least age 25. It's essential to monitor axial length for stability for six months before committing to a one-time surgical correction. This ensures a careful, informed decision-making process with greater chance of long-term success.

## OVC and eye infections.

Contact lenses have been employed for OVC since the early 1960s, and rigorous scientific studies have not reported any more significant health risks to the eyes than with normal daily contact lens wear. Nevertheless, instances of microbial keratitis and vision loss have been linked to poor hygiene and improper lens disinfection practices.

If your eyes appear unwell, feel uncomfortable, or you are experiencing impaired vision, it is essential to follow the procedures below.

1. Remove the retainers.
2. Call the practice to book an emergency consultation on the same day.
3. Follow our instructions.

Retainers may lead to temporary eye irritation upon waking, attributed to factors like allergy, reduced oxygen access, or mechanical stimulation. These effects typically alleviate upon lens removal and are not considered sight-threatening.

However, if such occurrences become recurrent, it is advisable to schedule an early morning appointment for a thorough review of your corneal surface.

While the likelihood of corneal infection and ulceration in rigid contact lens wearers is extremely low, estimated at 1-5 cases per 10,000 wearers, it remains a potential sight-threatening complication. In the rare event of a corneal infection, prompt consultation with our therapeutically endorsed optometrists ensures proper medical attention, minimising the risk of any significant vision loss.

It's crucial to note that tap water, spas, hot tubs, and tank water all contain a single-cell parasitic organism called Acanthamoeba (trophozoites and cysts). This organism can infiltrate a contact lens induced compromised cornea leading to irreversible vision loss within 24-48 hours. Therefore, avoiding exposure to these environments is vital for the safety of your eyes.

- **Only use the contact lens solutions provided.**
- **Never use the same solution twice.**
- **Never rinse your lenses in tap water!!!**
- **Don't share your retainers with family or friends.**
- **Don't place lenses in your mouth.**

Strategies that will reduce the risk of infection include the following.

1. Always wash your hands with soap and warm water before handling your OVC retainers.



2. Don't use moisturizer on your hands before handling your retainers.
3. Clean and disinfect your retainers according to your practitioner's directions every time you remove them from your eyes.
4. After lens insertion, empty the solution from your lens case and rinse it hot water.
5. Dry the case and lid by air drying or using a clean tissue and leave the case opened in a safe dry place. **(Not the bathroom!)**
6. Every week thoroughly scrub your lens case in detergent and hot water and leave it to dry as usual.
7. Most contamination comes from dirty hands or biofilm on dirty cases. Replace your lens case with every new solution package you receive from us. Cases are provided in every new value pack.
8. Regularly clean the lens sucker.
9. Replace the lens sucker every 6 months. (Part of your plan).
10. Replace retainers every 9-12 months. (Part of your plan)
11. Your eyes should : Look Well, See Well and Feel Well.

12. Cease lens wear if you have a cold, flu or virus which would keep you home. A day or two of reduced vision is better than 8 weeks without lens wear.

To minimize the risk of eye infections, it's important to follow your practitioner's instructions regarding wearing schedules and lens and case care procedures. If you experience any problems or have concerns, promptly remove your lenses, and contact the practice.

### Reactivation of Program.

Patients who haven't visited the office in over two years and those who have undergone successful Overnight Vision Correction (OVC) elsewhere may face more complex refits. This complexity can arise from issues such as lens warpage, accumulated deposits on lenses, or allergic responses. Failing to adhere to your ongoing program may lead to the unavailability of replacement corneal retainers. In the event of a subsequent refitting, you will be charged the full initial program costs. Additionally, if you are still using old retainers, a return-to-baseline charge will be applied before continuing OVC. This not only inconveniences you but also poses challenges for us as we wait for the corneal shape to recover from distortion induced by over-worn lenses.

### Got your corneal retainers elsewhere?

We need information on the condition of your cornea and your prescription both before and after starting OVC treatment, especially if you're coming from elsewhere. Without this data, there's a risk for both you and us, as we'd be relying on assumptions. Remember, assuming can lead to misunderstandings. If we cannot access your original topography, or it is incompatible with our machine, we will have to restart your treatment plan, wash out any current correction and re-establish ground zero before providing any corneal moulds.

### Annual retainer replacement provides you the following benefits:

- Clearer vision once the moulds are removed in the morning.
- Better comfort while the moulds are being worn.
- Fewer problems like poor daytime vision and infections.

### Why do we do 9-Monthly replacement with Myopia Control

- Clearer vision once the moulds are removed in the morning.
- Better comfort while the moulds are being worn.
- A better OVC effect to slow axial length increases.
- Fewer problems like poor daytime vision and infections.
- When myopia is progressing rapidly, we may be applying the brakes with OVC, but it may not be enough to halt progression. Adjusting the prescription altering the region of the reverse curve allows us to massage the brakes to ensure maximum control.

**Overnight Vision Correction Program: Agreement and Informed Consent.**

1. I've received details about the risks and benefits of Overnight Vision Correction (OVC), including the risks of eye infections and the necessity for regular lens replacement and ongoing vision care. I understand that to undergo this treatment, I need to commit to renewing the program annually and replacing the corneal retainers yearly as part of the ongoing care.
2. I agree to consistently wear the specially designed retainers overnight to reshape my corneas. This reshaping is intended to result in a significant enhancement of my unaided vision. I understand that these retainers are different from traditional lenses because they're engineered to hold a uniquely shaped layer of tears, creating suction forces that facilitate the reshaping process.
3. My practitioner has outlined the expected result to me: If everything goes according to plan, I anticipate that I will be pleased with the outcome. However, I understand there are no guarantees, and if I'm not satisfied with the results, I have the option to stop the treatment. In such a case, my cornea will revert to its original shape within 1-3 weeks. I can then resort to conventional methods of correction, such as using soft lenses or spectacles.
4. I acknowledge that Overnight Vision Correction is entirely reversible, and the use of the retainer must be ongoing to maintain its effects. I commit to following my practitioner's instructions regarding retainer wear to achieve the best possible outcome and will attend follow-up examinations as recommended.
5. I've been instructed on how to insert and remove the device, as well as on its proper care and maintenance. I understand that after wearing the device overnight, an assessment of refractive and corneal topographic changes will be conducted. I'm aware that initial retainers may require modification or exchange during the program's preliminary stages, and I may need to use my glasses while new retainers are being made.

**Refund on Program Fees if unsuccessful.**

Discontinuing by either the patient or Optometrist for any reason:

1. If during the first month of wear the modality should prove unsuitable the establishment costs are not refundable.
2. Patient initiated cancellation at any other stage is immediate and no refunds or credit are available for any of the monthly debit payments processed if inside the first 12 months payments will continue until all 12 payments have been made.

I've had a chance to discuss the treatment and associated costs with my practitioner, addressing any questions I may have had. I recognize the potential risks involved in the treatment and understand that there are no guarantees regarding the outcome. I agree to adhere to the treatment plan and follow the advice provided, including proper care of the lenses. I understand that my practitioner will strive to achieve the best possible result, and I am committed to communicating any concerns, complications, or difficulties arising from the treatment promptly to my practitioner.

If I experience any pain, redness, or discharge from my eyes, I will promptly remove the lenses and contact my practitioner immediately at (07) 49573066. If it's outside of regular trading hours, I will call the after-hours number 0428996229. I understand that consultations needed outside normal trading hours are not covered by the program fees.

Patient Name: .....

Person completing form (if different to above): .....

Relationship to Patient (If applicable): .....

Signature: ..... Date: .....

If patient is under 18 years old, then parent or guardian to sign above.

Address: 103 Alfred Street Mackay QLD 4740  
 Phone: (07) 4957 3066  
 Email: reception@bucktodd.com.au



ACN 096 902 813 | AFSL 315388

## DIRECT DEBIT REQUEST

Ph: 7 4957 3066 Fax: 7 4957 3907  
 ABN/ACN: 30 055 785 432

## NEW CUSTOMER FORM

**YOUR DETAILS** | Please complete this form using a BLACK PEN. \* Indicates a MANDATORY FIELD

Business: Pushcroft Pty Ltd ABN/ACN: 30 055 785 432 **100-251-195**

Customer Reference:

\* Surname: \* Given Name:

\* Mobile #:

\* Email:

\* Address:

\* Suburb: \* State: \* Postcode:

**DEBIT ARRANGEMENT** | Including payment details and associated fees/charges detailed below and/or the total amount billed for the specified period for this and any other subsequent agreements or amendments between me/us and the Business and/or Ezidebit

Once Only Debit On Date: / / Debit this amount: \$

Regular Debits Starting on Date: / / Debit this amount: \$

Frequency:  Weekly  Fortnightly  Monthly  4 Weekly

Duration:  Until I have paid regular debits

Until I have paid \$ in regular debits

Administration Fee (once only) up to: N/A Bank Account Transaction Fee: Paid By Business Credit Card Transaction Fee: VISA/Mastercard: 1.50% (Min \$0.88) AMEX/Diners: 3.50% (Min \$0.88)

**CHOOSE YOUR PAYMENT METHOD**

Debit from Credit Card

VISA  MasterCard  AMEX  Diners

Card Number: Expiry Date: / /

Name of Cardholder:

By signing this form, I/we authorise Ezidebit, acting on behalf of the Business, to debit payments from my specified Credit Card above, and I/we acknowledge that Ezidebit will appear as the merchant on my credit card statement. Furthermore, I/we agree to reimburse and indemnify Ezidebit for any successful claims made by the Card Holder through their financial institution against Ezidebit.

Debit from Bank, Building Society or Credit Union Account

Financial Institution: Branch:

BSB Number: Account Number:

Account Holder Name:

I/we authorise Ezidebit Pty Ltd ACN 096 902 813 (User ID No 165969, 303909, 301203, 234040, 234072, 428198) to debit my/our account at the Financial Institution identified above through the Bulk Electronic Clearing System (BECS) in accordance with the Debit Arrangement stated above and this Direct Debit Request and as per the Ezidebit DDR Service Agreement (Ver 1.8) provided.

This Authorisation is to remain in force in accordance with the terms and conditions on this Direct Debit Request, the provided Ezidebit DDR Service Agreement (Ver 1.8) and I/we have read and understand same. I/we acknowledge that our personal information will be collected, used, held and disclosed in accordance with the Ezidebit Privacy Policy found at <http://www.ezidebit.com/au/privacy-policy/>.

Signature(s) of Nominated Account: Date: / /



ACN 096 902 813 | AFSL 315388

## DDR SERVICE AGREEMENT (Ver 1.8)

### DDR Service Agreement (Ver 1.8)

I/We hereby authorise Ezidebit Pty Ltd ACN 096 902 813 (**Direct Debit User ID number 165969, 303909, 301203, 234040, 234072, 428198**) (herein referred to as "Ezidebit") to make periodic debits on behalf of the "Business" as indicated on the attached Direct Debit Request (herein referred to as "the Business").

I/We acknowledge that Ezidebit is acting as a Direct Debit Agent for the Business and that Ezidebit does not provide any goods or services (other than the direct debit collection services to me/us for the Business pursuant to the Direct Debit Request and this DDR Service Agreement) and has no express or implied liability in regards to the goods and services provided by the Business or the terms and conditions of any agreement that I/we have with the Business.

I/We acknowledge that the debit amount will be debited from my/our account according to the terms and conditions of my/our agreement with the Business and the terms and conditions of the Direct Debit Request (and specifically the Debit Arrangement and the Fees/Charges detailed in the Direct Debit Request) and this DDR Service Agreement.

I/We acknowledge that bank account and/or credit card details have been verified against a recent bank statement to ensure accuracy of the details provided and I/we will contact my/our financial institution if I/we are uncertain of the accuracy of these details.

I/We acknowledge that it is my/our responsibility to ensure that there are sufficient cleared funds in the nominated account by the due date to enable the direct debit to be honoured on the debit date. Direct debits normally occur overnight, however transactions can take up to three (3) business days depending on the financial institution. Accordingly, I/we acknowledge and agree that sufficient funds will remain in the nominated account until the direct debit amount has been debited from the account and that if there are insufficient funds available, I/we agree that Ezidebit will not be held responsible for any fees and charges that may be charged by either my/our or its financial institution.

I/We acknowledge that there may be a delay in processing the debit if:-

1. there is a public or bank holiday on the day of the debit, or any day after the debit date;
2. a payment request is received by Ezidebit on a day that is not a banking business day in Queensland;
3. a payment request is received after normal Ezidebit cut off times, being 3:00pm Queensland time, Monday to Friday.

Any payments that fall due on any of the above will be processed on the next business day.

I/We authorise Ezidebit to vary the amount of the payments from time to time as may be agreed by me/us and the Business as provided for within my/our agreement with the Business. I/We authorise Ezidebit to vary the amount of the payments upon receiving instructions from the Business of the agreed variations. I/We do not require Ezidebit to notify me/us of such variations to the debit amount.

I/We acknowledge that Ezidebit is to provide at least 14 days' notice if it proposes to vary any of the terms and conditions of the Direct Debit Request or this DDR Service Agreement including varying any of the terms of the debit arrangements between us.

I/We acknowledge that I/we will contact the Business if I/we wish to alter or defer any of the debit arrangements.

I/We acknowledge that any request by me/us to stop or cancel the debit arrangements will be directed to the Business.

I/We acknowledge that any disputed debit payments will be directed to the Business and/or Ezidebit. If no resolution is forthcoming, I/we agree to contact my/our financial institution.

I/We acknowledge that if a debit is returned by my/our financial institution as unpaid, a failed payment fee of up to \$11.90 is payable by me/us to Ezidebit. I/We will also be responsible for any fees and charges applied by my/our financial institution for each unsuccessful debit attempt together with any collection fees, including but not limited to any solicitor fees and/or collection agent fee as may be incurred by Ezidebit.

I/We authorise Ezidebit to attempt to re-process any unsuccessful payments as advised by the Business.

I/We acknowledge that certain fees and charges (including setup, variation, SMS or processing fees) may apply to the Direct Debit Request and may be payable to Ezidebit and subject to my/our agreement with the Business agree to pay those fees and charges to Ezidebit.

#### Credit Card Payments

I/We acknowledge that "Ezidebit" will appear as the merchant for all payments from my/our credit card. I/We acknowledge and agree that Ezidebit will not be held liable for any disputed transactions resulting in the non supply of goods and/or services and that all disputes will be directed to the Business as Ezidebit is acting only as a Direct Debit Agent for the Business. I/We acknowledge and agree that in the event that a claim is made, Ezidebit will not be liable for the refund of any funds and agree to reimburse Ezidebit for any successful claims made by the Card Holder through their financial institution against Ezidebit.

I/We acknowledge that Credit Card Fees are a minimum of the Transaction Fee or the Credit Card Fee, whichever is greater as detailed on the Direct Debit Request.

I/We appoint Ezidebit as my/our exclusive agent with regard to the control, management and protection of my/our personal information (relating to the Business and contained in this DDR Service Agreement). I/We irrevocably authorise Ezidebit to take all necessary action (which Ezidebit deems necessary) to protect and/or correct, if required, my/our personal information, including (but not limited to) correcting account numbers and providing such information to relevant third parties and otherwise disclosing or allowing access to my/our personal information to third parties in accordance with the Ezidebit Privacy Policy.

Other than as provided in this Agreement or the Ezidebit Privacy Policy, Ezidebit will keep your information about your nominated account at the financial institution private and confidential unless this information is required to investigate a claim made relating to an alleged incorrect or wrongful debit, to be referred to a debt collection agency for the purposes of debt collection, or as otherwise required or permitted by law. Further information relating to Ezidebit's Privacy Policy can be found at <http://www.ezidebit.com/au/privacy-policy/>.

I/We hereby irrevocably authorise, direct and instruct any third party who holds/stores my/our personal information (relating to the Business and contained in this DDR Service Agreement) to release and provide such information to Ezidebit on my/our written request.

I/We authorise:

- a. Ezidebit to verify and/or correct, if necessary, details of my/our account with my/our financial institution; and
- b. my/our financial institution to release information allowing Ezidebit to verify my/our account details.