

**Autoclavable plastic shields, Jaeger lidplates and Desmarres**

**Bilateral** With suction cup    **Unilateral** With handle



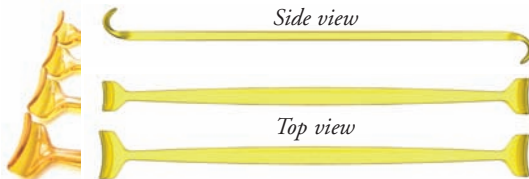
Plastic not for laser.

Up to 50 cycles in the autoclave. All shields available in black or transparent yellow. The black shields block all light and vision. – Our TOP SELLER. Yellow allows seeing pupil. Best for general anaesthesia and claustrophobia. Bilateral model with suction cup is ideal for blepharoplasty. Model with bilateral handle can be used in either eye and they are easier to insert and remove. The handle may interfere with certain procedures.

All shields are available in 4 sizes. Packaged as:  
 • ONE bilateral ocular shield with one suction cup. Sold as a unit. • ONE bilateral ocular shield with handle. Sold as a unit. • TWO unilateral (one left and one right) with handle. Sold as a pair. Sold non sterile.



2 models of Jaeger lid plates. A more concave model with a medium and small end (shown in black). 23-295B or Y. A flatter model with a medium and large end (shown in transparent yellow). 23-293B or Y. Sold non sterile.



2 Desmarres lid retractors. Transparent yellow. With 10 and 12 mm ends, 23-311Y. With 14 and 16 mm ends, 23-315Y. Sold non sterile.

Order by phone, fax, or mail. We ship worldwide.

**OCULO-PLASTIK®, Inc.**  
 200 SAUVÉ West. City of MONTRÉAL  
 Québec, Canada H3L 1Y9  
 Tel (514) 381-3292 • Fax (514) 381-1164  
 Toll-free tel (888) 381-3292 • Fax (800) 879-1849  
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Looking for



smooth-surfaced simple motility implants,



syblepharon rings,

and auto-clavable plastic shields.



**OCULO-PLASTIK®, Inc.**

Fine products for the fields of Ophthalmology, Oculoplastic, Plastic, Aesthetic, Dermatologic Surgery and Ocularistry.



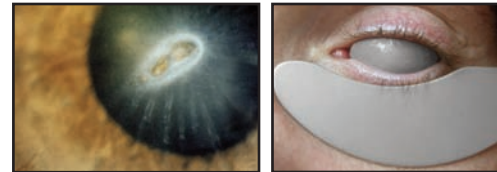
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**EN**

**COX II ocular laser shields**

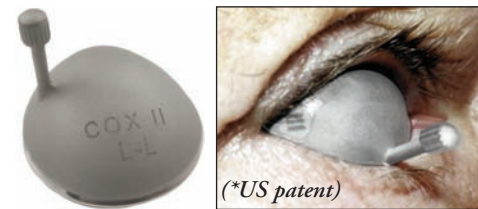
Nonreflective front, to protect from the LASER. Each ocular shield comes with a suction cup. In four sizes: x-small, small, medium, and large.

These elongated shields, with a nonreflective anterior finish, protect the ocular globes and personnel from the laser. The rounded edges and posterior surface are highly polished.



**Cox® II H\***  
 Left and right eyeshields

Unilateral, with offset handle.



- Vaulted at the cornea.
- Handle facilitates insertion and removal.
- Its position allows closure without the upper lid pressing and causing rotation or displacement of the shield, thereby minimizing the risk of corneal irritation or exposure of the globe.
- Cox II H, left and right (s, m, l)



**External laser shields\***

**Durette® II\***  
 with flexible nasal

1mm all-stainless-steel laser-safe surface design, safer than wet gauzes. Simple, practical design.

\*Patented in USA, Canada, France, Germany, Spain, and UK. Other Intern. patent pending.



External laser shields with movable nasal and temporals offers complete exposure of the glabella, nose, and crow's-feet. Metal cups (regular or small) with attachments moved away from area to be treated without affecting shields' position.

**Durette® III\***  
 with swivel plastic pieces



**Durette® IV\***  
 with swivel metal pieces



(\*US & Intern. patent pending)

Interested in laser shields and instruments?  
 Ask for our "LaserSecure" catalogue.

## Obtain Motility Simply

Among the most motile, the simplest to implant, to custom fit and care for.

They require one simple enucleation procedure and cost less. With them, you can obtain motility, simply.

Natural motility with the New Allen



The design of these unique quasi-integrated primary implants features complete smoothness to avoid extrusion, and four low mounds for better integration and support of the ocular prosthesis.

Both implants have either holes or fenestration, allowing inclusion of tissue to minimize migration.

The Universal is also an ideal evisceration implant.

### The New Allen implant



The NEW ALLEN (PMMA) Sold non sterile.  
14-122 [small, 17.5-13mm]  
14-124 [med., 20-13.5 mm]  
14-126 [large, 21.5-14.5 mm]



Choose the largest possible. The large size fits the majority of patients and provides a broad base, for better motility of the custom-made ocular prosthesis. The medium and small are available as second choices and should be used only when the larger one will not fit well within tenon's.

Refer to price list for additional devices available. PMMA cannot be autoclaved. Silicone can be autoclaved. Currently no device are sold sterile.

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### The Universal Implant



Excels both in evisceration and enucleation.

Sold non sterile.  
18-122 [small, 2.7cc]  
18-124 [medium, 3.2cc]  
18-126 [large, 3.6cc]

### UNA Conformer

Sold non sterile. Cannot be autoclaved. (PMMA)

19-012 [small, 23-20]  
19-016 [regular, 26-23]



### Suction Cups

For easy insertion and removal of prostheses, conformers, and ocular shields without handle. The red rubber suction cups are autoclavable. 23-012. A dozen.

### Bilateral Conformers

Triangular conformers with various curvatures to fit different posterior surfaces of the anophthalmic sockets. The most concave is the 16. The 18/20 is a thicker and flatter model than the 18. (PMMA) Each in 2 sizes. Sold non sterile.



16	18	18/20
19-122 [s]	19-112 [s]	19-102 [s]
19-124 [reg]	19-114 [reg]	19-104 [reg]

### Oval Bilateral Conformers 22

The most thin and flat.  
Sold non sterile.  
19-092 [small]  
19-094 [regular]  
Also available with 2 holes.  
19-092T [small]  
19-094T [regular]



### Acrylic (PMMA) spheres

Sold non sterile.



11-312, 11-314,  
11-316, 11-318,  
11-320, 11-322

### Silicone spheres

Sold non sterile.



11-214, 11-215, 11-216,  
11-218, 11-219

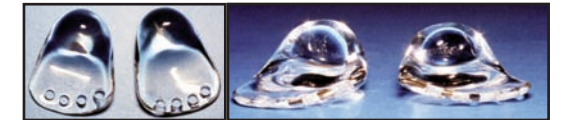
### Sterilization trays

Autoclavable plastic sterilizing trays. See price list for sizes available.



### The Codère-Durette Orbital Floor Implants

Designed to fit under the orbital floor periosteum, behind the orbital rim (to which they should be attached). For different volume defects present in the superior sulcus [anophthalmic sockets], they are the easiest to place. (PMMA) 3 volumes, both sides. Sold non sterile.



18-543 [small, left]	18-544 [small, right]
18-545 [med., left]	18-546 [med., right]
18-547 [large, left]	18-548 [large, right]

### The Putterman-Scott Prostheses For Contracted Sockets

For surgical reconstruction, used in cases of severely contracted or nonexistent sockets. Wrapped in buccal mucosa, they are inserted in the surgically created cavity, sutured to the orbital rim and left in place for three to six months for socket reconstruction. (Clear PMMA) 3 sizes. Sold non sterile.

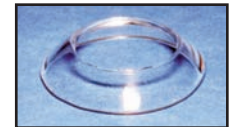


21-192 [small], 21-194 [medium], 21-196 [large]

### Symblepharon Rings

Ideal to avoid re-adhesion of symblepharons. (PMMA)

Round (Sold non sterile.)  
21-412 [small, 20 mm]  
21-414 [med., 22 mm]  
21-416 [large, 24 mm]



Pin hole, 4949-1