SIGHTPATH APPROVED SUBSTITUTE LIST

Physician may substitute their preferred monofocal IOL or viscoelastic (as identified in Exhibit A of the Cataract and Specialty Services Order Form) with any one (1) product listed below without change to the cataract suite per procedure fee.

MONOFOCAL IOL

ALCON	J&J	B&L
SA60AT	AR40	LI61A0
SN60AT	Z9002	AO60
SN60WF	ZA9003	MX60/MX60E
SA60WF	ZCB00	MX60UEPL
AU00T0	AAB00	MI60
MA60AC		
MN60AC	**LENSTEC**	**RAYNER**
MN60MA	SOFTEC 1	970C
MA60MA	SOFTEC HD	RAO600C
CZ70BD	SOFTEC HDO	
MA50BM	SOFTEC HDPLI	
MC50BD	SOFTEC HDM	**BVI**
MTA3U0/4U0/5U0		B1PC
ACU0T0		B3PC
SY60WF Clareon (without AutonoMe)	**ZEISS**	
CC60WF Clareon (without AutonoMe)	CT LUCIA	
	CT Lucia 621P	
	CT Lucia 621PY	

VISCOELASTIC

ALCON	J&J	B&L
Duovisc Green	Healon 5	Occucoat
Duovisc Blue	Healon Duet	Amvisc
Viscoat .5	Healon .55	Amvisc Plus
Provisc .55	Healon .85	ClearVisc
Provisc .85	Healon GV .55	ClearVisc/Amvisc Regular Bundle
Cellugel	Healon GV .85	Totalvisc
	Endocoat	Stablevisc
STAAR	**VISCOTECH**	
Staarvisc	Anikavisc	

The approved substitute list may be modified from time to time at Sightpath's sole discretion.