IOLMaster Software Version 5 Advanced Technology

Advanced Technology simplifies operation and expands the measurement options in axial length measurement and keratometry. With the new Advanced Technology, the overhead in user interaction is reduced. Through a new type of algorithm, the signal-to-noise ratio of the axial length measurement signal is improved, and a measurement of the axial length is possible even with relatively strong clouding of the ocular media. The advanced signal processing capabilities of the new Advanced Techology software extend the IOLMaster's patient spectrum and reduce user intervention.

The optimal measurement setting of the keratometer in relation to the patient is displayed through an adjustment aid. An easy-to-understand traffic light indicator helps prevent faulty measurements. A green light signals correct measurements adjustment and optimal focus. Almost every initiation of a measurement can thus result in a valid measurement. Dependence of keratometry on the user was further reduced.

In both measurement modes and during IOL power calculation, the software displays additional information to facilitate interpretation of the data. The axial lengths and corneal radii of both eyes are checked for plausibility. This simplifies interpretation of measurement results and provides increased confidence.

With Advanced Technology Software Version 5 the performance, simplicity and efficiency of the IOLMaster was further improved. Software version 5 is available as an upgrade for all IOLMaster instruments running version 4 or later, with Windows XP. For IOLMaster instruments released prior to version 4, a preceding hardware upgrade is required. Improved patient throughput with higher processing power as well as a range of new features – from the Haigis-L post-LASIK formula to the convenient 4-formula display – are the major advances of versions 4 and 5, which become available with this hardware upgrade. Now is the time to invest in a new IOLMaster or consider upgrading your existing instrument.