

RIMLESS TECH GLAZING ORDER FORM

PLEASE TICK YOUR FRAME CHOICE & COLOUR

FRAME	ALEXIS <input type="checkbox"/>	ANDRES <input type="checkbox"/>	ERIK <input type="checkbox"/>	SIRUS <input type="checkbox"/>	COLOUR	C1 <input type="checkbox"/>	C2 <input type="checkbox"/>	C3 <input type="checkbox"/>
--------------	---------------------------------	---------------------------------	-------------------------------	--------------------------------	---------------	-----------------------------	-----------------------------	-----------------------------

PLEASE TICK YOUR LENS CHOICE IN ONE OF THE BOXES BELOW

INDEX	COATINGS	LENS TYPE	LENS EFFECT	PROGRESSIVE DESIGN
1.6 <input type="checkbox"/>	INFINITY XT <input type="checkbox"/>	STOCK SINGLE VISION <input type="checkbox"/>	CLEAR <input type="checkbox"/>	ENTRY <input type="checkbox"/>
1.67 <input type="checkbox"/>	HYDRO+ <input type="checkbox"/>	SURFACED SINGLE VISION <input type="checkbox"/>	OPTISHADE <input type="checkbox"/>	EASY <input type="checkbox"/>
1.74 <input type="checkbox"/>	BLUE SHIELD <input type="checkbox"/>	PROGRESSIVE <input type="checkbox"/>	BROWN <input type="checkbox"/>	ZENIX <input type="checkbox"/>
	HONEYCOMB <input type="checkbox"/>		GREY <input type="checkbox"/>	CONFIDENCE <input type="checkbox"/>
			TRANSITIONS <input type="checkbox"/>	DRIVESENSE <input type="checkbox"/>
			BROWN <input type="checkbox"/>	SUPERIOR <input type="checkbox"/>
			GREY <input type="checkbox"/>	

ENTER YOUR PATIENT'S PRESCRIPTION & MEASUREMENTS

R:	SPHERE	CYL	AXIS	PRISM	BASE	ADD	PUPILLARY DISTANCE (PD) RIGHT: <input type="text"/> LEFT: <input type="text"/> BINOCULAR: <input type="text"/>
L:	SPHERE	CYL	AXIS	PRISM	BASE	ADD	
*BACK VERTEX DISTANCE (BVD)	*PANTOSCOPIC ANGLE (PA)	*FRONTAL BOW (FB)	*DIHEDRAL ANGLE	PUPIL HEIGHTS <small>Measured from the lowest point of lens</small>			
RIGHT: <input type="text"/>	RIGHT: <input type="text"/>	RIGHT: <input type="text"/>	RIGHT: <input type="text"/>	RIGHT: <input type="text"/>	RIGHT: <input type="text"/>		
LEFT: <input type="text"/>	LEFT: <input type="text"/>	LEFT: <input type="text"/>	LEFT: <input type="text"/>	LEFT: <input type="text"/>	LEFT: <input type="text"/>		

ADDITIONAL INFORMATION FOR CONFIDENCE LENSES ONLY *

Q1: A B C Q2: A B C Q3: A B C Q4: A B C Q5: A B C

CORRIDOR LENGTH

DEEP:

REGULAR:

SHALLOW:

PLEASE ENTER YOUR DETAILS

ACCOUNT NAME:	<input type="text"/>	ACCOUNT ADDRESS:	<input type="text"/>
ACCOUNT NO:	<input type="text"/>		<input type="text"/>
ORDER DATE:	<input type="text" value="DD/MM/YYYY"/>		<input type="text"/>
YOUR REFERENCE:	<input type="text"/>		<input type="text"/>

Please note, there are some exclusions on some coatings or indices. Please see guide on page 2.

Post your frame to Jai Kudo Lenses, 83 Sefton Lane, Maghull, Liverpool, L31 8BU, UK

Call us on: +44 (0) 2087 329 600 | Email us on: info@jaikudo.com | Visit our website: lenses.jaikudo.com

RIMLESS TECH - AVAILABLE LENSES

SINGLE VISION

	LENS TYPE	INDEX	INFINITY XT	HYDRO+	BLUE SHIELD	HONEYCOMB
CLEAR LENSES	SINGLE VISION STOCK	1.6	✓	✓	✓	✓
		1.67	✓	✓	✓	✓
		1.74	✓	✓	✗	✗
	SINGLE VISION SURFACED	1.6	✓	✓	✓	✓
		1.67	✓	✓	✓	✓
		1.74	✓	✓	✗	✗
OPTISHADE	SINGLE VISION SURFACED	1.6	✓	✓	✓	✗
		1.67	✓	✓	✓	✗
TRANSITIONS [GEN 8]	SV STOCK	1.6	✓	✓	✓	✓
	SINGLE VISION SURFACED	1.6	✗	✓	✗	✗
		1.67	✓	✓	✓	✗
		1.74	✓	✓	✓	✗

PROGRESSIVES

	LENS TYPE	INDEX	INFINITY XT	HYDRO+	BLUE SHIELD	HONEYCOMB
CLEAR LENSES	ENTRY, EASY & ZENIX	1.6	✓	✓	✓	✓
		1.67	✓	✓	✓	✓
		1.74			✗	✗
	CONFIDENCE & DRIVESENSE	1.6	✓	✓	✓	✓
		1.67	✓	✓	✓	✓
		1.74	✓	✓	✗	✗
CONFIDENCE SUPERIOR	1.6	✓	✓	✗	✗	
	1.67	✓	✓	✗	✗	
OPTISHADE	ENTRY, EASY & ZENIX	1.6	✓	✓	✓	✓
		1.67	✓	✓	✓	✓
	CONFIDENCE & DRIVESENSE	1.6	✓	✓	✓	✓
		1.67	✓	✓	✓	✓
TRANSITIONS [GEN 8]	ENTRY, EASY & ZENIX	1.6	✓	✓	✓	✓
		1.67	✓	✓	✓	✓
		1.74	✓	✓	✗	✗
	CONFIDENCE & DRIVESENSE	1.6	✓	✓	✗	✗
		1.67	✓	✓	✗	✗
	CONFIDENCE SUPERIOR	1.6	✓	✓	✗	✗
1.67		✓	✓	✗	✗	

WIDEVIEW CONFIDENCE QUESTIONNAIRE

1. HAVE YOU WORN PROGRESSIVE LENSES BEFORE?

- A. NEVER BEFORE
- B. AROUND ONE YEAR
- C. OVER TWO YEARS

2. PLEASE BEST DESCRIBE YOUR TYPICAL DAY?

- A. IN AND AROUND THE HOME
- B. IN AN OFFICE
- C. MAINLY OUTDOORS

3. HOW MUCH TIME PER DAY DO YOU SPEND READING?

- A. LESS THAN ONE HOUR/DAY
- B. UP TO 3 HOURS/DAY
- C. MOST OF THE DAY

4. HOW OFTEN DO YOU DRIVE?

- A. SELDOM OR NEVER
- B. REGULAR COMMUTING
- C. DRIVES FOR A LIVING

5. PLEASE BEST DESCRIBE HOW ACTIVE YOU ARE?

- A. NOT VERY ACTIVE
- B. QUITE ACTIVE
- C. DOES OUTDOOR ACTIVITIES