



# Go Beyond Visual Acuity to Elevate Patient Care

Neurolens in Your Practice  
Can Change Patients' Lives



# Raising Awareness Among Those Suffering from Digital Vision Syndrome

Implementing Neurolens technology in your practice provides you with a proven treatment for your patients who present with Digital Vision Syndrome, in addition to a premium lens design that will ensure best-in-class visual clarity and sharpness. In more than 80% of wearers, Neurolenses with patented contoured prism technology can alleviate the common symptoms that result from staring at screens for hours at a time – incessant headaches, neck and back pain, and of course, dry and irritated eyes.

“We treat a lot of Neurolens patients, ranging from changing their lives to just making life a little bit easier on their nine to five,” said Jordan Dau, OD, of Dau Family Eye Care in St. Johns, Florida.

However, the first step toward changing the lives of these patients is making them aware that Neurolenses with contoured prism are available. That’s no easy task, especially when most are not aware of the connection between these symptoms and their eyes.

Fortunately, though, raising awareness about the benefits of contoured prism has been simplified because of the tens of thousands that have experienced this technology firsthand, and Neurolens makes it easy to share their results and success stories with *your* patients.

## WORD-OF-MOUTH

Because one of the most impressive aspects of Neurolenses is the genuine excitement patients exhibit after they start wearing these lenses, it’s often just a matter of fitting a few patients and/or staff with contoured prism lenses then watching the referrals come in. Many patients have strong emotional reactions because their chronic headaches are gone or because they no longer have neck pain or irritated eyes; and once they share the joy of that relief with others, new patients will seek out this solution—and your practice—as well.

“We’ve gotten to the point in the past several months where we actually have patients coming in asking about Neurolens from word-of-mouth referrals,” said Brian Sirgany, OD, of Sirgany Eyecare in Cortland, New York.

## GETTING PATIENTS IN THE CHAIR

Beyond just word-of-mouth, raising awareness about Neurolenses directly to patients using traditional and

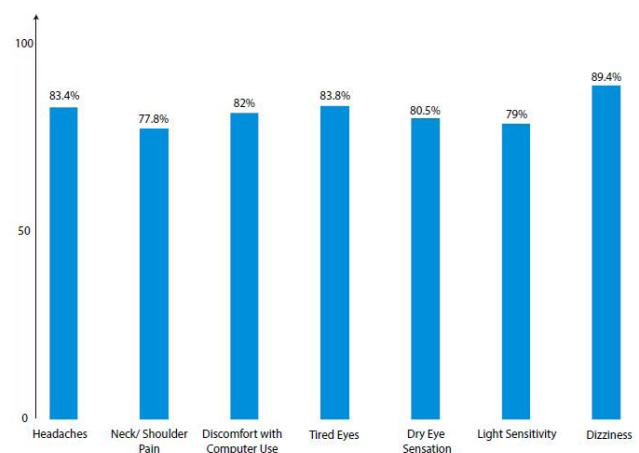


**“I want them to know that Neurolenses are not like ordinary glasses. Neurolenses are like adding a whole new dimension to their lenses—not just clear, but clear *and* comfortable.”** – Rob Szeliga, OD, Spring Hill Eyecare, Spring Hill, Tenn.

electronic media can be particularly effective due to the compelling patient outcomes they enable. Neurolens invests heavily in national direct-to-consumer advertising campaigns, leveraging channels such as social media, paid search, and digital video. These efforts leverage real-life Neurolens stories and results and have effectively driven thousands of patients to Neurolens providers through their online *Take The Test* and *Find A Doctor* tools.

Neurolens also provides a wide array of content and marketing assets for all Neurolens providers. This content is intended to help Neurolens providers amplify the consumer-facing messaging from Neurolens in their own practices—and by extension, benefit from these efforts as if the advertising were for their practice specifically.

“We make social media posts, and we have videos and information on our website,” said Rob Szeliga, OD, of Spring Hill Eyecare in Spring Hill, Tennessee, whose




Proportion of individuals that reported symptom relief after wearing Neurolens correction for 60 days.



practice gets the message out there electronically. “I want them to know that Neurolenses are not like ordinary glasses. Neurolenses are like adding a whole new dimension to their lenses—not just clear, but clear *and* comfortable.”

Dr. Szirgany heavily uses in-office tools, digital tools, and social media, and he even adds on-hold phone messaging.

Jason Hurley, OD, of EyeCare of Rigby in Rigby, Idaho, adds even more tactics to his arsenal: “We do a lot of radio ads about Neurolens, and we do a lot of social media marketing about Neurolens. I want to make sure that they know there is a treatment for headaches instead of medication or shots; that there is a simple option out there, and it’s optics.”

Whether through word-of-mouth or through direct-to-consumer efforts driven by Neurolens or by your practice, now that the patient is in your chair, the next step is determining whether they truly are a candidate for Neurolenses. 

## Screening Everyone to See Who Is a Candidate for Neurolenses

**T**he first step toward determining which patients are actually candidates for Neurolenses is to ask them a series of standardized questions. This can be accomplished either face-to-face or virtually in advance using the newly released electronic lifestyle index from Neurolens.

### THE QUESTIONNAIRE

Neurolens recently rolled out an updated process for practices to capture patient symptoms before the exam through an electronic lifestyle index. Every Neurolens provider is given a unique link where patients can complete a quick survey indicating which symptoms they’re experiencing and how frequently. This information is then sent directly to the practice’s Neurolens Measurement Device—or NMD—so that the technician can quickly call up the patient record and begin measuring. This information is also loaded into the practice’s Neurolens portal for easy record-keeping. Every Neurolens customer can find their unique link and QR code under the “Practice” tab of their Neurolens portal dashboard.



**“Neurolens now has a tool where the patient scans a QR code with their phone to access a digital questionnaire to answer questions about their symptoms while they’re waiting.”** – Troy White, OD,

Kapperman, White & McGarvey Eyecare,  
Chattanooga, Tenn.

Practices that have adopted the electronic lifestyle index are seeing the benefits. Troy White, OD, of Kapperman, White & McGarvey Eyecare in Chattanooga, Tennessee, is among the early adopters of the electronic lifestyle index. “Neurolens now has a tool where the patient scans a QR code with their phone to access a digital questionnaire to answer questions about their symptoms while they’re waiting,” he said. “There’s also a short video that explains the technology in ways patients can understand. The patient will have their responses uploaded so when we measure them on the device, the data is already in there. It cuts the testing time in half.”

“It does save time with data entry at the device,” agreed Matt Dixon, OD, of Advanced EyeCare Center in Perry, Georgia. “They can scan a QR code for a digital survey. This seems to work for the majority of patients, and it does save time.”

Many practitioners adopt the best practice of ensuring every patient completes the lifestyle index. “We give every single person over 12 years old the questionnaire. It’s just seven questions, rate your symptoms one through five,” said Jordan Dau, OD, of Dau Family Eye Care in St. Johns, Fla. “Every single person who marks a three or higher on a single symptom will get a check mark on their intake form that says, ‘Neurolens candidate,’ and is measured on the NMD during their regular pre-testing.”


### TRUST BUT VERIFY: NOT ALL ANSWERS MATCH

Whether patients answer the questionnaire virtually or in-person, it is important to discuss patients’ responses with them directly. Practitioners who have committed to leveraging the lifestyle index have come to realize it often takes marrying up the lifestyle index results and a face-to-face conversation to flesh out the full details of patients’ symptomology.

Brian Sirgany, OD, of Sirgany Eyecare in Cortland, N.Y., has also experienced discrepancies between virtual and in-person answers, but in his case, patients are more open face-to-face. "What we've found is a lot of people will say, 'No, no, no' on the questionnaire, but after we go through the exam, they have a large misalignment," he said. "And then we go back and ask again, 'So, you're not having headaches?' And they say, 'Oh yeah. I've had headaches for years, but there's not much you can do for them.' So, a lot of times the conversation evolves to where I can now say, 'For the last 15 years, we've given you the best care and the best glasses possible. However, even though I could help you see better, I couldn't also help you feel better before because this technology didn't exist. Now we can really help you.'"

"We utilize the lifestyle index, and anyone indicating threes, fours, or fives gets tested on the NMD," said Rob Szeliga, OD, of Spring Hill Eyecare in Spring Hill, Tennessee, referring to his patients' symptom frequency. "I will review their lifestyle index and discuss their symptoms, usually when the optician is on the way to the room to review what I am prescribing. When the optician arrives, I'll ask the patient to reiterate their symptoms to my optician, and then we discuss together that I'm prescribing Neurolenses to solve their issues."

Neurolens addresses common binocular vision issues using a three-step process. As just discussed, step one is efficiently identifying patient symptomology using a basic online symptom screener that every patient can complete

The NMD2 is accurate to the 1/100<sup>th</sup> prism diopter, which is a level of accuracy unparalleled by more traditional methods like cover tests. It also has a small footprint that will easily fit in a practice; and the test takes less than two minutes, so there is no risk of creating a bottleneck during pre-test. The NMD2 provides a plethora of information, including binocular and monocular PDs, a measurement quality score, horizontal and vertical phorias, an AC/A ratio, and of course the Neurolens value, which is a prescribable amount of base-in or base-out prism to incorporate in a patient's pair of Neurolenses. 

**A**s with most optometric treatments, educating the patient in the exam room about their vision and related symptoms, and how you can help them, is among the best ways to get them to embrace your prescription. Neurolenses are no different, and the company provides a variety of tools to do just that.

“Neurolens provides a measurement results summary for every patient, which visualizes their symptoms and level of misalignment; so I’ll put their results up on the screen in my exam room to show them,” said Brian Sirgany, OD, of Sirgany Eyecare in Cortland, N.Y., describing the tool available to all Neurolens providers in their Neurolens



portal, which he uses to explain the patient's condition to them. "If their eyes are not converging enough, it shows what their target is versus where their eyes are, so normal versus abnormal."

Troy White, OD, of Kapperman, White & McGarvey Eyecare in Chattanooga, Tennessee, also relies on this virtual results tool. "We pull up their results in the exam lane, and it gives us a visual of where their eye alignment is at distance and near," said Dr. White. "It's a pretty quick minute to minute-and-a-half explanation of their symptoms. Before that, they didn't realize that the symptoms were related to their eye misalignment and that there is a solution for it."

In addition to this measurement results summary tool, optometrists who are successful with Neurolens have also developed their own scripts to routinely discuss the technology with their patients who will benefit from it.

**"All day long, your eyes are trying to compensate for misalignment. That causes the whole system to overflow, and that results in headaches, neck aches, eye fatigue, etc."** – Jason Hurley, OD,

EyeCare of Rigby, Rigby, Idaho



### SIMPLIFYING THE TRIGEMINAL NERVE

The symptoms of Digital Vision Syndrome can be traced back to the trigeminal nerve. Proprioceptive information is sent to brain via the trigeminal nerve; but, when there is a proprioceptive mismatch between misaligned eyes and your vestibular and muscular systems, this creates a neural conflict and leads to an inaccurate gaze response. This leads to an overstimulation of the trigeminal nerve, and this overstimulation leads to a painful stimulation of several parts of the face and neck. This is why these common symptoms can so often be tracked back to binocular vision issues.

However, it's important to deliver this information in a simplified way that resonates with patients.

Jason Hurley, OD, EyeCare of Rigby, Rigby, Idaho, takes a complex topic, such as the trigeminal nerve, and simplifies it for his patients: "I teach my patients about the trigeminal nerve. I let them know that, 'Hey, this is the trigeminal nerve. I call it the sensory nerve of your head. It supplies your jaw, it supplies your forehead, and then it spiderwebs all the way through your head and back down through your neck. And then I say, 'The number one branch of this nerve is called your ophthalmic branch. It is responsible for innervating your eye muscles and keeping your eyes pointed on target. If your eyes are not pointing on the target, then that nerve continually has to fire and compensate for that misalignment. That causes the whole system to overflow, and that results in headaches, neck aches, eye fatigue, etc. So, all day long, your eyes are trying to compensate for that misalignment. That's where Neurolenses come in. Neurolenses use prism, and prism bends light to where your eyes are positioned so they're not having to compensate for that misalignment. We could put this technology in your glasses and get you a pair of glasses that gives you clarity and sharpness but also relieves your headaches or other symptoms.' That's how I do it. That's how I explain the trigeminal nerve. I keep it simple, and that's very important."

Because the trigeminal nerve is central to explaining how and why Neurolens contoured prism lenses are so effective at addressing Digital Vision Syndrome, other optometrists educate their patients in a similar way. Jordan Dau, OD, of Dau Family Eye Care in St. Johns, Florida, explains the trigeminal nerve this way, "Your eyes have a misalignment that can cause these symptoms because of their connections with the nerves. This is neurological. You have a nerve that stretches from the shoulder to the top of the head that controls so many different things."

Dr. White also discusses the trigeminal nerve with Neurolens patients: "What I'll usually do is describe how the trigeminal nerve is involved, and I'll say 'symptoms could include,' and then I'll go through chronic headache, tired eyes, glare at night, dry eye sensation, motion sickness, dizziness, grinding your teeth, clenching your jaws, and neck and shoulder stiffness. It's amazing—patients will say, 'Well, you just checked off about five of my six issues.' When you make that connection, then you know the lens will be beneficial to them."


### ANALOGIES HELP TELL THE STORY

Painting a picture for patients using analogies can also help simplify and clarify what could be a complex topic.

One successful Neurolens optometrist compares alleviating eye misalignment using contoured prism to helping a waiter balance unevenly dispersed trays, and another compares it to the stress that can result from holding even a small amount of weight in an outstretched arm for long periods of time.

"Think of a waiter juggling 10 plates of food. It's easier to juggle 10 plates of food when they're all equal weights," said Dr. Dau. "But if someone orders the 10-pound burrito, it's very difficult to juggle everything equally when you have so much weight on one end. In the same way, we have a nerve that's juggling all these things, but this eye misalignment takes away from your ability to get the right feedback. All these other things—your posture muscles, your inner ear, your balance system—start to fall apart because of your body's determination to prevent double vision. But Neurolenses fix the underlying misalignment, and suddenly the 10-pound burrito is taken off, and you can focus on everything equally. Backaches are getting better, headaches are getting better, dizziness, vertigo, light sensitivity, dryness, all these random things start to get better because we're taking the weight off the system in other places. We explain it this way to patients in the exam room so it makes sense to them, and they see the possibility of this actually helping with things that they never knew could be fixed. And that's why we have such a high conversion rate."

Rob Szeliga, OD, of Spring Hill Eyecare in Spring Hill, Tennessee, uses a different analogy: "I explain that most peoples' eyes are more comfortable looking off into the distance, but our world has changed where our eyes must constantly converge to look at screens. This irritates the largest nerve in your brain that runs from your forehead, through your eye muscles, and down your neck. I explain that Neurolenses are like having arm rests for your eyes. All of our exam lane chairs have armrests, and patients are usually using them. I'll ask them to hold their arms straight out in front of them and say, 'That doesn't take much effort, but how long can you hold your arms there? How long is your workday? Could you hold your arms in that position for an eight-hour day? If you had to hold them there all day long, your arms would be shaking with fatigue.'"

Whether their optometrist uses analogies, visual aids, or other educational techniques to explain the benefits of Neurolenses, patients are often surprised to learn that they have misaligned eyes, but they are encouraged to learn that this can be fixed using optics. More importantly, they are also anxious to try it. 

## A Proven Technology to Increase Revenue and Build Your Practice

Ultimately, the Neurolens technology that you have incorporated to change patients' lives will also boost your bottom line and help grow your practice. That's the unanimous consensus among practices that have already incorporated Neurolens.

Here are some examples of the difference adding this solution has made to the practices incorporating it and some ways in which the optometrists prescribing Neurolenses find opportunities to increase their sales.

### IMMEDIATE BOOST TO YOUR BOTOM LINE

Even though Dau Family Eye Care in St. Johns, Florida, was a cold start practice less than five years ago and, like everyone, fought through the challenges brought by Covid-19, Jordan Dau, OD, has still experienced strong practice profitability, thanks in large part to his decision to implement Neurolens. "We generated roughly \$90,000 in profit the first six months alone," said Dr. Dau. "Because it is a cash pay service, it gave us the flexibility to buy additional equipment and diversify the ways we can take care of our patients."

Others also experienced substantial growth when incorporating Neurolens. "Revenue per patient has been about 18% to 20% higher after implementing Neurolens," said Brian Sirgany, OD, of Sirgany Eyecare in Cortland, New York.



**"Neurolens is one of the best revenue-generating things that optometrists can do."** – Jason Hurley,

OD, EyeCare of Rigby, Rigby, Idaho

Jason Hurley, OD, of EyeCare of Rigby in Rigby, Idaho, describes his practice's growth in round numbers: "Neurolens is one of the best revenue-generating things that optometrists can do. It's increased our revenue per patient around \$90 to \$100 per patient. That's a significant boost to the bottom line right there."




## THE BEST REFERRALS COME FROM SATISFIED PATIENTS

While the benefits of Neurolens are strong selling points on their own, there are ways to boost sales with additional tactics, such as referrals from satisfied patients and converting existing patients.

Prescribing Neurolenses to multiple members of a family or multi-pair sales to patients that would benefit from multiple lens designs are great ways to increase your number of Neurolens sales. According to Rob Szeliga, OD, of Spring Hill Eyecare in Spring Hill, Tennessee: "We have many examples of multiple family members who all purchase Neurolenses and patients who have referred friends and coworkers. We also have patients who have purchased multiple pairs. There is also opportunity with patients purchasing different lens styles; for example, a progressive and an office design. We have many patients who purchase Neurolenses in their full prescription and a second pair that is plano to wear over their contact lenses."

Dr. Sirgany promotes plano for contact lens wearers as well, but he also includes LASIK patients. "About 20% of our Neurolenses sold are plano," he said. "Contact lens wearers have to decide, 'Okay, I'll wear my contacts to work with Neurolenses over them or just wear my prescription Neurolenses.' I've had a few people make the decision to get the plano to wear over their contact lenses, and they do well. LASIK patients, though sometimes a bit harder to convert due to the investment they have made specifically to avoid glasses, are often already wearing plano blue light lenses. For this segment of LASIK patients, it's a really easy segue for them into Neurolenses when needed."

Ultimately, patients who buy multiple pairs or those who try the technology as a result of a referral have nothing to lose because of the full refund the company offers. "If the patient does not experience the visual benefit or symptom relief they expect, Neurolens will actually give us a full refund on the glasses, which we extend to the patient," said Dr. Dau." The fact that we've done 400 and only three people had returns is even more impressive." 



## Top 4 Best Practice Tips for Success with Neurolens

**A**fter experiencing success not just fitting Neurolenses but actually changing their patients' lives, most practitioners agree on the best practices for using the technology. Here are the top four tips they recommend for those starting out with Neurolens in their practice. By far, the number one suggestion that all Neurolens practitioners adhere to is not only training their staff about the technology but letting them experience it themselves as well.

### TIP #1: STAFF BUY-IN

One of the best ways to expose your patients to Neurolens *and* encourage them to try out the contoured prism technology is by first ensuring buy-in among your staff members. Considering the fact that the proven effectiveness of Neurolenses is its best selling point and patients that experience that effectiveness can't help but share their experience with others, an office full of employees who are personally having success wearing these lenses will be your best advocates to convince your patients to try them as well.

"In order to be successful in the office, you have to gain buy-in from your staff. The staff confidence builds, and it grows into positive energy in the office," said Brian Sirgany, OD, of Sirgany Eyecare in Cortland, New York. "All the staff members were tested, and if symptomatic, they received a pair of Neurolenses. Once the staff bought in, they were able to educate the patients. The key is getting the staff to understand that these aren't your typical pair of eyeglasses. It's not just another progressive lens or another coating. It's a whole new technology."

Jordan Dau, OD, of Dau Family Eye Care in St. Johns, Florida, agrees that this is an entirely new technology, and the best way to start incorporating it into your practice is with an engaged staff "The first and biggest thing is to make sure your staff is invested," said Dr. Dau. "This is a unique technology; but as much as I may be excited about it in the exam room, the opticians are not going to be able to sell this to a patient if they don't believe in it themselves. When we introduced Neurolenses, we gave every single member of the staff a free pair if they were symptomatic. If they were not symptomatic, we would give a free pair of Neurolenses to their kids or their spouse, or a dear friend,

or someone else who was symptomatic, so that they could see the results through someone that they believed, trusted, and cared about. Now, every single one of our staff members will speak personally about how Neurolens has affected their lives or the life of someone very close to them. They speak with passion and conviction and believe that this technology works and will help our patients."

Troy White, OD, of Kapperman, White & McGarvey Eyecare in Chattanooga, Tennessee, agrees: "When you test all your staff and those having issues start getting symptom relief, they're going to be advocates as well."

In addition to sharing their own testimonials, staff can also recount the success stories of other patients. According to Jason Hurley, OD, of EyeCare of Rigby in Rigby, Idaho: "I have staff members who will call our patients three weeks to a month after they've received their Neurolenses to see how they're doing. When my staff gets to hear those successes then they really get on board with selling Neurolenses. My staff knows that we've changed people's lives, and when your staff is on board, game over. It works!"

**"Whether or not they report a significant degree of symptoms on the lifestyle index, I screen every patient on the NMD2."**

– Allise Markowski, OD, of Connecticut Vision Associates in Suffield, Connecticut



## **TIP #2: THE HANDOFF**

As is often the case with anything prescribed by the optometrist, a handoff to the optician with a discussion about the prescription will reinforce the doctor's message to the patient. That rule also holds true for Neurolenses, for which Dr. White recommends: "We do a handoff in the exam lane so when the optician comes back, I'll say to the optician, 'Buffy, this is Mr. Jones. He's having headaches and eye strain. We talked about Neurolenses and how they'll help those symptoms.' Then I look at Mr. Jones and say, 'Buffy will help you with those glasses.' That handoff is huge."

Of course, it's not all up to the optician. The optometrist must exude confidence when prescribing Neurolenses, both in the exam room and during the handoff. "We need to be confident when prescribing Neurolenses," said Dr. Hurley. "You have to say, 'I am prescribing Neurolenses for you because it's going to relieve your headaches and other symptoms.'"

## **TIP #3: KEEP IT SIMPLE**

Each of these tips can build upon the previous one. For example, having educated staff members who have experienced the benefits of Neurolenses for themselves available at the handoff can assist the optometrist with the next tip: keeping things simple.

"When we first implemented Neurolens, I would take up a lot of chair time going into too much detail, so I've learned to keep it simple," said Rob Szeliga, OD, of Spring Hill Eyecare in Spring Hill, Tennessee. "I'll say, 'This is where your eyes want to be, but this is where they need to be. The difference between these two points is your eyes at rest versus at work. That's it, and my opticians are trained to go into greater detail.'"

Dr. Hurley agrees on keeping it simple, and just like Dr. Szeliga, suggests limiting your conversation to how their eyes are actually working and how they should be working: "You have to keep the presentation to the patient simple. Keep it on their level, show them how their eyes are working and how Neurolenses can benefit them."

## **TIP #4: TEST EVERYONE**

Another best practice that many optometrists who are successful with Neurolens adhere to is to test every patient, even if they don't report a high degree of symptoms on the lifestyle index. "You're going to learn that the symptoms that are reported do not always match up with the findings from running the Neurolens Measurement Device, so run the test on every person who is able to sit through the test," said Dr. Sirgany.

"Whether or not they report a significant degree of symptoms on the lifestyle index, I screen every patient on the NMD2," affirms Allise Markowski, OD, of Connecticut Vision Associates in Suffield, Connecticut.

Dr. White also tests everyone: "For over a year now, I have tested every patient, which increases your likelihood of catching patients who might otherwise not get tested and not benefit. I test everybody, and I educate everybody, and that's either going to lead to helping the patient that's in the chair or a referral getting someone else to come in."