The easy-to-use Icare tonometers revolutionize IOP home-monitoring making it quick, effortless and effective. Icare HOME tonometer is designed for home use for Glaucoma Patients who need regular IOP monitoring by their ophthalmologists’ recommendation.

The device is based on a rebound measuring principle that requires no drops or air; neither specialized skills for its use.

**KEY FEATURES**

- **Icare® EyeSmart**: Automatic OD/OS recognition technology.
- **Icare® EasyPos**: Intelligent positioning assistant for the correct alignment of the tonometer.
- **Icare® AMS**: Automatic measuring sequence: series- and single mode with one button.
IOP SELF-MONITORING
ANYWHERE, ANYTIME

+ IMPROVED COST AND CLINIC EFFICIENCY
+ BETTER CARE AND PATIENT COMFORT
+ MORE RELIABLE DATA

mmHg

CURRENT PROCESS (24hrs)

mmHg

HOME (1 DAY)  HOME (2 DAY)  HOME (3 DAY)

24H IOP monitoring at the clinic
IOP self-monitoring with Icare HOME
“In patients with suspected glaucoma, daily intraocular pressure monitoring is also essential. In a large proportion of these patients, IOP elevations may be missed during regular scheduled examinations. Knowing these pressure peaks exist can help control the disease and personalize and optimize the treatment regimen. Autotonometry is an efficient option for this purpose, as well as being comfortable for the patient.”

José María Martínez de la Casa, MD, Professor of Ophthalmology, University of Madrid, Spain

“Taking normalicare measurements is very straightforward – I can train novice technicians in 15 minutes. Teaching patients to take their own measurements takes a little longer but is time well spent (around 20 minutes to set up the device to fit their face and train). The effort is worthwhile because when the patient returns you have a set of IOP measurements for both eyes taken at different times a day and night over several days. This saves the patient returning repeatedly to an eye clinic. Old-fashioned “phasing” is more time consuming, provides fewer measurements and is relatively useless being restricted to “office time”.

I recommend phasing done by the patient particularly anyone suspected of spiking IOP because of brittle narrow angles or sleep apnoea.”

Robert Harvey, Consultant Ophthalmologist, Victoria, Australia

“TECHNICAL DATA

TA022

Dimensions: approximately 11cm x 8cm x 3cm
Weight: approximately 150g
Power supply: 2 x CR123 non-rechargeable batteries
Measurement range: 5 – 50 mmHg
Accuracy: (95% tolerance interval relative to manometry): ± 1.2 (< 20 mmHg)
± 2.2 (≥ 20 mmHg)
Repeatability (coefficient of variation): < 8%
This device has EF-type electric shock protection

Download from www.icaretonometer.com