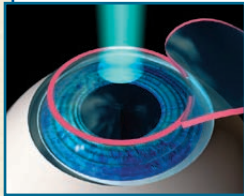


Refractive Error

The eye's ability to refract or focus light sharply is based on two main anatomic features: the overall length of the eye and the curvature of the eye's surface or cornea. Eyeglasses and contact lenses are fabricated with precise curvatures, which help offset flaws in our eyes optical system. Many of today's vision correction surgery such as LASIK also aim to correct refractive errors (nearsightedness, farsightedness, astigmatism) by changing the shape of our cornea so that light rays are in focus.



The LASIK Procedure

Lasik is the most commonly performed refractive surgery procedure.

In this procedure Dr. Turner uses a precision instrument called a microkeratome or IntraLase Laser to create a thin flap at the top of your cornea, which is lifted up, but remains attached at one side. Next, the excimer laser is programmed to correct your specific refractive error, removing a microscopic layer of cornea. This part of the procedure takes less than one minute. The corneal flap is put back into place and, because of its natural bonding properties, healing starts immediately. No stitches are required.

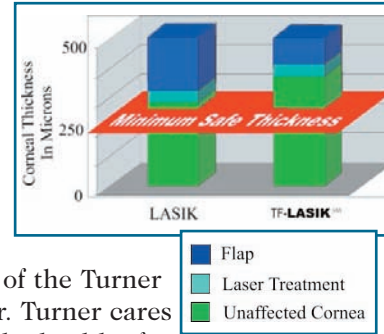
Custom LASIK

Custom LASIK utilizes WaveFront technology to measure your eyes. Digital technology identifies and measures imperfection in your eye 25 times more precisely than is possible with conventional methods. These measurements create a customized treatment "map" for the laser. The laser is programmed with the WaveFront information, giving the patient a treatment that is tailored to their individual visual needs. Custom LASIK can help individuals achieve

their best possible vision, typically 20/20 or better.

TF-LASIK Procedure

This is an advanced form of LASIK developed by Dr. Stephen Turner of the Turner Eye Institute. Dr. Turner cares so much about the health of his patient's eyes, he realized in 2001 that the original microkeratome was, in his opinion, removing too much corneal tissue. He developed his own microkeratome which ultimately creates a Thin Flap, leaving the cornea in a healthier state, and leaves more cornea tissue. This reduces the risk of corneal ectasia, a type of distortion of the cornea. In addition, many patients having TF-LASIK experience faster recovery times and reduced post-op dryness. The procedure was developed to enhance safety for the patient by maximizing the thickness of the cornea left unaffected by the procedure.



All Laser I-LASIK IntraLASE 60-FS Technology

This breakthrough, computer controlled all-laser, with its unique IntraLASE software, provides Dr. Turner with a high technology, blade-free approach to creating the corneal flap in laser vision correction surgery. The results are unparalleled safety for the patient and unprecedented control for Dr. Turner. The corneal flap procedure is customized, according to each individual patient's vision disorder and corneal anatomy.

IntraLASE provides remarkable accuracy, and may enable patients who have previously been dismissed as high risk due to a thin cornea, to be re-evaluated for vision correction surgery.

Stephen G. Turner, MD, FACS

Whether it is Refractive, Cataract, or Keratoconus conditions, Dr. Turner has spent his entire career searching for new and innovative techniques to give his patients the best visual result.



"In all of my years of practice, restoring my patients vision is the most rewarding feeling. We are changing people's lives."

Dr. Stephen Turner received his Doctorate of Medicine from Baylor College of Medicine in Houston Texas in 1968. His Ophthalmology residency was performed at the University of California, San Francisco. He served as the director of the Eye Bank at St. John's Hospital in Jerusalem and was visiting fellow at the Moorfield Eye Hospital in London.

In 1976 he founded the Turner Eye Institute Medical Group, Inc., specializing in the diagnosis and treatment of conditions and diseases of the cornea, anterior segment and external eye structures.

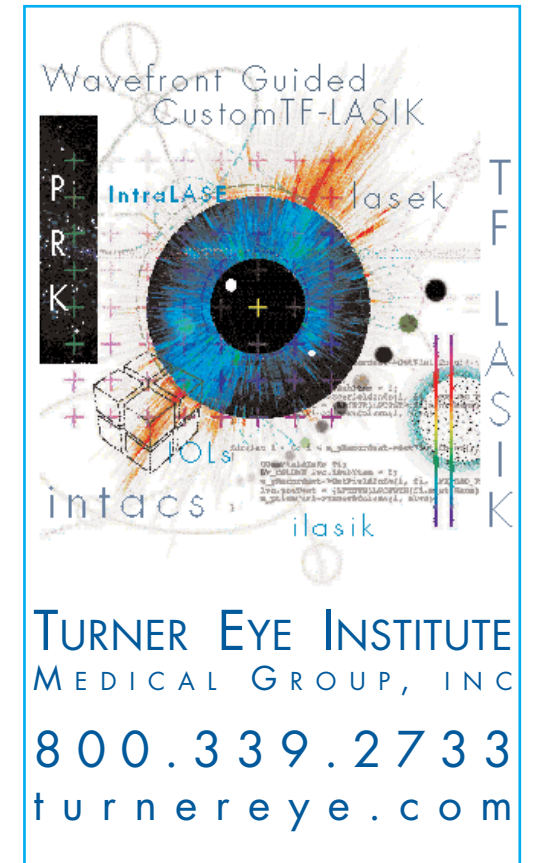
Dr. Turner is certified by the American Board of Ophthalmology and is a Fellow of the American Board of College of Surgeons. He is also a member of the American Medical Association, the California Medical Association, and the American Society of Cataract and Refractive Surgery.

Dr. Turner has been named "One of Top Doctors" by San Francisco Magazine, and "One of Silicon Valley's Best Doctors" by San Jose Magazine. He has been involved in research and has performed over 40,000 procedures. His post operative statistics are unbelievable with approximately 97% of his patients seeing 20/20 or better. He continues to lead the way, and is the preferred Refractive & Cataract Surgeon in the Entire Bay area. Many of Dr. Turner's patients are high profile, well-known Celebrities and Athletes, and we respect their privacy. People know if you want the best, go to Dr. Turner. With Dr. Turner's experience, cutting edge technology, and the most advanced lasers available, we will continue to serve our communities, and bring the best result in vision correction.

Thank you for considering us for your Vision Correction Procedures. We look forward to enhancing your vision.

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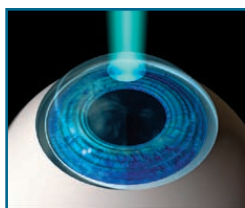
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Alternative Refractive Procedures

PRK

Photorefractive Keratectomy (PRK) is a surgical procedure performed with the excimer laser. In PRK, the laser is preset to vaporize portions of tissue on the surface of the cornea. No flap is created. The pattern and amount of tissue removed is determined by the amount of correction need. Dr. Turner usually prescribes medication postoperatively to help with the healing process.



EPI-LASEK

EPI-LASEK is a procedure that is similar to LASIK. The primary difference is that for EPI-LASEK the flap is created from corneal epithelium (top layer of cornea), while in traditional LASIK the stroma is also involved. Once the epithelium has been removed, Dr. Turner applies the excimer laser to the surface of the cornea (as in PRK laser vision correction). We have found that EPI-LASEK may be a better option for those with dry eye syndrome. The postoperative care of EPI-LASEK involves a therapeutic, soft bandage contact lens that is worn for a few days to reduce discomfort.

Intacs for Keratoconus

Keratoconus is a degenerative non-inflammatory disorder of the eye in which structural changes within the cornea cause it to thin. This creates a steepening or coning of the cornea. The change in the cornea's shape can have a dramatic impact on one's vision. Although Keratoconus rarely results in total blind-

ness, 20% of all patients with this condition will – at some time – undergo a corneal transplant, according to medical experts. Intacs - corneal implants - is an FDA approved option used to stabilize the cornea, improve vision and potentially defer the need for corneal transplant. Intacs consist of two small clear crescent shaped pieces that are inserted into the cornea causing the cornea to flatten out, resulting in reduction of astigmatism, and ultimately improving the vision by stabilizing the cornea. Dr. Turner has been doing the Intacs procedure for 8 years, and has had great results. He has saved many of his patients from corneal transplants. This procedure usually takes about 15 to 30 minutes. Following the procedure, a bandage therapeutic contact lens is placed over the eye for a few days for comfort.



Visian & Verisyse Phakic Intra Ocular Lens

For patients with high degree's of nearsightedness, or farsightedness

Phakic Intraocular lenses (Phakic IOL) are used to treat moderate to severe vision corrections. With over 18 years of use and 250,000 procedures performed worldwide, results prove that the designs are safe and effective for highly nearsighted people who are tired of thick glasses and are not candidates for LASIK eye surgery. The procedure involves placing the Phakic IOL between your cornea and your natural lens. This gives your eye another focusing lens that provides high quality, high definition vision, like a normal eye. Although the Phakic IOL's are intended to be permanent, the procedure is reversible if desired. Implanting the

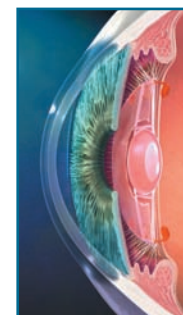
Phakic IOL is an outpatient procedure that takes around 15 to 30 minutes. Usually, one eye is treated at a time.

Cataract

A cataract is a clouding of the natural lens of the eye which impairs vision and subsequently must be removed surgically. Dr. Turner will extract the old cloudy lens and replace it with a Crystalens, Multifocal lens, or Intraocular Lens. The exact same procedure can be performed as a form of refractive surgery when a lens is not clouded in order to change optical power as a way to correct nearsightedness or farsightedness.

Crystalens Intra Ocular Lens (IOL)

Crystalens is a cataract replacement lens that works naturally with your eye muscles to give you the focusing and quality of vision you enjoyed when you were younger. It is the first and only accommodating IOL in the United States. The design element that makes Crystalens the state-of-the-art replacement lens are “hinges” which are designed to allow the lens to move, or accommodate, to focus on objects near, far and all distances in-between.



Multifocal Intra Ocular Lens (IOL)

This unique technological innovation can provide quality vision throughout the entire visual spectrum, near through distance, with increased independence from reading glasses or bifocals. As we perform daily activities such as reading, watching television, or working at the

computer our eyes are constantly looking at objects at varying distances – up close, far away and everything in-between.

Intra Ocular Lens

An Intraocular lens (IOL) is an implanted lens, in the eye usually replacing the eye's natural crystalline lens because it has been clouded over by a cataract. This will allow your distance vision to become clear again, however; in most cases you will be dependent on reading glasses for up close.



“Dr. Turner implanted lenses into my eyes. It's been about 1 year and I can see perfectly. My boyfriend teases me about having bionic eyes.”

April Sommers
Star 101.3,
Morning Show DJ

“Thanks to Dr. Turner, I haven't been able to see this well since third grade!”

Art Howe
Former General Manager,
Oakland Athletics



“A lot of people say that they're blind. Well, I was legally blind. I needed corrective lenses to drive an automobile. And now with surgery...it has been terrific. I've thrown away my glasses and corrective lenses. Now I don't need anything to see the world. And, it didn't hurt. It was painless, totally painless!”



Melanie Morgan
KSFO Radio Personality

More information is available on our website: www.turnereye.com