

PATIENT INSTRUCTIONS

for the 55 Spherical/Aspheric, 55 Spherical/Aspheric Blue, 55 UV Spherical/Aspheric, 55 UV Spherical/Aspheric Blue, 55 UV Spherical/Aspheric Color, 55 Toric, 55 Toric Blue, 55 UV Toric, 55 UV Toric Blue, 55 Multifocal, 55 Multifocal Blue, 55 UV Multifocal and 55 UV Multifocal Blue (methafilcon A) Soft (Hydrophilic) Contact Lens

CAUTION - Federal (USA) law restricts this device to sale by or on the order of a licensed practitioner

INTRODUCTION:

55 Spherical/Aspheric, 55 Spherical/Aspheric Blue, 55 UV Spherical/Aspheric, 55 UV Spherical/Aspheric Blue, 55 UV Spherical/Aspheric Color, 55 Toric, 55 Toric Blue, 55 UV Toric, 55 UV Toric Blue, 55 Multifocal, 55 Multifocal Blue, 55 UV Multifocal and 55 UV Multifocal Blue (methafilcon A) Soft (Hydrophilic) Contact Lens are intended for use in persons who have ametropia (myopia, hyperopia and astigmatism).

Eye care practitioners may prescribe the lenses for single use disposable wear or frequent replacement. When prescribed for a Disposable Wearing Schedule, the lenses are not intended to be cleaned or disinfected and should be discarded after a single use. When prescribed for a Frequent Replacement Program, the lenses may be disinfected using chemical or hydrogen peroxide disinfecting systems.

The lens material is hydrophilic (water absorbing) pliable material, and when placed on the eye, covers the cornea and a small portion of the sclera of the eye.

WEARING RESTRICTIONS AND INDICATIONS:

The 55 spherical/aspheric lenses are indicated for daily wear for the correction of refractive ametropia (myopia, hyperopia) in aphakic or not-aphakic persons with non-diseased eyes that may exhibit refractive astigmatism up to 2.00 diopters that does not interfere with visual acuity.

The 55 toric lenses are indicated for daily wear for the correction of refractive ametropia (myopia, hyperopia and astigmatism) in aphakic or not-aphakic persons with non-diseased eyes that may exhibit refractive astigmatism up to 2.50 diopters that does not interfere with visual acuity.

The 55 multifocal lenses are indicated for daily wear for the correction of refractive ametropia (myopia and hyperopia) and presbyopia in aphakic or not-aphakic persons with non-diseased eyes that may exhibit refractive and/or corneal astigmatism up to 2.00 diopters that does not interfere with visual acuity and require add power of up to +3.25 diopters.

The 55 UV lenses help protect against transmission of harmful UV radiation to the cornea and into the eye.

Eye care practitioners may prescribe the lenses for single use disposable wear or frequent replacement. When prescribed for a Disposable Wearing Schedule, the lenses are not intended to be cleaned or disinfected and should be discarded after a single use. When prescribed for a Frequent Replacement Program, the lenses may be disinfected using chemical or hydrogen peroxide disinfecting systems.

The 55 spherical/aspheric, 55 toric, and 55 multifocal lenses described in this booklet should be removed from your eyes for routine cleaning and disinfecting as prescribed by your eyecare practitioner.

DO NOT WEAR YOUR 55 Spherical/Aspheric, 55 Spherical/Aspheric Blue, 55 UV Spherical/Aspheric, 55 UV Spherical/Aspheric Blue, 55 UV Spherical/Aspheric Color, 55 Toric,

55 Toric Blue, 55 UV Toric, 55 UV Toric Blue, 55 Multifocal, 55 Multifocal Blue, 55 UV Multifocal and 55 UV Multifocal Blue (methafilcon A) Soft (Hydrophilic) Contact Lens WHILE SLEEPING.

CONTRAINDICATIONS (REASONS NOT TO USE):

DO NOT USE the 55 spherical/aspheric, 55 toric, and 55 multifocal lenses for Daily Wear when any of the following conditions exist:

- Acute and subacute inflammation or infection of the anterior chamber of the eye
- Any eye disease, injury, or abnormality that affects the cornea, conjunctiva, or eyelids
- Severe insufficiency of lacrimal secretion (dry eyes)
- Corneal hypoesthesia (reduced corneal sensitivity), if not-aphakic
- Any systemic disease that may affect the eye or be exaggerated by wearing contact lenses
- Allergic reactions of ocular surfaces or adnexa that may be induced or exaggerated by wearing contact lenses or use of contact lens solutions

WARNING: Contact lens solutions is only used for a Frequent Replacement Program but NOT for the Disposable Wearing Schedule

- Allergy to any ingredient, such as mercury or Thimerosal, in a solution which is to be used to care for the 55 spherical/aspheric, 55 toric, and 55 multifocal lenses.

WARNING: Lens care products are only used for a Frequent Replacement Program but NOT for the Disposable Wearing Schedule

- Any active corneal infection (bacterial, fungal, or viral)
- If eye becomes red or irritated

WARNINGS:

You should be advised of the following warnings pertaining to contact lens wear:

- Problems with contact lenses and lens care products could result in serious injury to the eye. It is essential that patients follow their eyecare practitioner's direction and all labeling instructions for proper use of lenses—and lens care products, including the lens case. Eye problems, including corneal ulcers, can develop rapidly and lead to loss of vision.

WARNING: Lens care products and the lens case are only used for a Frequent Replacement Program but NOT for the Disposable Wearing Schedule

- Daily wear lenses are not indicated for overnight wear, and patients should be instructed not to wear lenses while sleeping, Clinical studies have shown that the risk of serious adverse reactions is increased when the lenses are worn overnight.
- Studies have shown that contact lens wearers who are smokers have a higher incidence of adverse reactions than nonsmokers.
- If you experience eye discomfort, excessive tearing, vision changes, or redness of the eye, you should be instructed to immediately remove lenses and promptly contact your eyecare practitioner.

NOTE: Long term exposure to UV radiation is one of the risk factors associated with cataracts. Exposure is based on a number of factors such as environmental conditions (altitude, geography, cloud cover) and personal factors (extent and nature of outdoor activities). UV-absorbing contact lenses help provide protection against harmful UV radiation. However, clinical studies have not been done to demonstrate that wearing

UV-absorbing contact lenses reduces the risk of developing cataracts or other eye disorders. Consult your eye-care practitioner for more information.

WARNING: UV-absorbing contact lenses are NOT substitutes for protective UV absorbing eye wear such as UV absorbing goggles or sunglasses because they do not completely cover the eye and surrounding area. You should continue to use UV absorbing eye wear as directed

PRECAUTIONS:

Special Precautions for Eyecare Practitioners:

- The potential impact of these factors on the patient's ocular health should be carefully weighed against the patient's need for refractive correction; therefore, the continuing ocular health of the patient and lens performance on the eye should be carefully monitored by the prescribing eyecare practitioner.
- If you wear aspheric contact lenses to correct presbyopia, you may not achieve the best corrected visual acuity for either far or near vision. Visual requirements vary with the individual and should be considered when selecting the most appropriate type of lens for each patient.
- Aphakic patients should not be fitted with the 55 spherical/aspheric, 55 toric, and 55 multifocal lenses until the determination is made that the eye has healed completely.
- Fluorescein, a yellow dye, should not be used while the lenses are on the eyes. The lenses absorb this dye and become discolored. Whenever fluorescein is used in eyes, the eyes should be flushed with a sterile saline solution that is recommended for in-eye use.
- Before leaving the eyecare practitioner's office, you should be able to remove lenses or should have someone else available who can remove the lenses for you.
- You should remove the lenses immediately if the eye becomes red or irritated.
- Different solutions cannot always be used together, and not all solutions are safe for use with all lenses. Use only recommended solutions.

WARNING: Lens care products are only used for a Frequent Replacement Program but NOT for the Disposable Wearing Schedule

- Never use solutions recommended for conventional hard contact lenses only.
 - Chemical disinfection solutions should not be used with heat unless specifically indicated on product labeling for use in both heat and chemical disinfection.
 - Always use fresh un-expired lens care solutions.
 - Use only a chemical (not heat) lens care system. Use of a heat (thermal) care system can damage the 55 spherical/aspheric, 55 toric, and 55 multifocal lenses.
 - Sterile unpreserved solutions, when used, should be discarded after the time specified in the labeling directions.
 - Do not use saliva or anything other than the recommended solutions for lubricating or wetting lenses.
 - Always keep the lenses completely immersed in the recommended storage solution when the lenses are not being worn (stored). Prolonged periods of drying will damage the lenses. Follow the lens care directions for Care for a Dried Out (Dehydrated) Lens if lens surface does become dried out.
- If the lens sticks (stops moving) on your eye, follow the recommended directions on Care

for a Sticking Lens. The lens should move freely on your eye for the continued health of your eye. If no movement of the lens continues, you should be instructed to immediately consult your eyecare practitioner.

- **Always wash and rinse hands before handling lenses.** Do not get cosmetics, lotions, soaps, creams, deodorants, or sprays in your eyes or on the lenses. It is best to put on lenses before putting on makeup. Water-based cosmetics are less likely to damage lenses than oil-based products.
- **Do not** touch contact lenses with your fingers or hands if the hands are not free of foreign materials, as microscopic scratches of the lenses may occur, causing distorted vision and/or injury to the eye.
- **Carefully** follow the handling, insertion, removal, cleaning, disinfecting, storing and wearing instructions in the Patient Instructions for 55 spherical/aspheric, 55 toric, and 55 multifocal lenses and those prescribed by the eyecare practitioner.

WARNING: The procedures of cleaning, disinfecting, storing are executed only for a Frequent Replacement Program but NOT for the Disposable Wearing Schedule

- **Never** wear lenses beyond the period recommended by your eyecare practitioner.
- If aerosol products such as hair spray are used while wearing lenses, exercise caution and **keep eyes closed** until the spray has settled.
- **Always** handle lenses carefully and avoid dropping them.
- **Avoid** all harmful or irritating vapors and fumes while wearing lenses.
- **Ask** your eyecare practitioner about wearing lenses during sporting activities.
- Inform your doctor (health care practitioner) about being a contact lens wearer.
- **Never** use tweezers or other tools to remove lenses from the lens container unless specifically indicated for that use. Pour the lens into your hand.
- **Do not** touch the lens with fingernails.
- **Always** discard disposable lenses and lenses worn on a frequent replacement schedule after the recommended wearing schedule prescribed by the eyecare practitioner.
- **Always** contact your eyecare practitioner before using any medicine in the eyes.
- **Always** inform your employer of being a contact lens wearer. Some jobs may require use of eye protection equipment or may require that the patient not wear contact lenses.
- As with any contact lens, follow-up visits are necessary to assure the continued health of your eyes. Consult with your eyecare practitioner for a recommended follow-up schedule.

ADVERSE REACTIONS:

The following problems may occur:

- Eyes stinging, burning, itching (irritation), or other eye pain
- Comfort is less than when lens was first placed on eye
- Feeling that something is in eye such as foreign body or scratched area
- Excessive watering (tearing) of the eyes
- Unusual eye secretions

- Redness of the eyes
- Reduced sharpness of vision (poor visual acuity)
- Blurred vision, rainbows, or halos around objects
- Sensitivity to light (photophobia)
- Dry eyes

If you notice any of the above, you should:

- Immediately remove lenses.
- Disposable Wearing Schedule: If the discomfort or problem stops, discard the lens and replace it with a new sterile replacement contact lens. If the discomfort or problem persists, discard the lens and **IMMEDIATELY** consult the eye care professional. **DO NOT** place any contact lens on the affected eye until instructed to do so by the eye care professional.
- Frequent Replacement Wearing Schedule: If the discomfort or problem stops, then look closely at the lens. If the lens is in any way damaged, do not put the lens back on the eye. Place the lens in the storage case and contact the eyecare practitioner. If the lens has dirt, an eyelash, or other foreign body on it, or the problem stops and the lens appears undamaged, the patient should thoroughly clean, rinse, and disinfect the lenses; then reinsert them. After reinsertion, if the problem continues, the patient should immediately remove the lenses and consult the eyecare practitioner.

When any of the above problems occur, a serious condition such as infection, corneal ulcer, neovascularization, or iritis may be present. You should be instructed to keep lens off the eye and **seek immediate** professional identification of the problem and prompt treatment to avoid serious eye damage.

PERSONAL CLEANLINESS FOR LENS HANDLING:

1. Preparing the Lens for Wearing:

It is essential that you learn and use good hygienic methods in the care and handling of your new lenses. Cleanliness is the first and most important aspect of proper contact lens care. In particular, your hands should be clean and free of any foreign substances when you handle your lenses. The procedures are:

- Always wash your hands thoroughly with mild soap, rinse completely, and dry with a lint-free towel before touching your lenses.
- Avoid the use of soaps containing cold cream, lotion, or oily cosmetics before handling your lenses, since these substances may come into contact with the lenses and interfere with successful wearing.
- Handle your lenses with your fingertips, and be careful to avoid contact with fingernails. It is helpful to keep your fingernails short and smooth.

Start off correctly by getting into the habit of always using proper hygienic procedures so that they become automatic.

2. Handling the Lenses:

- Develop the habit of always working with the same lens first to avoid mixups.
- Remove the lens from its storage case and examine it to be sure that it is moist, clean, clear and free of any nicks or tears.

3. Placing the Lens on the Eye:

- Place the lens on the tip of your index finger, keeping the finger as dry as possible.
- Separate the lids by lowering the lower lid with the middle finger.
- Gaze upward forcing the upper lid to move upward, and place your lens gently against the lower portion of the exposed eye.
- Once placed, slide the lens upwards gently, and remove your index finger away from the eye.
- There are other methods of lens placement. If the above method is difficult for you, your eyecare practitioner will provide you with an alternative method.

Note: If after placement of the lens, your vision is blurred, check for the following:

- The lens is not centered on the eye (see "Centering the Lens," next in this booklet).
- If the lens is centered, remove the lens (see "Removing the Lens" section) and check for the following:
 - a. Cosmetics or oils on the lens. Clean, rinse, disinfect, and place on the eye again for frequent replacement wearing schedule. Discard the lens and replace it with a new sterile replacement contact lens for disposable wearing schedule.
 - b. The lens is on the wrong eye.
 - c. The lens is inside out (it would also not be as comfortable as normal).

If you find that your vision is still blurred after checking the above possibilities, remove both lenses and consult your eyecare practitioner.

4. Centering the Lens:

Very rarely, a lens that is on the cornea will be displaced onto the white part of the eye during lens wear. This can also occur during placement and removal of the lenses if the correct techniques are not performed properly. To center a lens follow one of the procedures below:

- Place your index finger onto the lens and slide the lens toward the cornea.
- Alternately, place your finger against the closed lid and gently apply pressure on the eyelid in the direction you want the lens to go.

5. Removing the Lens:

Always remove the same lens first.

- a. Wash, rinse, and dry your hands thoroughly.
- b. Gaze upward and place your index finger directly on the lens. Slide the lens downward, insert your thumb next to the index finger and gently pinch the lens directly off your eye.
- c. Remove the other lens by following the same procedure.
- d. Follow the required lens care procedures described under the heading, CARING FOR YOUR LENSES (CLEANING, RINSING, DISINFECTING, ENZYMING, STORAGE AND REWETTING/LUBRICATING)

WARNING: The procedures of cleaning, rinsing, disinfecting, enzyming, storing and rewetting/lubricating are executed only for a Frequent Replacement Program but NOT for the Disposable Wearing Schedule

Note: If this method of removing your lens is difficult for you, your eyecare practitioner will provide you with an alternative method.

CARING FOR YOUR LENSES (CLEANING, RINSING, DISINFECTING, ENZYMING, STORAGE AND REWETTING/LUBRICATING):

WARNING: The procedures of cleaning, rinsing, disinfecting, enzyming, storing and rewetting/lubricating are executed only for a Frequent Replacement Program but NOT for the Disposable Wearing Schedule. This section is for Frequent Replacement Program only.

1. Basic Instructions:

For continued safe and comfortable wearing of your lenses, it is important that you first clean and rinse, then disinfect and neutralize (for hydrogen peroxide systems) your lenses after each removal, using the care regimen recommended by your eyecare practitioner. Cleaning and rinsing are necessary to remove mucus, secretions, films, or deposits which may have accumulated during wearing. The ideal time to clean your lenses is immediately after removing them. Disinfecting is necessary to destroy harmful germs.

You should adhere to a recommended care regimen. Failure to follow the regimen may result in development of serious ocular complications as discussed in the WARNINGS section above.

If you require only vision correction, but will not or cannot adhere to a recommended care regimen for your lenses, or are unable to place and remove lenses or have someone else available to place and remove them, you should not attempt to get and wear contact lenses.

When you first get your lenses, be sure you have to put the lenses on and remove them while you are in your eyecare practitioner's office. At that time you will be provided with a recommended cleaning and disinfection regimen and instructions and warnings for lens care, handling, cleaning, and disinfection. Your eyecare practitioner should instruct you about appropriate and adequate procedures and products for your use, and provide you with a copy of the Patient Instructions for 55 Spherical/Aspheric, 55 Spherical/Aspheric Blue, 55 UV Spherical/Aspheric, 55 UV Spherical/Aspheric Blue, 55 UV Spherical/Aspheric Color, 55 Toric, 55 Toric Blue, 55 UV Toric, 55 UV Toric Blue, 55 Multifocal, 55 Multifocal Blue, 55 UV Multifocal and 55 UV Multifocal Blue (methafilcon A) Soft (Hydrophilic) Contact Lens.

For safe contact lens wear, you should know and always practice your lens care routine.

- Always wash, rinse, and dry hands before handling contact lenses.
- Always use fresh unexpired lens care solutions.
- Use the recommended system of lens care, either heat (thermal) or chemical (not heat) and carefully follow instructions on solution labeling. Different solutions cannot always be used together, and not all solutions are safe for use with all lenses. Do not alternate or mix lens care systems unless indicated on solution labeling.
- Always remove, clean, rinse, enzyme and disinfect your lenses according to the schedule prescribed by your eyecare practitioner. The use of an enzyme or any cleaning solution does not substitute for disinfection.
- Do not use saliva or anything other than the recommended solutions for lubricating or rewetting your lenses: Do not put lenses in your mouth.
- Never rinse your lenses in water from the tap. There are two reasons for this:
 - a. Tap water contains many impurities that can contaminate or damage your lenses

and may lead to eye infection or injury.

b. You might lose the lens down the drain.

- Your eyecare practitioner should recommend a care system that is appropriate for your 55 spherical/aspheric, 55 toric, and 55 multifocal lenses. Each lens care product contains specific directions for use and important safety information, which you should read and carefully follow.

Note: Some solutions may have more than one function, which will be indicated on the label. Read the label on the solution bottle, and follow instructions.

- Use only fresh multi-purpose (contact lens disinfecting) solution each time you soak (store) your lenses.

WARNING: Do not reuse or “top off” old solution left in your lens case since solution reuse reduces effective lens disinfection and could lead to severe infection, vision loss or blindness. Topping-Off” is the addition of fresh solution to solution that has been sitting your case.

- Discard any remaining solution within the time period after opening recommended by the lens care manufacturers.

WARNING: Using your multi-purpose solution beyond the discard date could result in contamination of the solution and can lead to severe infection, vision loss or blindness.

- Clean one lens first (always the same lens first to avoid mixups), rinse the lens thoroughly with recommended saline or disinfecting solution to remove the cleaning solution, mucus, and film from the lens surface. Follow the instructions provided in the cleaning solution labeling. Put that lens into the correct chamber of the lens storage case. Then repeat the procedure for the second lens.
- After cleaning, disinfect lenses using the system recommended by your eyecare practitioner and/or the lens manufacturer. Follow the instructions provided in the disinfection solution labeling.

WARNING: Rub and rinse your lenses for the recommended amount of time to help prevent serious eye infections. Never use water, saline solution, or rewetting drops to disinfect your lenses. These solutions will not disinfect your lenses. Not using the recommended disinfectant can lead to severe infection, vision loss or blindness.

- To store lenses, disinfect and leave them in the closed/unopened case until ready to wear. If lenses are not to be used immediately following disinfection, you should consult the package insert or your eyecare practitioner for information on storage of your lenses.
- After removing your lenses from the lens case, empty and rinse the lens storage case with solution(s) recommended by the lens case manufacturer; then allow the lens case to air dry. When the case is used again, refill it with fresh storage solution. Replace lens case at regular intervals.
- Your eyecare practitioner may recommend a lubricating/rewetting solution for your use. Lubricating/Rewetting solutions can be used to wet (lubricate) your lenses while you are wearing them to make them more comfortable.
- Do not expose your contact lenses to water while you are wearing them.

WARNING: Water can harbor microorganisms that can lead to severe infection, vision loss or blindness. If your lenses have been submersed in water such as when swimming in pools, lakes, or oceans, you should discard them and replace them with a new pair. Ask your eye

care practitioner (professional) for recommendations about wearing your lenses during any activity involving water.

2. Care for a Sticking [Nonmoving] Lens:

If the lens sticks (stops moving), the patient should be instructed to apply 1 to 2 drops of the recommended lubricating or rewetting solution directly to the eye and wait until the lens begins to move freely on the eye before removing it. If no movement of the lens continues after 5 minutes, the patient should immediately consult the eyecare practitioner.

3. Chemical (Not Heat) Disinfection:

Clean the contact lenses with a recommended cleaning solution and thoroughly rinse them with a recommended rinsing solution.

- After cleaning, to disinfect, carefully follow the instructions accompanying the disinfecting solution in the care regimen recommended by the lens manufacturer or the eyecare practitioner.
- When using hydrogen peroxide lens care systems, lenses must be neutralized before wearing. Follow the recommendations on the hydrogen peroxide system labeling.
- Do not heat the disinfection solution and lenses.
- Leave the lenses in the unopened storage case until ready to put on the eyes.
- Caution: Lenses that are chemically disinfected may absorb ingredients from the disinfecting solution, which may be irritating to the eyes. A thorough rinse in fresh sterile saline solution prior to placement on the eye should reduce the potential for irritation.

4. Lens Deposits and Use of Enzymatic Cleaning Procedure:

Enzyme cleaning may be recommended by the eyecare practitioner. Enzyme cleaning removes protein deposits on the lens. These deposits cannot be removed with regular cleaners. Removing protein deposits is important for the well being of the patient's lenses and eyes. If these deposits are not removed, they can damage the lenses and cause irritation.

Enzyme cleaning does NOT replace routine cleaning and disinfecting. For enzyme cleaning, the patient should carefully follow the instructions in the enzymatic cleaning labeling.

5. Lens Case Cleaning and Maintenance:

Contact lens cases can be a source of bacterial growth. Lens cases should be emptied, cleaned, rinsed with solutions recommended by the lens case manufacturer, and allowed to air dry. Lens cases should be replaced at regular intervals as recommended by the lens case manufacturer or the eyecare practitioner.

WARNING: Do not store your lenses or rinse your lens case with water or any non-sterile solution. Only use fresh multi-purpose solution (or sterile saline solution) so you do not contaminate your lenses or lens case. Use of non-sterile solution can lead to severe infection, vision loss or blindness.

6. Care for a Dehydrated Lens:

If a soft, hydrophilic contact lens is exposed to air while off the eye, it may become dry and brittle and need to be rehydrated. If the lens is adhering to a surface, apply sterile saline before handling.

To rehydrate the lens:

- Handle the lens carefully.

- Place the lens in its storage case and soak the lens in a recommended rinsing and storing solution for at least 1 hour until it returns to a soft state.
- Clean lens first, then disinfect the rehydrated lens using a recommended lens care system.
- If after soaking, the lens does not become soft, if the surface remains dry, **DO NOT USE THE LENS UNLESS IT HAS BEEN EXAMINED BY YOUR EYECARE PRACTITIONER.**

7. Emergencies:

If chemicals of any kind (household products, gardening solutions, laboratory chemicals, etc.) are splashed into the eyes, you should: **FLUSH EYES IMMEDIATELY WITH TAP WATER AND IMMEDIATELY CONTACT THE EYECARE PRACTITIONER OR VISIT A HOSPITAL EMERGENCY ROOM WITHOUT DELAY.**

INSTRUCTIONS FOR THE MULTIFOCAL WEARER

- You should be aware that as with any type of lens correction, there are advantages and compromises to multifocal contact lens correction. The benefit of clear near vision in straight ahead and upward gaze that is available with multifocal may be accompanied by a vision compromise that may reduce your visual acuity and depth perception for distance and near tasks. Some patients have experienced difficulty adapting to it. Symptoms, such as mild blurred vision, dizziness, headaches and a feeling of slight imbalance, may last for a brief minute or for several weeks as adaptation takes place. The longer these symptoms persist, the poorer your prognosis for successful adaptation. You should avoid visually demanding situations during the initial adaptation period. It is recommended that you first wear these contact lenses in familiar situations, which are not visually demanding. For example, it might be better to be a passenger rather than a driver of an automobile during the first few days of lens wear. It is recommended that you only drive with multifocal correction if you pass your state drivers license requirements with monovision correction.
- For presbyopia patients, it may hard to achieve very fine vision at both near and distance conditions. Auxiliary glasses are sometimes needed for extremely small print.
- The lenses will “meet most visual needs most of the time” and some patients cannot be fit successfully with presbyopic (multifocal or monovision) contact lenses.
- It may take many weeks adaptation. A follow-up visit should be scheduled about 1 week after dispensing each refit
- It may take more time to achieve a fit and acceptable vision by exchanging lenses. Because of the longer, more difficult adaptation period, it is important that the patient is motivated
- It is more difficult to achieve fine vision when your cylinder is greater than 1.00D.
- When compared to spectacles, blur vision may happen.
- For some special conditions (distance or light), the vision may not be so clear.
- Presbyopia is a condition where with age, the dry eye feeling may occur more often than before. You should take care of their eyes particularly.
- It is important that you follow your eyecare practitioner’s suggestions for adaptation to multifocal contact lens correction. You should discuss any concerns that you may have during and after the adaptation period.
- The decision to be fit with a multifocal correction is most appropriately left to the eyecare practitioner in conjunction with you, after carefully considering and discussing your needs.

INSTRUCTIONS FOR THE MONOVISION WEARER:

- You should be aware that as with any type of lens correction, there are advantages and compromises to monovision contact lens therapy. The benefit of clear near vision in straight ahead and upward gaze that is available with monovision may be accompanied by a vision compromise that may reduce your visual acuity and depth perception for distance and near tasks. Some patients have experienced difficulty adapting to it. Symptoms, such as mild blurred vision, dizziness, headaches and a feeling of slight imbalance, may last for a brief minute or for several weeks as adaptation takes place. The longer these symptoms persist, the poorer your prognosis for successful adaptation. You should avoid visually demanding situations during the initial adaptation period. It is recommended that you first wear these contact lenses in familiar situations, which are not visually demanding. For example, it might be better to be a passenger rather than a driver of an automobile during the first few days of lens wear. It is recommended that you only drive with monovision correction if you pass your state drivers license requirements with monovision correction.
- Some monovision patients will never be fully comfortable functioning under low levels of illumination, such as driving at night. If this happens, you may want to discuss with your eyecare practitioner having additional contact lenses prescribed so that both eyes are corrected for distance when sharp distance binocular vision is required.

If you require very sharp near vision during prolonged close work, you may want to have additional contact lenses prescribed so that both eyes are corrected for near when sharp near binocular vision is required.

- Some monovision patients require supplemental spectacles to wear over the monovision correction to provide the clearest vision for critical tasks. You should discuss this with your eyecare practitioner.
- It is important that you follow your eyecare practitioner's suggestions for adaptation to monovision contact lens therapy. You should discuss any concerns that you may have during and after the adaptation period.
- The decision to be fit with a monovision correction is most appropriately left to the eyecare practitioner in conjunction with you, after carefully considering and discussing your needs.

WEARING AND APPOINTMENT SCHEDULES:

Prescribed Wearing Scheduled (to be filled in by your eyecare practitioner)

<u>Day</u>	<u>Wearing Time (Hours)</u>
1	_____
2	_____
3	_____
4	_____
5	_____
6	_____
7	_____
8	_____
9	_____
10	_____
11	_____
12	_____
13	_____
14	_____

Appointment Schedule

Your appointments are on:

<u>Month</u>	<u>Year</u>	<u>Time</u>	<u>Day</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Minimum number of hours that your lenses should be worn at the time of your appointment: _____

PATIENT/EYECARE PRACTITIONER INFORMATION:

Eyecare Practitioner's Name:

Address: _____

Telephone Number: _____

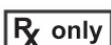
Recommended Lens Care Regimen:

IMPORTANT: In the event that you experience any difficulty wearing your lenses or you do not understand the instructions given you, **DO NOT WAIT** for your next appointment. **TELEPHONE YOUR EYECARE PRACTITIONER IMMEDIATELY.**

NAME AND ADDRESS OF MANUFACTURER:

St. Shine Optical Co. Ltd.
4,5F, No. 276-2, Sec. 1, Ta Tong Rd.,
Hsi Chih Dist., 221 New Taipei City Taiwan R.O.C.
Phone: 1-888-556-6567

SYMBOL REFERENCE GUIDE FOR LABEL AND CARTONS

SYMBOL	DESCRIPTION
	Quality System Certification symbol
	Sterile using steam or dry heat
	See instruction leaflet
DIA	Diameter
B.C.	Base Curve
PWR	Diopter (lens power)
CYL	Cylinder power (diopters)
AXS	Cylinder Axis (degrees)
Add	Add powers
	Expiry
	Batch code
	Caution: Federal (U.S.A.) law restricts this device to sale by or on the order of a licensed practitioner.
	Symbol indicating that the product packaging is able to be recycled.
	Single Use Only (for the Disposable Wearing Schedule)