

PACKAGE INSERT

IMPORTANT: Please read carefully and keep this information for future use.

This Package Insert is intended for the Eye Care Practitioner, but should be made available to patients upon request. The Eye Care Practitioner should provide the patient with the patient instructions that pertain to the patient's prescribed lens.

VISTAKON™ (lenefilcon A) Contact Lens
VISTAKON BIFOCAL (lenefilcon A) Contact Lens
VISTAKON TORIC (lenefilcon A) Contact Lens
VISTAKON TORIC BIFOCAL (lenefilcon A) Contact Lens
Clear and Visibility Tinted with UV Blocker
for Daily and Extended Wear

VISTAKON®

DIVISION OF

Johnson & Johnson
Vision Care, Inc.

Vistakon, Johnson & Johnson Vision Care, Inc.

VISTAKON
(lenefilcon A)
SOFT (HYDROPHILIC) CONTACT LENSES
CLEAR AND VISIBILITY TINTED WITH UV BLOCKER

SYMBOLS KEY

The following symbols may appear on the label or carton:

SYMBOL	DEFINITION
	See Instruction Leaflet
	Use By Date (expiration date)
	Batch Code
	Sterile Using Steam or Dry Heat
DIA	Diameter
BC	Base Curve
D	Diopter (lens power)
 0086	Quality System Certification Symbol
	UV Blocking
	Federal Law restricts this device to sale by or on the order of a licensed practitioner.

CAUTION: Federal Law restricts this device to sale by or on the order of a licensed practitioner.

Spherical or Aspherical Lenses for: Myopia, Hyperopia, Presbyopia, Aphakic and Not-Aphakic (Daily Wear), Not-Aphakic (Extended Wear).

Toric Lenses for: Myopia Astigmatism, Hyperopia Astigmatism, Mixed Astigmatism, Presbyopia with Astigmatism, Aphakic and Not-Aphakic Astigmatism (Daily Wear), Not-Aphakic (Extended Wear).

DESCRIPTION

The VISTAKON (lenefilcon A) Soft (hydrophilic) Contact Lens is available as a spherical lens, bifocal lens, an astigmatic (toric) lens, and a toric bifocal lens. The lens material (lenefilcon A) is a copolymer of 2-hydroxyethyl 2-methyl-2-propenoate and, glycerol monomethacrylate cross-linked with poly (oxy-1,2-ethanediyl) (4) bis (2-methyl-2-propenoate). The VISTAKON Contact Lens with visibility tint is tinted blue using Reactive Blue Dye #4 to make the lens more visible for handling. A benzotriazole UV-absorbing monomer is used to block UV radiation. The minimum UV blocking averages 99.9% in the UVB range of 280nm to 315nm and 95% in the UVA range of 316nm to 380nm.

*The data was obtained from measurements taken through the central 3-5mm portion for the thinnest marketed lens (-4.00D VISTAKON lens, 0.070mm center thickness).

1. Lerman, S., Radiant Energy and the Eye, MacMillan, New York, 1980, p.58, figure 2-21
2. Waxler, M. Hitchens, V.M., Optical Radiation and Visual Health, CRC Press, Boca Raton, Florida, 1986, p.10, figure 5

WARNING: UV absorbing contact lenses are NOT substitutes for protective UV absorbing eyewear, 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 eyewear as directed.

ACTIONS

In its hydrated state, the VISTAKON Contact Lens, when placed on the cornea, acts as a refracting medium to focus light rays on the retina.

UVA Blocking	95%
UVB Blocking	99.9%

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 blocking contact lenses help provide protection against harmful UV radiation. However, clinical studies have not been done to demonstrate that wearing UV blocking contact lenses reduces the risk of developing cataracts or other eye disorders. Consult your Eye Care Practitioner for more information.

INDICATIONS (USES)

- Spherical Lens** The VISTAKON (Ienofilcon A) Contact Lens (spherical) is indicated for daily and extended wear for the correction of refractive ametropia (myopia and hyperopia) in not-aphakic persons with non-diseased eyes. The lens is indicated for daily wear in aphakic persons. The lens may be worn by persons who have astigmatism of 1.00D or less which does not interfere with visual acuity.
- BIFOCAL Lens** The VISTAKON BIFOCAL (Ienofilcon A) Contact Lens is indicated for daily and extended wear for the correction of distance and near vision in presbyopic, not-aphakic persons with non-diseased eyes. The lens is indicated for daily wear in aphakic persons. The lens may be worn by persons who have astigmatism of 1.00D or less which does not interfere with visual acuity.
- Toric Lens** The VISTAKON TORIC (Ienofilcon A) Contact Lens is indicated for daily and extended wear for the correction of visual acuity in not-aphakic persons with non-diseased eyes that are hyperopic or myopic and have astigmatism of 10.00D or less. The lens is indicated for daily wear in aphakic persons.
- TORIC Bifocal Lens** The VISTAKON TORIC BIFOCAL (Ienofilcon A) Contact Lens is indicated for daily and extended wear for the correction of distance and near vision in presbyopic not-aphakic persons with non-diseased eyes who have

astigmatism of 10.00D or less. The lens is indicated for daily wear in aphakic persons.

VISTAKON (lenefilcon A) UV Blocking Contact Lenses help protect against transmission of harmful UV radiation to the cornea and into the eye.

The lens may be prescribed for either daily wear or for extended wear from 1-7 days between removals for cleaning and disinfection or disposal, as recommended by the Eye Care Practitioner. Eye Care Practitioners may prescribe the lens either for single-use disposable wear or frequent/planned replacement wear, with cleaning, disinfection and scheduled replacement (see "Wearing Schedule"). When prescribed for frequent/planned replacement wear, the lens may be disinfected using a chemical disinfection system recommended for soft (hydrophilic) contact lenses.

CONTRAINDICATIONS (REASONS NOT TO USE)

DO NOT USE the VISTAKON Contact Lens when any of the following conditions exist:

- Acute or 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
- Allergy to any ingredient, such as mercury or Thimerosal, in a solution which is to be used to care for the VISTAKON Contact Lens
- Any active corneal infection (bacterial, fungal, protozoal or viral)
- If eyes become red or irritated

WARNINGS

- Problems with contact lenses or lens care products could result in serious injury to the eye. Patients should be cautioned that proper use and care of contact lenses and lens care products, including lens cases, are essential for the safe use of these products. Patients should be advised of the following warnings pertaining to contact lens wear:
- Eye problems, including corneal ulcers, can develop rapidly and lead to loss of vision. The results of a study¹ indicate the following:
- The overall annual incidence of ulcerative keratitis in daily wear contact lens users is estimated to be about 4.1 per 10,000 persons and about 20.9 per 10,000 persons in extended wear contact lens users.

¹ New England Journal of Medicine, September 21, 1989

- The risk of ulcerative keratitis is 4 to 5 times greater for extended wear contact lens users than for daily wear users. When daily wear users who wear their lenses overnight and extended wear users who wear their lenses on a daily basis are excluded from the comparison, the risk among extended wear users is 10 to 15 times greater than among daily wear users.
- When daily wear users wear their lenses overnight (outside the approved indication), the risk of ulcerative keratitis is 9 times greater than among those who do not wear them overnight.
- The overall risk of ulcerative keratitis may be reduced by carefully following directions for lens care, including cleaning the lens case.
- The risk of ulcerative keratitis among contact lens users who smoke is estimated to be 3 to 8 times greater than among non-smokers.

If patients experience eye discomfort, excessive tearing, vision changes, redness of the eye or other problems, they should be instructed to immediately remove their lenses and promptly contact their Eye Care Practitioner. It is recommended that contact lens wearers see their Eye Care Practitioner routinely as directed.

PRECAUTIONS

Special Precautions for Eye Care Practitioners

- Due to the small number of patients enrolled in clinical investigation of lenses, all refractive powers, design configurations or lens parameters available in the lens material are not evaluated in significant numbers. Consequently, when selecting an appropriate lens design and parameters, the Eye Care Practitioner should consider all characteristics of the lens that can affect lens performance and ocular health, including oxygen permeability, wettability, central and peripheral thickness and optic zone diameter.

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 Eye Care Practitioner.

- **DO NOT** use if the sterile blister package is opened or damaged.
- Patients who wear contact lenses to correct presbyopia using Monovision 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.
- 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 Eye Care Practitioner's office, the patient should be able to promptly remove lenses or should have someone else available who can remove the lenses for him or her.
- Eye Care Practitioners should instruct the patient to remove the lenses immediately if the eyes become red or irritated.

Eye Care Practitioners should carefully instruct frequent replacement lens wear patients about the following care regimen and safety precautions:

- Different solutions cannot always be used together and not all solutions are safe for use with all lenses. Use only recommended solutions.
 - 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, unexpired lens care solutions and lenses.
 - Always follow directions in the package inserts for the use of contact lens solutions.
 - Use only a chemical (not heat) lens care system. Use of a heat (thermal) care system can damage the VISTAKON Contact Lens.
 - 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 reduce the ability of the lens surface to return to a wettable state. Follow the lens care directions in "Care for a Dried Out (Dehydrated) Lens" if lens surface does become dried out.
- If the lens sticks (stops moving) on the eye, follow the recommended directions in "Care for a Sticking Lens". The lens should move freely on the eye for the continued health of the eye. If non-movement of the lens continues, the patient should be instructed to immediately consult his or her Eye Care Practitioner.
- Always wash and rinse hands before handling lenses. Do not get cosmetics, lotions, soaps, creams, deodorants or sprays in the 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 the 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 Instruction Guide" for the VISTAKON Contact Lens and those prescribed by the Eye Care Practitioner.
- Never wear lenses beyond the period recommended by the Eye Care 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 Eye Care 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 and the packing solution into the hand.
- Do not touch the lens with fingernails.
- Always discard lenses worn on a disposable or frequent replacement schedule after the recommended wearing schedule prescribed by the Eye Care Practitioner.
- Always contact the Eye Care Practitioner before using any medicine in the eyes.
- Always inform the 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.
- Certain medications, such as antihistamines, decongestants, diuretics, muscle relaxants, tranquilizers and those for motion sickness, may cause dryness of the eye, increased lens awareness or blurred vision. Should such conditions exist, proper remedial measures should be prescribed. Depending on the severity, this could include the use of lubricating drops that are indicated for use with soft contact lenses or the temporary discontinuance of contact lens wear while such medication is being used.
- Oral contraceptive users could develop visual changes or changes in lens tolerance when using contact lenses. Patients should be cautioned accordingly.
- As with any contact lens, follow-up visits are necessary to assure the continuing health of the patient's eyes. The patient should be instructed as to a recommended follow-up schedule.
- NOTE: Heat disinfection is not recommended.

ADVERSE REACTIONS

The patient should be informed that the following problems may occur when wearing contact lenses:

- The eye may burn, sting and/or itch.
- There may be less comfort than when the lens was first placed on the eye.
- There may be a feeling of something in the eye (foreign body, scratched area).
- There may be the potential for some temporary impairment due to peripheral infiltrates, peripheral corneal ulcers or corneal erosion. There may be the potential for other physiological observations, such as local or generalized edema, corneal neovascularization, corneal staining, injection, tarsal abnormalities, iritis and conjunctivitis, some of which are clinically acceptable in low amounts.
- There may be excessive watering, unusual eye secretions, or redness of the eye.
- Poor visual acuity, blurred vision, rainbows or halos around objects, photophobia, or dry eyes may also occur if the lenses are worn continuously or for too long a time.

The patient should be instructed to conduct a simple 3-part self examination at least once a day. They should ask themselves:

- How do the lenses feel on my eyes?
- How do my eyes look?
- Do I continue to see well?

If the patient reports any problems, he or she should be instructed to **IMMEDIATELY REMOVE THE LENS**.

If the discomfort or problem stops, the patient should then look closely at the lens.

If the lens is in any way damaged, the patient **SHOULD NOT** put the lens back on the eye. The patient should discard the lens and insert a new fresh lens on the eye.

If the lens has dirt, an eyelash, or foreign body on it, or the problem stops and the lens appears undamaged, he or she should be instructed to dispose of the lens and insert a new fresh lens.

If the problem continues, the patient **SHOULD NOT** put the lens back on the eye but **IMMEDIATELY CONSULT HIS OR HER EYE CARE PRACTITIONER**.

The patient should be advised that when any of the above symptoms occur, a serious condition such as infection, corneal ulcer, neovascularization or iritis may be present. He or she should be instructed to seek immediate professional identification of the problem and prompt treatment to avoid serious eye damage.

FITTING

Conventional methods of fitting contact lenses apply to the VISTAKON (lenefilcon A) Contact Lenses. For a detailed description of the fitting techniques, refer to the "VISTAKON Contact Lenses Fitting and Patient Management Guide", copies of which are available from:

The logo for VISTAKON, featuring the word "VISTAKON" in a bold, serif font, enclosed within a horizontal oval border.

DIVISION OF

Johnson & Johnson
Vision Care, Inc.

Vistakon, Johnson & Johnson Vision Care, Inc.
P.O. Box 10157
Jacksonville, FL 32247-0157
1-800-843-2020

WEARING SCHEDULE

The wearing and replacement schedules should be determined by the Eye Care Practitioner. Patients tend to over wear the lenses initially. The Eye Care Practitioner should emphasize the importance of adhering to the initial maximum wearing schedule. Regular checkups, as determined by the Eye Care Practitioner, are also extremely important.

Vistakon recommends that the frequent replacement lens be discarded and replaced with a new lens every 2 weeks. However, the Eye Care Practitioner is encouraged to determine an appropriate lens replacement schedule based upon the response of the patient. The disposable lens should be discarded upon removal.

The VISTAKON Contact Lenses are indicated for daily wear (less than 24 hours while awake) and for extended wear (greater than 24 hours, including while asleep).

DAILY WEAR

The maximum suggested wearing time for these lenses is:

<u>Day</u>	<u>Hours</u>
1	6-8
2	8-10
3	10-12
4	12-14
5 and after	all waking hours

EXTENDED WEAR

The VISTAKON (lenefilcon A) Contact Lens for Extended Wear is recommended for 1-7 days/6 nights of continuous wear. Once the lens is removed, it is recommended that the patient's eyes should have a rest period of overnight or longer.

The wearing time of soft (hydrophilic) contact lenses used for extended wear should be determined by the Eye Care Practitioner.

It is recommended that the new contact lens wearer first be evaluated on a daily wear schedule. If, in the opinion of the Eye Care Practitioner, the patient is determined to be an acceptable extended wear candidate, the Eye Care Practitioner is encouraged to determine a wearing schedule based upon the response of the patient.

LENS CARE DIRECTIONS

DISPOSABLE LENS WEARERS: Eye Care Practitioners should review with patients that no cleaning or disinfection is needed with disposable lenses. Patients should always dispose of lenses when they are removed and have replacement lenses or spectacles available.

FREQUENT REPLACEMENT LENS WEARERS: Eye Care Practitioners should review with the patient, the lens care directions, including both basic lens care information and specific instructions on the lens care regimen recommended for the patient.

GENERAL LENS CARE (TO FIRST CLEAN AND RINSE, THEN DISINFECT LENSES)

Basic Instructions

- Always wash, rinse and dry hands before handling contact lenses.
- Always use fresh, unexpired lens care solutions.

- Use the recommended system of lens care, 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.**
- Do not use saliva or anything other than the recommended solutions for lubricating or rewetting lenses. Do not put lenses in the mouth.
- Lenses should be **cleaned, rinsed and disinfected** each time they are removed. **Cleaning and rinsing** are necessary to remove mucus and film from the lens surface. **Disinfecting** is necessary to destroy harmful germs.
- Always remove, clean, rinse, and disinfect lenses according to the schedule prescribed by the Eye Care Practitioner. Enzyme as frequently as recommended by the Eye Care Practitioner. The use of an enzyme or any cleaning solution does not substitute for disinfection.
- The Eye Care Practitioner should recommend a care system that is appropriate for the VISTAKON Contact Lenses. Each lens care product contains specific directions for use and important safety information, which should be read and carefully followed.

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.

- **Clean** one lens first (always the same lens first to avoid mix-ups), rinse the lens thoroughly with recommended saline or disinfecting solution to remove the cleaning solution, mucus and film from the lens surface, and put that lens into the correct chamber of the lens storage case. Repeat the procedure for the second lens.
- After cleaning, **disinfect** lenses using the system recommended by the manufacturer and/or the Eye Care Practitioner.
- 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, the patient should be instructed to consult the Package Insert or the Eye Care Practitioner for information on storage of lenses.
- After removing the lenses from the lens case, empty and rinse the lens storage case with solution as recommended by the lens case manufacturer; then allow the lens case to air dry. When the case is used again, refill it with storage solution. Replace lens case at regular intervals as recommended by the lens case manufacturer or your Eye Care Practitioner.
- Eye Care Practitioners may recommend a **lubricating/rewetting** solution which can be used to wet (lubricate) lenses while they are being worn to make them more comfortable.

CHEMICAL (NOT HEAT) DISINFECTION OF LENSES WORN ON A FREQUENT REPLACEMENT SCHEDULE

- **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 Eye Care Practitioner.**

- When using hydrogen peroxide lens care systems, lenses must be neutralized before wearing. Follow the recommendations on the hydrogen peroxide system labeling.
- Thoroughly rinse lenses with a fresh solution recommended for rinsing before inserting and wearing, or follow the instructions on the disinfection solution 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.

LENS CASE CLEANING AND MAINTENANCE (Frequent Replacement Lens Wearers Only)

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 your Eye Care Practitioner.

CARE FOR A DRIED OUT (DEHYDRATED) LENS

If the frequent replacement lens is off the eye and exposed to air from 30 minutes to 1 hour or more, its surface will become dry and gradually become non-wetting. If this should occur, discard the lens and use a new one.

CARE FOR A STICKING (NON-MOVING) LENS

If the lens sticks (stops moving), the patient should be instructed to apply a few 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 non-movement of the lens continues after a few minutes, the patient should immediately consult the Eye Care Practitioner.

EMERGENCIES

The patient should be informed that if chemicals of any kind (household products, gardening solutions, laboratory chemicals, etc.) are splashed into the eyes, the patient should: **FLUSH EYES IMMEDIATELY WITH TAP WATER AND IMMEDIATELY CONTACT THE EYE CARE PRACTITIONER OR VISIT A HOSPITAL EMERGENCY ROOM WITHOUT DELAY.**

HOW SUPPLIED

Each sterile lens is supplied in a foil-sealed plastic package containing buffered saline solution. The plastic package is marked with visibility tint (if applicable), base curve, diopter power, ADD power (for bifocal), cylinder (for toric), diameter, lot number and expiration date.

REPORTING OF ADVERSE REACTIONS

All serious adverse experiences and adverse reactions observed in patients wearing VISTAKON Contact Lenses or experienced with the lenses should be reported to:

VISTAKON®

DIVISION OF

Johnson & Johnson
Vision Care, Inc.

Vistakon, Johnson & Johnson Vision Care, Inc.
P.O. Box 10157
Jacksonville, FL 32247-0157
1-800-843-2020

www.acuvue.com

© Johnson & Johnson Vision Care, Inc.
Printed in U.S.A.
Revision Date:
Revision Number:

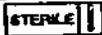
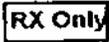
PATIENT INSTRUCTION GUIDE

VISTAKON™ (lenefilcon A) Contact Lens
VISTAKON BIFOCAL (lenefilcon A) Contact Lens
VISTAKON TORIC (lenefilcon A) Contact Lens
VISTAKON TORIC BIFOCAL (lenefilcon A) Contact Lens
Clear and Visibility Tinted with UV Blocker

for Disposable Daily and Extended Wear

SYMBOLS KEY

The following symbols may appear on the label or carton:

SYMBOL	DEFINITION
	See Instruction Leaflet
	Use By Date (expiration date)
	Batch Code
	Sterile Using Steam or Dry Heat
DIA	Diameter
BC	Base Curve
D	Diopter (lens power)
	Quality System Certification Symbol
	UV Blocking
	Federal Law restricts this device to sale by or on the order of a licensed practitioner.

CAUTION: Federal Law restricts this device to sale by or on the order of a licensed practitioner.

TABLE OF CONTENTS

PAGE

Introduction	
Wearing Restrictions and Indications	
Contraindications	
Warnings	
Precautions	
Adverse Reactions	
Personal Cleanliness For Lens Handling and Insertion	
Preparing the Lens for Wearing	
Opening The Multipack and Lens Package	
Handling the Lenses	
Placing the Lens on the Eye	
Centering the Lens	
Removing the Lens	
Caring for Your Lenses	
Care for a Sticking (Non-moving) Lens	
Emergencies	
Instructions for the Presbyopic Patient (Monovision or Bifocal)	
Wearing and Appointment Schedules	
Patient/Eye Care Practitioner Information	

INTRODUCTION

Congratulations on choosing the VISTAKON, VISTAKON BIFOCAL, VISTAKON TORIC, VISTAKON TORIC BIFOCAL (Ienofilcon A) Disposable Contact Lens (which may also be referred to as VISTAKON Contact Lens). In the VISTAKON Contact Lenses with Visibility Tint and UV Blocker, a UV absorbing monomer is used to block UV radiation. When your prescribed daily or extended wearing time is over, you simply throw the used lens away and replace it with a new sterile one. By replacing your VISTAKON Contact Lens as prescribed, there is little chance for long term build-up, which can affect vision and cause irritation and discomfort to the eye. VISTAKON Disposable Contact Lenses are single-use and are to be removed and discarded as prescribed by your Eye Care Practitioner. You should always have replacement lenses or spectacles available.

The VISTAKON Disposable Contact Lens is a soft spherical lens, aspherical or toric lens. It is made from a "water-loving" (hydrophilic) material that has the ability to absorb water, making the lens soft and flexible. It differs from other lenses available because of the way it is manufactured. Simply put, the multi-patented manufacturing process which took years to perfect, makes VISTAKON disposable wear possible. Since the lenses are produced identically one after another, you will experience the same excellent comfort and vision, lens after lens after lens.

The information and instructions contained in this booklet apply only to the VISTAKON VISTAKON BIFOCAL, VISTAKON TORIC, and VISTAKON TORIC BIFOCAL (Ienofilcon A) Disposable Contact Lenses. The VISTAKON Disposable Contact Lens is

intended to be used for daily and extended wear within the Vistakon planned lens replacement system. For your eye health, it is important that the VISTAKON Disposable Contact Lens be worn as prescribed by your Eye Care Practitioner. Your Eye Care Practitioner should be kept fully aware of your medical history. Your Eye Care Practitioner will tailor a total program of care based on your specific needs. He or she will review with you all instructions for lens handling, including how to safely and easily open the packaging. You will also be instructed on how to properly insert and remove lenses. This booklet will reinforce those instructions. VISTAKON Disposable Contact Lenses should be discarded and replaced with a new sterile pair, as prescribed by your Eye Care Practitioner. If you have any questions, always ask your Eye Care Practitioner.

WEARING RESTRICTIONS AND INDICATIONS

- Spherical Lens** The VISTAKON (lenefilcon A) Contact Lens (spherical) is indicated for daily and extended wear for the correction of refractive ametropia (myopia and hyperopia) in not-aphakic persons with non-diseased eyes. The lens is indicated for daily wear in aphakic persons. The lens may be worn by persons who have astigmatism of 1.00D or less which does not interfere with visual acuity.
- BIFOCAL Lens** The VISTAKON BIFOCAL (lenefilcon A) Contact Lens is indicated for daily and extended wear for the correction of distance and near vision in presbyopic, not-aphakic persons with non-diseased eyes. The lens is indicated for daily wear in aphakic persons. The lens may be worn by persons who have astigmatism of 1.00D or less which does not interfere with visual acuity.
- Toric Lens** The VISTAKON TORIC (lenefilcon A) Contact Lens is indicated for daily and extended wear for the correction of visual acuity in not-aphakic persons with non-diseased eyes that are hyperopic or myopic and have astigmatism of 10.00D or less. The lens is indicated for daily wear in aphakic persons.
- TORIC Bifocal Lens** The VISTAKON TORIC BIFOCAL (lenefilcon A) Contact Lens is indicated for daily and extended wear for the correction of distance and near vision in presbyopic not-aphakic persons with non-diseased eyes who have astigmatism of 10.00D or less. The lens is indicated for daily wear in aphakic persons.

VISTAKON (lenefilcon A) UV Blocking Contact Lenses help protect against transmission of harmful UV radiation to the cornea and into the eye.

The VISTAKON Contact Lenses described in this booklet may be prescribed for either daily wear or extended wear from 1-7 days between removal as directed by your Eye Care Practitioner. They should be removed from your eyes and discarded as prescribed by your Eye Care Practitioner.

WARNING: UV absorbing contact lenses are NOT substitutes for protective UV absorbing eyewear, 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 eyewear as directed.

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 blocking contact lenses help provide protection against harmful UV radiation. However, clinical studies have not been done to demonstrate that wearing UV blocking contact lenses reduces the risk of developing cataracts or other eye disorders. Consult your Eye Care Practitioner for more information.

CONTRAINDICATION (REASONS NOT TO USE)

DO NOT USE the VISTAKON Contact Lenses when any of the following conditions exist:

- Acute or 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
- Any active corneal infection (bacterial, fungal, protozoal or viral)
- If eyes become red or irritated

WARNINGS

Problems with contact lenses could result in serious injury to the eye. Proper use and care of contact lenses are essential for the safe use of these products. The following warnings pertain to contact lens wear.

- Eye problems, including corneal ulcers, can develop rapidly and lead to loss of vision. The results of a study¹ indicate the following:
 - The overall annual incidence of ulcerative keratitis in daily wear contact lens users is estimated to be about 4.1 per 10,000 persons and about 20.9 per 10,000 persons in extended wear contact lens users.
 - The risk of ulcerative keratitis is 4 to 5 times greater for extended wear contact lens users than for daily wear users. When daily wear users who wear their lenses overnight and extended wear users who wear their lenses on a daily basis are excluded from the comparison, the risk among extended wear users is 10 to 15 times greater than among daily wear users.

¹ New England Journal of Medicine, September 21, 1989

- When daily wear users wear their lenses overnight (outside the approval indication), the risk of ulcerative keratitis is 9 times greater than among those who do not wear them overnight.
- The overall risk of ulcerative keratitis may be reduced by carefully following directions for lens care, including cleaning the lens case.
- The risk of ulcerative keratitis among contact lens users who smoke is estimated to be 3 to 8 times greater than among non-smokers.

If you experience eye discomfort, excessive tearing, vision changes, redness of the eye or other problems, you should immediately remove your lenses and promptly contact your Eye Care Practitioner. It is recommended that you see your Eye Care Practitioner routinely, as directed.

PRECAUTIONS

- **DO NOT** use if the sterile blister package is opened or damaged.
- Patients who wear contact lenses to correct presbyopia using monovision 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.
- Before leaving the Eye Care Practitioner's office, you should be able to promptly remove lenses or you should have someone else available who can remove the lenses for you.
- You should remove your lenses immediately if your eyes become red or irritated.
- If the lens sticks (stops moving) on your eye, follow the recommended directions in "Care for a Sticking Lens". The lens should move freely on your eye for the continued health of your eye. If non-movement of your lens continues, you should immediately consult your Eye Care Practitioner.
- Always wash and rinse your hands before handling lenses. Do not get cosmetics, lotions, soaps, creams, deodorants or sprays in your eyes or on your lenses. It is best to put on your lenses before putting on makeup. Water-based cosmetics are less likely to damage lenses than oil-based products.
- Do not touch your contact lenses with your fingers or hands if they are not free of foreign materials, as microscopic scratches of the lenses may occur, causing distorted vision and/or injury to your eye.
- Carefully follow the handling, insertion, removal, and wearing instructions in this booklet and those prescribed by your Eye Care Practitioner.
- Never wear your lenses beyond the period recommended by your Eye Care Practitioner.
- If aerosol products, such as hair spray, are used while wearing lenses, exercise caution and keep your 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 Eye Care 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 your lenses from the lens container unless specifically indicated for that use. Slide the lens up the side of the bowl.
- Do not touch the lens with your fingernails.
- Always discard lenses as prescribed by your Eye Care Practitioner.
- Always contact your Eye Care Practitioner before using any medicine in your eyes.
- Always inform your employer of being a contact lens wearer. Some jobs may require use of eye protection equipment or may require that you not wear contact lenses.
- Certain medications, such as antihistamines, decongestants, diuretics, muscle relaxants, tranquilizers and those for motion sickness, may cause dryness of the eye, increased lens awareness or blurred vision. Should such conditions exist, proper remedial measures should be prescribed. Depending on the severity, this could include the use of lubricating drops that are indicated for use with soft contact lenses or the temporary discontinuance of contact lens wear while such medication is being used.
- Oral contraceptive users could develop visual changes or changes in lens tolerance when using contact lenses.
- As with any contact lens, follow-up visits are necessary to assure the continuing health of your eyes.

ADVERSE REACTIONS (Problems And What To Do)

The following problems may occur when wearing contact lenses:

- Your eye may burn, sting and/or itch.
- There may be less comfort than when the lens was first placed on your eye.
- There may be a feeling of something in your eye (foreign body, scratched area).
- There may be the potential for some temporary impairment due to peripheral infiltrates, peripheral corneal ulcers or corneal erosion. There may be the potential for other physiological observations, such as local or generalized edema, corneal neovascularization, corneal staining, injection, tarsal abnormalities, iritis and conjunctivitis, some of which are clinically acceptable in low amounts.
- There may be excessive watering, unusual eye secretions or redness of your eye.
- Poor visual acuity, blurred vision, rainbows or halos around objects, photophobia or dry eyes may also occur if your lenses are worn continuously or for too long a time.

You should conduct a simple 3-part self examination at least once a day. Ask yourself:

- How do the lenses feel on my eyes?
- How do my eyes look?
- Do I see well?

If you have any problems, you should **IMMEDIATELY REMOVE YOUR LENS.**

If the discomfort or problem stops, you should look closely at the lens.

If the lens is in any way damaged, you **SHOULD NOT** put the lens back on your eye. You should discard the lens and insert a new fresh lens on your eye.

If your lens has dirt, an eyelash, or foreign body on it, or the problem stops and the lens appears undamaged, you should dispose of the lens and insert a fresh new lens.

If the problem continues, you **SHOULD NOT** put the lens back on your eye but **IMMEDIATELY CONSULT YOUR EYE CARE PRACTITIONER.**

When any of the above symptoms occur, a serious condition such as infection, corneal ulcer, neovascularization or iritis may be present. Seek immediate professional identification of the problem and prompt treatment to avoid serious eye damage.

PERSONAL CLEANLINESS FOR LENS HANDLING AND INSERTION

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 a 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. Opening the Multipack and Lens Package

Multipack

It is simple to open the multipack. Locate the opening flap on the front of the multipack and pull up to break the seal. Inside you will find twelve lenses, in four strips of three lenses. Each lens comes in its own lens package designed specifically to maintain sterility. To close the multipack for storage, just tuck in the flap.

Lens Package

To open an individual lens package, follow these simple steps:

1. Shake the lens package and check to see that the lens is floating in the solution.
2. Peel back the foil closure to reveal the lens. By stabilizing the lens package on the tabletop, you will minimize the possibility of a sudden splash.

Occasionally, a lens may adhere to the inside surface of the foil when opened, or to the plastic package itself. This will not affect the sterility of the lens. It is still perfectly safe to use. Carefully remove and inspect the lens following the handling instructions.

3. Handling the Lenses

- Develop the habit of always working with the same lens first to avoid mix-ups.
- 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. If the lens appears damaged, do not use it. Use the next lens in the multipack.

Verify that the lens is not turned inside out by placing it on your forefinger and checking its profile. The lens should assume a natural, curved, bowl-like shape (Fig. A). If the lens edges tend to point outward, the lens is inside out (Fig. B). Another method is to gently squeeze the lens between the thumb and forefinger. The edges should turn inward. If the lens is inside out, the edges will turn slightly outward.

4. Placing the Lens on the Eye

Remember, start with your right eye.

Once you have opened the lens package, removed and examined the lens, follow these steps to apply the lens to your eye:

1. Place the lens on the tip of your forefinger. **BE SURE THE LENS IS CORRECTLY ORIENTED** (see "Handling the Lenses").
2. Place the middle finger of the same hand close to your lower eyelashes and pull down the lower lid.
3. Use the forefinger or middle finger of the other hand to lift the upper lid.
4. Place the lens on the eye.
5. Gently release the lids and blink. The lens will center automatically.
6. Use the same technique when inserting the lens for your left eye.

There are other methods of lens placement. If the above method is difficult for you, your Eye Care Practitioner will provide you with an alternate 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. Dispose of the lens and insert a new fresh lens.
 - 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 Eye Care Practitioner.

If a lens becomes less comfortable than when it was first inserted or if it is markedly uncomfortable upon insertion, remove the lens immediately and contact your Eye Care Practitioner.

After you have successfully inserted your lenses, you should ask yourself:

- How do the lenses feel on my eyes?
- How do my eyes look?
- Do I see well?

If your examination shows any problems, **IMMEDIATELY REMOVE YOUR LENSES AND CONTACT YOUR EYE CARE PRACTITIONER.**

5. Centering the Lens

A lens which is on the cornea will very rarely be displaced onto the white part of the eye during wear. This, however, can occur if insertion and removal procedures are not performed properly. To center a lens, follow either of these procedures:

- a. Close your eyelids and gently massage the lens into place through the closed lids.

OR

- b. Gently manipulate the off-centered lens onto the cornea while the eye is opened, using finger pressure on the edge of the upper lid or lower lid.

6. Removing the Lens

Always remove the same lens first.

- a. Wash, rinse, and dry your hands thoroughly.

CAUTION: Always be sure the lens is on the cornea before attempting to remove it. Determine this by covering the other eye. If vision is blurred, the lens is either on the white part of the eye or it is not on the eye at all. To locate the lens, inspect the upper area of the eye by looking down into a mirror while pulling the upper lid up. Then inspect the lower area by pulling the lower lid down.

- b. There are two recommended methods of lens removal: the Pinch Method and the Forefinger and Thumb Method. You should follow the method that is recommended by your Eye Care Practitioner.

Pinch Method:

1. Look up, slide the lens to the lower part of the eye using the forefinger.
2. Gently pinch the lens between the thumb and forefinger.
3. Remove the lens.

Forefinger and Thumb Method:

1. Place your hand or towel under your eye to catch the lens.
2. Place your forefinger on the center of the upper lid and your thumb on the center of the lower lid.
3. Press in and force a blink. The lens should fall onto your hand or the towel.
4. Once the lens is removed, **DISCARD** the lens.

Note: The lens may come out, but remain on the eyelid, finger or thumb.

5. Remove and discard the other lens by following the same procedure.

Note: If these methods of removing your lens are difficult for you, your Eye Care Practitioner will provide you with an alternate method.

CARING FOR YOUR LENSES

Remember, there is no cleaning or disinfection needed with VISTAKON, VISTAKON BIFOCAL, VISTAKON TORIC, and VISTAKON TORIC BIFOCAL (lenefilcon A) Disposable Contact Lenses. Always dispose of lenses when they are removed and have replacement lenses or spectacles available.

Your Eye Care 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.

1. Care for a Sticking (Non-moving) Lens

If a lens sticks (stops moving) on your eye, apply a few drops of the recommended lubricating solution.

You should wait until the lens begins to move freely on the eye before removing it. If non-movement of the lens continues, you should IMMEDIATELY consult your Eye Care Practitioner.

2. Emergencies

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

INSTRUCTIONS FOR THE PRESBYOPIC PATIENT (MONOVISION) – SPHERICAL, BIFOCAL, TORIC, TORIC BIFOCAL

- You should be aware that as with any type of lens correction, there are advantages and compromises to presbyopic contact lens correction. The benefit of clear near vision in straight ahead and upward gaze that is available with VISTAKON, VISTAKON BIFOCAL, VISTAKON TORIC, VISTAKON TORIC BIFOCAL Contact Lenses for 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 this. Symptoms, such as mild blurred vision and variable vision, may last for a brief period or for several weeks as adaptation takes place. The longer these symptoms persist, the poorer your chances 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 or if you pass your state drivers license requirements with Monovision correction.

- Some presbyopic patients require supplemental spectacles to wear over the VISTAKON Contact Lenses for Monovision to provide the clearest vision for critical tasks. You should discuss this with your Eye Care Practitioner.
- Some presbyopic 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 Eye Care Practitioner having additional contact lenses prescribed so that both eyes are corrected for distance when sharp distance binocular vision is required.
- It is important that you follow your Eye Care Practitioner's suggestions for adaptation to presbyopic contact lens correction. You should discuss any concerns that you may have during and after the adaptation period.
- The decision to be fit with Monovision correction is most appropriately left to the Eye Care Practitioner, in conjunction with you, after carefully considering and discussing your needs.

WEARING AND APPOINTMENT SCHEDULE

Prescribed Wearing Schedule

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

Appointment Schedule

Your appointments are on:

Minimum number of hours lenses to be worn at time of appointment:

Month: Year:

Time: Day:

PATIENT/EYE CARE PRACTITIONER INFORMATION

Next Appointment: _____

Date: _____

Dr.: _____

Address: _____

Phone: _____

Day	Date	Hours Worn	Day	Date	Hours Worn
1			1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		

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 EYE CARE PRACTITIONER IMMEDIATELY.**

Notes:

VISTAKON®

DIVISION OF

Johnson & Johnson
Vision Care, Inc.

Vistakon, Johnson & Johnson Vision Care, Inc.
P. O. Box 10157 • Jacksonville, Florida 32247-0157 • 1-800-843-2020
www.acuvue.com

VISTAKON is a trademark of Vistakon, Johnson & Johnson Vision Care, Inc.

© by Vistakon
Printed in U.S.A.
Revision date:
Revision number:

PATIENT INSTRUCTION GUIDE

VISTAKON™ (lenefilcon A) Contact Lens
VISTAKON BIFOCAL (lenefilcon A) Contact Lens
VISTAKON TORIC (lenefilcon A) Contact Lens
VISTAKON TORIC BIFOCAL (lenefilcon A) Contact Lens
Clear and Visibility Tinted with UV Blocker

for Frequent Replacement Daily and Extended Wear

SYMBOLS KEY

The following symbols may appear on the label or carton:

SYMBOL	DEFINITION
	See Instruction Leaflet
	Use By Date (expiration date)
	Batch Code
	Sterile Using Steam or Dry Heat
DIA	Diameter
BC	Base Curve
D	Diopter (lens power)
	Quality System Certification Symbol
	UV Blocking
	Federal Law restricts this device to sale by or on the order of a licensed practitioner.

CAUTION: Federal Law restricts this device to sale by or on the order of a licensed practitioner.

TABLE OF CONTENTS

Page

Introduction	
Wearing Restrictions and Indications	
Contraindications	
Warnings	
Precautions	
Adverse Reactions	
Personal Cleanliness For Lens Handling and Insertion	
Preparing the Lens for Wearing	
Opening the Multipack	
Handling the Lenses	
Placing the Lens on the Eye	
Centering the Lens	
Removing the Lens	
Caring for Your Lenses (Cleaning, Rinsing, Disinfecting, Storage and Rewetting/Lubricating)	
Basic Instructions	
Care for a Sticking (Non-moving) Lens	
Chemical (Not Heat) Disinfection	
Lens Case Cleaning and Maintenance	
Care for a Dehydrated Lens	
Emergencies	
Instructions for the Presbyopic Patient (Monovision or Bifocal)	
Wearing and Appointment Schedules	
Patient/Eye Care Practitioner Information	

INTRODUCTION

Congratulations on choosing the VISTAKON[®], VISTAKON BIFOCAL, VISTAKON TORIC, or VISTAKON TORIC BIFOCAL (lenefilcon A) Contact Lens (which may also be referred to VISTAKON Contact Lens, Visibility Tinted with UV Blocker). In the VISTAKON Contact Lenses with Visibility Tint and UV Blocker, a UV absorbing monomer is used to block UV radiation. When your prescribed replacement period is over, you simply throw the used lens away and replace it with a new sterile one. By replacing your VISTAKON Contact Lens on a regular basis, lens deposits, which can affect vision and cause irritation and discomfort to the eye, have little chance to build up over time as with conventional lens wear. When you discard the lens, you dispose of potential deposit build-up problems.

The VISTAKON Contact Lenses are soft spherical lenses, aspherical or toric lenses. They are made from a "water-loving" (hydrophilic) material that has the ability to absorb water, making the lens soft and flexible. They differ from other lenses available because of the way they are manufactured. Simply put, the multi-patented manufacturing process which took years to perfect, makes VISTAKON frequent replacement possible. Since the

lenses are produced identically one after another, you will experience the same excellent comfort and vision, lens after lens after lens.

The information and instructions contained in this booklet apply only to the VISTAKON, VISTAKON BIFOCAL, VISTAKON TORIC, and VISTAKON TORIC BIFOCAL (lenefilcon A) Contact Lenses. The VISTAKON Contact Lenses are intended to be used for daily and extended wear within the Vistakon planned lens replacement system. For your eye health, it is important that the VISTAKON Contact Lenses be worn only as prescribed by your Eye Care Practitioner. Your Eye Care Practitioner should be kept fully aware of your medical history. Your Eye Care Practitioner will tailor a total program of care based on your specific needs. He or she will review with you all instructions for lens handling and care, including how to safely and easily open the packaging. You will also be instructed on how to properly insert and remove lenses. This booklet will reinforce those instructions. After the accumulated wearing period prescribed by your Eye Care Practitioner, VISTAKON, VISTAKON BIFOCAL, VISTAKON TORIC, VISTAKON TORIC BIFOCAL Contact Lenses should be discarded and replaced with a new sterile pair. If you have any questions, always ask your Eye Care Practitioner.

WEARING RESTRICTION AND INDICATIONS

Spherical Lens The VISTAKON (lenefilcon A) Contact Lens (spherical) is indicated for daily and extended wear for the correction of refractive ametropia (myopia and hyperopia) in not-aphakic persons with non-diseased eyes. The lens is indicated for daily wear in aphakic persons. The lens may be worn by persons who have astigmatism of 1.00D or less which does not interfere with visual acuity.

BIFOCAL Lens The VISTAKON BIFOCAL (lenefilcon A) Contact Lens is indicated for daily and extended wear for the correction of distance and near vision in presbyopic, not-aphakic persons with non-diseased eyes. The lens is indicated for daily wear in aphakic persons. The lens may be worn by persons who have astigmatism of 1.00D or less which does not interfere with visual acuity.

Toric Lens The VISTAKON TORIC (lenefilcon A) Contact Lens is indicated for daily and extended wear for the correction of visual acuity in not-aphakic persons with non-diseased eyes that are hyperopic or myopic and have astigmatism of 10.00D or less. The lens is indicated for daily wear in aphakic persons.

TORIC Bifocal Lens The VISTAKON TORIC BIFOCAL (lenefilcon A) Contact Lens is indicated for daily and extended wear for the correction of distance and near vision in presbyopic not-aphakic persons with non-diseased eyes who have astigmatism of 10.00D or less. The lens is indicated for daily wear in aphakic persons.

VISTAKON (lenefilcon A) UV Blocking Contact Lenses help protect against transmission of harmful UV radiation to the cornea and into the eye.

The VISTAKON Contact Lenses described in this booklet may be prescribed for either daily wear or extended wear from 1-7 days between removal as directed by your Eye Care Practitioner. They should be removed from your eyes for routine cleaning and disinfecting, as prescribed by your Eye Care Practitioner. The lens may be disinfected using a disinfection system recommended for soft (hydrophilic) contact lenses.

WARNING: UV absorbing contact lenses are NOT substitutes for protective UV absorbing eyewear, 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 eyewear as directed.

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 blocking contact lenses help provide protection against harmful UV radiation. However, clinical studies have not been done to demonstrate that wearing UV blocking contact lenses reduces the risk of developing cataracts or other eye disorders. Consult your Eye Care Practitioner for more information.

CONTRAINDICATION (REASONS NOT TO USE)

DO NOT USE THE VISTAKON Contact Lens when any of the following conditions exist:

- Acute or 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
- Allergy to any ingredient, such as mercury or Thimerosal, in a solution which is to be used to care for the VISTAKON Contact Lens.
- Any active corneal infection (bacterial, fungal, protozoal, or viral)
- If eyes become red or irritated

WARNINGS

Problems with contact lenses or lens care products could result in serious injury to the eye. Proper use and care of contact lenses and lens care products, including lens cases, are essential for the safe use of these products. The following warnings pertain to contact lens wear.

Eye problems, including corneal ulcers, can develop rapidly and lead to loss of vision. The results of a study¹ indicate the following:

- The overall annual incidence of ulcerative keratitis in daily wear contact lens users is estimated to be about 4.1 per 10,000 persons and about 20.9 per 10,000 persons in extended wear contact lens users.

¹ New England Journal of Medicine, September 21, 1989

- The risk of ulcerative keratitis is 4 to 5 times greater for extended wear contact lens users than for daily wear users. When daily wear users who wear their lenses overnight and extended wear users who wear their lenses on a daily basis are excluded from the comparison, the risk among extended wear users is 10 to 15 times greater than among daily wear users.
- When daily wear users wear their lenses overnight (outside the approved indication), the risk of ulcerative keratitis is 9 times greater than among those who do not wear them overnight.
- The overall risk of ulcerative keratitis may be reduced by carefully following directions for lens care, including cleaning the lens case.
- The risk of ulcerative keratitis among contact lens users who smoke is estimated to be 3 to 8 times greater than among non-smokers.

If you experience eye discomfort, excessive tearing, vision changes, redness of the eye or other problems, you should immediately remove your lenses and promptly contact your Eye Care Practitioner. It is recommended that you see your Eye Care Practitioner routinely, as directed.

PRECAUTIONS

- **DO NOT** use if the sterile blister package is opened or damaged.
- Patients who wear contact lenses to correct presbyopia using monovision 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.
- Before leaving the Eye Care Practitioner's office, you should be able to promptly remove lenses or you should have someone else available who can remove the lenses for you.
- You should remove your lenses immediately if your eyes become 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.
 - Never use solutions recommended for conventional hard contact lenses only.
 - Always use fresh, unexpired lens care solutions and lenses.
 - Always follow directions in the Package Inserts for the use of contact lens solutions.
 - Use only a chemical (not heat) lens care system. Use of heat (thermal) care systems can damage the VISTAKON Contact Lens.
 - 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 your lenses completely immersed in the recommended storage solution when the lenses are not being worn (stored). Prolonged periods of

drying will reduce the ability of the lens surface to return to a wettable state. 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 in "Care for a Sticking Lens". The lens should move freely on your eye for the continued health of your eye. If non-movement of your lens continues, you should immediately consult your Eye Care Practitioner.
- Always wash and rinse your hands before handling lenses. Do not get cosmetics, lotions, soaps, creams, deodorants, or sprays in your eyes or on your lenses. It is best to put on your lenses before putting on makeup. Water-based cosmetics are less likely to damage lenses than oil-based products.
- Do not touch your contact lenses with your fingers or hands if they are not free of foreign material, as microscopic scratches of the lenses may occur, causing distorted vision and/or injury to your eye.
- Carefully follow the handling, insertion, removal, cleaning, disinfecting, storing and wearing instructions in this booklet and those prescribed by your Eye Care Practitioner.
- Never wear your lenses beyond the period recommended by your Eye Care Practitioner.
- If aerosol products, such as hair spray, are used while wearing lenses, exercise caution and keep your 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 Eye Care 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 your lenses from the lens container unless specifically indicated for that use. Slide the lens up the side of the bowl.
- Do not touch the lens with your fingernails.
- Always discard lenses worn on a frequent replacement schedule after the recommended wearing schedule prescribed by your Eye Care Practitioner.
- Always contact your Eye Care Practitioner before using any medicine in your eyes.
- Always inform your employer of being a contact lens wearer. Some jobs may require use of eye protection equipment or may require that you not wear contact lenses.
- Certain medications, such as antihistamines, decongestants, diuretics, muscle relaxants, tranquilizers and those for motion sickness, may cause dryness to the eye, increased lens awareness or blurred vision. Should such conditions exist, proper remedial measures should be prescribed. Depending on the severity, this could include the use of lubricating drops that are indicated for use with soft contact lenses or the temporary discontinuance of contact lens wear while such medication is being used.
- Oral contraceptive users could develop visual changes or changes in lens tolerance when using contact lenses.
- As with any contact lens, follow-up visits are necessary to assure the continuing health of your eyes.
- Heat disinfection is not recommended.

ADVERSE REACTIONS (Problems And What To Do)

The following problems may occur when wearing contact lenses:

- Your eyes may burn, sting and/or itch.
- There may be less comfort than when the lens was first placed on your eye.
- There may be a feeling of something in your eye (foreign body, scratched area).
- There may be the potential for some temporary impairment due to peripheral infiltrates, peripheral corneal ulcers or corneal erosion. There may be the potential for other physiological observations, such as local or generalized edema, corneal neovascularization, corneal staining, injection, tarsal abnormalities, iritis and conjunctivitis, some of which are clinically acceptable in low amounts.
- There may be excessive watering, unusual eye secretions or redness of your eye.
- Poor visual acuity, blurred vision, rainbows or halos around objects, photophobia or dry eyes may also occur if your lenses are worn continuously or for too long a time.

You should conduct a simple 3-part self examination at least once a day. Ask yourself:

- How do the lenses feel on my eyes?
- How do my eyes look?
- Do I continue to see well?

If you have any problems, you should **IMMEDIATELY REMOVE YOUR LENS.**

If the discomfort or problem stops, you should look closely at the lens.

If the lens is in any way damaged, you **SHOULD NOT** put the lens back on your eye. You should discard the lens and insert a new fresh lens on your eye.

If your lens has dirt, an eyelash, or foreign body on it, or the problem stops and the lens appears undamaged, you should dispose of the lens and insert a new fresh lens.

If the problem continues, you **SHOULD NOT** put the lens back on your eye but **IMMEDIATELY CONSULT YOUR EYE CARE PRACTITIONER.**

When any of the above symptoms occur, a serious condition such as infection, corneal ulcer, neovascularization or iritis may be present. Seek immediate professional identification of the problem and prompt treatment to avoid serious eye damage.

PERSONAL CLEANLINESS LENS FOR HANDLING AND INSERTION

1. Prepare 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 a 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. Opening the Multipack and Lens Package

Multipack

It is simple to open the multipack. Locate the opening flap on the front of the multipack and pull up to break the seal. Inside you will find twelve lenses in four strips of three lenses. Each lens comes in its own lens package designed specifically to maintain sterility. To close the multipack for storage, just tuck in the flap.

Lens Package

To open an individual lens package, follow these simple steps:

1. Shake the lens package and check to see that the lens is floating in the solution.
2. Peel back the foil closure to reveal the lens. By stabilizing the lens package on the tabletop, you will minimize the possibility of a sudden splash.

Occasionally, a lens may adhere to the inside surface of the foil when opened, or to the plastic package itself. This will not affect the sterility of the lens. It is still perfectly safe to use. Carefully remove and inspect the lens following the handling instructions.

3. 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. If the lens appears damaged, do not use it. Use the next lens in the multipack.

Verify that the lens is not turned inside out by placing it on your forefinger and checking its profile. The lens should assume a natural, curved, bowl-like shape (Fig. A). If the lens edges tend to point outward, the lens is inside out (Fig. B). Another method is to gently squeeze the lens between the thumb and forefinger. The edges should turn inward. If the lens is inside out, the edges will turn slightly outward.

4. Placing the Lens on the Eye

Remember, start with your right eye.

Once you have opened the lens package, removed and examined the lens, follow these steps to apply the lens to your eye:

1. Place the lens on the tip of your forefinger. Be sure lens is correctly oriented (see "Handling the Lenses").
2. Place the middle finger of the same hand close to your lower eyelashes and pull down the lower lid.
3. Use the forefinger or middle finger of the other hand to lift the upper lid.
4. Place the lens on the eye.
5. Gently release the lids and blink. The lens will center automatically.
6. Use the same technique when inserting the lens for your left eye.

There are other methods of lens placement. If the above method is difficult for you, your Eye Care Practitioner will provide you with an alternate 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. Dispose of the lens and insert a new fresh lens.
 - 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 Eye Care Practitioner.

If a lens becomes less comfortable than when it was first inserted or if it is markedly uncomfortable upon insertion, remove the lens immediately and contact your Eye Care Practitioner.

After you have successfully inserted your lenses, you should ask yourself:

- How do the lenses feel on my eyes?
- How do my eyes look?
- Do I see well?

If your examination shows any problems, **IMMEDIATELY REMOVE YOUR LENSES AND CONTACT YOUR EYE CARE PRACTITIONER.**

5. Centering the Lens

A lens, which is on the cornea, will very rarely be displaced onto the white part of the eye during wear. This, however, can occur if insertion and removal procedures are not performed properly. To center a lens, follow either of these procedures:

- a. Close your eyelids and gently massage the lens into place through the closed lids.

OR

- b. Gently manipulate the off-centered lens onto the cornea while the eye is opened using finger pressure on the edge of the upper lid or lower lid.

6. Removing the Lens

Always remove the same lens first.

- a. Wash, rinse and dry your hands thoroughly.

CAUTION: Always be sure the lens is on the cornea before attempting to remove it. Determine this by covering the other eye. If vision is blurred, the lens is either on the white part of the eye or it is not on the eye at all. To locate the lens, inspect the upper area of the eye by looking down into a mirror while pulling the upper lid up. Then inspect the lower area by pulling the lower lid down.

- b. There are two recommended methods of lens removal: the Pinch Method and the Forefinger and Thumb Method. You should follow the method that is recommended by your Eye Care Practitioner.

Pinch Method:

1. Look up, slide the lens to the lower part of the eye using the forefinger.
2. Gently pinch the lens between the thumb and forefinger.
3. Remove the lens.

Forefinger and Thumb Method:

1. Place your hand or towel under your eye to catch the lens.
2. Place your forefinger on the center of the upper lid and your thumb on the center of the lower lid.
3. Press in and force a blink. The lens should fall onto your hand or the towel.
4. Once the lens is removed, simply follow the lens care directions recommended by your Eye Care Practitioner.

Note: The lens may come out, but remain on the eyelid, finger or thumb.

5. Remove the other lens by following the same procedure.
6. Follow the required lens care procedures described under the heading, "Caring For Your Lenses (Cleaning, Rinsing, Disinfecting, Storage and Rewetting/Lubricating)".

Note: If these methods of removing your lens are difficult for you, your Eye Care Practitioner will provide you with an alternate method.

CARING FOR YOUR LENSES

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 Eye Care 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.

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 available to place and remove them, you should not attempt to get and wear contact lenses.

When you first get your lenses, be sure to put the lenses on and remove them while you are in your Eye Care 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 Eye Care Practitioner should instruct you about appropriate and adequate procedures and products for your use.

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 solution.
- Use the recommended system of lens care, chemical (not heat) and carefully follow instructions on the 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 care system labeling.**
- Always remove, clean, rinse and disinfect your lenses according to the schedule prescribed by your Eye Care Practitioner. The use of 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.
- Lenses prescribed on the frequent replacement program should be thrown away after the recommended wearing period prescribed by your Eye Care Practitioner.
- 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 your lens down the drain.

- Your Eye Care Practitioner should recommend a care system that is appropriate for your VISTAKON Contact Lens. 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.

- Clean one lens first (always the same lens first to avoid mix-ups), 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 Eye Care Practitioner and/or the lens manufacturer. Follow the instructions provided in the disinfection solution labeling.
- 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 Eye Care Practitioner for information on storage of your lenses.
- Always keep your lenses completely immersed in a recommended disinfecting solution when the lenses are not being worn. If you discontinue wearing your lenses, but plan to begin wearing them again after a few weeks, ask your Eye Care Practitioner for a recommendation on how to store your lenses.
- VISTAKON Contact Lenses cannot be heat (thermally) disinfected.
- 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 Eye Care 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.

2. Care For A Sticking (Non-moving) Lens

If a lens sticks (stops moving) on your eye, apply a few drops of the recommended lubricating solution. You should wait until the lens begins to move freely on the eye before removing it. If non-movement of the lens continues, you should **IMMEDIATELY** consult your Eye Care 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 Eye Care Practitioner.

- When using hydrogen peroxide lens care systems, lenses **must be neutralized before wearing**. Follow the recommendations on the hydrogen peroxide system labeling.
- Thoroughly rinse lenses with a fresh solution recommended for rinsing before inserting and wearing, or follow the instructions on the disinfection solution 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 Case Cleaning and Maintenance

Contact lens cases can be a source of bacteria 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 your Eye Care Practitioner.

5. 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. If this happens, dispose of the lens and use a new fresh one.

6. Emergencies

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

**INSTRUCTIONS FOR THE PRESBYOPIC PATIENT (MONOVISION) –
SPHERICAL, BIFOCAL, TORIC, TORIC BIFOCAL**

- You should be aware that, as with any type of lens correction, there are advantages and compromises to presbyopic contact lens correction. The benefit of clear near vision in straight ahead and upward gaze that is available with VISTAKON, VISTAKON BIFOCAL, VISTAKON TORIC, VISTAKON TORIC BIFOCAL Contact Lenses for 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 this. Symptoms, such as mild blurred vision and variable vision, may last for a brief period or for several weeks as adaptation takes place. The longer these symptoms persist, the poorer your chances 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 that are not visually demanding. For example, it might be better to be a passenger rather than a driver of an automobile during the first days of lens wear. It is recommended that you only drive with VISTAKON BIFOCAL, VISTAKON TORIC BIFOCAL, and VISTAKON Frequent Replacement Contact Lenses for Monovision or VISTAKON TORIC Frequent Replacement Contact Lenses for Monovision if you pass your state drivers license requirements with VISTAKON BIFOCAL, VISTAKON TORIC BIFOCAL, and VISTAKON Disposable Contact Lenses for Monovision or VISTAKON TORIC Disposable Contact Lenses for Monovision.
- Some presbyopic patients require supplemental spectacles to wear over the VISTAKON Contact Lenses for Monovision to provide the clearest vision for critical tasks. You should discuss this with your Eye Care Practitioner.
- Some presbyopic 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 Eye Care Practitioner having additional contact lenses prescribed so that both eyes are corrected for distance when sharp distance binocular vision is required.
- It is important that you follow your Eye Care Practitioner's suggestions for adaptation to presbyopic contact lens correction. You should discuss any concerns that you may have during and after the adaptation period.
- The decision to be fit with VISTAKON BIFOCAL, VISTAKON TORIC BIFOCAL, and VISTAKON Frequent Replacement Contact Lenses for Monovision or VISTAKON TORIC Frequent Replacement Contact Lenses for Monovision is most appropriately left to the Eye Care Practitioner, in conjunction with you, after carefully considering and discussing your needs.

WEARING AND APPOINTMENT SCHEDULE

Prescribed Wearing Schedule

Day	Wearing Time (Hours)
1	
2	
3	
4	
5	
6	
7	
8	
9	

- 10
- 11
- 12
- 13
- 14

Appointment Schedule

Your appointments are on:

Minimum number of hours lenses to be worn at time of appointment:

Month: Year:

Time: Day:

PATIENT EYE CARE PRACTITIONER INFORMATION

Next Appointment: _____

Date: _____

Dr.: _____

Address: _____

Phone: _____

Day	Date	Hours Worn	Day	Date	Hours Worn
1			1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		

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 EYE CARE PRACTITIONER IMMEDIATELY.**

Notes:

VISTAKON[®]

DIVISION OF

Johnson & Johnson
Vision Care, Inc.

Vistakon, Johnson & Johnson Vision Care, Inc.
P. O. Box 10157 • Jacksonville, Florida 32247-0157 • 1-800-843-2020
www.acuvue.com

VISTAKON is a trademark of
Vistakon, Johnson & Johnson Vision Care, Inc.

© by Vistakon
Printed in U.S.A.
Revision date:
Revision number: