Patients should wear the following:

- **Ocufilcon D Toric**

> diopters.

- **astigmatism in powers from –10.00 to +10.00 diopters and astigmatic corrections from –0.25 to –10.00 diopters.**

**NOTE:**

- **–8.00 diopters:**

> Transmittance of ultraviolet light through the contact lens for two representative lens powers is as

**DESCRIPTION:**

- **The lens material, ocufilcon D, is an electrically conductive hydrophilic polymer of 2-hydroxyethyl methacrylate and methacrylic acid cross-linked with ethylene glycol dimethacrylate (45.0%) and water (55.0%).**

**INDICATIONS (USES):**

- **Disposable Wear Program or Scheduled Replacement Program.**

**PRECAUTIONS:**

- **Contact lens wear may not be suitable for those in certain occupations, or, in other instances, such persons may require protection equipment.**

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**CONTRADICTIONS (REASONS NOT TO USE):**

- **Acute and subacute infection or inflammation in the anterior chamber of the eye.**

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**WARNING:**

- **All UV-blocking Ocufilcon D Toric contact lenses are available with a proprietary benzophenone UV-absorbing monomer. UV-blocking Ocufilcon D Toric contact lenses help protect against transmission of harmful ultraviolet radiation to the cornea and into the eye. The transmittance of ultraviolet radiation to the eye for two representative center thicknesses are: +2.0 diopters (center thickness of 0.07 mm) and –8.00 diopters (center thickness of 0.06 mm), through the central 3- to 5-mm portions of the lenses.**

**CAUTION:**

- **This is the transmittance profile of –8.00D ocufilcon D hydrophilic contact lens with UV-blocker versus a human cornea and a human crystalline lens.**

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**INDICATIONS:**

- **Acute and subacute infection or inflammation in the anterior chamber of the eye.**

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**WARNING:**

- **Light Transmittance:**

  > 97.0%.

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**REFERENCE:**

- **Lerman, S., Radiant Energy and the Eye** (New York: MacMillan, 1980), p. 58, Figure 2-21.

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**REFERENCE:**

- **Optical Radiation and Visual Health** (Boca Raton: CRC Press, 1986), p. 19, Figure 5. Transmittance profile for the human crystalline lens of a 25-year-old person.

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**REFERENCE:**

- **Human Cornea (24-year-old person).**

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**REFERENCE:**


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**REFERENCE:**

- **The physical parameters of the lens are as follows:**

**DESCRIPTION:**

- **The lens material, ocufilcon D, is an electrically conductive hydrophilic polymer of 2-hydroxyethyl methacrylate and methacrylic acid cross-linked with ethylene glycol dimethacrylate (45.0%) and water (55.0%).**

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**REFERENCE:**

- **Acute and subacute infection or inflammation in the anterior chamber of the eye.**

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**REFERENCE:**

In order to minimize the likelihood of lens contamination or of physical trauma to the cornea, lens-wearing patients should avoid environmental fumes, smoke, dust, vapors, and windy conditions.

In the Scheduled Replacement Program, or in the event of emergency lens care in the Disposable Wear Program, replace lenses. A CooperVision Company recommends the use of sterile non-preserved solutions and should discard such solutions after the time specified in their label directions.

Eye injury from irritation or infection and damage to contact lenses may result from lens contamination. Patients should take care to prevent cosmetics, lotions, soaps, cream, hair sprays, or deodorants from coming into contact with their lenses or lens cases.

The lens wearer should have a pair of replacement lenses available. If the lens is or appears in any way damaged, the patient should not put the lens back on the eye. If the lens is adhering to a surface such as a counter top, apply sterile saline before handling the lens. For patients in the Disposable Wear Program, eye-care practitioners should recommend appropriate and adequate care practitioner. Once removed, a lens should remain out of the eye for a period of rest overnight or longer, as determined by the prescribing eye-care practitioner.

**Lens Care Directions:**

Eye-care practitioners should provide their patients with appropriate and adequate instructions and information regarding lens care and handling, and practitioners should recommend appropriate and adequate procedures and products for each individual patient in accordance with the particular lens-wearing schedule and care system selected by the practitioner, the specific instructions for such products, and the particular characteristics of the patient.

For patients in the Disposable Wear Program: eye-care practitioners should review with patients that no sharing of dispensing or replacement lenses should not be re-sterilized. It is important that the patient always have a pair of replacement lenses available.

For complete information concerning emergency lens care, refer to the Patient Information booklet for the Disposable Wear Program. Emergency lens care does not apply to lenses worn on a daily-wear basis.

For patients in the Scheduled Replacement Program: For complete information concerning the care, cleaning, and disinfecting of OCUFILCON D Toric contact lenses, patients should refer to the Patient Information booklet for the Scheduled Replacement Program.

**Care for a Dehydrated Lens:**

If the lens sticks (or stops moving), the patient should be instructed to apply several drops of the recommended lubricating solution to the lens. If the lens is still not flexible, the patient should be instructed to apply additional drops of the recommended lubricating solution to the lens. If the lens does not become soft after soaking, the lens should not be used until it is examined by the eye-care practitioner.

**Care for a Sticking Lens:**

If the lens sticks (or stops moving), the patient should be instructed to apply several drops of the recommended lubricating solution to the lens. If the lens does not become soft after soaking, the lens should not be used until it is examined by the eye-care practitioner.

**PRACTITIONER FITTING SETS:**

- All lenses which have been opened must be discarded after each fitting.

**NOW SUPPLIED:**

- Each OCUFILCON D Toric contact lens is supplied sterile in a container with a normal buffered saline solution. Several containers are packaged in a multi-pack arrangement, each of which is marked with the manufacturing lot number of the lens, the date of expiration, the lot number, the cylinder, and the expiration date.

**REPORTING OF ADVERSE REACTIONS:**

- All serious adverse experiences and adverse reactions observed in patients wearing OCUFILCON D Toric contact lenses or experienced by the lenses should be reported to: P0125A May 2007

CooperVision, Inc. recommends beginning extended-wear patients with the recommended initial daily-wear schedule, followed by a period of daily wear, and then the gradual introduction of extended wear, one night at a time, unless individual considerations indicate otherwise. The practitioner should examine the patient in the early stages of extended wear to determine corneal response. Patients should remove their lenses and clean and discard them or replace with fresh, new lenses directed by the eye-care practitioner. Once removed, a lens should remain out of the eye for a period of rest overnight or longer, as determined by the prescribing eye-care practitioner.

- Eye-care practitioners should provide their patients with appropriate and adequate instructions and information regarding lens care and handling, and practitioners should recommend appropriate and adequate procedures and products for each individual patient in accordance with the particular lens-wearing schedule and care system selected by the practitioner, the specific instructions for such products, and the particular characteristics of the patient.

In order to minimize the likelihood of lens contamination or of physical trauma to the cornea, lens-wearing patients should avoid environmental fumes, smoke, dust, vapors, and windy conditions.

In the Scheduled Replacement Program, or in the event of emergency lens care in the Disposable Wear Program, replace lenses. A CooperVision Company recommends the use of sterile non-preserved solutions and should discard such solutions after the time specified in their label directions.

Eye injury from irritation or infection and damage to contact lenses may result from lens contamination. Patients should take care to prevent cosmetics, lotions, soaps, cream, hair sprays, or deodorants from coming into contact with their lenses or lens cases.

The lens wearer should have a pair of replacement lenses available. If the lens is or appears in any way damaged, the patient should not put the lens back on the eye. If the lens is adhering to a surface such as a counter top, apply sterile saline before handling the lens.

Eye-care practitioners should review the following information on re-hydrating the lenses with the patient:

- Handle the lens carefully.
- Place the lens in a storage case and soak the lens in a recommended mixing and storing solution for at least one hour before it returns to a soft state.
- Clean and disinfect and re-hydrate lens using a recommended lens-care system.
- If the lens does not become soft after soaking, the lens should not be used until it is examined by the eye-care practitioner.

**PRACTITIONER FITTING GUIDES AND PATIENT INFORMATION BOOKLETS:**

The OCUFILCON D Toric Practitioner Fitting Guide provides detailed fitting information for OCUFILCON D Toric contact lenses. Standard methods of fitting soft contact lenses apply to these lenses. Practitioners should instruct their patients with appropriate instructions for wearing, removing, and replacing their lenses, and patients must fully understand all handling and lens-care instructions. It is very important for practitioners to provide their patients with the appropriate Patient Information booklet (either for the Disposable Wear Program or for the Scheduled Replacement Program).

Practitioner fitting guides and patient information booklets are available from:

Customer Service
370 Woodlawn Drive, Suite 200
Fayette, NY 14450
(800) 341-2020

**WEARING SCHEDULES:**

It is recommended that a contact lens-wearing patient see his or her eye-care practitioner twice each year, or, if directed, more frequently. The practitioner should determine the appropriate wearing schedule and replacement schedule, which he or she should provide to the patient.

**Daily Wear:**

There may be a tendency for the daily-wear patient to overwear the lenses initially. After removal of the lenses from the lens case, to prevent the lens from adhering to the surface of the lens case, the lens should be inserted into the eye using clean and dry hands. The patient should be advised that when any of the aforementioned symptoms occur, a serious condition such as infection, corneal ulcer, corneal neovascularization, or iritis may be present and may progress rapidly. The patient should seek immediate professional identification of the problem and prompt treatment to avoid serious eye damage. Less serious reactions, such as abrasions, epithelial staining, and bacterial conjunctivitis, should be treated appropriately to avoid complications.

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