

Continuous Range of High-Quality Vision at All Distances.

From the Leader in Presbyopia-Correcting IOLs

Anterior Side



TECNIS[®] IOL
WAVEFRONT-DESIGNED
ANTERIOR ASPHERIC
SURFACE

POSTERIOR ACHROMATIC
DIFFRACTIVE SURFACE
AND ECHELETTE FEATURE

Posterior Side

HAPTICS OFFSET FOR
3 POINTS OF FIXATION

13.0 mm OVERALL
DIAMETER

FROSTED,
CONTINUOUS
360° POSTERIOR
SQUARE EDGE

6.0 mm OPTIC
DIAMETER

OPTICAL CHARACTERISTICS		
Model Number:	ZXR00	
Powers:	+5.0 D to +34.0 D in 0.5 diopter increments	
Diameter:	6.0 mm	
Center Thickness:	0.7 mm (20.0 D)	
Shape:	Biconvex, wavefront-designed anterior aspheric surface, posterior achromatic diffractive surface designed to reduce chromatic aberration for improved image contrast and echelette feature to extend the range of vision.	
Material:	UV-blocking hydrophobic acrylic	
Refractive Index:	1.47 at 35° C	
Edge Design:	ProTEC frosted, continuous 360° posterior square edge	
BIOMETRY*	CONTACT ULTRASOUND†	OPTICAL**
A-constant:	118.8	119.3
AC Depth:	5.4 mm	5.7 mm
Surgeon Factor:	1.68 mm	1.96 mm
HAPTIC CHARACTERISTICS		
Overall Diameter:	13.0 mm	
Thickness:	0.46 mm	
Style:	C	
Material:	Soft, Foldable, UV-blocking hydrophobic acrylic	
Design:	TRI-FIX , Haptics offset from optic; 1-piece lens	
RECOMMENDED INSERTION INSTRUMENTS		
UNFOLDER [®] Platinum 1 Series Screw-Style Inserter (DK7796)	UNFOLDER [®] Platinum 1 Series Cartridge (1MTEC30)	
UNFOLDER [®] Emerald-AR Inserter (EMERALDAR)	UNFOLDER [®] Emerald-AR Cartridge (1CART30)	
ONE SERIES [®] Ultra Syringe-Style Inserter (DK7786)	ONE SERIES [®] Ultra Cartridge (1VIPR30)	

* Value theoretically derived for a typical 22.0 D lens. Johnson & Johnson Surgical Vision, Inc. recommends that surgeons personalize their A-constant based on their surgical techniques and equipment, experience with the lens model and postoperative results.

† IOL constants have been theoretically derived for contact ultrasound.

** IOL constants have been derived from clinical evaluation results of the 1-Piece IOL Platform.

1. Calculated based on Holladay I formula (Holladay JT, Prager TC, Chandler TY, Musgrove KH, Lewis JW, Ruiz RS. A three-part system for refining intraocular lens power calculations. *J Cataract Refract Surg.* 1988;14(1):17-24).

INDICATIONS and IMPORTANT SAFETY INFORMATION for TECNIS SYMPHONY EXTENDED RANGE OF VISION IOLS

Rx Only

INDICATIONS FOR USE

The TECNIS Symfony Extended Range of Vision IOL, Model ZXR00, is indicated for primary implantation for the visual correction of aphakia, in adult patients with less than 1 diopter of pre-existing corneal astigmatism, in whom a cataractous lens has been removed. The lens mitigates the effects of presbyopia by providing an extended depth of focus. Compared to an aspheric monofocal IOL, the lens provides improved intermediate and near visual acuity, while maintaining comparable distance visual acuity. The Model ZXR00 IOL is intended for capsular bag placement only.

WARNINGS

Patients with any of the conditions described in the Directions for Use may not be suitable candidates for an intraocular lens because the lens may exacerbate an existing condition, may interfere with diagnosis or treatment of a condition, or may pose an unreasonable risk to the patient's eyesight. Lenses should not be placed in the ciliary sulcus. May cause a reduction in contrast sensitivity under certain conditions, compared to an aspheric monofocal IOL; fully inform the patient of this risk before implanting the lens. Special consideration should be made in patients with macular disease, amblyopia, corneal irregularities, or other ocular disease. Inform patients to exercise special caution when driving at night or in poor visibility conditions. Some visual effects may be expected due to the lens design, including: a perception of halos, glare, or starbursts around lights under nighttime conditions. These will be bothersome or very bothersome in some people, particularly in low-illumination conditions, and on rare occasions, may be significant enough that the patient may request removal of the IOL.

PRECAUTIONS

Interpret results with caution when refracting using autorefractors or wavefront aberrometers that utilize infrared light, or when performing a duochrome test. Confirmation of refraction with maximum plus manifest refraction technique is recommended. The ability to perform some eye treatments (e.g. retinal photocoagulation) may be affected by the optical design. Target emmetropia for optimum visual performance. Care should be taken to achieve IOL centration, as lens decentration may result in a patient experiencing visual disturbances under certain lighting conditions.

SERIOUS ADVERSE EVENTS

The most frequently reported serious adverse events that occurred during the clinical trial of the Tecnis Symfony lens were cystoid macular edema (2 eyes, 0.7%) and surgical reintervention (treatment injections for cystoid macular edema and endophthalmitis, 2 eyes, 0.7%). No lens-related adverse events occurred during the trial.

ATTENTION: Reference the Directions for Use for a complete listing of Indications and Important Safety Information.