TECNIS®
Multifocal Toric II IOL

Tailored Clarity to Meet Each Patient’s Lifestyle.

TECNIS®
MULTIFOCAL TORIC II IOL +2.75 D

For Enhanced Performance at 50 cm (20 in)
(Theoretical Reading Distance)

TECNIS® IOL
WAVEFRONT-DESIGNED ANTERIOR TORIC ASPHERIC SURFACE

HAPTICS HAVE A SQUARED AND FROSTED DESIGN

13.0 MM OVERALL LENGTH

FROSTED, CONTINUOUS 360° POSTERIOR SQUARE EDGE

ANTERIOR CYLINDER AXIS MARKS DENOTE IOL MERIDIAN WITH LOWEST POWER

POSTERIOR DIFFRACTIVE SURFACE (15 diffractive rings)

6.0 MM OPTIC DIAMETER

ANTERIOR SIDE

(15 diffractive rings)

POSTERIOR SIDE

HAPTICS OFFSET FOR 3 POINTS OF FIXATION
**INDICATIONS and IMPORTANT SAFETY INFORMATION for TECNIS® Multifocal Toric II IOLs**

Rx ONLY

**INDICATIONS FOR USE:** The TECNIS® Multifocal Toric II lens models ZKU150, ZKU225, ZKU300, ZKU375 and ZLU150, ZLU225, ZLU300, ZLU375 are indicated for primary implantation for the visual correction of aphakia and for reduction of residual refractive astigmatism in adult patients with or without presbyopia, with greater than or equal to 1 diopter of preexisting corneal astigmatism, in whom a cataractous lens has been removed in order to provide near, intermediate and distance vision. The IOLs are intended for capsular bag placement only.

**WARNINGS:** Physicians considering lens implantation should weight the potential risk/benefit ratio for any conditions described in the Directions for Use that could increase complications or impact patient outcomes. Multifocal IOL implants may be inadvisable in patients where central visual field reduction may not be tolerated, such as macular degeneration, retinal pigment epithelium changes, and glaucoma. The lens should not be placed in the ciliary sulcus. Inform patients about the possibility that a decrease in contrast sensitivity and an increase in visual disturbances may affect their ability to drive a car under certain environmental conditions, such as driving at night or in poor visibility conditions.

**PRECAUTIONS:** The clinical study did not show evidence of effectiveness for the treatment of preoperative corneal astigmatism of less than one diopter. The clinical study of the TECNIS Toric 1-Piece IOL did not show evidence of effectiveness for the treatment of preoperative corneal astigmatism of less than one diopter. Rotation of the TECNIS® Multifocal Toric II IOL away from its intended axis can reduce its astigmatic correction. Misalignment greater than 30° may increase postoperative refractive cylinder.

**ADVERSE EVENTS:** The most frequently reported cumulative adverse events are non-lens-related, in the ZLB00 (+3.25 D) lens group, was statistically higher than the FDA grid rate (for both first and second eyes). The most frequently reported cumulative adverse event that occurred during the TECNIS® Toric II IOL clinical trial was surgical re-intervention which occurred at a rate of 3.4% (lens repositioning procedures and retinal repair procedures). ATTENTION: Reference the Directions for Use for a complete description of the preexisting conditions and intraoperative complications. All preoperative surgical parameters are important when choosing a toric lens for implantation. Variability in any of the preoperative measures can influence patient outcomes. All corneal incisions were placed temporally in the clinical study. Do not reuse, resterilize, or autoclave.

For optimal results, utilize the TECNIS® Toric IOL calculator at [www.TecnisToricCalc.com](http://www.TecnisToricCalc.com) to determine the appropriate Toric model and power.