

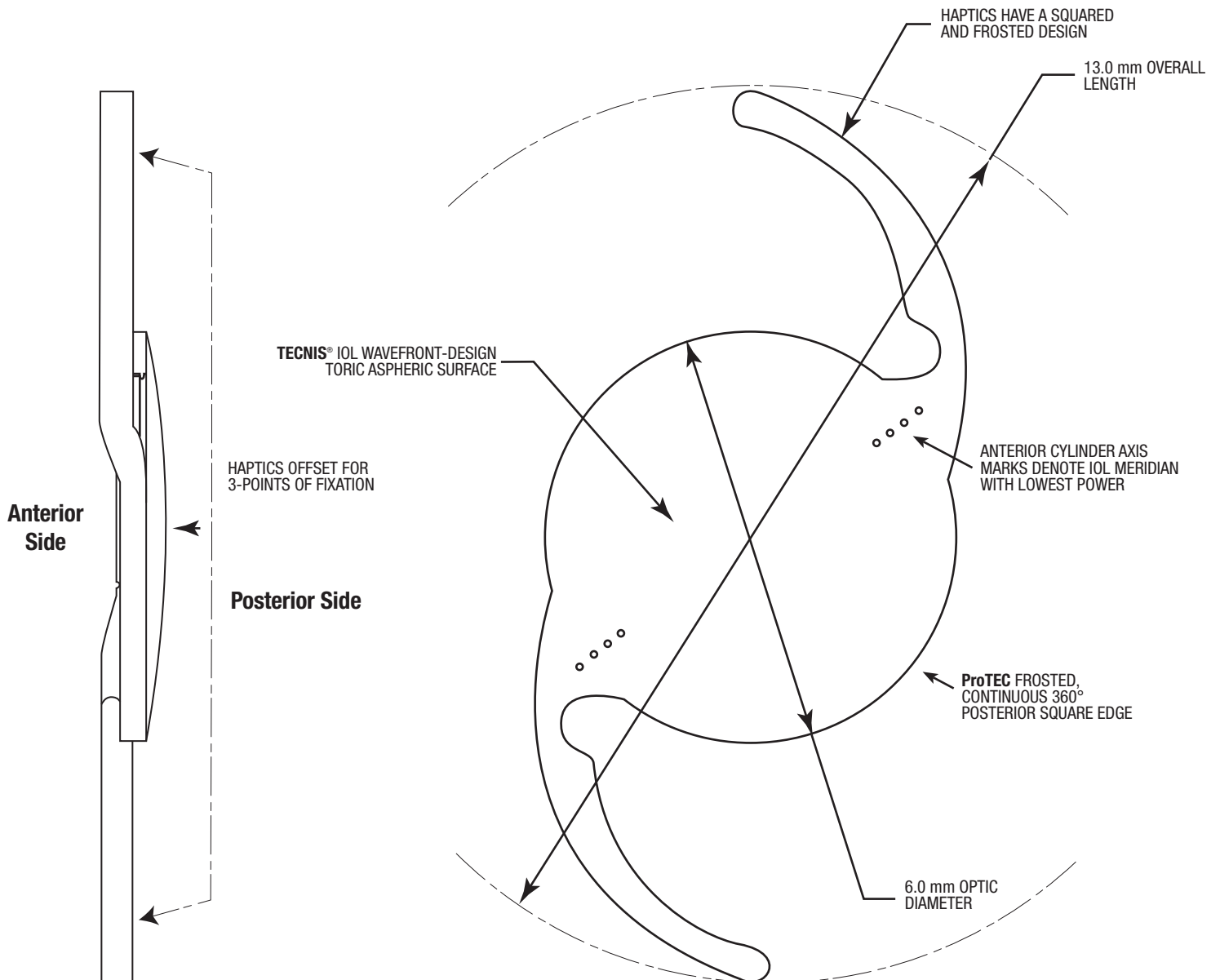
TECNIS®

Toric II 1-Piece IOL

Toric II

TECNIS® TORIC II 1-PIECE IOL

Hydrophobic Acrylic



OPTIC CHARACTERISTICS

| Powers: | | | | +5.0 D to +34.0 D in 0.5 diopter increments | | | |
|--|---|---------------|---------------|---|---------------|---------------|---------------|
| MODEL | ZCU150 | ZCU225 | ZCU300 | ZCU375 | ZCU450 | ZCU525 | ZCU600 |
| Cylinder Powers – IOL Plane: | 1.50 D | 2.25 D | 3.00 D | 3.75 D | 4.50 D | 5.25 D | 6.00 D |
| Cylinder Powers – Corneal Plane*: | 1.03 D | 1.54 D | 2.06 D | 2.57 D | 3.08 D | 3.60 D | 4.11 D |
| Correction Range Based on Combined Corneal Astigmatism (Preoperative Kcyl [†] +SIA [‡]) This information is used for software set up and not as a guide for lens selection | 0.75 - 1.50 D | 1.50 - 2.00 D | 2.00 - 2.50 D | 2.50 - 3.00 D | 3.00 - 3.50 D | 3.50 - 4.00 D | 4.00 - 4.75 D |
| Diameter: | 6.0 mm | | | | | | |
| Shape: | Biconvex, anterior toric aspheric surface | | | | | | |
| Material: | UV-blocking hydrophobic acrylic | | | | | | |
| Refractive Index: | 1.47 at 35° C | | | | | | |
| ABBE: | 55 | | | | | | |
| Asphericity of Lens: | -0.27 um | | | | | | |
| Edge Design: | ProTEC frosted, continuous 360° posterior square edge | | | | | | |

OPTICAL BIOMETRY[†]

| | |
|-----------------|---------|
| A-Constant: | 119.3 |
| AC Depth: | 5.7 mm |
| Surgeon Factor: | 1.96 mm |

APPLANATION ULTRASOUND BIOMETRY[§]

| | |
|-------------------------------|---------|
| A-Constant: | 118.8 |
| Theoretical AC Depth: | 5.4 mm |
| Surgeon Factor [‡] : | 1.68 mm |

HAPTIC CHARACTERISTICS

| | |
|-----------------|--|
| Overall Length: | 13.0 mm |
| Configuration: | Tri-Fix design, modified C, integral with optic |
| Material: | UV-blocking hydrophobic acrylic |
| Design: | Haptics offset from optic Haptics have a squared and frosted design |

RECOMMENDED INSERTION INSTRUMENTS

| | MODEL |
|---|---------|
| The UNFOLDER® Platinum 1 Series Handpiece | DK7796 |
| The UNFOLDER® Platinum 1 Series Cartridge | 1MTEC30 |

[†] Keratometric cylinder

[‡] Surgically induced Astigmatism

[†] 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 and Holladay, J.T. International Intraocular Lens & Implant registry 2003. *J Cataract Refract Surg.* 2003; 29:176-197.

[‡] Based on average pseudophakic human eye and 'Holladay et al. A three-part system for refining intraocular lens power calculations. *J Cataract Refract Surg.* 1988;14(1):17-24'.

[§] Derived from clinical evaluation results of the 1-Piece IOL Platform for optical biometry.

[§] A-Constant theoretically derived for ultrasound biometry.

Visit the **TECNIS® Toric calculator at www.TecnisToricCalc.com**

To learn more and to view important safety information, please review the **TECNIS® Toric II IOL Directions For Use (DFU)**.

About TECNIS® Toric II IOL

Physicians considering use of the TECNIS® Toric II IOLs should refer to the Directions for Use labeling for a complete list of indications and safety information.

The TECNIS® Toric II 1-Piece posterior chamber lens is indicated for the visual correction of aphakia and pre-existing corneal astigmatism of one diopter or greater in adult patients with or without presbyopia in whom a cataractous lens has been removed by phacoemulsification and who desire improved uncorrected distance vision, reduction in residual refractive cylinder, and increased spectacle independence for distance vision. The device is intended to be placed in the capsular bag.

Important Safety Information: The most frequently reported cumulative adverse event that occurred during the TECNIS® Toric 1-Piece IOL clinical trial was surgical re-intervention which occurred at a rate of 3.4% (lens repositioning procedures and retinal repair procedures). Rotation of these IOLs away from its intended axis can reduce its astigmatic correction. Misalignment greater than 30° may increase postoperative refractive cylinder. Variability in any of the preoperative measurements can influence patient outcomes. Physicians should weigh the potential risk/benefit ratio for circumstances described in the Directions for Use that could increase complications or impact patient outcomes. Federal law restricts this device to sale, distribution and use by or on the order of a physician.