

Patient Instructions

This Patient Instruction is for Daily Disposable Soft Contact Lens.

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INTRODUCTION :

Type: VISCO Toric Daily Silicone Hydrogel Soft Contact Lens

Material: NVP, Siloxane macromer

Water Content: 47%

Base Curve (mm): 8.00~9.20mm

Diameter (mm): 13.00~15.00mm

Power: +8.00 ~ -12.00

UV blocking: Class I

The **Daily Disposable** Soft Contact Lens is daily wear single use contact lenses. Once removed, they are to be discarded. They are not intended to be cleaned and disinfected. You should always carry a spare pair of lenses or glasses with them.

They are different from the rigid contact as they are more soft and flexible. The lenses with UV blocking may block UV light a little bit but cannot protect eyes as UV protection Equipment does.

The information and instructions apply only to Soft Contact Lens for **Daily Disposable**. For your eye health, it is important to wear your lenses as prescribed by your eye care practitioner. It is also important to keep your eye care practitioner 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 package. You will receive instruction how to properly insert and remove lenses. This booklet will emphasize those instructions. Discard and replace your contact lenses with a new sterile pair, as prescribed by your eye care practitioner.

The safe and effectiveness of contact lenses depends on proper use.

WEARING RESTRICTIONS AND INDICATIONS :

The **Daily Disposable** Soft Contact Lens are indicated as daily wear single use for the correction of refractive ametropia (myopia and hyperopia) in phakic or aphakic persons with non-diseased eyes who exhibit refractive astigmatism of 1.00D or less where the astigmatism does not interfere with visual acuity.

Eye care practitioners may prescribe the lens for daily wear (disposable use) single use. The lenses are to be discarded upon removal. Therefore, no cleaning or disinfecting is required. The Soft Contact Lens for **Daily Disposable** with UV blocking may block UV light a little bit but cannot protect eyes as UV protection Equipment does.

DO NOT WEAR YOUR SOFT CONTACT LENSES FOR DAILY DISPOSABLE WHILE SLEEPING.

CONTRAINDICATIONS (REASONS NOT TO USE)

DO NOT USE Daily Disposable Soft Contact Lens when any of the following conditions exists:

- Acute or subacute inflammation or infection of the anterior chamber of the eye
- Any eye disease, injury or abnormality that affect the cornea, conjunctiva, or eyelids
- Severe insufficiency of lacrimal secretion (dry eye)
- Corneal hypoesthesia (reduced corneal sensitivity), if not-aphakic
- Any systemic disease that may affect the eye or exacerbated by wearing contact lens
- Allergic reactions of ocular surface or adnexa that may be induced or exaggerated by the wearing of contact lenses or use of contact lens solutions
- Allergy to any ingredient, such as mercury or Thimerosal, in a solution which is be used to care for Daily Wear Soft Contact Lens
- Any active corneal infection (bacterial, fungal, or viral)
- If the eye becomes red or irritated

WARNINGS

INFECTION WITH POSSIBLE PERMANENT DAMAGE TO VISION COULD RESULT IN FROM THE FAILURE TO STRICTLY FOLLOW RECOMMENDED DIRECTIONS FOR USE.

PROBLEMS WITH CONTACT LENSES COULD RESULT IN SERIOUS INJURY TO THE EYE.

It is essential that you follow the directions of the eye care practitioner and all labeling instructions for proper use of contact lenses. You should be advised of the following instructions for use and warnings pertaining to contact lens wear:

Water Activity

Instruction for Use:

- Do not expose your contact lenses to water while you are wearing them.

WARNING:

Water can harbor microorganisms that can lead to severe infection, vision loss or blindness. If your lenses have been submersed in water when swimming in pools, lakes or oceans, you should discard them and replace them with a new pair. Ask your eye care practitioner (professional) for recommendations about wearing your lenses during any activity involving water.

EYE PROBLEMS, INCLUDING CORNEAL ULCERS, CAN DEVELOP RAPIDLY AND LEAD TO LOSS OF VISION; IF YOU EXPERIENCE:

- **Eye Discomfort,**

- **Excessive Tearing,**
- **Vision Changes,**
- **Loss of Vision,**
- **Eye Redness,**
- **Or Other Eye Problems**

YOU SHOULD BE INSTRUCTED TO IMMEDIATELY REMOVE THE LENSES, AND PROMPTLY CONTACT YOUR EYE CARE PRACTITIONER.

- Daily wear lenses are not indicated for overnight wear, and you should be instructed not to wear lenses while sleeping. Clinical studies have shown that the risk of serious adverse reactions is increased when these lenses are worn overnight.
- Do not wear the contact lens continuously more than 12 hours.
- It is recommended that the contact lens should be left out of the eye more than 3 hours before next re-insertion.
- Consult the eye care professional regarding the use of contact lens in certain atmospheric or environmental conditions that can cause irritation to the eye.
- Studies have shown that contact lens wearers who are smokers have a higher incidence of adverse reactions than nonsmokers.
- Consult the eye care professional or doctor if you are pregnant. According to personal physical condition, the dimension of cornea might have some change during pregnancy.
- The lens is immersed in the packaging solution contents boric acid, to prevent microbiological contamination. If you might be pregnant, please talk to your doctor before wearing the contact lens as it contains boric acid. *. Please flush it with clean saline solution before wearing the contact lens.
- Problems with contact lenses and lens care products could result in serious injury to the eye. It is essential that you follow their eye care professional's direction and all labeling instructions for proper use of lenses and lens care products, including the lens case. Eye problems, including corneal ulcers, can develop rapidly and lead to loss of vision.
- If you experiences eye discomforts, excessive tearing, vision changes, or redness of the eye, you should be instructed to immediately remove lenses and promptly contact your eye care professional.
- Please note there are additional risks if you reuse of contact lens:
 - The chance of infection may increase.
 - You may experience blurred vision due to inappropriate cleaning of lens surface.
 - Lenses may become physically compromised by repeatedly removing and re-inserting lenses.

* If the boric acid absorbed by body exceeds 39.9 mg per day, it may impair fertility or damage the unborn child. The maximum amount of boric acid absorb by average body while wearing this contact lens (pair) is less than 0.3 mg per day.

PRECAUTIONS

Eye care practitioners should carefully instruct you about the following safety precautions. If the lens is prescribed for disposable use only, you should always discard the lens upon removal, and never place it in the storage case.

- Do not use saliva or anything other than the recommended solutions for lubricating or wetting lenses.
- If the lens sticks (stops moving) on the eye, you should be instructed to **immediately** consult your 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-base cosmetics are less likely to damage lenses than oil-base 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, and wearing instructions in you Instructions for the **Daily Disposable** Soft 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 the eye care practitioner about wearing lenses during sporting activities.
- Never use tweezers or other tools to remove lenses from the lens container unless specifically indicated for that use. Pour the lens into the hand.
- Do not touch the lens with fingernails.
- Inform the doctor (health care practitioner) about being a contact lens wearer.
- 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 you not wear contact lenses.
- As with any contact lens, follow-up visits are necessary to assure the continuing health of your eyes. You should be instructed as to a recommend follow-up schedule.
- Never to share the lens with other users.

ADVERSE REACTIONS (PROBLEM AND WHAT TO DO)

You should be informed that the following problems may occur:

- Eyes staining, burning, itching (irritation), or other eye pain
- Comfort is less than when lens was first placed on eye
- Feeling that something is in the eye such as a foreign body or scratched area
- Excessive watering (tearing) of the eyes

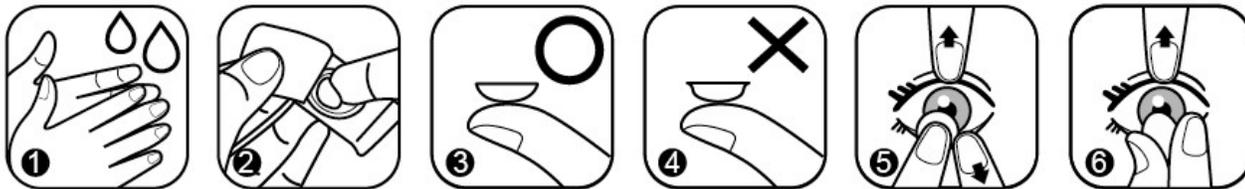
- Unusual eye secretions
- Redness of the eyes
- Reduced sharpness of vision (poor visual acuity)
- Blurred vision, rainbows, halos around objects
- Sensitivity to light (photophobia)
- Dry eyes

If you notice any of above, he or she should be instructed to:

- **Immediately remove lenses.**
- If the discomfort or problem stops, then look closely at the lens. If the lens is in any way damaged, DO NOT put the lens back on the eye. Discard the lens if your lens is prescribed for daily disposable lens.
- If your lens has dirt, an eyelash, or foreign body on it, or the problem stops and the lens appears undamaged, you should discard the lens upon removal and replace it with a new one.
- If the lens is prescribed for disposable use only, you should always discard the lens upon removal, and never place it in the storage case.

When any of the above problems occur, a serious condition such as infection, corneal ulcer, neovascularization, or iritis may be present. You should be instructed to **keep lens off the eye and consult and eye care professional before resuming use for** identification of the problem and prompt treatment to avoid serious eye damage.

PERSONAL CLEANING FOR LENS HANDLING



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 touching the lens with fingernails. It is helpful to keep your fingernails short and smooth.

Start off correctly by getting into the habit of always use proper hygienic procedures so that they become automatic.

2. Opening the lens package

The lens packages are individual and maintains sterily.

- Shake the lens package first and confirm that the lens is floating in the solution.
- Tear off the foil closure. To avoid splash, you can stabilize the package on the table then tear off.

A lens may adhere to the inside surface of the foil, or to the plastic package sometimes. There is no effect about the sterility of the lens and still safe to use. Follow the handling instructions removing and inspecting the lens carefully.

3. Handling the Lenses

- Develop the habit of always working with the same lens first to avoid mixups.
- Remove the lens from its storage cases and examine it to be sure that it is moist, clean, and free of any nicks or tears.

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

4. Placing the Lens on the Eye

Start with your right eye.

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

- A. Clean your hands throughout.
- B. Place the lens on the tip of your forefinger. **Make sure the lens is correctly oriented.**
- C. Place the middle finger of the same hand and pull down the lower lid.
- D. Use the forefinger or middle finger of the other hand to lift the upper lid.
- E. Place the lens on the eye.
- F. Release the lids gently and blink. The lens will center automatically.
- G. Place the lens on your left eye by the same technique.

There are some other methods of lens wearing. If the above method is difficult for you, please consult your eye care practitioner for alternative methods.

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. Discard the lens and replace a new one.

- b. The lens is on the wrong eye.
- c. The lens is inside out (it would also not be as comfortable as normal).

If your vision is still blurred after checking the above possibilities, remove both lenses and consult your eye care practitioner.

After applied your lenses successfully, you should ask yourself:

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

If any problems discover, remove your lenses immediately and contact your eye care practitioner.

5. Centering the Lens

Very rarely, a lens that is on the cornea will be displaced onto the white part of the eye during wear. This can also occur during placement and removal of the lens if the correct techniques are not performed properly. To center a lens as follow one of the procedures below.

- a. Close your eyelids and gently massage the lens into place through the closed lids.
- b. Use finger pressure on the edge of the upper lid or lower lid and gently manipulate the off-centered lens onto the cornea while the eye is open.

6. Removing the Lens

Caution: Always be sure the lens is on the cornea before attempting to remove it. This could be determined by covering the other eye. If vision is blurred, the lens is either on the white part of the eye or 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.

- Always work with the same side lens first.
- Wash, rinse, and dry your hands thoroughly.

There are two techniques for removing lens: Pinch Method or Forefinger and Thumb Method. Simply follow the procedures recommended by the eye care practitioner.

•Pinch Method

- a. Look up; slide the lens to the lower part of the eye using the forefinger.
- b. Pinch the lens between the thumb and forefinger gently.
- c. Remove the lens.

- Thumb Method
 - a. Place your hand or a towel under your eye to catch the lens.
 - b. Place your forefinger on the center of the upper lid and your thumb on the center of the lower lid.
 - c. Press in and force a blink. The lens should fall onto your hand or a towel.
 - d. Once you remove the lens, follow the lens care directions recommended by the eye care practitioner immediately.
- Remove the other lens by following the same procedure.

Note: If these methods described above are difficult for you, please consult your eye care practitioner will provide you with an alternative method.

- The proper method for disposing of used contact lenses is to throw the lenses in the trash bin.

CARING FOR YOUR LENS

If you are prescribed daily disposable lenses you should have a spare pair of lenses with you at all times.

1. Basic Instructions:

If you require only vision correction, but will not or 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 you have to put the lenses on and remove them while you are in your eye care practitioner's office. Your eye care practitioner should instruct you about appropriate and adequate procedures for your use, and provide you with a copy of the Patient Instructions for the **Daily Disposable Soft Contact Lens** .

For safe contact lens wear, you should know how to care contact lenses.

- Always wash, rinse and dry hands before handling contact lenses.
- Do not use saliva or anything other than the recommended solutions for lubricating or rewetting your lenses. Do not put lenses in your mouth.
- 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 the lens down the drain.
- 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. Emergencies

If chemicals of any kind (household products, gardening solution, laboratory chemicals, etc.) are splashed into your eyes, you should: **Flush eyes with tap water and immediately contact your eye care practitioner or visit a hospital emergency room without delay.**

INSTRUCTIONS FOR MONOVISION WEARER

- You should be aware that as with any type of lens correction, there are advantages and compromises to mono-vision contact lens therapy. The benefit of clear near vision in straight ahead and upward gaze that is available with mono-vision may be accompanied by a vision compromise that may reduce your visual acuity and depth perception for distance and near tasks. Some you have experienced difficulty adapting to it. Symptoms, such as mild blurred vision, dizziness, headaches and a feeling of slight imbalance, may last for a brief minute or for several weeks as adaptation takes place. The longer these symptoms persist, the poorer your prognosis 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 mono-vision correction if you pass your state driver's license requirements with mono-vision correction.
- Some mono-vision you 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.

If you require very sharp near vision during prolonged close work, you may want to have additional contact lenses prescribed so that both eyes are corrected for near when sharp near binocular vision is required.

- Some mono-vision you require supplemental spectacles to wear over the mono-vision correction to provide the clearest vision for critical tasks. You should discuss this with your eye care practitioner.
- It is important that you follow your eye care practitioner's suggestions for adaptation to mono-vision contact lens therapy. You should discuss any concerns that you may have during and after the adaptation period.
- The decision to be fit with mono-vision correction is most appropriately left to the eye care practitioner in conjunction with you, after carefully considering and discussing your needs.

REPORTING OF ADVERSE REACTIONS (Side Effects)

Any incident experienced whilst wearing VISCO Brand Contact Lenses should be reported to the manufacturer and/or its authorized representative and/or to your national authority.

WEARING AND APPOINTMENT SCHEDULES

Record here the number of hours your eye care practitioner recommends you wear the lenses each day during the adaptation period.

It is essential that you follow your eye care practitioner's directions regarding this important step of building up your wear time.

Prescribed Wearing Schedule

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

Appointment Schedule

Your appointments are on

Month	Year	Time	Minimum number of hours lenses to be worn at time of appointment Day

PATIENT/EYE CARE PRACTITIONER INFORMATION

Patient/Eye Care Practitioner Information Record

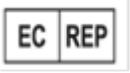
Dr. : _____
Address : _____
Phone No. : _____
Note : _____

IMPORTANT: In the event that you experience any difficulty wearing your lenses or you do not understand the instructions given to you, **do not wait** for your next appointment. **Telephone your eye care practitioner immediately.**

Australian Sponsor

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GLOSSARY OF TECHNICAL TERMS

Term	Definition
Adnexa	Tissues surrounding the eyeball.
Ametropia	Abnormal vision requiring correction for proper focus.
Anterior chamber	Fluid-filled portion of the eye between the iris and innermost corneal surface.
Aphakic	An eye that does not have its natural lens (example: after cataract surgery).
Astigmatism	A condition where the cornea is not equally curved in all parts of its surface. It is somewhat oval in shape, causing the visual image to be out of focus (blurred).
Conjunctiva	Transparent membrane that lines the eyelids and the white part of the eye.
Conjunctivitis	Inflammation of the conjunctiva.
Continuous Wear	Extended wear for multiple nights in a row.
Cornea	Clear front part of the eye that covers the iris, pupil and anterior chamber.
Corneal erosion	Wearing away of the surface of the cornea.
Corneal ulcer	A sore or lesion on the cornea
Disinfection	A process that kills harmful microorganisms (germs) which can cause serious eye infections
Hydrophilic material	“water loving” or water absorbing substance
Hyperopia	Farsightedness
Hypoesthesia	Reduced corneal sensitivity to touch
Iritis	Inflammation of the interior portion of the eye that includes the iris, and results in redness, pain, blurred vision and sensitivity to light.
Inflammation	Swelling, redness and pain
Monivision	A correction method for presbyopia (loss of reading vision) using contact lenses; one eye is fitted for distance, the other for near vision
Myopia	Nearsightedness
Neovascularization	Blood vessels growing into the cornea
Phakic	An eye that has its natural lens
Presbyopic	A person with Presbyopia
Spherical contact lens	A lens with a continuously rounded curve
Toric contact lens	A lens with two different optical powers at right angles to each other for the correction of astigmatism
Ulcerative keratitis	An infected corneal ulcer

SYMBOLS KEY

The following symbols may appear on the label or packaging.

Symbol	Definition	Symbol	Definition
	Consult Instructions for Use		Temperature limit
	Caution		Do not use if package is damaged
	Manufacturer		CAUTION: U.S. Federal law restricts this device to sale by or on the order of a licensed practitioner
 /EXP	Use-By date (expiration date)		CE-mark and Identification Number of Notified Body
	Batch code		Authorized representative in the European Community
	Sterilized using steam		Do not re-use
DIA (mm)	Diameter (the unit is millimeter)		Medical device
BC (mm)	Base curve (the unit is millimeter)		Unique device identifier
D/PWR	Diopter (lens power)		Contains hazardous substances
CYL	Cylinder		Catalogue number
AXIS	Axis		Date of manufacture
MAX ADD	Highest near addition that can be corrected		Single sterile barrier system
LO	“low” near ADD lens (up to +1.25D)		Importer
MID	“medium” near ADD lens (up to +2.00D)		
HI	“high” near ADD lens		

	(above +2.00D)		
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