



ACUVUE®  
abiliti™

1-DAY SOFT THERAPEUTIC LENSES  
FOR MYOPIA MANAGEMENT

## ACUVUE® Abiliti™ 1-Day Soft Therapeutic Lenses for Myopia Management

senofilcon A Soft (hydrophilic) Contact Lenses

Visibility Tinted with UV Blocker for Daily Disposable Wear

### **PARENT/PATIENT INSTRUCTION GUIDE**



CAUTION: U.S. Federal law restricts this device to sale by or on the order of a licensed practitioner.

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## INTRODUCTION

### *About This Booklet:*

The information and instructions contained in this booklet apply only to ACUVUE® Abiliti™ 1-Day Soft Therapeutic Lenses for Myopia Management.

It is important that the contact lenses be worn only as prescribed by the Eye Care Professional. The Eye Care Professional should be kept fully aware of the patient's medical history and will develop a total program of care based on the patient's specific needs. He or she will review all instructions for lens handling and care, including how to safely and easily open the packaging. The patient will also be taught how to properly insert and remove lenses. This booklet will reinforce those instructions.

**If the patient has any questions, he/she should always ask the Eye Care Professional.**

A "Glossary of Commonly Used Terms" is included for reference. This contains definitions of medical and technical terminology used in this booklet. In addition, a "Symbols Key" provides an explanation of symbols that may appear on the lens packaging.

Special sections are included in the back of this booklet to record specific prescribed wearing information as well as to record the contact information for the Eye Care Professional.

### *About These Lenses and Contact Lens Wear:*

ACUVUE® Abiliti™ 1-Day Soft Therapeutic Lenses for Myopia Management are made from a water loving (hydrophilic) material that has the ability to absorb water, making the lenses soft and flexible. The lenses are tinted to make them easier to see and also contain a special ingredient (UV Blocker) to protect the patient's eyes from ultraviolet (UV) radiation.

















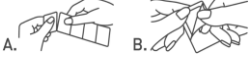
The lenses are intended for daily disposable wear and should be discarded upon removal. There is no cleaning or disinfection required because new contact lenses are used for each wear. The patient should always have spare contact lenses or eyeglasses in case they need to remove their current contact lenses.

#### *Important things to remember:*

- **Always** wash hands thoroughly with a mild soap, rinse completely and dry with a clean, lint-free towel before touching the lenses to reduce the chance of getting an infection.
- **DO NOT** use if the sterile blister package is opened or damaged.
- **Never** wear these contact lenses while napping or sleeping.
- **Never** allow anyone else to wear your lenses. Sharing lenses greatly increases the chance of eye infections.
- **DO NOT EXPOSE** the contact lenses **TO WATER WHILE WEARING** them.

## SYMBOLS KEY

The following symbols may appear on the label or carton:

<i>Symbol</i>	<i>Description</i>
	Caution, Consult Instructions for Use
	Date of Manufacture
	Manufactured by or in
	Use By Date (expiration date)
	Batch Code
	Sterilized Using Steam or Dry Heat
	Do Not Re-Use (Single Use)
	Do Not Use if Package is Damaged
	Fee Paid for Waste Management
	Indicates a Single Sterile Barrier System
	CAUTION: U.S. Federal law restricts this device to sale by or on the order of a licensed practitioner
UV BLOCKING	UV Blocking
DIA	Diameter
BC	Base Curve
D	Diopter (lens power)
	Lens Orientation Correct
	Lens Orientation Incorrect (Lens Inside Out)
	Contains Hazardous Substances
	Medical Device Symbol
	Authorized Representative in the European Community
	Opening Package (Carton)

Visit [www.acuvue.com/guides](http://www.acuvue.com/guides) for additional information about symbols.

## GLOSSARY OF COMMONLY USED TERMS

<i>Term</i>	<i>Definition</i>
<b>Astigmatism</b>	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)
<b>Conjunctivitis</b>	Inflammation of the membrane that lines the eyelids and the white part of the eye
<b>Cornea</b>	Clear center part of the eye
<b>Corneal Ulcer</b>	A sore or lesion on the cornea
<b>Inflammation</b>	Swelling, redness, and pain

## INDICATIONS

The ACUVUE® Abiliti™ 1-Day Soft Therapeutic Lenses for Myopia Management are intended for daily wear, worn on a daily disposable basis, for the correction of nearsightedness (while the lenses are worn) and may slow the patient's prescription change over time. The contact lenses are intended to be used by children who, at the initiation of treatment, are 7 to 12 years old, with myopia between -0.75D and -4.50D and 1.00D or less astigmatism, with non-diseased eyes and are symptomatic with regard to a need for distance vision correction.

Slowing axial elongation and myopia progression was demonstrated in a clinical study of children between 7 and 12 years of age with a required lens wear time of, at a minimum, 8 hours per day and 5 days per week. Longer-term myopia control effect of the lens as well as permanent myopia control after lens treatment is discontinued has not been established through clinical trials.

## WEARING INFORMATION

The ACUVUE® Abiliti™ 1-Day Soft Therapeutic Lenses for Myopia Management are intended for daily disposable wear and should be discarded upon removal.

The contact lenses should **never** be worn while napping or sleeping.

There is no cleaning or disinfection required.

The patient should always have spare lenses or eyeglasses.

The lenses contain a UV Blocker to help provide protection against transmission of harmful UV radiation to the cornea and into the eye.

**WARNING: UV ABSORBING CONTACT LENSES are not a substitute for protective UV absorbing eyewear such as UV absorbing goggles or sunglasses because they do not completely cover the eye and surrounding area. The patient should continue to use UV absorbing eyewear as directed.**

**Note: Long-term exposure to UV radiation is one of the risk factors associated with cataracts. Exposure is based on a number of factors such as environmental conditions (altitude, geography, cloud cover) and personal factors (extent and nature of outdoor activities). UV blocking contact lenses help provide protection against harmful UV radiation. However, clinical studies have not been done to demonstrate that wearing UV blocking contact lenses reduces the risk of developing cataracts or other eye disorders. Consult the Eye Care Professional for more information.**

## **WHEN LENSES SHOULD NOT BE WORN (CONTRAINDICATIONS)**

**DO NOT USE** the Contact Lens when any of the following conditions exist and immediately contact the Eye Care Professional:

- Inflammation or infection in or around the eye or eyelids
- Any eye disease, injury or abnormality that affects the cornea, conjunctiva or eyelids
- Any previously diagnosed condition that makes contact lens wear uncomfortable
- Severe dry eye
- Reduced corneal sensitivity (corneal hypoesthesia)
- Any systemic disease that may affect the eye or made worse by wearing contact lenses
- Allergic reactions on the surface of the eye or surrounding tissues (adnexa) that may be induced or made worse by wearing contact lenses or use of contact lens solutions
- Any active eye infection (bacterial, fungal, protozoal or viral)
- If eyes become red or irritated
- Irritation of the eye caused by allergic reactions to ingredients in contact lens solutions (i.e., rewetting drops). These solutions may contain chemicals or preservatives (such as mercury, Thimerosal, etc.) to which some people may develop an allergic response.

## ADVERSE REACTIONS (SIDE EFFECTS)

Wearing contact lenses, compared to eyeglasses, increases the patient's risk of developing eye problems. While the risk of eye problems is low, the chance of developing a problem increases when the contact lenses are worn to sleep or nap, exposed to water, or when dirty lenses are used. Eye problems can develop even when the contact lenses are properly cared for. This section outlines possible risks or discomforts associated with wearing contact lenses and will offer some guidance on who to contact if a problem should occur. Some of these possible risks or discomforts may result in the patient not being able to wear contact lenses, either for a short time or ever again.

The following signs or symptoms may also occur when wearing contact lenses:

- Burning, stinging, itchy and/or dry eyes
- Less comfort after daily wear than when the lens was first placed on the eye
- A feeling like there is something in the eye (foreign body, scratched area)
- Reduced vision or temporary loss of vision due to peripheral infiltrates (white blood cells), peripheral corneal ulcers (inflammation of the cornea), and/or corneal erosion (defects in the corneal surface)
- Local or generalized edema (swelling)
- Corneal neovascularization (small blood vessels growing into the cornea)
- Corneal staining (defect in the corneal surface)
- Eye redness
- Tarsal abnormalities (bumps on the inside upper eye lid)
- Iritis (internal inflammation of the eye)
- Conjunctivitis (infection or inflammation of the white part of the eye or under the eyelids)
- Excessive watering, unusual eye secretions
- Poor visual acuity
- Blurred vision
- Rainbows or halos around objects
- Sensitivity to light (photophobia)
- Dry eyes may also occur if lenses are worn continuously or for too long a time

When any of the above symptoms occur, a serious eye condition may be present. **Immediately remove the lenses, and promptly be seen by the Eye Care Professional**, so the problem can be identified and treated, if necessary, in order to avoid serious eye damage.



## ***Recognizing Problems and What to Do***

You should conduct a simple 3-part self-examination at least once a day. Ask yourself:

- How do the lenses feel on my eyes?
- How do my eyes look?
- Have I noticed a change in my vision?

If you notice any problems, you should IMMEDIATELY REMOVE THE LENS. If the problem or discomfort stops, discard the lens and place a new fresh lens on the eye. If after applying the new lens the problem continues, IMMEDIATELY REMOVE THE LENS AND CONTACT YOUR EYE CARE PROFESSIONAL.

## **WARNINGS**

### ***What You Should Know About Contact Lens Wear:***

**EYE PROBLEMS, INCLUDING CORNEAL ULCERS (ULCERATIVE KERATITIS), CAN DEVELOP RAPIDLY AND LEAD TO SEVERE PAIN AND LOSS OF VISION. A CORNEAL ULCER IS WHEN THE CLEAR WINDOW AT THE FRONT OF THE EYE (THE CORNEA) BECOMES INFECTED. THE YEARLY RISK OF THIS IS ABOUT 1 PER 2000 CONTACT LENS WEARERS IN ADULTS, BUT IS NOT WELL ESTABLISHED IN CHILDREN. IF THE PATIENT EXPERIENCES ANY OF THE FOLLOWING SYMPTOMS:**

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

**THE PATIENT SHOULD IMMEDIATELY REMOVE THE LENSES, AND PROMPTLY CONTACT THE EYE CARE PROFESSIONAL.**

- These lenses are prescribed for daily wear and are for single use. Studies have shown that daily disposable contact lens wear reduces the risk of some complications including discomfort and inflammation that are associated with lens care and handling and reuse can put you at greater risk of these problems.
- Lenses prescribed for daily disposable wear (i.e., when the patient is instructed to remove and discard the lenses at the end of each day), **should not** be worn while sleeping. Clinical studies have shown that the risk of serious eye problems (i.e., ulcerative keratitis) is increased when lenses are worn overnight.<sup>1</sup>
- Studies have shown that contact lens wearers who smoke have a higher rate of eye problems (ulcerative keratitis) than nonsmokers.
- Problems with contact lenses or lens care products could result in serious injury to the eye.
- Proper use and care of the contact lenses and lens care products are essential for the safe use of these products.

- The overall risk of serious eye problems (i.e., ulcerative keratitis) may be reduced by carefully following directions for lens wear and disposal.

<sup>1</sup>New England Journal of Medicine, September 21, 1989; 321 (12), pp. 773-783

### ***Vision Quality and Potential Symptoms:***

Due to the intended optical design of these lenses for the purpose of reducing the patient's prescription change, under certain circumstances, some patients may experience visual symptoms.

- These lenses will provide vision correction while worn, but the vision quality may not be as clear as with conventional soft contact lenses.
  - Some patients may experience bothersome visual symptoms. For example, lights may appear streaked or smeared or have blur or fuzz around them; or things may appear to have a faint image overlapping them.
- Different patients may experience different levels of such visual symptoms, and some may find these visual symptoms to be bothersome and cause difficulties with some activities.
  - Patients should exercise extra care if performing potentially hazardous, vision demanding activities.
  - **If the patient is not comfortable with how well they can see with these lenses, remove the lenses and contact the Eye Care Professional.** The Eye Care Professional may modify the patient's prescription to help them see as well as possible. The Eye Care Professional may also decide to discontinue the patient from wearing these lenses.

### ***Specific Instructions for Use and Warnings:***

- **Water Activity**

#### ***Instruction for Use***

Do not expose the contact lenses to water while 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 participating in water sports or swimming in pools, hot tubs, lakes, or oceans, you should discard them and replace them with a new pair. Ask your Eye Care Professional for recommendations about wearing your lenses during any activity involving water.**

## PRECAUTIONS

**For patient's eye health**, it is important to carefully follow the handling, insertion, removal and wearing instructions in this booklet as well as those prescribed by the Eye Care Professional (see **"Lens Handling & Insertion"** and **"Lens Wearing"** sections).

- **DO NOT** use if the sterile blister package is opened or damaged, or after the expiry date.
- When the patient first gets the lenses, be sure they are able to put the lenses on and remove them (or have someone else available who can remove the lenses for them) before leaving the EYE CARE PROFESSIONAL'S office.
- **NEVER** use tweezers or other tools to remove the lenses from the lens container.
- Remember, always start with the same eye.
- Always be sure the lens is in the patient's eye and they see clearly before commencing the removal technique.

### **General Precautions:**

- Due to the small number of patients enrolled in clinical investigation of lenses, all refractive powers, design configurations, or lens parameters available in the lens material are not evaluated in significant numbers. Consequently, when selecting an appropriate lens design and parameters, the Eye Care Professional should consider all characteristics of the lens that can affect lens performance and ocular health, including oxygen permeability, wettability, central and peripheral thickness, and optic zone diameter.

The potential impact of these factors on the patient's ocular health should be carefully weighed against the patient's need for refractive correction; therefore, the continuing ocular health of the patient and lens performance on the eye should be carefully monitored by the prescribing Eye Care Professional.

- Eye Care Professionals should instruct the patient to remove the lenses immediately if the eyes become red or irritated.
- **Always** contact the Eye Care Professional before using any medicine on eyes.
- **Be aware** that certain medications, such as antihistamines, decongestants, diuretics, muscle relaxants, tranquilizers and those for motion sickness may cause dryness of the eye, increased lens awareness (feeling of the lens in the eye) or blurred vision. Always inform the Eye Care Professional if the patient experiences any problems with the lenses while taking such medications.
- **Be aware** that if the patient uses oral contraceptives (birth control pills), they could develop changes in vision or comfort when wearing contact lenses.
- **Do not** change the lens type (e.g., brand name, etc.) or parameters (e.g., diameter, base curve, lens power, etc.) without consulting the Eye Care Professional.

- The patient should **never** sleep or nap in their contact lenses. If the patient accidentally falls asleep with the lenses, the lenses may stick (stop moving) on the eye. If the lens sticks on the eye, the patient should try some forceful blinks and gently massage the lens through the closed eyelids. If the Eye Care Professional recommended rewetting eye drops, the patient may apply 1-2 eye drops. Wait until the lens begins to move freely on the eye before removing and throwing away the lenses. If non-movement of the lens continues, the patient should immediately consult the Eye Care Professional.
- If the lenses are uncomfortable, the patient should try some forceful blinks and gently massage the lens through the closed eyelids. If the Eye Care Professional recommended rewetting eye drops, the patient may apply 1-2 eye drops. If comfort does not improve, the patient should remove the contact lenses. If the patient's eyes still feel dry after the lenses are removed, the patient should not wear the contact lenses until the eyes feel back to normal. After 30 minutes, if the patient's eyes are comfortable, they may put in a new pair of contact lenses.
- If the patient needs to remove the lenses during the day, he/she must wash hands with soap and water, rinse and dry his/her hands, then remove the lenses and throw them away.
- Make sure the patient **always** has a functional pair of eyeglasses with a current prescription available to use if he/she becomes unable to wear contact lenses, or in circumstances where contact lens wear is not advised. The patient should avoid rubbing his/her eyes.
- As with any contact lens, follow-up visits are necessary to assure the continuing health of the patient's eyes. Ask the Eye Care Professional about the recommended follow-up schedule.
- The patient's vision should be closely monitored by the Eye Care Professional to make sure their eyes and vision are performing properly.
  - **If a young patient experiences blurred vision for a long enough period of time, this could theoretically cause a permanent reduction of their vision, even with the best prescription glasses, if it is not identified and treated promptly.<sup>2</sup>**
  - **If the patient is not comfortable with how well they can see with these lenses, remove the lenses and contact the Eye Care Professional.** The Eye Care professional may modify the patient's prescription to help them see as well as possible.
  - The Eye Care Professional may also decide to discontinue the patient from wearing these lenses if the patient's vision is reduced too much, to prevent any long-term risk of reduced visual acuity.

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<sup>2</sup> No temporary or permanent reduction of best-corrected vision has been observed to date in JJVC myopia control clinical trials or reported in the literature for other optical interventions for myopia that introduce aberrations to the eye.

- **It is critical that the patient completes all scheduled follow-up visits with the Eye Care Professional on time to minimize the risk of these problems.**

### ***Who Should Know That You are Wearing Contact Lenses:***

- **Inform** all of the doctors (Health Care Professionals) about being a contact lens wearer.
- **Always** inform teachers and coaches about being a contact lens wearer.

## **LENS HANDLING AND INSERTION**

**For the patient's eye health**, it is important to carefully follow the lens handling, insertion, removal and wearing instructions in this booklet as well as those prescribed by the Eye Care Professional. If the patient will not or cannot always follow the recommended care procedures, he/she should not attempt to wear contact lenses.

***When the patient first gets his/her lenses, be sure he/she is able to put the lenses on and remove them (or have someone available who can remove the lenses for them) before leaving the Eye Care Professional's office.***

### ***Step 1: Getting Started***

It is essential that the patient learn and use good hygiene in the care and handling of his/her new lenses.

Cleanliness is the first and most important aspect of proper contact lens care. In particular, the patient's hands should be clean, dry, and free of any soaps, lotions, or creams before he/she handles their lenses.

Before the patient starts:

- **Always** wash hands thoroughly with a mild soap, rinse completely and dry with a clean, lint-free towel before touching the lenses to reduce the chance of getting an infection.
- The patient should avoid the use of soaps containing cold cream, lotion, fragrances or cosmetics before handling the lenses. These substances may come into contact with the lenses and interfere with successful wearing. It is best to put on the lenses before putting on makeup.

The patient should start off correctly by getting into the habit of always using proper hygiene so that they become automatic.

## **Step 2: Opening the Packaging**

Always confirm the lens parameters (e.g., diameter (DIA), base curve (BC), lens power (D), etc.) printed on the multi-pack and on the individual lens package match the patient's prescription. DO NOT use if there is a mismatch.

### **Multipack**

- Each multipack contains individually packaged lenses. Each lens comes in its own foil-sealed plastic package containing borate buffered saline solution with methyl ether cellulose. This package is designed specifically to keep the lens sterile while the package is sealed. In the European Union, borates (boric acid & sodium borate) are defined as CMR 1B substances in a concentration above 0.1% weight by weight and are safe when product is used according to label instructions.

### **Lens Package**

***DO NOT use if the sterile blister package is opened or damaged.***

To open an individual lens package, follow these simple steps:

1. Shake the lens package and check to see that the lens is floating in the solution.
2. Carefully peel back the foil closure to reveal the lens.
3. Place a finger on the lens and slide the lens up the side of the bowl of the lens package until it is free of the container.

***NEVER use tweezers or other tools to remove the lenses from the lens container.***

Occasionally, a lens may stick to the inside surface of the foil when opened, or to the plastic package itself. This will not affect the sterility of the lens. It is still perfectly safe to use. Carefully remove and inspect the lens following the handling instructions.

### **Lens Handling Tips**

- Handle the lenses with fingertips, and be careful to avoid contact with fingernails. It is helpful to keep fingernails short and smooth.
- Develop the habit of always working with the same lens first to avoid mix-ups.
- After the patient has removed the lens from the packaging, examine it to be sure that it is a single, moist, clean lens that is free of any nicks or tears. If the lens appears damaged, DO NOT use it.

***ALWAYS handle lenses carefully and avoid dropping them.***

### ***Step 3: Placing the Lens on the Eye***

**Remember, always start with the same eye.**

Once the patient has opened the lens package, removed and examined the lens, he/she should follow these steps to insert the lens to his/her eye:

1. BE SURE THE LENS IS NOT INSIDE-OUT by following either of the following procedures:
  - Place the lens on the tip of the index finger and check its profile. The lens should assume a natural, curved, bowl-like shape. If the lens edges tend to point outward, the lens is inside out.
  - Gently squeeze the lens between the thumb and forefinger. The edges should turn inward. If the lens is inside out, the edges will turn slightly outward.
  - Place the lens on the tip of the index finger and, looking up at the lens, locate the numbers 1-2-3. 1-2-3 indicates correct orientation, while a reverse of 1-2-3 indicates the lens is inside out. If the lens is inside out (reverse 1-2-3), invert the lens and locate the numbers again to confirm correct lens orientation.
2. With the lens on the index finger, use the other hand to hold the upper eyelid so he/she won't blink.
3. Pull down the lower eyelid with the other fingers of the "inserting" hand.
4. Look up at the ceiling and gently place the lens on the white of the lower part of the eye.
5. Slowly release the eyelid and close the eye for a moment.
6. Blink several times to center the lens.
7. Use the same technique when inserting the lens for the other eye.

There are other methods of lens placement. If the above method is difficult for the patient, ask the Eye Care Professional for an alternate method.

### ***Step 4: Checking the Lenses***

After the patient has successfully inserted the lenses, he/she should ask him/herself:

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

If after placement of the lens, the patient's vision is blurred, check for the following:

- The lens is not centered on the eye (see "Step 5: Centering the Lens," next in this booklet).
- If the lens is centered, remove the lens (see "Removing The Lenses") and check for the following:
  - Cosmetics or oils on the lens. Dispose of the lens and insert a new fresh lens.

- The lens is on the wrong eye.
- The lens is inside out (it would also not be as comfortable as normal). See “Step 3: Placing the Lens on the Eye.”

If the patient finds that his/her vision is still blurred after checking the above possibilities, remove both lenses and consult the Eye Care Professional.

**Note:** If a lens is noticeably uncomfortable upon insertion or becomes less comfortable than when it was first inserted, remove the lens immediately and contact the Eye Care Professional. If the examination of the patient’s eyes and the lenses shows any other problems, IMMEDIATELY REMOVE THE LENSES AND CONTACT THE EYE CARE PROFESSIONAL.

### **Step 5: Centering the Lens**

A lens, which is on the cornea (center of the eye), will very rarely move onto the white part of the eye during wear. This, however, can occur if insertion and removal procedures are not performed properly. To center a lens, follow either of these procedures:

- Close eyelids and gently massage the lens into place through the closed lids.

**OR**

- Gently move the off-centered lens onto the cornea (center of the eye) while the eye is opened using finger pressure on the edge of the upper lid or lower lid.

## LENS WEARING

**While wearing the lenses, remember the following important precautions:**

- **DO NOT** use if the sterile blister package is opened or damaged.
- **Never** wear these contact lenses while napping or sleeping.

### **Hazardous Conditions**

- If the patient uses aerosol (spray) products, such as hair spray, while wearing lenses, keep their eyes closed until the spray has settled.
- **Avoid** all harmful or irritating vapors and fumes while wearing lenses.
- **Never** rinse the lenses in water from the tap. Tap water contains many impurities that can contaminate or damage the lenses and may lead to eye infection or injury.

### **Water Sports and Activities**

- **DO NOT EXPOSE** the contact lenses **TO WATER WHILE WEARING** them.

### **Lubricating/Rewetting Eye Solution**

- The Eye Care Professional may recommend lubricating/rewetting solution for use. These solutions can be used to wet (lubricate) the lenses while he/she is wearing them. Only use a rewetting solution that has been recommended by the Eye Care Professional.



- **Do not** use saliva or anything other than the recommended solutions for lubricating or rewetting the lenses. Do not put lenses in the mouth.

### **Sharing Lenses**

- **Never** allow anyone else to wear the lenses. Sharing lenses greatly increases the chance of eye infections.

### **Adhering to the Prescribed Wearing & Replacement Schedules**

- **Never** wear the lenses beyond the amount of time recommended by the Eye Care Professional.
- **Always throw away** worn lenses as prescribed by the Eye Care Professional.

## **REMOVING THE LENSES**

**CAUTION:** Always be sure the lens is on the cornea (center of the eye) before attempting to remove it. The patient can determine this by covering the other eye. If vision is blurred, the lens is either on the white part of the eye or it is not on the eye at all. To locate the lens, the patient should 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 remove the same lens first.**

1. **Wash, rinse and dry hands thoroughly.** The patient should follow the method that is recommended by the Eye Care Professional. Below is an example of one method:

***Pinch Method:***

**Step 1.** Look up, slide the lens to the lower part of the eye using the forefinger.

**Step 2.** Gently pinch the lens between the thumb and forefinger.

**Step 3.** Remove the lens.

2. Follow the instructions in the next section, *'Caring for Your Lenses'*.

**NOTE:** For the patient's eye health, it is important that the lens moves freely on the eye. If the lens sticks (stops moving) on the eye, try some forceful blinks and gently massage the lens through the closed eyelids. If the Eye Care Professional recommended rewetting solution, you may apply 1-2 eye drops. Wait until the lens begins to move freely on the eye before removing it. If non-movement of the lens continues, you should immediately consult the Eye Care Professional.

## CARING FOR THE LENSES

Remember, there is no cleaning or disinfection needed with your contact lenses when they are prescribed for disposable wear. Always dispose of lenses when they are removed and have replacement lenses or glasses available.

## EMERGENCIES

If chemicals of any kind (household products, gardening solutions, laboratory chemicals, etc.) are splashed into the eyes: **FLUSH EYES IMMEDIATELY WITH TAP WATER AND IMMEDIATELY CONTACT THE EYE CARE PROFESSIONAL OR VISIT A HOSPITAL EMERGENCY ROOM RIGHT AWAY.**

## WEARING AND APPOINTMENT SCHEDULE

### Prescribed Wearing Schedule

Day	Wearing Time (Hours)
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	

### Appointment Schedule

Your appointments are on: \_\_\_\_\_

Minimum number of hours lenses to be worn at time of appointment: \_\_\_\_\_

Month: \_\_\_\_\_ Year: \_\_\_\_\_

Time: \_\_\_\_\_ Day: \_\_\_\_\_

**PATIENT / EYE CARE PROFESSIONAL INFORMATION**

Next Appointment: \_\_\_\_\_

Date: \_\_\_\_\_

Doctor: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

\_\_\_\_\_

Day	Date	Hours Worn	Day	Date	Hours Worn
1			1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		

**IMPORTANT: If the patient experience any difficulty wearing the lenses or does not understand the instructions given, DO NOT WAIT for the next appointment. CONTACT THE EYE CARE PROFESSIONAL IMMEDIATELY.**



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