**Crystalens® AO IOL delivers an Active Range of Clear Vision for Your Cataract Patients**

- Only FDA approved accommodating IOL available in the US
- Delivers excellent distance and intermediate acuity\(^1\)
- Provides exceptional contrast sensitivity by focusing 100% of light, 100% of the time\(^2,3\)
- Minimal issues with halos and glare\(^2,3\)

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### Crystalens® Important Safety Information:

**INDICATIONS FOR USE:** The Crystalens® posterior chamber accommodating intraocular lens (IOL) is intended for primary implantation in the capsular bag of the eye for the visual correction of aphakia secondary to the removal of a cataractous lens in adult patients with and without presbyopia. Crystalens provides approximately one diopter of monocular accommodation which allows for near, intermediate, and distance vision without spectacles.

**WARNINGS:** Careful preoperative evaluation and sound clinical judgement should be used by the surgeon to decide the risk/benefit ratio before implanting a lens in a patient. Unlike most other IOLs, the Crystalens AO IOL optic has hinges connecting it to the haptic; please see adverse events section below for more information.

**PRECAUTIONS:** Do not resterilize this intraocular lens by any method. Do not store lenses at temperatures over 45°C (113°F). Careful preoperative evaluation and sound clinical judgment should be used by the surgeon to decide the benefit/risk ratio before implanting a lens in a patient with conditions as outlined in the Crystalens AO IOL Directions for Use.

**ADVERSE EVENTS:** The incidence of adverse events experienced during the clinical trial was comparable to or lower than the incidence reported in the historic control ("FDA grid") population. As with any surgical procedure, risk is involved. Vaulting is a post-operative adverse event where the Crystalens AO IOL optic hinges move into and remain in a displaced configuration. If vaulting occurs, please see Directions for Use for a detailed listing of symptoms, information regarding diagnosis, potential causes, and sequelae. Physicians should consider the characteristics of each individual vaulting case prior to determining the appropriate treatment. Data on long-term follow-up after treatment of vaulting is not available.

**ATTENTION:** Refer to the Directions for Use labeling for a complete listing of indications, warnings and precautions, clinical trial information, etc.

**CAUTION:** Federal (USA) law restricts this device to the sale by or on the order of a physician.

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<table>
<thead>
<tr>
<th>Model</th>
<th>Recommended Starting A-Constant</th>
<th>Recommended Starting ACD</th>
<th>Overall Diameter</th>
<th>Diopter Powers</th>
</tr>
</thead>
<tbody>
<tr>
<td>AO1UV</td>
<td>119.1*</td>
<td>5.61 mm*</td>
<td>11.5 mm</td>
<td>+22.5 D to +33 D in 0.5 D steps +18 D to +22 D in 0.25 D steps</td>
</tr>
<tr>
<td>AO2UV</td>
<td>119.1*</td>
<td>5.61 mm*</td>
<td>12.0 mm</td>
<td>+4 D to +10 D in 1.0 D steps +10.5 D to +24 D in 0.5 D steps</td>
</tr>
</tbody>
</table>

**Optic Body Diameter:** 5.0 mm

**Shape:** Biconvex

**Material–Body and Plates:** Biosil (Silicone Elastomer) with enhanced UV protection; 10% UV cutoff at 400 nm

**Material–Loop (haptics):** Polymide

**Refractive Index at 35˚C:** 1.43

**Delivery System:** Crystalsert\(^*\)

\(^*\)A-constant and ACD are estimates only. It is recommended that each surgeon develop his or her own values.

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Crystalens® FOIU

\(^1\) Crystalens DFU


Trulign® Toric IOL delivers True Performance at all Distances for Your Cataract Patients with Astigmatism

- Delivers excellent distance and intermediate acuity
- Outstanding rotational stability, effective cylinder correction, and precise refractive predictability
- Minimal issues with halos and glare

For Toric Targeting, visit: https://trulign.toriccalculator.com

<table>
<thead>
<tr>
<th>Model</th>
<th>Recommended Starting A-Constant</th>
<th>Recommended Starting ACD</th>
<th>Overall Diameter</th>
<th>Diopter Powers</th>
</tr>
</thead>
<tbody>
<tr>
<td>TRULIGN Toric IOL BL1UT</td>
<td>119.1*</td>
<td>5.61 mm*</td>
<td>11.5 mm</td>
<td>+4.0 D to +10.0 D in 1.0 D steps</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>+10.5 D to +33.0 D in 0.5 D steps</td>
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<tr>
<td>Cylinder Powers—IOL Plane</td>
<td>1.25, 2.00, 2.75 D</td>
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<tr>
<td>Cylinder Powers—Corneal Plane</td>
<td>0.83, 1.33, 1.83</td>
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<tr>
<td>Optic Body Diameter</td>
<td>5.0 mm</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Anterior Surface</td>
<td>Aspheric with axis marks</td>
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<td></td>
</tr>
<tr>
<td>Posterior Surface</td>
<td>Aspheric toric (cyl at 1.25, 2.00, 2.75 D)</td>
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</tr>
<tr>
<td>Material—Body and Plates</td>
<td>Silicone with enhanced UV protection; 10% UV cutoff at 400 nm</td>
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<tr>
<td>Material—Loop (haptics)</td>
<td>Polyimide</td>
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<tr>
<td>Refractive Index at 35˚C</td>
<td>1.43</td>
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<td></td>
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</tr>
<tr>
<td>Delivery System</td>
<td>Crystalsert®</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* A-constant and ACD are estimates only. It is recommended that each surgeon develop his or her own values.

Trulign Toric Important Safety Information:

INDICATIONS FOR USE: The TRULIGN® Toric Posterior Chamber Intraocular Lens (IOL) is intended for primary implantation in the capsular bag of the eye for the visual correction of aphakia and postoperative refractive astigmatism secondary to removal of a cataractous lens in adult patients with or without presbyopia who desire reduction of residual refractive cylinder with increased spectacle independence and improved uncorrected near, intermediate and distance vision.

WARNINGS: Careful preoperative evaluation and sound clinical judgement should be used by the surgeon to decide the risk/benefit ration before implanting a lens in a patient. Rotation of toric lenses away from their intended axis can reduce their effectiveness, and misalignment can increase postoperative refractive cylinder. The TRULIGN® Toric IOL should only be repositioned when the refractive needs of the patient outweigh the potential risks inherent in any surgical reintervention into the eye. Unlike most other IOLs, the Trulign Toric optic has hinges connecting it to the haptic; please see adverse events section below for more information.

PRECAUTIONS: The safety and effectiveness of the TRULIGN® Toric intraocular lenses have not been substantiated in patients with preexisting ocular conditions and intraoperative complications. Long-term stability in the human eye has not been established; therefore postoperative monitoring after implant should be performed on a regular basis. Lens rotation less than 5° may not warrant reorientation. Do not resterilize this intraocular lens by any method. Do not store lenses at temperatures over 45°C (113°F). Careful preoperative evaluation and sound clinical judgment should be used by the surgeon to decide the benefit/risk ratio before implanting a lens in a patient with conditions as outlined in the TRULIGN® Toric IOL directions for use.

ADVERSE EVENTS: The incidence of adverse events experienced during the clinical trial was comparable to or lower than the incidence reported in the historic control ("FDA grid") population. As with any surgical procedure, risk is involved. Vaunting is a post-operative adverse event where the TRULIGN® Toric IOL optic hinges move into and remain in a displaced configuration. If vaunting occurs, please see Directions for Use for a detailed listing of symptoms, information regarding diagnosis, potential causes, and sequelae. Physicians should consider the characteristics of each individual vaunting case prior to determining the appropriate treatment. Data on long-term follow-up after treatment of vaunting is not available.

ATTENTION: Refer to the Directions for Use labeling for a complete listing of indications, warnings and precautions, clinical trial information, etc.

CAUTION: Federal (USA) law restricts this device to the sale by or on the order of a physician

1 TRULIGN Toric IOL Directions for Use.
2 Data on file, Bausch & Lomb Incorporated. Study 650.

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