

# PROFESSIONAL FITTING GUIDE

## Optacryl<sup>®</sup> 60 (kolfocon A)

Rigid Gas Permeable Contact Lenses for Daily Wear

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CAUTIONS: Federal law prohibits dispensing of contact lenses without a prescription.  
Nonsterile. Clean and condition lenses prior to use.

NOTE: Paragon Vision Sciences does not hold the Registered Trademark,  
Optacryl® in the United Kingdom.

## PRODUCT DESCRIPTION

The Optacryl® 60 (kolfocon A) rigid gas permeable contact lens for daily wear is a lathe cut firm contact lens with spherical front and back surfaces. The posterior curve is selected so as to properly fit an individual eye and the anterior curve selected to provide the necessary optical power to correct refractive error. A peripheral curve system on the posterior surface allows tear exchange between the lens and the cornea.

The Optacryl 60 (kolfocon A) rigid gas permeable contact lens material is a thermoset copolymer derived from siloxane and methylmethacrylate.

This lens material is available untinted (clear); and in blue, green, or gray versions. The blue lens contains Microlith Blue 4 G-K; the green lens contains Sunfast Green #7; and, the gray lens contains D&C Green No. 6, D&C Violet No. 2 and Perox Yellow No. 9 as the color additives.

The lenses have the following attributes.

### OPTACRYL 60 (kolfocon A)

Refractive Index	1.467 (Nd at 25°C)
Luminous Transmittance <sup>+</sup> (Clear)	99%
Luminous Transmittance (Blue)	95%
Luminous Transmittance (Green)	98%
Luminous Transmittance (Gray)	94%
Wetting Angle (Receding Angle)	<25°
Specific Gravity	1.13
Hardness (Shore D)	88
Water Content	1.6%
Oxygen Permeability*	18 x 10 <sup>-11</sup> Dk at 35°C
Oxygen Permeability**	14 x 10 <sup>-11</sup> Dk at 35°C

<sup>+</sup> Determination of the Spectral and Luminous Transmittance, ISO 8599: 1994

\* (cm<sup>2</sup>/sec)(mL O<sub>2</sub>) / (mL x mm Hg) Revised Method of I. Fatt

\*\* (cm<sup>2</sup>/sec)(mL O<sub>2</sub>) / (mL x mm Hg) ISO/ANSI Method, ISO 9913-1

### Lens Parameters

Chord Diameter .....	7.0 to 11.0 mm
Center Thickness .....	0.05 to 0.70 mm
Base Curve .....	6.50 to 9.00 mm
Lens Powers .....	-20.00 to + 20.00 Diopters

## ACTIONS

The Optacryl 60 (kolflcon A) rigid gas permeable contact lens is intended for daily wear only.

When placed on the human cornea, the Optacryl 60 (kolfocon A) rigid gas permeable contact lens acts as a refracting medium to focus light rays upon the retina.

## **INDICATIONS**

The Optacryl 60 (kolflcon A) rigid gas permeable contact lens is indicated for daily wear as recommended by the eye care practitioner.

The Optacryl 60 (kolflcon A) rigid gas permeable contact lens is indicated for the correction of visual acuity in not-aphakic persons with non-diseased eyes with up to 20.00 diopters of myopia or 20.00 diopters of hyperopia, and who may exhibit corneal astigmatism up to 4.00 diopters.

## **CONTRAINDICATIONS (REASONS NOT TO USE)**

Optacryl 60 rigid gas permeable contact lenses are contraindicated by the presence of any of the following conditions:

- Acute or subacute inflammations of the anterior segment of the eye.
- Any disease which affects the cornea or conjunctiva.
- Insufficiency of lacrimal secretion (dry eyes).
- Corneal hypoesthesia (reduced corneal sensitivity).
- Any systemic disease, which may affect the eye or be exacerbated by wearing contact lenses.
- Allergic reactions of ocular surfaces or adnexa which may be induced or exaggerated by wearing contact lenses and/or using contact lens solutions.
- Any active corneal infection (bacterial, fungal or viral).

## **LENS HANDLING**

**CAUTION:** Nonsterile. Clean and condition lenses prior to use.

1. Prior to fitting, wash your hands and rinse them thoroughly to remove all traces of soap.
2. To condition (disinfect) your lenses, leave them in a recommended storage solution for at least 4 hours prior to usage or as indicated on the product label.
3. Remove the lens from the case and rinse it with wetting and soaking solution.
4. Place the lens on the tip of your index finger, concave side up.

## **LENS PLACEMENT**

1. Retract the patient's lids with your index finger and thumb.

2. Direct the patient to look straight ahead and place the lens on the cornea.
3. Slowly release the lids and ask the patient to blink. This will center the lens.

## **LENS REMOVAL**

1. Place your index fingers on the lid margins and direct the patient to look straight ahead.
2. Separate the lids, then push them together to remove the lens.

## **IN-OFFICE CLEANING, DISINFECTION AND STORAGE**

Optacryl 60 rigid gas permeable contact lenses must be both cleaned and disinfected each time they are removed from the eye. One procedure does not replace the other. Cleaning is necessary to remove mucus and film from the lens surface. Disinfecting is necessary to destroy harmful germs. Leave the Optacryl 60 rigid gas permeable contact lenses in a storage solution (such as Unique-pH™ Multi-Purpose Solution from Alcon Laboratories, Inc.) for a minimum of 4 hours or as indicated on the product label.

To minimize lens warpage during cleaning, the lenses should be cleaned in the palm of the hand rather than between the thumb and fingers.

The directions from any lens care systems used should be followed. Failure to adhere to these procedures may result in the development of serious ocular infections.

Do not mix or alternate the disinfection and storage systems unless so indicated on the product label.

## **LENS FITTING**

The Optacryl 60 (kolfocon A) rigid gas permeable contact lens may be fitted using standard techniques for rigid contact lenses. A trial lens fitting procedure is recommended, although not always required.

Clinical studies have demonstrated that rigid gas permeable contact lenses manufactured from this contact lens material are safe and effective for their intended use. However, the clinical studies may not have included all design configurations or lens parameters that are presently available in these materials. Consequently, when selecting an appropriate lens design and parameters, the eye care practitioner must consider all factors that affect lens performance and ocular health. The potential impact of these factors must be weighted against the patient's needs. Therefore, the continuing ocular health of the patient and lens performance on the eye should be carefully monitored.

## **FITTING PROCEDURE**

### **Pretrial Examination**

A complete contact lens examination should be carried out including health and previous contact lens history, refraction, keratometry and slit lamp examination. Patients should

be eliminated who have evidence of any disease affecting the cornea or conjunctiva, acute or subacute inflammation of the anterior segment of the eye, insufficiency of the lacrimal secretion, corneal hypoesthesia or any disease or infection which will affect the eye or be exaggerated by the wearing of contact lenses.

### **Selection of Patients**

Patients should be selected who require a daily wear lens and are not-aphakic and who have non-diseased eyes. Patients should have a refractive error which does not exceed 20.00 diopters of myopia, 20.00 diopters of hyperopia, and who may exhibit corneal astigmatism up to 4.00 diopters.

### **Spherical Diagnostic Fitting Procedure**

It is recommended that fitting be carried out with the aid of diagnostic lenses. Nearly every patient begins with a 9.2 mm trial lens. The exceptions would be patients who have keratometer readings below 41.00 D or above 45.00 D. If the corneal reading is below 41.00 D and the patient appears to have an exceptionally large cornea and palpebral fissure, begin with a 9.6 mm diameter lens. This is rare. Alternatively, if the patient has a keratometer reading which is greater than 45.00 D or has an unusually small palpebral aperture, begin the fitting with an 8.8 mm diameter lens.

The base curve of the lens may be found from Table 1. From the keratometer readings find the flattest K and steepest K. Enter the table on the left with the corneal cylinder ( $\Delta K$ ) value and follow across to the first diagnostic lens base curve to be used.

TABLE 1

<u>Corneal Cylinder (<math>\Delta K</math>)</u>	<u>Lens Base Curve</u>
Plano	0.25 D flatter to on flat K
0.25 – 0.75	on flat K or 0.25 D steeper
1.00 – 1.75	0.25 D steeper to 0.75 D steeper
>2.00 D	0.75 D steeper to 1.00 D steeper

Place the diagnostic lens on the patient's cornea. Wait approximately 10 minutes for tearing to subside and check the lens for positioning and movement. Ideally, the lens will ride up with the blink and then quickly drop to a position that is near the center of the cornea. If the lens should drop to the lower limbus or position eccentrically, remove the lens and replace it with a lens that is 0.4 mm larger. If centering is still not achieved, use a diagnostic lens which is 0.25 D. steeper.

The power for the final lens may be most accurately determined by an overrefraction with the trial lens in place. This may be carried out with either a trial frame or refractor. Allow approximately 15 minutes for the lens to settle on the patient's eye before performing the over refraction. Only the spherical power needs to be determined in order to arrive at the final correction.

When the optimum overrefraction has been obtained, the correction should be added to the power of the trial lens to arrive at the final prescription.

EXAMPLE:	Overrefraction	-1.25 D
	Diagnostic Lens	(+) -3.00 D
	<hr/>	
	Lens Power Ordered	-4.25 D

A patient's lens power requirement may be determined without diagnostic lenses by:

1. Converting the spectacle Rx to minus cylinder form.
2. Adjust spectacle Rx for vertex distance.
3. Use the sphere power only.

The selection of the Optacryl 60 (kolfocon A) rigid gas permeable contact lens may be aided by an examination of the fluorescein pattern. The ideal fluorescein pattern shows a definite green central area with some darkening near the periphery of the optic zone. The peripheral curve area should show a definite green band.

The most important faulty lens fluorescein pattern to be detected is a corneal seal at the intermediate lens position. The fluorescein pattern shows a dark touch ring that runs completely around the contact lens in the intermediate zone. The larger the lens the greater is the tendency for this to happen. It also occurs most frequently when the optic zone of the contact lens is greater than 8.0 mm diameter. Hence, a lens design with an optic zone of 8.0 mm or less is usually preferred.

A 9.6 mm (large) lens may be needed for patients who have a problem of flare with smaller diameter contact lenses. The flare may occur if the patient has either a very large pupil or if the smaller lens rides off the center of the cornea. Fortunately, flare is only an occasional problem with the 9.6 mm lens because the peripheral curve and edge are specifically designed to minimize the flare problem.

Some patients develop problems of staining that are due to an optic zone that is too large. A 7.8 mm optic zone is large enough to avoid flare in nearly every contact lens patient. If the patient requires an even larger lens than the 9.2 mm diameter, choose the 9.6 mm diameter lens but keep the optic zone at 8.0 mm in all but the most unusual cases. In this way some tear pumping is achieved in nearly every case and avoids the corneal punctate staining that is due to inadequate lens pumping.

## THE CLINICAL PICTURE

With the ideal fit the lens should move freely with the lid during a blink and then drop quickly to a position near the center of the cornea. In some patients the lens will ride slightly high and this is most desirable. It is especially favorable if the lens rides slightly under the upper lid since that will reduce lens edge sensation and make the lens most comfortable. It is best to avoid having the lens ride exceptionally high so that excessive lid pressure is exerted on the superior lens margin. Over an extended wearing period, this inevitably leads to structural changes in the superior corneal epithelium. If the lens appears to center well and move adequately following the blink, proceed to determine the refractive correction.

A lens that is too tight will show reduced movement upon blinking. The lens usually occupies a centered corneal position and may not move far from this position. Bubbles may be detected in the post-lens space.

A lens that is too loose will move excessively on the cornea following each blink. The lens may ride in either a position that is too high or too low or in an eccentric position. A loose lens is usually uncomfortable for the patient.

## WEARING SCHEDULE

Patients should be cautioned to limit wear to the wearing schedule recommended by the eye care practitioner regardless of how comfortable the lenses feel. The maximum suggested wearing time for Optacryl 60 (kolfocon A) rigid gas permeable contact lenses is found in this table.

DAY	1	2	3	4	5	6	7	8	9	10-14	15 and after
SUGGESTED HOURS	3	4	5	6	7	8	9	10	11	12	ALL waking hours
HOURS WORN											

PATIENTS SHOULD NOT SLEEP WHILE WEARING OPTACRYL 60 (kolfocon A) RIGID GAS PERMEABLE CONTACT LENSES. Studies have not been completed to show that the Optacryl 60 lens is safe to wear during sleep.

## FOLLOW-UP PROCEDURE

Follow-up examinations should include an evaluation of lens movement, centration, comfort and fluorescein pattern. Lens movement will decrease as the tear volume is diminishing during adaptation. An assessment of vision and eye health including inspection of the cornea for edema and/or staining should be performed. Patient symptoms should also be assessed.

During the wear adaptation period, the patient may experience a feeling or sensation of something foreign in their eye(s). As they gradually increase the daily wear time, the lenses should begin to feel more comfortable.

### **Recommended Daily Wear Follow-up Schedule**

#### **First Follow-up Examination**

Immediately following 3 hours of lens wear on days 1 to 3 following dispensing

#### **Second Follow-up Examination**

After 1 week of lens wear

#### **Third Follow-up Examination**

After 3 weeks of lens wear

#### **Subsequent Follow-up Examinations**

After about 2 months of lens wear

After about 3 months of lens wear

Regular checkups, as determined by the eye care practitioner.

NOTE: See Package Insert for additional safety information.

### **REPORT OF ADVERSE REACTIONS**

All serious adverse experiences and adverse reaction observed in patients wearing or experienced with the lenses should be reported to the manufacturer.

#### **Paragon Vision Sciences**

**947 E. Impala Avenue**

**Mesa, Arizona 85204-6619**

**1-800-528-8279**

**1-480-892-7602**

**1-480-926-7369 FAX**

### **HOW SUPPLIED**

Each lens is supplied nonsterile in an individual plastic case. The case, packing slip or invoice is marked with the base curve, dioptic power, diameter, center thickness, lot number and the color of the lens.

## PACKAGE INSERT

### Optacryl® 60 (kolfocon A) Rigid Gas Permeable Lenses for Daily Wear

IMPORTANT: Please read carefully and keep this information for future use.

Spherical contact lenses for: Nearsightedness (myopia)  
Farsightedness (hyperopia)

#### DESCRIPTION

The Optacryl® 60 (kolfocon A) rigid gas permeable contact lens is a lathe cut firm contact lens with spherical front and back surfaces. The posterior curve is selected so as to properly fit an individual eye and the anterior curve is selected to provide the necessary optical power to correct refractive error. A peripheral curve system on the posterior surface allows tear exchange between the lens and the cornea.

The lens material is a thermoset copolymer derived from siloxane and methylmethacrylate.

The lens has the following dimensions.

Chord Diameter	7.0 to 11.0 mm
Center Thickness	0.05 to 0.70 mm
Base Curve	6.50 to 9.00 mm
Powers	-20.00 to +20.00 Diopters

The physical properties of the lens are:

Refractive Index	1.467 (Nd at 25°C)
Luminous Transmittance <sup>+</sup> (Clear)	99%
Luminous Transmittance (Blue)	95%
Luminous Transmittance (Green)	98%
Luminous Transmittance (Gray)	94%
Wetting Angle (Receding Angle)	<25°
Specific Gravity	1.13
Hardness (Shore D)	88
Water Content	1.6%
Oxygen Permeability*	18 x 10 <sup>-11</sup> Dk at 35°C
Oxygen Permeability**	14 x 10 <sup>-11</sup> Dk at 35°C

<sup>+</sup> Determination of the Spectral and Luminous Transmittance, ISO 8599: 1994

\* (cm<sup>2</sup>/sec)(mL O<sub>2</sub>) / (mL x mm Hg) Revised Method of I. Fatt

\*\* (cm<sup>2</sup>/sec)(mL O<sub>2</sub>) / (mL x mm Hg) ISO/ANSI Method, ISO 9913-1

The lens is available in untinted (clear), blue, green, violet or gray versions. The blue tinted lens contains [phthalocyaninate (2-)] copper, or D&C Green #6; the green tinted lens contains phthalocyanine green as the color additive; the violet lens contains D&C Violet #2; and, the gray lens contains D&C Violet #2, D&C Green #6, and 4-[(2,4-dimethylphenyl)azo]- 2,4-dihydro-5-methyl-2-phenyl-3H-pyrazol-3-one.

#### ACTION

When placed on the human cornea the Optacryl® 60 (kolfocon A) contact lens acts as a refractive medium to focus light rays on upon the retina.

## INDICATIONS (USES)

The Optacryl® 60 (kolfocon A) rigid gas permeable contact lens is indicated for daily wear for the correction of visual acuity in not-aphakic persons with non-diseased eyes who are nearsighted (myopic) or farsighted (hyperopic) and may exhibit corneal astigmatism up to 4.00 diopters that does not interfere with visual acuity.

## CONTRAINDICATIONS (REASONS NOT TO USE)

The Optacryl® 60 (kolfocon A) contact lens is contraindicated by the presence of any of the following conditions.

- Acute and subacute inflammations of the anterior segment of the eye
- Any eye disease which affects the cornea or conjunctiva
- Insufficiency of lacrimal secretion
- Corneal hypesthesia (reduced corneal sensitivity)
- Any systematic disease which may affect the eye or be exacerbated by wearing contact lenses
- Allergic reactions of ocular surfaces or adnexa which may be induced or exaggerated by the wearing of contact lenses and/or contact lens solutions
- Any active corneal infection (bacterial, fungal or viral)

## WARNINGS

PROBLEMS WITH CONTACT LENSES AND LENS CARE PRODUCTS COULD RESULT IN SERIOUS INJURY TO THE EYE. IT IS ESSENTIAL THAT YOU FOLLOW YOUR EYE CARE PRACTITIONER'S DIRECTIONS AND ALL LABELING INSTRUCTIONS FOR PROPER USE OF YOUR CONTACT LENSES AND LENS CARE PRODUCTS. EYE PROBLEMS, INCLUDING CORNEAL ULCERS, CAN DEVELOP RAPIDLY AND LEAD TO LOSS OF VISION. THEREFORE IF YOU EXPERIENCE EYE DISCOMFORT, EXCESSIVE TEARING, VISION CHANGES OR REDNESS OF THE EYE, IMMEDIATELY REMOVE YOUR LENSES, AND PROMPTLY CONTACT YOUR EYE CARE PRACTITIONER.

The risk of ulcerative keratitis has been shown to be greater among wearers of extended wear lenses than among wearers of daily wear lenses. The risk among extended wear lens wearers increases with the number of consecutive days that lenses are worn between removals, beginning with the first overnight use. This risk can be reduced by carefully following directions for routine lens care, including cleaning of the lens storage case. Additionally, smoke increases the risk of ulcerative keratitis for contact lens wearers.

It is recommended that contact lens wearers see their eye care practitioner twice a year or, if directed, more frequently.

## PRECAUTIONS

Follow the instructions below to prevent damage to your eye(s) or your lens (es).

- The Optacryl 60 (kolofocoon A) should not be worn while sleeping or in the presence of noxious and irritating vapors.
- Before you leave your eye care practitioner's office, be able to promptly remove your lens or have someone else remove your lens for you.
- Do not swim with your lenses in place.
- Always inform your doctor (eye care practitioner) that you wear contact lenses.
- Always consult your eye care practitioner before using any medication in your eyes.
- Always inform your employer that you wear contact lenses as 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 health. Check with your eye

care practitioner for a schedule.

- To minimize lens warpage during cleaning, the lenses should be cleaned in the palm of the hand rather than between the thumb and fingers.
- The safety of these lenses with medications or contact lens solutions other than those recommended has not been established.
- The lens must move freely for the continued good health of the eye. If your lens sticks (stops moving) on the eye, follow the recommended directions for “Care for a Sticking Lens”. If non-movement of the lens continues, immediately consult your eye care practitioner.

#### ADVERSE REACTIONS (PROBLEM AND WHAT TO DO)

The following problems may occur when wearing contact lenses.

- Eyes sting, burn or itch (irritation)
- Comfort is less than when lens was first placed on eye
- Abnormal feeling of something new in the eye (foreign body, scratched area, abrasion)
- Excessive watering (tearing) of the eyes
- Unusual eye secretions
- Redness of the eyes
- Reduced sharpness of vision (poor visual acuity)
- Blurred vision, rainbows, or halos around objects
- Sensitivity light (photophobia)
- Dry eyes

If you notice any of the listed problems, IMMEDIATELY REMOVE YOUR LENSES.

- If the discomfort or problem stops, carefully examine the contact lens for damage or debris.
- If the lens appears to be damaged, DO NOT put the lens back on your eye. Place the lens in the storage case and contact your eye practitioner.
- If the lens appears to be undamaged but has dirt, an eyelash, or other foreign body on it, thoroughly clean, rinse, and disinfect the lens; then reapply it to the eye.
- If the problem continues, IMMEDIATELY remove your contact lenses and consult your eye care practitioner.

When any of the above symptoms occur, a serious condition such as infection, corneal ulcer, neovascularization or iritis may be present. Seek immediate professional identification of the problem and prompt treatment to avoid serious eye damage.

#### CLEANING AND DISINFECTION (LENS HANDLING)

CAUTION: Non-sterile. Clean and condition lenses prior to use.

Optacryl<sup>®</sup> 60 (kolfocon A) contact lenses must be both cleaned and disinfected each time you remove them. Once procedure does not replace the other. Cleaning is necessary to remove mucus and film from the lens surface and disinfection is necessary in a chemical (not heat) disinfection solution for a minimum of 4 hours.

The lens care products listed below are recommended for use with your Optacryl<sup>®</sup> 60 (kolfocon A) contact lenses. This is not an exclusive list. You may use other lens care solutions as recommended by your eye care practitioner. Follow the instructions provided with each lens care solution.

<b>SYSTEM PROCESS</b>	<b>CHEMICAL (not heat) DISINFECTION SYSTEM</b>
Cleaning	Unique-pH™ Multi-Purpose Solution, SupraClens®, Opti-Clean® II, Opti-Zyme®, Barnes-Hind® GP Daily Cleaner, LC-65®, Pro-Free/GP®
Disinfection	Unique-pH™ Multi-Purpose Solution, Barnes-Hind® GP Wetting and Soaking Solution, Wet-N-Soak® Plus
Lubrication	Clerz® Plus, Opti-Tears®, Refresh Contacts™, Wet-N-Soak® Rewetting Drops

## PRODUCT LIST

Unique-pH™ Multi-Purpose Solution, SupraClens®, Clerz® Plus, Opti-Clean® II, Opti-Zyme®, Opti-Tears® by Alcon Laboratories, Inc.

Barnes-Hind® GP Daily Cleaner, LC-65®, ProFree/GP®, Barnes-Hind® GP Wetting and Soaking Solution, Wet-N-Soak® Plus, Wet-N-Soak® Rewetting Drops by Allergan Pharmaceuticals

The directions in the package inserts for these products should be followed. Failure to adhere to these procedures may result in the development of serious ocular complications. A patient should not switch from one lens care system to another unless it has been determined by the eye care practitioner that this is necessary. Do not mix or alternate the disinfection and storage systems.

These lenses should not be heat (thermally) disinfected.

Always use FRESH disinfection solutions.

Do not use saliva or anything other than the approved solutions to wet your lenses.

Always keep the lenses completely immersed in the recommended storage solution when the lenses are not being worn.

Always wash your hands with an additive-free soap rinse thoroughly and dry on a lint-free towel before handling your lenses. Cosmetics, lotions, soaps and creams must not come in contact with the lenses since eye irritation may result. If hair spray is used while the lenses are being worn, your eyes must be kept closed until the hair spray has settled.

Never use tweezers or other tools to remove your lens from the lens container. Pour the lens into your hand. Do not touch the lens with your fingernails.

## FITTING AND WEARING SCHEDULE

Conventional methods of fitting rigid contact lenses apply to the Optacryl® 60 (kolfocon A) contact lens. For a description of fitting techniques, refer to the Fitting Guide for Optacryl® 60 (kolfocon A) Contact Lens, copies of which are available from:

Paragon Vision Sciences  
947 E. Impala Avenue, Mesa, Arizona 85204-6619

### Wearing Schedule

THE WEARING SCHEDULE SHOULD BE DETERMINED BY THE EYE CARE PRACTITIONER. Patients tend to overwear their lenses initially. It is important to adhere to the initial maximum wearing schedule. Regular check-ups, as determined by the eye care practitioner, are also extremely important.

DAILY WEAR (less than 24 hours while awake)

DAY	SUGGESTED HOURS	HOURS WORN
1	3	
2	4	
3	5	
4	6	
5	7	
6	8	
7	9	
8	10	
9	11	
10	12	
11	12	
12	12	
13	12	
14	12	
15 and after	All Waking Hours	

DO NOT SLEEP WHILE WEARING YOUR OPTACRYL® 60 (kolfocon A) RIGID GAS PERMEABLE CONTACT LENS. Studies have not been completed to show that the Optacryl 60 (kolfocon A) lens is safe to wear during sleep. There is a tendency for some patients to overwear the lens initially. It is important to adhere to the maximum wearing schedule.

CARE FOR A STICKING LENS

If the lens sticks (stops moving) on the eye, apply 2-3 drops of the recommended sterile rewetting or lubricating solution. Wait until the lens begins to move freely on the eye before removing it. If non-movement of the lens continues, immediately consult your eye care practitioner.

HOW SUPPLIED

Each lens is supplied non-sterile in an individual plastic case. The case, packing slip or invoice is marked with the base curve, dioptric power, diameter, center thickness, lot number, expiration date and the color of the lens.

CAUTION: Federal law (USA) prohibits dispensing without a prescription.

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