AcrySof® IQ ReSTOR® +3.0 D IOL

True Performance at All Distances

- Near
- Intermediate
- Distance
The Power of +3

Based on the defocus curve, the AcrySof® IQ ReSTOR® +3.0 D IOL provides a full spectrum of visual acuity to satisfy patient needs:

- **Near**
  Mean VA is 20/20 at 40 cm (16 in)

- **Intermediate**
  Mean VA is 20/20 at 50 cm (20 in)

- **Distance**
  Mean VA is 20/20 at distance

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**Comparison of mean defocus curves for AcrySof® IQ ReSTOR® IOLs 6 months postoperatively after binocular implantation.**

1. AcrySof® IQ ReSTOR® IOL Directions for Use.

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

INDICATIONS: The AcrySof® IQ ReSTOR® Posterior Chamber Intraocular Lens (IOL) is intended for primary implantation for the visual correction of aphakia secondary to removal of a cataractous lens in adult patients with and without presbyopia, who desire near, intermediate and distance vision with increased spectacle independence. The lens is intended to be placed in the capsular bag. Please refer to the back cover for important safety information for AcrySof® IQ ReSTOR® IOL.
A Greater Range of Visual Acuity

The next evolution of a proven presbyopia-correcting IOL platform, the AcrySof® IQ ReSTOR® +3.0 D IOL delivers True Performance at All Distances: the consistent near and far vision you expect, with significantly improved intermediate vision as compared to AcrySof® IQ ReSTOR® +4.0 D IOL.

*“Near” acuities were adjusted for the working distance – “20/20” letter font size is smaller for patients tested at a “near” distance of ~31-33 cm (patients implanted with Model SN6AD3) than it is for patients tested at a “near” distance of ~37-40 cm (patients implanted with Model SN6AD1). Patients implanted with the + 4.0 add model will generally be able to read smaller font size at “near” than those implanted with the + 3.0 add, due to the different working distance.
A Proven Satisfaction

Patients reported a significant improvement in vision after bilateral cataract surgery.

Because it delivers True Performance at All Distances, 94% of patients indicated they would have the AcrySof® IQ ReSTOR® +3.0 D IOL implanted again.*

Patient-reported spectacle independence was determined using the Cataract TyPE Specification instrument (Javitt, 1997). Spectacle independence rates between the Model SN6AD1 and Model SN6AD3 were similar, with better than 78% of patients in both groups reporting “never” having to use glasses at any time.

1. AcrySof® IQ ReSTOR® Directions for Use.
* Some side effects that patients may experience include glare, halos and blurred vision, and reduction of sensitivity in low lighting conditions.

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Better Image Quality by Design

The AcrySof® IQ ReSTOR® +3.0 D IOL utilizes apodization within the central 3.6 mm optic zone to control light distribution to both near and distant focal points. This gradual decrease in step heights from center to periphery delivers enhanced image quality by optimally allocating energy to the retina based on all lighting conditions.

- Precise reduction in step heights from 1.3 to 0.2 microns
- Higher step heights direct more light to the near focal point
- Light energy is gradually distributed to the distant focal point as the pupil enlarges

1. AcrySof® IQ ReSTOR® Directions for Use.
**Improved Vision in All Lighting Conditions**

- Sends optimal light to both near and distant focal points, providing a full range of quality vision
- As the pupil dilates (low-light situations), the refractive portion sends a greater percentage of light energy to the distance focal point
- Manages nighttime visual disturbances (halos) caused by defocused light

**Note:** Some visual effects with AcrySof® IQ ReSTOR® IOLs may be expected due to the superposition of focused and unfocused multiple images. These may include some perceptions of halos or radial lines around point sources of light under nighttime conditions. A reduction in contrast sensitivity as compared to a monofocal IOL may be experienced by some patients and may be more prevalent in low lighting conditions. Therefore, multifocal patients should exercise caution when driving at night or in poor visibility conditions. Please refer to the back cover for important safety information for AcrySof® IQ ReSTOR® IOL.
The Power of a Proven Platform

Built on the proven AcrySof® platform, the AcrySof® IQ ReSTOR® +3.0 D IOL shares the same benefits of the entire AcrySof® family:

Excellent Biomechanics
- Single-piece design for rotational stability
- Patented STABLEFORCE® haptics for capsular bag stability

Optimal Biomaterials
- High refractive index for thinner IOL profile
- UV and blue-light filtration

Advanced Optics
- Proven aspheric design for image quality
- Thin edge profile

Ease of Implantation
- Consistent design
- Consistent delivery
- Predictably unfolds*
- Easier centration*

Trusted Leadership
- Over 60 million AcrySof® IOL implants²
- Backed by the Alcon® network of support

* Bench data on file: Monarch® Delivery Systems.

The AcrySof® IQ ReSTOR® +3.0 D IOL Delivers True Performance at All Distances.

### Specifications

<table>
<thead>
<tr>
<th></th>
<th>SN6AD1</th>
<th>SN6AD3</th>
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<tbody>
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<td>Model Number</td>
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<td>Apodized, aspheric, biconvex</td>
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<td>Filtration</td>
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*Provided as a guideline only.

Please refer to the back cover for important safety information for AcrySof® IOLs.
IMPORTANT SAFETY INFORMATION:

AcrySof® IQ ReSTOR® IOL

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

INDICATIONS: The AcrySof® IQ ReSTOR® Posterior Chamber Intraocular Lens (IOL) is intended for primary implantation for the visual correction of aphakia secondary to removal of a cataractous lens in adult patients with and without presbyopia, who desire near, intermediate and distance vision with increased spectacle independence. The lens is intended to be placed in the capsular bag.

WARNING/PRECAUTION: Careful preoperative evaluation and sound clinical judgment should be used by the surgeon to decide the risk/benefit ratio before implanting a lens in a patient with any of the conditions described in the Directions for Use labeling. Physicians should target emmetropia, and ensure that IOL centration is achieved. Care should be taken to remove viscoelastic from the eye at the close of surgery.

Some patients may experience visual disturbances and/or discomfort due to multifocality, especially under dim light conditions. Clinical studies with the AcrySof® ReSTOR® lens indicated that posterior capsule opacification (PCO), when present, developed earlier into clinically significant PCO. Prior to surgery, physicians should provide prospective patients with a copy of the Patient Information Brochure available from Alcon for this product informing them of possible risks and benefits associated with the AcrySof® IQ ReSTOR® IOLs.

Studies have shown that color vision discrimination is not adversely affected in individuals with the AcrySof® Natural IOL and normal color vision. The effect on vision of the AcrySof® Natural IOL in subjects with hereditary color vision defects and acquired color vision defects secondary to ocular disease (e.g., glaucoma, diabetic retinopathy, chronic uveitis, and other retinal or optic nerve diseases) has not been studied. Do not resterilize; do not store over 45° C; use only sterile irrigating solutions such as BSS® or BSS PLUS® Sterile Intraocular Irrigating Solutions.

ATTENTION: Reference the Directions for Use labeling for a complete listing of indications, warnings and precautions.

AcrySof® IQ Toric IOL

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

INDICATIONS: The AcrySof® IQ Toric posterior chamber intraocular lenses are intended for primary implantation in the capsular bag of the eye for visual correction of aphakia and pre-existing corneal astigmatism secondary to removal of a cataractous lens in adult patients with or without presbyopia, who desire improved uncorrected distance vision, reduction of residual refractive cylinder and increased spectacle independence for distance vision.

WARNING/PRECAUTION: Careful preoperative evaluation and sound clinical judgment should be used by the surgeon to decide the risk/benefit ratio before implanting a lens in a patient with any of the conditions described in the Directions for Use labeling. Toric IOLs should not be implanted if the posterior capsule is ruptured, if the zonules are damaged, or if a primary posterior capsulotomy is planned. Rotation can reduce astigmatic correction; if necessary lens repositioning should occur as early as possible prior to lens encapsulation. All viscoelastics should be removed from both the anterior and posterior sides of the lens; residual viscoelastics may allow the lens to rotate.

Optical theory suggest, that, high astigmatic patients (i.e. > 2.5 D) may experience spatial distortions. Possible toric IOL related factors may include residual cylindrical error or axis misalignments. Prior to surgery, physicians should provide prospective patients with a copy of the Patient Information Brochure available from Alcon for this product informing them of possible risks and benefits associated with the AcrySof® IQ Toric Cylinder Power IOLs.

Studies have shown that color vision discrimination is not adversely affected in individuals with the AcrySof® Natural IOL and normal color vision. The effect on vision of the AcrySof® Natural IOL in subjects with hereditary color vision defects and acquired color vision defects secondary to ocular disease (e.g., glaucoma, diabetic retinopathy, chronic uveitis, and other retinal or optic nerve diseases) has not been studied. Do not resterilize; do not store over 45° C; use only sterile irrigating solutions such as BSS® or BSS PLUS® Sterile Intraocular Irrigating Solutions.

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AcrySof® IQ IOL

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

INDICATIONS: The AcrySof® IQ posterior chamber intraocular lens is intended for the replacement of the human lens to achieve visual correction of aphakia in adult patients following cataract surgery. This lens is intended for placement in the capsular bag.

WARNING/PRECAUTION: Careful preoperative evaluation and sound clinical judgment should be used by the surgeon to decide the risk/benefit ratio before implanting a lens in a patient with any of the conditions described in the Directions for Use labeling. Caution should be used prior to lens encapsulation to avoid lens decentrations or dislocations.

Studies have shown that color vision discrimination is not adversely affected in individuals with the AcrySof® Natural IOL and normal color vision. The effect on vision of the AcrySof® Natural IOL in subjects with hereditary color vision defects and acquired color vision defects secondary to ocular disease (e.g., glaucoma, diabetic retinopathy, chronic uveitis, and other retinal or optic nerve diseases) has not been studied. Do not resterilize; do not store over 45° C; use only sterile irrigating solutions such as BSS® or BSS PLUS® Sterile Intraocular Irrigating Solutions.

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1. AcrySof® IQ ReSTOR® IOL Directions for Use
3. Independent third party research; Data on File, December 2011.

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