

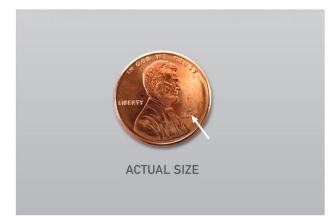
The iStent® Patient

- ✓ Adults with Mild to Moderate OAG
- ✓ Having Cataract Surgery
- ✓ On one or more Glaucoma Medication(s)



iStent[®] Benefits

- ✓ Reduce and control IOP
- ✓ May reduce patient's drug burden (at physician's discretion).
- ✓ Overall safety profile similar to cataract surgery



Covered by Medicare,

Medicare Supplement plans

and most commercial plans.

INDICATION FOR USE. The iStent[®] Trabecular Micro-Bypass Stent (Models GTS100R and GTS100L) is indicated for use in conjunction with cataract surgery for the reduction of intraocular pressure (IOP) in adult patients with mild to moderate open-angle glaucoma currently treated with ocular hypotensive medication. (See reverse for full safety statement.)



CONTRAINDICATIONS. The iStent is contraindicated in eyes with primary or secondary angle closure glaucoma, including neovascular glaucoma, as well as in patients with retrobulbar tumor, thyroid eye disease, Sturge-Weber Syndrome or any other type of condition that may cause elevated episcleral venous pressure. **WARNINGS**. Gonioscopy should be performed prior to surgery to exclude PAS, rubeosis, and other angle abnormalities or conditions that would prohibit adequate visualization of the angle that could lead to improper placement of the stent and pose a hazard. The iStent* is MR-Conditional meaning that the device is safe for use in a specified MR environment under specified conditions, please see label for details. **PRECAUTIONS**. The surgeon should monitor the patient postoperatively for proper maintenance of intraocular pressure. The safety and effectiveness of the iStent* has not been established as an alternative to the primary treatment of glaucoma, in patients with pseudoexfoliative glaucoma, pigmentary, and uveitic glaucoma, in patients with unmedicated IOP less than 22 mmHg or greater than 36 mmHg after "washout" of medications, or in patients with prior glaucoma surgery of any type including argon laser trabeculoplasty, for implantation of more than a single stent, after complications during cataract surgery, and when implantation has been without concomitant cataract surgery with IOL implantation for visually significant cataract. **ADVERSE EVENTS**. The most common post-operative adverse events reported in the randomized pivotal trial included early post-operative corneal edema (8%), BCVA loss of ≥ 1 line at or after the 3 month visit (7%), posterior capsular opacification (6%), stent obstruction (4%) early post-operative anterior chamber cells (3%), and early post-operative corneal abrasion (3%). Please reference the Directions for Use for additional adverse event information. **CAUTION**: Federal law restricts this device to sale by, or on the order of, a physician. Please reference the Directions