



1 PREPARE

- Make sure that your pack contains a sterile prefilled syringe in a sealed tray
- Peel the lid off the syringe tray and, using aseptic technique, remove the syringe

2 INSPECT SYRINGE

- LUCENTIS should be colorless to pale yellow
- **Do not** use the prefilled syringe if:
 - The syringe cap is detached from the Luer lock
 - The syringe is damaged
 - Particulates, cloudiness, or discoloration are visible

SNAP

3

REMOVE SYRINGE CAP

- Snap off (**do not** turn or twist) the syringe cap (see Figure 1)

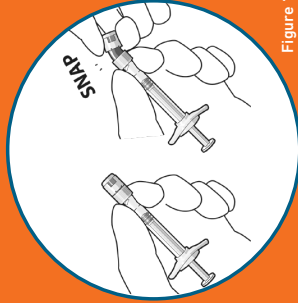


Figure 1

ATTACH

4

ATTACH NEEDLE

- Attach a 30G x 1/2-inch sterile injection needle firmly onto the syringe by screwing it tightly onto the Luer lock (see Figure 2)
- Carefully remove the needle cap by pulling it straight off

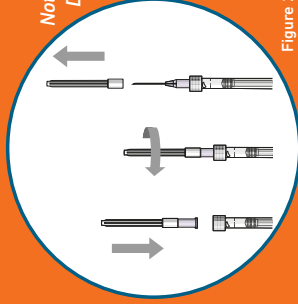


Figure 2

TAP

5

DISLodge AIR BUBBLES

- Hold the syringe with the needle pointing up
- If there are any air bubbles, gently tap the syringe with your finger until the bubbles rise to the top (see Figure 3)

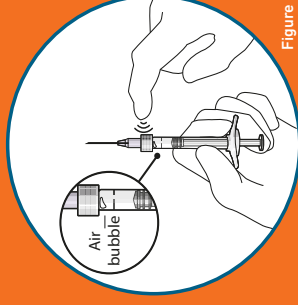


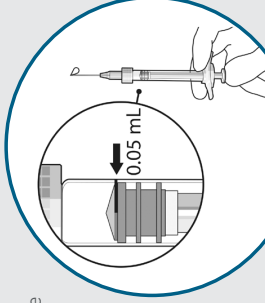
Figure 3

6

EXPEL AIR AND ADJUST DRUG DOSE

- Hold the syringe at eye level, and carefully push the plunger rod until the **edge below the dome** of the rubber stopper is aligned with the 0.05 mL dose mark (see Figure 4)

Note: The plunger rod is not attached to the rubber stopper—this is to prevent air from being drawn into the syringe.

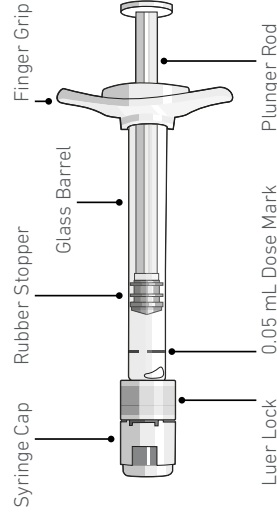


7 INJECT

- The injection procedure should be carried out under aseptic conditions
- Insert the needle into the injection site
- Inject slowly until the rubber stopper reaches the bottom of the syringe to deliver the volume of 0.05 mL
- After injection, **do not** recap the needle or detach it from the syringe. Dispose of the used syringe together with the needle in a sharps disposal container, or in accordance with local requirements

For Important Safety Information, please see next

DEVICE DESCRIPTION



TO PREPARE LUCENTIS FOR INTRAVITREAL ADMINISTRATION, PLEASE ADHERE TO THE ACCOMPANYING INSTRUCTIONS. READ ALL THE INSTRUCTIONS CAREFULLY BEFORE USING THE PREFILLED SYRINGE. PLEASE SEE THE FULL PRESCRIBING INFORMATION FOR ADMINISTRATION INFORMATION.

HOW TO STORE LUCENTIS:

- LUCENTIS should be refrigerated at 2°C-8°C (36°F-46°F).
Do not freeze
- **Do not** use beyond the expiration date stamped on the label
- Protect LUCENTIS prefilled syringes from light and store in the original carton until time of use
- **Do not** open sealed tray until time of use

The prefilled syringe is for single-use only. The prefilled syringe is sterile. **Do not** use product if the packaging is damaged or has been tampered with.
The opening of the sealed tray and all subsequent steps should be done under aseptic conditions.
For the intravitreal injection, a 30-gauge x 1/2-inch sterile injection needle should be used (not provided).

NOTE: The dose must be set to 0.05 mL.

IMPORTANT SAFETY INFORMATION

INDICATIONS

LUCENTIS® (ranibizumab injection) is indicated for the treatment of patients with:

- Neovascular (wet) age-related macular degeneration (AMD)
 - Macular edema following retinal vein occlusion (RVO)
 - Diabetic macular edema (DME)
 - Diabetic retinopathy (DR)
 - Myopic choroidal neovascularization (mCNV)
- IMPORTANT SAFETY INFORMATION**
- LUCENTIS is contraindicated in patients with ocular or periocular infections or known hypersensitivity to ranibizumab or any of the excipients in LUCENTIS. Hypersensitivity reactions may manifest as severe intraocular inflammation.
 - Intravitreal injections, including those with LUCENTIS, have been associated with endophthalmitis, retinal detachment, and iatrogenic traumatic cataract
 - Increases in intraocular pressure have been noted both pre-injection and post-injection with LUCENTIS.

- Although there was a low rate of arterial thromboembolic events (ATEs) observed in the LUCENTIS clinical trials, there is a potential risk of ATEs following intravitreal use of VEGF inhibitors. ATEs are defined as nonfatal stroke, nonfatal myocardial infarction, or vascular death (including deaths of unknown cause).

- Fatal events occurred more frequently in patients with DME and DR at baseline treated monthly with LUCENTIS compared with control. Although the rate of fatal events was low and included causes of death typical of patients with advanced diabetic complications, a potential relationship between these events and intravitreal use of VEGF inhibitors cannot be excluded.

- In the LUCENTIS Phase III clinical trials, the most common ocular side effects included conjunctival hemorrhage, eye pain, vitreous floaters, and increased intraocular pressure. The most common non-ocular side effects included nasopharyngitis, anemia, nausea, and cough.

For additional Safety Information, please see LUCENTIS full Prescribing Information.

You may report side effects to the FDA at (800) FDA-1088 or www.fda.gov/medwatch. You may also report side effects to Genentech at (888) 835-2555.

REFERENCE: 1. LUCENTIS (package insert), South San Francisco, CA: Genentech, Inc.; 2018.