RETINA CENTER OF OKLAHOMA DR. DAHR: INFORMED CONSENT FOR EYLEA™ (AFLIBERCEPT) INJECTION INTO THE EYE

INDICATIONS

EYLEA™ is approved by the Food and Drug Administration (FDA) to treat Neovascular (Wet) Age-Related Macular Degeneration (AMD), which is the leading cause of blindness in people over 50 years of age. There are two types of macular degeneration: dry and wet. In the "wet" form of AMD, abnormal blood vessels grow in the back of the eye. Sometimes these vessels leak blood or fluid that causes blurred or distorted vision. Without treatment, vision loss may be quick and severe.

POSSIBLE BENEFITS, LIMITATIONS, AND ADMINISTRATION

EYLEA™ works by inhibiting the growth of the abnormal blood vessels that cause AMD; it also decreases swelling of the macula. The goal of treatment is to prevent further loss of vision. Although some patients have regained vision, the medication may not restore vision that has already been lost, and may not ultimately prevent further loss of vision caused by the disease.

After the eye is numbed with anesthesia, the medication is injected into the vitreous, or jelly-like substance in the back chamber of the eye. EYLEA™ is administered by an injection into your eye as needed at regular intervals (usually every four to eight weeks, but this may vary).

ALTERNATIVES

You do not have to receive treatment for your condition, although without treatment, wet macular degeneration can lead to further vision loss and blindness, sometimes very quickly. Other forms of treatment are available. Lucentis and Avastin are medications that are similar to Eylea and have also been shown in clinical trials to have good results.

COMPLICATIONS FROM THE MEDICATION AND INJECTION

Complications of EYLEA™

Your condition may not get better or may become worse. Any or all of the following complications may cause decreased vision and/or have a possibility of causing blindness. Additional procedures may be needed to treat these complications. During the follow-up visits or phone calls, you will be checked for possible side effects, and the results will be discussed with you.

Although not common, some patients have had non-eye related adverse events, for example, blood clots (heart attacks, strokes, and death). If you have had a

stroke or heart attack, you should discuss this issue with your physician. Whenever a medication is used in a large number of patients, a small number of coincidental life-threatening problems may occur that have no relationship to the treatment. For example, patients with diabetes are already at increased risk for heart attacks and strokes. If one of these patients being treated with EYLEA™ suffers a heart attack or stroke, it may be caused by the diabetes and not the EYLEA™ treatment.

Possible complications of the procedure and administration of EYLEA™ include but are not limited to retinal detachment, serious infection (endophthalmitis), inflammation within the eye (uveitis), cataract formation (clouding of the lens of the eye), glaucoma (increased pressure in the eye), hypotony (reduced pressure in the eye), damage to the retina or cornea (structures of the eye), and bleeding. Any of these complications may lead to further severe vision loss or even rarely complete loss of vision. The most common side effects to your eye are increased redness in the whites of your eye and irritation for a day or two after the injection

PATIENT RESPONSIBILITIES

I will immediately contact my **ophthalmologist (eye surgeon)** if any of the following signs of infection or other complications develop: pain or severe ache, blurry or decreased vision, sensitivity to light, or redness of the eye (compared to immediately after the injection. I have been instructed NOT to rub my eyes or swim for a week after each injection. I will keep all post-injection appointments so my doctor can check for complications.

PATIENT CONSENT

The above explanation has been read by/to me. The nature of my eye condition has been explained to me and the proposed treatment has been described. The risks, benefits, alternatives, and limitations of the treatment have been discussed with me. All my questions have been answered.

- I hereby authorize Dr. Dahr to administer the intravitreal injection of EYLEA™ at regular intervals as needed.
- This consent will be valid until I revoke it or my condition changes to the point that the risks and benefits of this medication for me are significantly different.

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Patient's Signature Date