

#### URGENT FIELD SAFETY NOTICE

Johnson & Johnson Surgical Vision, Inc. (JJSV, part of the Johnson & Johnson Vision group of companies) is recalling 21
product lots of Healon GV <sup>®</sup> PRO (this "Action"). This Action only affects the Healon GV <sup>®</sup> PRO Ophthalmic Viscosurgical Device (OVD) listed on page 4. No other JJSV Healon <sup>®</sup> OVD products are affected by this Action.
The Healon GV® PRO OVD lot number is displayed on the end of each individual unit carton (see page 3 for label example). The OVD lot number is also present on each individual syringe packaging tray and each syringe.
JJSV has voluntarily initiated this Action due to complaints that the Healon GV® PRO may be difficult to remove from
the eye, leading to increased postoperative Intraocular Pressure (IOP) requiring additional intervention. There have also
been reports of potential clogging of phacoemulsification equipment tubing, which may lead to delay in the procedure or
ocular injury. You are receiving this notice because our records indicate that you received Healon GV® PRO
impacted by this Action.

Because you have received impacted product, please immediately take the following actions:

- 1. Compare your inventory against the attached list on page 4.
- 2. **Discontinue** using and remove from your inventory all affected Healon GV® PRO OVD lots listed on page 4 of this letter. **Note that you can continue to use all other JJSV OVD lots not affected by this recall.**
- 3. **EVEN IF YOU HAVE NO INVENTORY,** please complete the attached Customer Reply Form (on page 5). JJSV requires this information for reconciliation purposes with regulatory agencies.

If you have inventory of any of the OVDs with the lot number listed on page 4, please complete the Custo	mer Reply
Form, noting the lot numbers of the OVDs and contact at JJSV Quality Assurance at	as we will
notify Customer Support to arrange pick up of affected product to be returned. Returned product will NO	)T require
<b>refrigerated shipping.</b> Any returned product will be replaced/substituted.	

The completed Customer Reply Form should be emailed to JJSV Quality Assurance at 3 business days of receipt of this letter.

This notice should be shared with anyone who needs to be aware within your organization or to any organization where the potentially affected products have been transferred.

November 29, 2019

Dear Johnson & Johnson Vision Customer:

RE: Voluntary Recall of Healon GV® PRO OVDs



If you have product complaints or adverse events to report regarding the use of these Healon  $GV^{\otimes}$  PRO OVD, please inform JJSV by emailing at <u>RA-VISAP-JJSV-APAC-C@its.jnj.com</u>. If you do report a complaint, please provide the Healon  $GV^{\otimes}$  PRO OVD Lot Number and, if a patient was involved, the date of surgery, a description of the event and patient outcome.

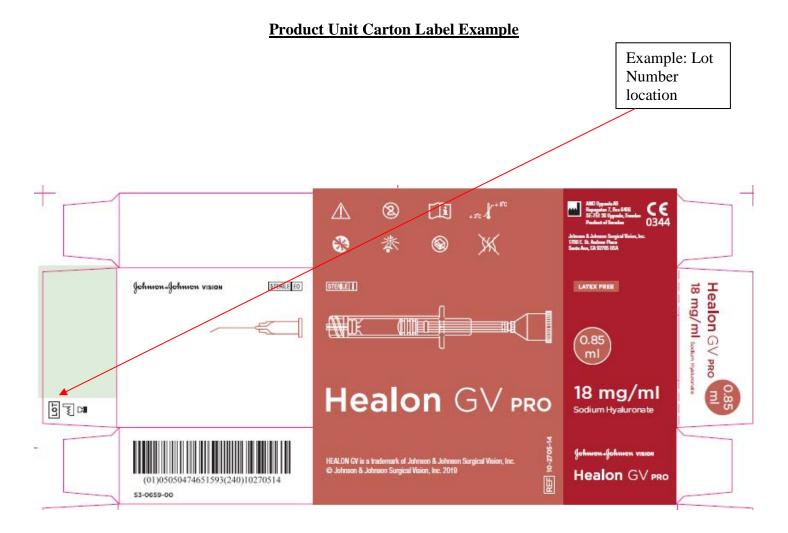
The Health Science Authority of Singapore have been notified of this action.

This voluntary action reflects JJSV's commitment to high quality standards and ensuring that our products fully meet your expectations. JJSV remains fully committed to serving you and your patients with safe and effective products. We recognize the inconvenience this causes you and appreciate your assistance in expediting the return of this product.

Sincerely,

Manager, Business Regional Quality Asia Pacific Johnson & Johnson Surgical Vision, Inc.

# Johnson Johnson VISION



# Johnson Johnson VISION

### O.U.S. Lot Numbers Affected by Recall

Model	Lot No.
Healon GV® PRO 0.85 mL	UE31098
Healon GV® PRO 0.85 mL	UE31204
Healon GV® PRO 0.85 mL	UE31283
Healon GV® PRO 0.85 mL	UE31306
Healon GV® PRO 0.85 mL	UE31364
Healon GV® PRO 0.85 mL	UE31409
Healon GV® PRO 0.85 mL	UE31467
Healon GV® PRO 0.85 mL	UE31476
Healon GV® PRO 0.85 mL	UE31507
Healon GV® PRO 0.85 mL	UE31519
Healon GV® PRO 0.85 mL	UE31588
Healon GV® PRO 0.85 mL	UE31408
Healon GV® PRO 0.85 mL	UE31439
Healon GV® PRO 0.85 mL	UE31559
Healon GV® PRO 0.85 mL	UE31587



JJSV Product RECALL Letter Dated November 26, 2019

#### 2019 JJSV HEALON GV® PRO RECALL CUSTOMER REPLY FORM

	lete and return immediat number] <i>or</i> email: [Ema		HAVE NO STOCK		
Please place	an "X" in one of the boxe	es below.			
	All affected products have JJSV Representative has re Product(s) was(were) previous are returning affected producted products are returning affected products are returning affected products have are returning affected products have	eturned all affected prices iously returned to JJS	roduct inventory on or	ır behalf.	
	Lot Number	Quantity of Healon GV <sup>®</sup> PRO to be Returned	Lot Number	Quantity of Healon GV <sup>®</sup> PRO to be Returned	
	JJV Account Number:				
	Account Names	:			
	Address	:			
	City, State, Zip Code				
	Country	7			
	Telephone Number:	:			
	Person completing this for tated in the Product Recannel (print)  Title/Position:  Signature:		e receipt and unders	etanding of the actions,	as
3	Name: (print)  Title/Position:				