



Dear Patient,

Our Surgery Scheduler will be contacting you to you to set up your appointments for Cataract surgery.

Please use the space below to write down your appointment dates and times:

**A-Scan/Pre-op Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Surgery Date:** \_\_\_\_\_ **Arrival Time:** \_\_\_\_\_ **Surgery Time:** \_\_\_\_\_

**1<sup>st</sup> Post-op Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**2<sup>nd</sup> Post-op Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

1. Remember to bring this packet with you to your pre-op appointment.
2. Please bring all medications, or a list that includes dosages, to your pre-op appointment.
3. All pre-op and post-op appointments are at Scottsdale Eye Physicians & Surgeons
4. Eye Surgery Center at the Biltmore is located at 2222 E. Highland Ave. Ste. 101. Phoenix, AZ 85016.
5. Please contact our Surgery Scheduler @ 480 994-1872 if you have any questions regarding your appointment times.

Driving Directions to Eye Surgery Center at the Biltmore:

Take Indian School Rd. West

Turn right (North) at 24<sup>th</sup> Street

Turn left (West) at Highland Ave.

Eye Surgery Center at the Biltmore is located on the NE corner of 22<sup>nd</sup> Street & Highland Ave.

Phone Number: (602) 279-2434

Rev: 1/15/15

## **CONTACT LENS WEARING AGREEMENT**

This will confirm that staff members from Scottsdale Eye Physicians & Surgeons, PC have informed me that I need to remove my contact lenses prior to measurements and surgery according to the following schedule:

- Regular Soft Lenses: Remove 1 week prior to pre-op visit
- Soft Toric Lenses: Remove 2 weeks prior to pre-op visit
- RGP'S: Remove 3-4 weeks prior to pre-op visit
- I do not wear contact lenses currently

These recommendations are to ensure that the cornea has had a chance to relax and assume its natural shape prior to surgery.

I agree to these terms and conditions and fully understand and accept any risks involved by not adhering to these precautions.

By execution of this document, I declare that the foregoing is true and correct.

\_\_\_\_\_  
PATIENT SIGNATURE

\_\_\_\_\_  
DATE

Rev: 5/14/14

## Eye Surgery Center at the Biltmore Medication List

Below is a list of medications that are typically used during eye surgery in our center. We have included the usage of these medications and some side effects, if you have questions or concerns please ask your physician, nurse or anesthesia provider. Be sure to alert your nurse and physician to any known allergies that you have. It is always possible for a person to experience other reactions following the administration of any medication, if you have any questions or concerns following your surgery please consult your physician.

### Pre Surgical Eye Drops:

Anesthetic Eye drops, (Alcaine, Proparacaine, Tetracaine): A topical eye anesthetic used during eye surgery and eye procedures causing numbing of the surface of the eye. Side effects may include: stinging, burning and irritation, and conjunctival redness may occur; overuse can cause drying of the cornea. Use caution and not to rub the eye until the effects have worn off, which will occur in approximately 30 minutes.

Antibiotic Eye drops are used to prevent eye infections, use as directed by your physician. Note: stopping this medication early may result in the infection returning.

Ocuflox (Ofloxacin); Vigamox (Moxifloxacin): These medications are used to treat bacterial eye infections. Ofloxacin and Moxifloxacin belong to a class of drugs called quinolone antibiotics. They work by stopping the growth of bacteria. Side effects may include: temporary stinging or burning of the eyes for a minute or two when applied. Temporary blurred vision, eye discomfort, itching, redness, dryness, tearing, feeling as if something is in your eye, or sensitivity to light may occur. If any of these effects persist or worsen, notify your doctor or pharmacist promptly. Do not use if patient is allergic to Quinolone antibiotics (e.g: Ciprofloxacin, Norfloxacin, Moxifloxacin, Levofloxacin).

Trobramycin: (Tobrex) is an aminoglycoside antibiotic used to treat bacterial infections of the eye. It works by stopping the growth of bacteria. Side effects may include: tearing, eye redness, eye discomfort, or eyelid itching or swelling may occur. Use of this medication for prolonged or repeated periods may result in a new fungal eye infection. Do not use for longer than prescribed. If any of these symptoms persist or worsen, notify your doctor or pharmacist promptly. Do not use if the patient is allergic to Tobramycin or other Aminoglycosides (e.g. Gentamicin). Do not wear contact lenses while you are using this medicine.

Phenylephrine ophthalmic drops (Neo-synephrine, Mydrin): 2.5 % and 10% solutions are used to dilate (enlarge) the pupil before eye surgery. Side effects may include: burning, tearing, light sensitivity, and blurred vision. Do not use if

the patient is allergic to phenylephrine. Use caution in patients with narrow angle glaucoma and hypertension.

Mydracyl (Tropicamide): This medication is in a class of drugs known as anticholinergics and is used to dilate the pupil of the eye by relaxing certain eye muscles. It is used in preparation for eye surgery and some eye examinations. Side effects may include: burning, stinging, redness, temporary blurred vision, dry mouth, or sensitivity to light.

Cyclogyl (Cyclopentolate): This medication is in a class of drugs known as anticholinergics. It works by temporarily dilating the pupil of the eye and relaxing the muscles of the eye. It is used in preparation for eye surgery and some eye examinations. Side effects may include: burning, stinging, redness of the eye, eye irritation, or temporary blurred. Do not use in patients that are allergic to Cyclopentolate or Belladonna Alkaloids (e.g., Atropine).

Non-steroidal anti-inflammatory - NSAIDS (Ketorolac, Acular): NSAIDS work by blocking the production of prostaglandin, a substance that causes pain. It also works to reduce swelling and inflammation following eye surgery. Side effects may include: headache, temporary stinging and burning of the eye. Do not use in patients that are allergic to Ketorolac, Acular, Toradol or other non-steroidal anti-inflammatory drugs (e.g. Ibuprofen, Naproxen, Celecoxib) or ASA.

Pilocarpine (Pilocar): This medication is in a class of drugs known as cholinergics. Pilocarpine is used to constrict the pupil when a smaller pupil is required for eye surgery. It may be used during surgery to decrease the pupil size. Pilocarpine is also used to treat glaucoma symptoms by decreasing the pupil size and decreasing the fluid inside the eye. Side effects may include: temporary irritation, burning, stinging of the eye, temporary blurred vision, poor vision in dim light (do not drive, especially at night after using this medication), headache, or brow ache. Do not use if the patient has an allergy to Pilocarpine. Patients with asthma, heart disease, or recent heart attacks should use extreme caution when using this medication.

Betadine drops: A diluted betadine solution is used to disinfect the eye tissues and help prevent eye infections both prior to and following eye surgery. Side effects may include: stinging, burning and/ or eye irritation. Do not use if the patient is allergic to topical Betadine.

## **Intravenous Medications:**

### **Anti- Anxiety/ Sedatives:**

**Versed (Midazolam):** Versed is a benzodiazepine drug that causes relaxation, sleepiness and can cause a partial or complete loss of memory during the use of the drug. It is frequently used prior to surgery to calm and relax the patient. Side effects may include: pain, tenderness and redness at the injection site, nausea, and drowsiness.

**Diprivan (Propofol):** Diprivan is a short-acting hypnotic, amnestic sedative used for relaxation prior to surgical procedures. Diprivan is administered intravenously. Side effects may include: slight burning or stinging around the injection site, numbness or tingly feeling, nausea, cough, confusion, agitation, and anxiety.

**Non-steroidal anti-inflammatory (NSAIDS): (Toradol, Ketorolac):** May be given for short-term pain relief usually given before or after surgery, also to decrease swelling. It works by blocking the body's production of certain natural substances that cause inflammation. Side effects may include: upset stomach, nausea, vomiting, constipation, diarrhea, gas, dizziness, or drowsiness. NSAIDS can also cause bleeding if taken over long periods of time (take only for the prescribed number of days). Do not use in patients that are allergic to Ketorolac, Toradol, other non-steroidal anti-inflammatory drugs (e.g. Ibuprofen, Naproxen, Celecoxib) or Aspirin.

**Fentanyl (Sublimaze):** Fentanyl is a narcotic (opioid) analgesic. It works in the brain and nervous system to cause anesthesia and decrease pain. Fentanyl is given intravenously and used for producing anesthesia for surgery and treating pain before, during and after surgery. Side effects may include: drowsiness, lightheadedness, weakness, fatigue, or feelings of euphoria.

**Xylocaine (Lidocaine):** Xylocaine is a local anesthetic agent that is injected around the eye for numbing the eye or can be used in a jelly form that is used directly on the surface of the eye for local anesthesia. In the injection form, Lidocaine is usually mixed with hyaluronidase to help with absorption and distribution of the injection. Side effects may include: stinging and burning, redness, or temporary blurred vision. Following an injection of the medication it can take several hours to completely wear off. Use caution and follow all instructions if your eye has been patched closed; corneal abrasions may occur if the patch is removed too soon.

**Marcaine (Bupivacaine Hydrochloride):** Bupivacaine is an anesthetic (numbing medicine) that blocks the nerve impulses that send pain signals to your brain. Side effects may include: stinging and burning, double vision, redness and bruising around the injection site, weak or shallow breathing, fast heart rate, gasping, feeling unusually hot, slow heart rate, weak pulse, feeling restless or

anxious, ringing in the ears, metallic taste, speech problems, numbness or tingling around your mouth, tremors, feeling light-headed, fainting; or problems with urination and allergic reactions. Following an injection of the medication it can take several hours to completely wear off. Use caution and follow all instructions if your eye has been patched closed; corneal abrasions may occur if the patch is removed too soon.

Antihypertensive Agents (Blood Pressure lowering medications) may be given to reduce the blood pressure, if the pressure is higher than optimal. Lowering high blood pressure helps prevent strokes, heart attacks, and kidney problems.

Labetalol (Trandate): This medication is both an alpha-blocker and beta-blocker. It works by blocking the action of certain natural chemicals in your body such as epinephrine on the heart and blood vessels. This effect lowers the heart rate, blood pressure, and strain on the heart. Side effects may include: tiredness, diarrhea, lightheadedness, hypotension (low blood pressure, or dizziness, especially upon standing).

Hydralazine (Apresoline): Hydralazine is a vasodilator. It is used to lower high blood pressure, and works by relaxing blood vessels so blood can flow through the body more easily. Side effects may include: pounding or fast heartbeat, loss of appetite, nausea, vomiting, diarrhea, lightheadedness, hypotension (low blood pressure) or dizziness, especially upon standing.

Dextrose: Intravenous glucose medication that is used to raise the body's blood sugar. It is given intravenously if blood sugar levels are too low. Side effects may include: Increased blood sugar.

Antiemetic: Given to prevent or treat nausea and/or vomiting.

Zofran (Ondansetron): Is used to prevent and treat nausea and vomiting after surgery. It works by blocking one of the body's natural substances (serotonin) that causes vomiting. Side effects may include: headaches, lightheadedness, dizziness, drowsiness, and tiredness. Tell your physician if you are allergic to serotonin blockers.

Compazine (Prochlorperazine Maleate): This medication is used to treat severe nausea and vomiting from various causes (e.g. anti-cancer treatment, migraine headaches, after surgery). Prochlorperazine is a phenothiazine medication that works by affecting the balance of natural chemicals (neurotransmitters) in the brain to reduce nausea and the urge to vomit. Side effects include: dizziness, blurred vision, or dry mouth.

## **Intra-operative Medications:**

Antibiotic eye drop (Vigamox, Ocuflax, Tobramycin): See pre-operative antibiotic eye drops.

Antibiotic injections (Vigamox, Cefuroxime): Injections in the eye post surgery to reduce the risk of postoperative infections. Side effects may include: stinging, burning or redness around the injection site.

Steroid eye drops (Predforte, Prednisolone): Reduces inflammation in the eye following eye surgery. Can cause the pressure in the eye to increase.

Trimoxi (Triamcinolone and Moxifloxacin) injection: Trimoxi is a single injection of the steroid Triamcinolone and the antibiotic Moxifloxacin that some surgeons choose to use on their patients. The Trimoxi is injected into the eye following cataract surgery. In most cases there is no need for antibiotic eye drops before surgery and no need for antibiotic or steroid eye drops following cataract surgery if this injection is used. Side effects may include: floaters for a few days post injection, blurred vision in the immediate postoperative period, and an increase in eye pressure in patients with glaucoma.

Pilocarpine, Miochol and Miostat are medications used to constrict the pupil during or following some eye surgeries, these medications may cause brow aching or headaches temporarily.

Balanced salt solution- used to moisten the surface of the eye and keep the eye chamber inflated during cataract removal.

Shugarcaine (Phenylephrine, Lidocaine and Balanced Salt Solution mixture): Shugarcaine is sometimes injected into the anterior chamber of the eye during cataract surgery to increase and/or maintain the pupil dilation, or to reduce floppy iris syndrome during cataract surgery in patients that have used Flomax.

Pressure Lowering Eye drops: The eye drops are sometimes used to lower the pressure in the eye following eye surgery or eye procedures such as laser procedures.

Alphagan (Brimonidine tartrate): Alphagan is an eye drop that is used to treat high fluid pressure in the eye or open-angle glaucoma. This medication lowers the eye pressure by allowing better fluid drainage from within the eye and also by reducing the amount of fluid formed in the eye. Side effects may include: eye discomfort, itching, redness, blurred vision, dizziness, dry mouth, drowsiness, or tiredness.

Iopidine (Apraclonidine): Iopidine is thought to work by decreasing the amount of fluid within the eye. This medication is used to treat or prevent high pressure

inside the eye that may occur during and after laser eye surgery. Decreasing high pressure inside the eye may help to prevent decreased vision or blindness in the eye treated by laser surgery. Side effects may include: eye discomfort, redness, burning, blurred vision, upset stomach, dizziness, or drowsiness. Eye itching, watering or eyelid swelling may be symptoms of an allergic reaction of the eye. If any of these effects persist or worsen, tell your doctor.

### **Postoperative Medications:**

Diamox (Acetazolamide): Is a diuretic medication that helps to reduce the pressure in the eye following cataract surgery and other eye surgeries. It may cause gastric discomfort; take with food such as crackers. Side effects may include: temporary numbness and tingling of fingers and/or toes. Drink plenty of fluids and eat potassium rich food for 12 hours if numbness occurs. This medication may be withheld for patients with kidney failure or sulfa allergies.

Postoperative Antibiotics and Steroid medications are the same as those used pre operatively. Failure to use antibiotics and steroid eye drops as prescribed may result in an eye infection or an increase in inflammation following surgery.

### **Analgesics:**

Tylenol (Acetaminophen): Acetaminophen can be used for mild to moderate pain associated with eye surgery. Acetaminophen comes in many different forms and brand names, read the instructions on the bottle for proper dosing. Do not use more of this medication than the manufacturer's recommended dosage or frequency. An over dosage of Acetaminophen can cause liver damage. If your pain persists call your physician.

Ibuprofen is a non-steroidal anti-inflammatory drug (NSAIDS). It works by blocking your body's production of certain natural substances that cause inflammation. This effect helps to decrease swelling, pain, or fever. Read the instructions on the bottle for proper dosing. Do not use this medication more than the manufacturers recommend dosage or frequency. If your pain persists call your physician.

Vicodin (Acetaminophen and Hydrocodone): Occasionally after some types of eye surgery the physician may prescribe a stronger pain medication for you to have filled at your local pharmacy, one such medication is Vicodin. Vicodin contains a combination of Acetaminophen and Hydrocodone. Hydrocodone is an opioid (narcotic) pain medication. Acetaminophen is a less potent pain reliever that increases the effects of hydrocodone. Vicodin is used to relieve moderate to severe pain. Use only as directed. If the pain is not relieved call your physician. Hydrocodone can slow or stop your breathing. Never use Vicodin in larger amounts, or for longer than prescribed. Narcotic pain medicine may be habit-forming, even at regular doses. Never share Vicodin with another person,



especially someone with a history of drug abuse or addiction. Keep the medication in a place where others cannot get to it. Do not use this medicine if you have taken an MAO inhibitor in the past 14 days.

Percocet (Oxycodone and Acetaminophen) Percocet is a combination drug consisting of oxycodone (opioid drug type) and acetaminophen. Percocet is used for the management of moderate to severe pain. Adverse reactions, which may occur with Percocet, are similar to those observed with other opioid analgesics; they include respiratory depression, apnea (periodic stopping of breathing), respiratory arrest, circulatory depression, hypotension (low blood pressure), shock, and death. This opioid is often a drug of choice for addictive use and can easily lead to dependency. Use only as directed. If the pain is not relieved call your physician.

### **Allergic Response:**

Many drugs can cause adverse side effects, and certain medicines can trigger allergic reactions. In an allergic reaction, the immune system mistakenly responds to a drug by creating an immune response against it. The immune system recognizes the drug as a foreign substance and the body produces certain chemicals, such as large amounts of histamine, in an attempt to expel the drug from the body. The release of histamine can cause symptoms like hives, skin rash, itchy skin or eyes, congestion, and swelling in the mouth and throat. A more severe reaction, called anaphylaxis, may include difficulty breathing, blueness of the skin, dizziness, fainting, anxiety, confusion, rapid pulse, nausea, diarrhea, and abdominal problems. If you experience an allergic reaction contact your physician immediately. **If you experience a severe or life threatening reaction call 911 immediately.**

## **LENSAR Femtosecond Laser Cataract Surgery**

Dr. Dennis L. Kilpatrick at Scottsdale Eye Physicians & Surgeons is proud to offer the option of removing your cataract with a new technology called femtosecond laser. Also known as bladeless cataract surgery, the laser is used to perform many of the steps of the procedure in a more advanced way. Dr. Kilpatrick uses the femtosecond laser system manufactured by LENSAR, an American company based in Orlando, Florida.

The femtosecond laser procedure, which usually only takes a few minutes and shortens the overall cataract surgical time, first scans the eye and creates a sophisticated 3-D image. This image is then used by the laser to quickly create customized incisions at just the right depth and placement, plus soften the cataract in preparation for removal. It also treats astigmatism, which can reduce your dependency on glasses or contact lenses.

This type of laser does not use heat to achieve the results. It is the same proven cold laser technology that has been used so successfully in LASIK procedures for over a decade. It precisely makes the incisions needed to facilitate removal of the cataract. The precision is far greater than using metal scalpels, like in the past. This greater precision allows more accurate centering of the intraocular lens implant, faster healing, and more predictable results. It allows Dr. Kilpatrick to achieve the best possible, most consistent visual outcome with your surgery.

The femtosecond laser cannot be used for all cataract surgeries. If you have a scar, pterygium, or certain diseases on your cornea, you may not be a candidate. Patients with glaucoma, pseudo exfoliation, a history of certain prior surgeries, or some retinal diseases may also not be candidates. If you have a very small, or a deep-set eye, or if your pupil does not dilate well, conventional cataract surgery may be a better choice.

The femtosecond laser option requires additional fees both by the surgeon and by the surgery center, which are not covered by Medicare or other insurance companies. Dr. Kilpatrick's office offers payment plans, if needed.

With the most advanced technology currently available, Dr. Kilpatrick can offer you a better, more precise, and safer cataract removal procedure that is customized to your eye's own unique size and shape. It is a system designed with comfort in mind, so you can relax, knowing the latest technology available is being used to treat one of your most valuable senses – your sight.

The femtosecond laser represents a more intelligent approach to cataract surgery. It is the method Dr. Kilpatrick would choose for himself or for his own family members if cataract surgery were needed. Additional information can be found at [www.LENSAR.com](http://www.LENSAR.com).

## Visual Lifestyle Preference Assessment

1. How interested are you in seeing at a distance (driving, playing golf) without glasses?
  - It is very important to me NOT to wear glasses for distance vision.
  - It is not important to me. I do not mind wearing glasses.
2. Are you interested in seeing well up close (reading) without glasses?
  - It is very important to me NOT to wear glasses.
  - It is not important to me. I do not mind wearing reading glasses to see things up close.
3. Would you be willing to wear glasses while doing the activities listed below, if you had no other option?
  - Reading fine print       Using a computer or cooking       Driving a car
4. If you could have good vision for driving during the day, without glasses, and good near vision in most situations, also without glasses, would you be able to tolerate some halos and glare around lights at night?
  - Yes       No
5. If you could have good distance vision day and night and, good vision for computer work, without glasses, would you be willing to wear glasses for reading fine print and small type?
  - Yes       No
6. In our daily lives, there are different things we do that require us to see at various distances. Select which of the following activity groupings is most important to you to do without depending on glasses:
  - Reading newsprint, books, maps, sewing
  - Reading from computer screens, menus, price tags, or headlines
  - Watching TV, cooking, cleaning, and doing other indoor activities
  - Driving, playing golf, seeing road signs
  - Driving at night, watching movies
7. If you decide to undergo cataract surgery to improve your vision, with or without glasses, which surgical method would you be more inclined to choose?
  - Using manual surgical instruments and traditional blades; covered by insurance
  - Using computer-controlled, laser technology, for an additional cost
8. Consider your personality. Based on the options presented below, how would you describe yourself?

Easygoing \_\_\_\_\_ Perfectionist  
Draw an X where you think your personality matches the best.

## **NOTICE TO PATIENTS**

State law, A.R.S. § 32-1401.27 (ff), requires that a physician notify the patient if he has ownership in a separate treatment facility to which the physician is referring the patient; and if this treatment is available elsewhere on the competitive basis.

In compliance with the requirements of this law, this notice discloses that Dennis L. Kilpatrick, MD holds a financial interest in: Eye Surgery Center at the Biltmore. Services we have prescribed are available on a competitive basis at Scottsdale Healthcare Osborne Hospital and Scottsdale Eye Surgery Center.

## **ACKNOWLEDGEMENT**

I have read this Notice To Patients, and I understand the disclosure that it contains.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
(Signature of Patient or Guardian)

Rev: 11/2014

## **CATARACT SURGERY PATIENT INFORMATION**

This information is given to you so that you can prepare for the discussion with your surgeon.

### **WHAT IS A CATARACT?**

The lens in the eye can become cloudy and hard, a condition known as a cataract. Cataracts can develop from normal aging, from an eye injury, or if you have taken certain medications such as steroids. Cataracts can cause blurry vision, dulled vision, and sensitivity to light, glare, and/or ghost images. If the cataract affects your vision so much that it interferes with your daily life, the cataract may need to be removed. If you do not have the surgery, your vision loss from the cataract will continue to get worse.

### **HOW WILL REMOVING THE CATARACT AFFECT MY VISION?**

The goal of cataract surgery is to correct the decreased vision caused by the cataract. During surgery, the surgeon removes the cataract and puts in a new artificial lens called an intraocular lens, or IOL. The IOL will be left in the eye permanently. Cataract surgery will not correct other causes of decreased vision, such as glaucoma, diabetes, or age-related macular degeneration. Most people still need to wear glasses or contact lenses after cataract surgery to correct near and/or distance vision and astigmatism.

## **REMOVING CONTACT LENSES PRIOR TO THE PRE-OPERATIVE VISIT AND SURGERY.**

If you wear contact lenses, you must discontinue wearing them before surgery. This is done because the contact lens rests on the cornea and distorts its shape, which can affect the accuracy of the measurements for implant lens power. When you stop wearing your contact lenses, the corneas can return to their natural shape.

**Discontinue soft contact lenses 2 weeks before your pre-op visit and discontinue wearing toric and rigid contacts (including gas permeable and standard hard) for at least 3 weeks before.**

Although the cornea usually returns to its natural state within three weeks, this process may take longer, and you will need to remain contact lens free while your vision and cornea stabilize.

## **EXAMINATION PRIOR TO SURGERY**

You will undergo a complete eye examination by your surgeon before surgery. This may include a refraction to determine your eyeglass prescription and visual acuity, measurement of your vision with and without glasses, tonometry measurement of the pressure inside your eye, keratometry measurement of the curvature of the cornea, optical biometry or ultrasonic measurement of the eye length, intraocular lens calculation to determine the best estimate of the proper power of the implanted lens, slit lamp examination (a microscopic examination of the front part of your eye), and an examination of the retina of your eye with your pupils dilated.

You will meet with your surgeon to discuss the surgery, the type of implant lens, and other procedures that may be needed. You will be given prescriptions for pre-operative drops. You will leave with your cataract surgery packet, including pre-operative and post-operative instructions.

Rev: 07/2014

**OPTIONAL PROCEDURES AND “DELUXE LENSES” (NOT COVERED BY INSURANCE). You may or may not be a candidate for the “Deluxe Lenses”. Eligibility will be decided after further testing, the day of your pre-op examination.**

ORA OPTIWAVE™ REFRACTIVE ANALYSIS is a revolutionary diagnostic device with wavefront technology that takes intraoperative measurements of the eye after the cataract has been removed. These measurements will improve the likelihood that the implant lens used is the most optimal choice, and will also help the surgeon with precise placement in the eye.

**LENSAR FEMTOSECOND LASER WITH LIMBAL RELAXING INCISION (LRI)**

A bladeless cataract surgery using a laser to make the incisions and soften the cataract for easier removal. The LRI is an incision the laser makes on your cornea to make its shape rounder.

TORIC LENS is a “deluxe” type of lens that will correct astigmatism. Instead of being round like a basketball, a cornea with astigmatism is shaped like a football. This leads to a distorted image in the eye.

MULTI-FOCAL LENS this is a “deluxe” type of implant lens that provides distance vision AND restores some or all of your eye’s ability to focus closer. It corrects for both distance and other ranges, such as near or intermediate, depending on the implant lens chosen.

**Choosing the above optional care procedures will lead to a higher out of pocket expenses. Medical and other insurance will not cover these procedures.**

## **PROCEDURE**

You may undergo light sedation administered by an anesthesiologist. In addition, numbing drops will be administered to your eye, and in some cases an injection of local anesthesia in the eyelid may be used.

A small incision, or opening, is then made in the eye. The natural lens will be removed using a technique called phacoemulsification, which uses a vibrating probe to break up the lens into small pieces. Those pieces are gently suctioned out of the eye through a small, hollow tube inserted through the incision. (If you have elected to have the ORA measurements, the surgeon will perform the test after the natural lens has been removed.) The IOL will then be placed inside your eye. The incision is self-healing, but in some cases it may require closure with very fine sutures.

## **POST OPERATIVE CARE**

Your eye will be examined by the surgeon the day after surgery, and the following week. During the initial recovery period, you will administer drops in your eye for approximately 4 weeks. You should be able to resume normal activities 1 to 2 days after surgery. Your eye will usually stabilize within 3 to 6 weeks at which time you will be given a prescription for glasses or contact lenses.

Rev: 05/04/2014



## Frequently Asked Questions

Q. When do I start my drops?

A. Two days before surgery.

Please refer to the Pre-op Surgery Instructions.

Q. Do I administer drops the day of surgery?

A. Yes. Please refer to the Pre-op Cataract Surgery Instructions.

Q. Can I take my usual medication(s) the day of surgery?

A. Yes. Unless the doctor instructed you not to take your Medications.

Q. Will I be required to have a driver the day of surgery?

A. Yes.

Q. Will I need a driver the day after surgery?

A. No. As long as you feel comfortable driving.

Q. How long does the procedure take?

A. Approximately 30 minutes.

Q. When will I be released after surgery?

A. Approximately 30 – 60 minutes.