## CATARACT SURGERY STEPS/DATES - DR. BRYCE FORD

\*This package and video avail on website: www.glaucomacalgary.com

1.	1 to 12 Months Prior to Surgery - A-SCAN: This is a measurement of your eye needed to			
	determine the type and power of the artificial lens that will be placed in your eye at surgery.			
•	Where: Dr. Ford's office: #102, 49 Richard Way SW, Calgary, AB			
•	When::takes about 45 min, no dilation although			
	a family member is welcome to join you to listen to discussion/options			
	• <u>5 days prior to A-SCAN</u> : begin instilling artificial tears (eg. Refresh or Systane) 4 times per day in both eyes (continue any other drops already taking); please do not instill any drops 1 hour before exam			
	<ul> <li>if you wear contact lenses, soft contacts must be removed 1 week prior, hard contacts</li> </ul>			
	must be removed 2-3 weeks prior			
2.	1 month prior to surgery - MEDICAL: complete and return the enclosed "Medical			
	Information" page (INCLUDING MEDICATION LIST)			
	• If you are having any health changes within the 3 months prior to your surgery date or a glaucoma surgery is added to your cataract surgery, please call our office to discuss as a more detailed medical exam may be needed by your family doctor			
3.	<b>2 days before surgery - EYE DROPS</b> : see prescription and instruction sheet in package.			
	Bottles can be open for $\sim$ 4-5 weeks. (Continue any other drops you already use.)			
4.	SURGERY (Time is tentative and may need to change):			
	RIGHT EYE:Arrival time:			
	• LEFT EYE:Arrival time:			
	WHERE? Holy Cross Surgical Services: Room 101, 2210 2nd St SW,  Colgany, Alberta (see an elegand street and building many).			
	<ul><li>Calgary, Alberta (see enclosed street and building maps)</li><li>Pay parking is available</li></ul>			
	<ul> <li>HOW LONG? You will be at the surgery center for approx 1.5 to 2 hrs</li> </ul>			
	• <b>FEES?</b> IF you chose a specialized lens or do not have Alberta HealthCare, you must			
	prepay at our office the associated fees <u>prior</u> to surgery with Debit/VISA/Mastercard			
	(AHC pays for surgery with standard lens)			
	<ul> <li>Somebody else must drive you home from surgery; taxi is acceptable if no other option and no sedation is given</li> </ul>			
5.	AFTER SURGERY Follow-Up appointments: will be booked automatically at Dr. Ford's			
<b>J</b> .	office, although you may choose to arrange with your optometrist if preferred			
	• 1 Day after surgery:			

~3weeks after surgery (may be dilated):

# ASCAN/CATARACT DISCUSSION HIGHLIGHTS PLEASE LISTEN TO VIDEOS ON WEBSITE IF POSSIBLE;

www.glaucomacalgary.com

<u>CATARACT SURGERY:</u> A cataract is a clouding of the natural lens of your eye. Cataract surgery breaks up your natural lens (cataract) using a blade, ultrasound and fluid (not laser). This lens is then replaced with an implanted, artificial lens (IOL). The type/power of the IOL depends on the A-Scan measurements and your preferred outcome.

**RISKS OF SURGERY:** There is approximately a 1% risk factor associated with cataract surgery, with the majority of the potential risks being treatable. Risks include, but are not limited to; unexpected visual outcome requiring full-time use of glasses, inflammation, corneal irritation, increased light sensitivity, infection, retinal detachment, additional surgery needed and blindness. Some risks occur several weeks after surgery so please discuss with staff if you have any travel plans within 6 weeks after surgery. Advise staff if you have ever taken Flomax/Hytrin/Avodart or Risperdal/Invega medications OR if you have ever had eye surgery before.

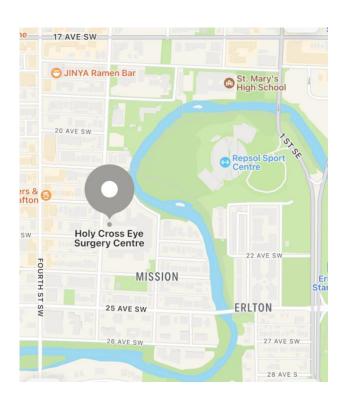
### **LENS (IOL) RANGE TARGETS:**

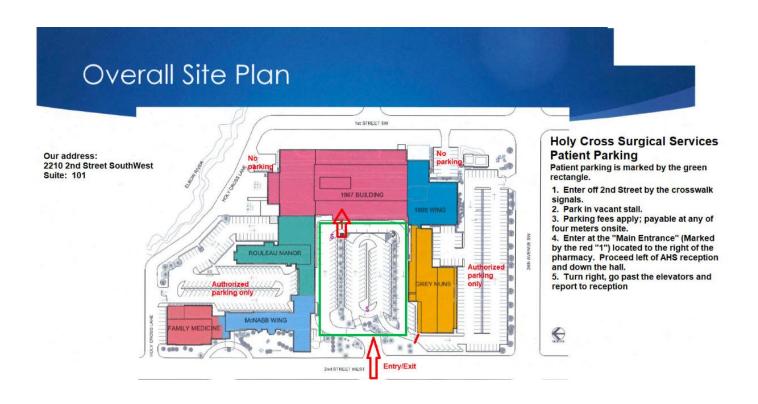
- **A.Distance Target:** aims to eliminate distance glasses; glasses will be required for any near activities <u>within</u> arms length (ie. reading, looking at watch or in mirror, cutting fingernails), over the counter reading glasses are often helpful
- **B. Near Target:** aims to eliminate reading glasses; glasses will be required for any activities beyond arms length (ie. driving, tv). This scenario is typically for people who currently remove distance glasses to read (and wish to keep this scenario)
- **C. Intermediate Target:** helpful for reading larger print at arms length, computer monitors, etc but will likely need glasses for sharp distance vision (driving, reading guide on TV) as well as for detailed near work (ie. reading, looking at watch)

# LENS (IOL) OPTIONS AVAILABLE (ANY FEES TO BE MADE AT OFFICE PRIOR TO SURGERY)

- **1."Standard"/Monofocal IOL:** This lens is **paid by Alberta Health Care**, it corrects <u>one range only</u> (see options above) and does not correct for astigmatism (part of your prescription). If you have significant astigmatism, you would still require glasses at all ranges to correct this.
- **2. Toric IOL: cost ~\$925.00 per eye.** This lens aims to correct <u>one range only</u> (see options above) but also corrects astigmatism.
- **3. PanOptix Trifocal IOL or Vivity Extended Vision IOL: cost: ~2240.00 per eye**. These lenses are newer technology and are designed to limit the need for glasses. The PanOptix lens is likely to provide better uncorrected near vision but does have an increased risk of decreased quality of vision, particularly at night, with halos/glare around lights. The Vivity IOL does not provide as good near vision (will likely still need reading glasses for finer print) but does not have the increased risks of glare and halos.

**NOTE:** Individual healing responses vary and we cannot guarantee the exact outcome of your surgery or requirement for glasses regardless of your lens choice





## PRE-SURGERY MEDICAL INFORMATION

## RETURN FORM 1 MONTH BEFORE SURGERY - VALID FOR 3 MONTHS

DR. B. FORD

Please complete the following information and mail/fax to our office: #102, 49 Richard Way, Calgary, AB, T3E 7M8
Attn: Surgery Department (OR FAX TO 403-245-1058)

Patient's Name D		ate of Birth		
Date of Surgery				
Allergies				
Approx. Date of Last Health Check-	Up?			
Name and Phone Number of Family				
(**Please book routine health exam	if you have not seen	doctor w	rithin past 6 months)	
	•		,	
1) Do you take any medications?		Yes	No	
a) If YES, please attach pharmacy-				
b) If you are on bloodthinners requ	iring bloodwork/INR p	lease have	done 1 wk prior to surge	
2) Have you ever been told you have/may	have diabetes?	Yes	No	
a) Any changes within the last 2 m		Yes	No	
b) Are your sugars well controlled		Yes	No	
c) Ave Blood Sugar reading (if kno		-		
2) Have you are been told you have high	blood massaumo	Vaa	No	
3) Have you ever been told you have high		Yes	No No	
<ul><li>a) Any changes within the last 2 m</li><li>b) Last Blood Pressure (if known)?</li></ul>		Yes	No	
b) Last Blood Flessure (II Kliowii)	/			
4) Do you have any difficulties breathing	?	Yes	No	
a) Diagnosis?	COPD ASTHMA	SLEEP A	PNEA OTHER	
b) Any changes within the last 2 m	onths?	Yes	No	
c) Do you require supplemental Ox	xygen?	Yes	No	
5) Have you ever had or been told of hear	t problems?	Yes	No	
a) Diagnosis? ATRIAL FIBRILLA	-			
b) Any history of heart attack? If y				
c) Any history of heart surgery? If				
d) Do you have a pacemaker?		Yes	No	
6) Can you lie flat for 15 to 20 minutes?		Yes	No	
7) Do you suffer from Anxiety Disorder of	r Claustrophobia'?	Yes	No	
8) Anything else you feel we should know	about your health?			
I confirm that the above is true to the best	of my knowledge:			
(print name)	(signature)	(0	late)	

## **Cataract Surgery Information**

Dear Patient,

This instruction sheet contains valuable information about the medications you must take before and after your cataract surgery. Be sure to keep this information handy for reference.

## **MEDICATIONS**







VIGAMOX

**PROLENSA** 

DUREZOL

## **BEFORE SURGERY**

Beginning <u>2</u> days <u>before</u> surgery, put <u>1</u> drop of <u>VIGAMOX</u> <u>3 times per day</u> and <u>PROLENSA</u> <u>1 time per day</u> into the eye that is planned for surgery. <u>Reminder:</u> Do not eat anything after midnight the night before surgery; you may drink clear fluids up to 3 hours prior to surgery.

## **AFTER SURGERY**

### WEEK 1

Starting the day of surgery once your surgery is completed:

VIGAMOX three (3) times per day DUREZOL two (2) times per day PROLENSA once (1) per day







## WEEK 2

Continue:

**DUREZOL** two (2) times per day & **PROLENSA** once (1) per day







### WEEK 3 + WEEK 4

Continue:

PROLENSA once (1) per day







#102 – 49 Richard Way SW Calgary, Alberta T3E 7M8

#### FREQUENTLY ASKED QUESTIONS - PLEASE READ CAREFULLY

#### 1. Do I take all my general health and other eye medications before surgery?

A. Yes, take anything as you normally would with the following exception;

- any medications recommended to take with food, including diabetic medications

#### 2. <u>Do I continue to take my bloodthinner?</u>

A. If you take Coumadin/Warfarin, you should have your INR checked approx 1-2 weeks prior to surgery

- Continue any bloodthinners as you normally would (ensure staff are aware)

#### 3. *Can I eat and drink before surgery*?

A. It is recommended to drink 3 cups of fluids (NO alcohol) the evening prior.

B. Do NOT eat anything <u>after midnight</u> the night before surgery (including gum/candies). You can drink up to 1 cup of CLEAR fluids (water, apple juice, sports drink, BLACK tea or coffee without any sweeteners) up to 4 hours prior to surgery then NOTHING.

#### 4. What if I get sick before surgery?

A. You should contact the office immediately if you have an uncontrollable or new cough, fever, vomiting, possible eye infection, or sudden health changes (403–245–3730)

#### 5. *Can I drive after surgery*?

A. You are not allowed to drive yourself on the day of surgery. It is preferred that a friend/family member drive you home after surgery; a taxi is permitted if no sedation is taken. Bus or walking by yourself is NOT permitted. You may ask a staff member at your follow-up appointment if you are legal to drive or if you need to update your driver's license.

#### 6. What can I expect on the day of surgery?

\*Ensure to wear loose-fitting clothing; nothing tight or restricting. Do not wear make-up or jewelry. Contact lenses will need to be removed.

- A. <u>Check-in at Surgery Center Reception</u>: you will need your current ID and healthcare card. You may need to sign a consent form for surgery. Your driver may wait in the waiting room or return to pick you up after your surgery (~2 hours).
- B. <u>Anesthetist</u>: The anesthetist will offer a mild sedative if you prefer and only if you have somebody who will be with you the remainder of the day. He/She will discuss your health, monitor your blood pressure and instill drops to "freeze" and dilate your eye. Rarely a needle may be used to freeze the eye; this will be discussed prior to surgery if needed.
- C. <u>Surgery Room</u>: You will need to lie down on the surgery table; the nurses will make you as comfortable as possible with knee or neck support. Dr. Ford will place a drape over you leaving only your surgery eye exposed. You will need to listen to instructions regarding where to look; if needed, a translator may accompany you into the surgery suite. The surgery will take about 15 minutes and is generally painless. A clear shield will be given to you to tape over the eye before sleeping for the first 1–2 weeks.
- D. <u>Recovery Room</u>: The nurse will take you to a room to ensure you are stable and comfortable prior to allowing you to go home.

#### 7. <u>Are there restrictions after surgery</u>?

- A. You should rest quietly the day of surgery.
- B. You should tape the eye shield over your eye whenever sleeping for the first 1-2 weeks. If your skin is sensitive to tape, you may use elastic to make a "pirate patch" instead but this is not typically as secure.
- C. For the first two weeks after surgery you should avoid rubbing your eye, lifting over 10 lbs, straining or potentially strenuous activities including any sports, extended periods of bending over, pools or hot tubs and any dirty/dusty environments. Try to avoid squeezing or closing eyes tightly. You may shower but try to keep your head back to minimize water/soap getting in eyes. Sunglasses are recommended outside.
- D. You should avoid wearing any eye makeup or having creams/lotions near eyes for one week after surgery.

#### 8. *What should I expect*?

A. Your eye may be somewhat irritated the first 24 hours after surgery; extreme pain is not expected however, keeping both eyes closed or Tylenol may help if needed. Instilling artificial tears may help any mild irritation/itching. Vision is often functional for the targeted range by 24 hours after surgery however do not be alarmed if it is not as there are many factors involved in healing. Although your glasses will no longer be correct, you can continue to wear them if they help or you can have your optician remove the lens from in front of your surgery eye (this may not work well if you still have a high prescription in the other eye). Over the counter reading glasses may help with near work initially; it is recommended to wait about 5–6 weeks after surgery before updating glasses.

#### 10. <u>Can I travel after surgery</u>?

A. Extended/international travel is not advised for the first six weeks after surgery.

#### 11. Are there any tips for instilling drops?

A. It is generally best to pull your lower lid down to form a "pouch", look up and instill one drop. Some people find it easier to lie down and look up. Be careful not to touch tip of bottle to lid/lashes and <u>always</u> wait 5 minutes between types of drops. If you were using glaucoma drops before surgery, these should be continued. It is common for drops to sting for ~1 minute after instilling. There are refills on your prescription for the surgery drops (see drop instruction sheet).

#### 12. What if I still have questions?

A. You may call our office at 403–245–3730 ext 2 or 0; we will do our best to return any messages within 24 hours. Call immediately if there is a sudden drop in vision, severe pain or discharge or if you are noticing flashes of light or a large amount of floaters; if not during office hours, you may call Healthlink at 811, see your optometrist or go to the Rockyview Hospital Emergency.