

CATARACT SURGERY STEPS/DATES – DR. ANDREW CRICHTON

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

- 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
 - 5 days prior to A-SCAN:** 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
 - if you wear contact lenses, soft contacts must be removed 1 week prior, hard contacts must be removed 2-3 weeks prior
- 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
- 2 days before surgery - EYE DROPS:** see prescription and instruction sheet in package. Continue any other drops you already use.
- SURGERY (Time is tentative and may need to change):**
 - RIGHT EYE:** _____ **Arrival time:** _____
 - LEFT EYE:** _____ **Arrival time:** _____
 - WHERE?** Lasik MD: Suite 440, 8835 Macleod Trail SW, Calgary, AB
 - HOW LONG?** You will be at the surgery center for approx 1.5 to 2 hrs
 - PARKING?** Free parking available upper lot for up to 3 hrs
 - FEES?** IF you chose a specialized lens or do not have Alberta HealthCare, you must prepay at our office the associated surgeon fees prior to surgery with Debit/VISA/Mastercard; Facility fees will be collected at LASIK MD (AHC pays for surgery with standard lens)
 - Somebody else must drive you home from surgery; taxi is acceptable if no other option and no sedation is given
- AFTER SURGERY Follow-Up appointments:** will be booked automatically at Dr. Crichton's office, although you may choose to arrange with your optometrist if preferred
 - 1 Day after surgery:**
 - 2-3weeks after surgery:**

ASCAN/CATARACT DISCUSSION HIGHLIGHTS
PLEASE LISTEN TO VIDEOS ON WEBSITE IF POSSIBLE:
www.glaucomacalgary.com

CATARACT SURGERY: 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 within 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 one range only (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 one range only (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. A. Crichton

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 _____ Date of Birth _____

Date of Surgery _____

Allergies _____

Approx. Date of Last Health Check-Up? _____

Name and Phone Number of Family Doctor? _____

(**Please book routine health exam if you have not seen doctor within past 6 months)

- 1) Do you take any medications? Yes No
a) **If YES, please attach pharmacy-generated list or have pharmacy fax list**
b) If you are on bloodthinners requiring bloodwork/INR please have done 1 wk prior to surgery
- 2) Have you ever been told you have/may have diabetes? Yes No
a) Any changes within the last 2 months? Yes No
b) Are your sugars well controlled? Yes No
c) Ave Blood Sugar reading (if known)? _____
- 3) Have you ever been told you have high blood pressure? Yes No
a) Any changes within the last 2 months? Yes No
b) Last Blood Pressure (if known)? _____/_____
- 4) Do you have any difficulties breathing? Yes No
a) Diagnosis? COPD ASTHMA SLEEP APNEA OTHER
b) Any changes within the last 2 months? Yes No
c) Do you require supplemental Oxygen? Yes No
- 5) Have you ever had or been told of heart problems? Yes No
a) Diagnosis? ATRIAL FIBRILLATION ANGINA CONGESTIVE HEART FAILURE
b) Any history of heart attack? If yes, WHEN? _____
c) Any history of heart surgery? If yes, WHEN? _____
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 or 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)

(date)

Cataract Surgery Drop Information

This is your surgery drop schedule. Do not stop any other drops you may have been prescribed previously (ie. for glaucoma). Allow 5 minutes between different types of drops. Drops used multiple times per day need to be spaced throughout the day. For your 2nd eye, you may use the same bottle of Durezol if it is within 6 weeks; start new bottles of Vigamox and Prolelsa

MEDICATIONS



BEFORE SURGERY

Two (2) days **before surgery**, begin instilling one (1) drop of **VIGAMOX (Moxifloxacin)** **three (3) times per day** and **PROLENSA** (1) time per day into the eye that is planned for surgery.

Morning of surgery, instill one drop of each
****Reminder:** Do not eat anything after midnight the night before surgery; drink clear fluids up to 3 hours prior to surgery.

AFTER SURGERY

WEEK 1

1 DAY AFTER surgery instill all three drops :
VIGAMOX(Moxifloxacin)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



PHONE: (403) 245-3730 **Dr. Andrew Crichton** FAX: (403) 245-1058
Eye Physician & Surgeon
 #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. *Do I continue to take my bloodthinner?*

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 after midnight 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. Check-in at Surgery Center Reception: you will need your current ID and healthcare card. You will 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. Anesthetist: 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. Surgery Room: 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. Recovery Room: The nurse will take you to a room to ensure you are stable and comfortable prior to allowing you to go home.

7. Are there restrictions after surgery?

- A. You should rest quietly the day of surgery.
- B. You may remove the eye patch the morning after surgery, discard the gauze but keep the clear shield. 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. Can I travel after surgery?

- 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 always 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.