



Standard, Advanced IOL, and LAL Pre-Operative Information

Dos

- Bring insurance cards, driver's license, sunglasses, eye drop(s) and your surgery bag.
- Take regular medications the morning of surgery with just a sip of water.
- If the patient takes quick acting insulin with meals for diabetes, it must be brought to surgery.
- Wear comfortable warm clothing to the surgery center; patient remains in street clothes
- Patient will need a known driver on surgery day (no public transportation or medical transports)

Don'ts

- No dairy products after midnight
- Nothing by mouth (including liquid) 8 hours prior to surgery.
- DO NOT bring valuables (i.e. jewelry)
- NO contact lenses beginning 2 days prior to surgery. (Take them out to start drops)
- NO face procedures at least one month prior to surgery such as laser treatments
- NO make-up (especially mascara)

Drop Information

(Shake Drops prior to use and space 1 minute apart)

Two Days Prior

Prolensa (Bromsite or Ketorolac)	Besivance (Moxifloxacin, Tobramycin or Polytrim)	Lotemax (Prednisolone or Durezol)
1 drop, once daily	1 drop, three times daily	1 drop, three times daily
OR		
Multi Drop		
1 drop, three times daily		

Morning of surgery - 1 drop of each

All drops are placed in the surgery bag and brought to the procedure, as well as all post-operative appointments.



Restrictions Post Cataract Surgery for At Least One Week

Standard and Advanced IOLs

- When bending at the waist, go slowly keep head up
- NO eye makeup
- NO vigorous or high impact exercise such as jogging. Walking is the only approved exercise.
- NO lifting over 20 pounds
- NO eye rubbing, use artificial tears for mild irritation
- Wear eye shield at bedtime and while napping
- Wear protective eyewear while outdoors
- Avoid getting soap in eyes while bathing
- No swimming pools, lakes, oceans, or hot tubs for two weeks

LALs

- Wear protective eyewear during all waking hours, especially while outdoors until 24 hours after last lock-in
- When bending at the waist, go slowly keep head up
- NO eye makeup
- NO vigorous or high impact exercise such as jogging. Walking is the only approved exercise.
- NO lifting over 20 pounds
- NO eye rubbing, use artificial tears for mild irritation
- Wear eye shield at bedtime and while napping
- Avoid getting soap in eyes while bathing
- No swimming pools, lakes, oceans, or hot tubs for two weeks

Blurry vision is normal and expected after surgery. Vision should improve daily. There may be some redness, itching, mild discomfort or bruising around the eye.

Any pain and/or extreme redness, swelling, or discharge should be reported immediately



Tips for Co-Managing Advanced IOLs

Below are some tips related to co-managing advanced IOLs following cataract surgery. This list is not all inclusive; please call with any questions

LALs		
<ul style="list-style-type: none"> • Generally distance vision or monovision target • Post-LASIK patients are good candidates as it avoids LASIK touch-up s/p IOL • Goal is to sharpen vision with IOL, then fine tune with UV light adjustment of implant curvature. • Patients will need to travel to Chesterfield 3-5 times for adjustments • The patients must wear UV blocking glasses outdoors until their final lock-in (2-4 month post-op) • Their vision will not be adjusted for 3 or more weeks after their second eye is completed 		
Advanced IOLs		
<ul style="list-style-type: none"> • Auto-refractors can be inaccurate because of the extended depth of focus. Manually refract your patients, as needed, pushing plus power to achieve an accurate end point • Patients may need reassurance regarding the fact that their visual system needs time to adjust to the new IOL, and that the range of vision may increase after the second eye is implanted and as after surgery. • Patients may be especially sensitive to posterior capsular opacity or residual refractive error. If suspected, please return the patient for evaluation. 		
PanOptix	Vivity	Symfony
<ul style="list-style-type: none"> • Trifocal lens offering a full range of vision • Corneal patients on night glare. Treatment can include tinted driving glasses and miotic agents 	<ul style="list-style-type: none"> • Extended depth of focus lens with a good intermediate target • Patients may need to use mild readers (+1.00 to +1.50) for fine print. Do not prescribe a full strength near add. 	<ul style="list-style-type: none"> • Extended depth of focus lens with a balance of distance and near • Mild corneal edema degrades the optics of this lens. Therefore, many patients will not have the “wow” factor on day one. Advise your patients that the vision will improve as the corneal edema decreases. • Patients may need to use mild readers (+1.00 to +1.50) for fine print. Do not prescribe a full strength near add.
Toric IOLs		
Toric IOLs are enhanced monofocal IOLs with a limited extended depth of focus. May still need reading spectacles.		