Outpatient

Cataract Surgery

Guide for Patients

of
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New Minas, NS
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Cataract Office:
678-4352

DO NOT THROW THIS BOOKLET AWAY

Please read this booklet as it contains important information and instructions about your surgery.

Please bring this booklet with you on the day of surgery.

Please keep this booklet until you are completely finished with ALL appointments for cataract treatment.
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Cataracts are the most common cause of poor vision in adults. Over 100,000 people undergo cataract surgery in Canada every year. Fortunately, there have been significant advances in the treatment of this condition and the majority of people with this problem can expect to regain most of their vision.

Anatomy of the Eye

In some ways the eye resembles a camera, receiving light from objects and focusing it onto the retina (equivalent to the film at the back of the camera) to produce a clear picture.

The cornea, lens and vitreous are normally clear structures that allow the light to enter the eye and reach the retina. The optic nerve conducts the image to the brain where it is interpreted.

What is a cataract?

A cataract is a clouding of the natural lens. This prevents the normal passage of light through the lens and reduces the ability of the eye to produce a sharp focus on the retina.

Causes of cataracts

Cataracts are a normal part of ageing. They may also result from injury to the eye. Certain diseases (such as diabetes) and drugs (such as steroids) may also cause cataracts.
**Effects of Cataracts**

Depending on the size and location of the cloudy areas in the lens, a person may or may not be aware that a cataract is developing. If the cataract is located on the outer edge of the lens, no change in vision may be noticed. If it is located near the centre of the lens, it usually interferes with clear sight.

As cataracts develop, there may be hazy, fuzzy and blurred vision. Double vision may also occur. The eyes are more sensitive to light and glare, making night driving more difficult. There may be a need to change the eyeglass prescription frequently.

**Misconceptions** - There are many misconceptions about cataracts.

Cataracts do not spread from one eye to the other, although they may develop in both eyes at the same time. A cataract is not a film visible on the outside of the eyes. Using the eye does not make a cataract worse. Cataracts are not related to cancer.

**Treatment**

When a cataract causes loss of sight that interferes with work or lifestyle, it is probably time to have it removed. The patient and ophthalmologist decide together when removal is necessary, according to individual needs.

Surgery is the only way to remove the cloudy lens. Eye drops, ointments, pills, special diets or eye exercises have not been proven to dissolve or reduce a cataract. **Cataracts are not removed with a laser**, although lasers may be required after surgery if the lens capsule becomes cloudy. Cataract surgery is highly successful, with well over 99% of patients regaining vision.

**It is important to understand that complications can occur and, as with any surgery, the result cannot be guaranteed.**
Cataract surgery is performed with the use of a surgical microscope. Microsurgery makes the operation safer and reduces healing time. Usually a topical anesthetic gel is administered to the eye. The patient remains awake throughout the procedure. Modern techniques aim to leave the thin, posterior shell of the lens (the posterior capsule) intact. Phacoemulsification reduces complications associated with older methods and most patients will not require sutures.

This technique requires the use of an ultrasound machine for removal of the central nucleus of the lens. The soft lens remnants are removed by gentle suction. Occasionally a larger incision with a number of fine nylon sutures will be necessary.

In most patients it will be possible to implant a plastic intraocular lens (IOL) at the time of surgery to take over the focusing power of the natural lens. The surgeon’s preferred IOL is the ‘Acrysof’ lens. It is soft and can be folded as it is placed in the eye. Once in the eye it resumes its normal shape. Frequently no suture is required when implanting the Acrysof lens. The District Administration via Middleton Hospital levies a charge for the Acrysof lens. This is due at the time of surgery.

Although many patients continue to wear glasses after surgery, either for distance vision, reading, or both, most patients are much less dependent upon spectacles after cataract surgery. Astigmatism present before surgery will generally continue unchanged after surgery and glasses will still be required for correction. Glasses are usually not prescribed until at least one month following surgery.
Pre-operative Appointments and Preparation:

After attending your initial consultation, it will generally be necessary to attend a technical appointment and a pre-operative assessment appointment at the surgeon’s office, prior to your surgery.

At the technical appointment a measurement of the curvature of the front of the eye and the length of the eye (IOL Master) will be used to determine the correct power of the intraocular lens to be implanted. A health questionnaire will be completed with the help of the technician. You will be given information on the lens implants available to you.

You will be examined by the surgeon 1-3 months before your surgery date at the pre-operative appointment. Details of the cataract surgery and potential complications will be discussed. Based on the examination at your initial visit, the measurements at technical assessment and a final examination made by the surgeon, a decision will be made by both you and the surgeon whether to undergo surgery. A consent form will need to be signed if surgery is to proceed.

Prior to leaving the office you will be given prescriptions. You will also be given a Questionnaire that will need to be completed and sent to the Soldier’s Memorial Hospital 1 month prior to your surgery.

Advise your Surgeon:

Non-steroidal anti-inflammatory agents such as ASA should be continued. If in doubt, ask your surgeon. Please advise the surgeon if you are taking blood thinners such as Heparin, or Warfarin (Coumadin).

If on the medication FLOMAX you must advise your surgeon. You may be required to discontinue Flomax for one month prior to surgery, and you must inform your family doctor of halting the medication, if this is the case.
Three (3) Days Before Surgery:

Two of the prescriptions (Vigamox and Voltaren) are to be started three (3) full days before the surgery.

Vigamox is to be used one drop four times a day.
   (Breakfast, lunch, dinner and bedtime)
Voltaren is to be used one drop four times a day.
   (Breakfast, lunch, dinner, and bedtime)

Continue to use the drops on the day of surgery prior to leaving for the hospital.

Two (2) Days Before Surgery:  *VERY IMPORTANT*

The Cataract office in New Minas must receive a call from you 2 business days before your surgery to confirm that you will be attending the appointment.

*Failure to do so will result in cancellation of the surgery.*

If your surgery is on a Tuesday you must call the cataract office on the previous Friday (in the morning) to confirm that you will be attending your surgery.

If your surgery is on a Thursday you must call the cataract office on the previous Tuesday (in the morning) to confirm that you will be attending your surgery.

CATARACT OFFICE: (902) 678-4352
Instructions for Day of Surgery:

- On the morning of surgery, take all your usual medications, including diabetic pills and Insulin (unless directed otherwise).
- **Use your eye drops before going to hospital.**
- Have a light breakfast or snack a few hours before surgery.
- Liquids are permitted.
- Do not wear make-up, nail polish, jewelry or contact lenses.
- Do not bring valuables or sums of money.
- Soldiers’ Memorial Hospital is a scent and smoke free institution. Please do not wear perfumes, aftershave, hairspray, etc.
- The hospital requires that you have someone available to drive, assist and stay with you after your surgery for 24 hours.

Items you **Must BRING WITH YOU** to the Hospital:

- All of your eye drops.
- Bring **all** of your regular prescription medications with you to the hospital, in the proper containers. This includes any emergency products such as Nitro-spray or “puffers” (inhalers) - even if you rarely use them.
- The fee for the intraocular lens implant for the hospital ($100 or $200). Cash, debit, credit card or cheque (made out to “Soldiers’ Memorial Hospital”) are accepted.
- Your sunglasses, distance glasses or bifocal glasses
- A card with the name and telephone number of the person who will drive and accompany you home.
- Your Nova Scotia Health Card and your Soldiers’ Memorial Hospital Card if you have one.
- A list of any allergies you have
- This booklet – *Outpatient Cataract Surgery Guide for Patients*
Where to Go on Day of Surgery:

Please arrive promptly to the
Outpatient Registration Desk – Level 2
at Soldiers’ Memorial Hospital

Day Surgery Telephone Number:
(902) 825-6160 Extension 376 or 386

If you are unable to keep your surgery date due to illness, etc., notify the surgeon’s office as soon as possible. If the office is closed, please contact the hospital.

What to Expect While at the Hospital:

- You will be in the hospital approximately 2 – 3 hours.
- The nurse will place drops in your eye.
- An intravenous needle will be inserted into your arm.
- A number of monitors will be attached to keep a check on your blood pressure, blood oxygen, and heart rhythm.
- After the surgery, you will be observed for a short time to make sure the initial effects of any medication given during the surgery have worn off, you will stay in a holding area with your companion and then you will be discharged.
- You must be accompanied by a responsible adult. Make arrangements to be driven home by private car or taxi if no other transportation is available for you.
Discharge Instructions: (IMPORTANT)

On the day of surgery the vision may be worse than prior to surgery. Upon leaving the hospital begin using the Genteal drop every 20 minutes (even during driving time) until bedtime. (A bottle of Genteal drops is provided to you by the Soldier’s Memorial Hospital in Middleton on the day of surgery.)

Arriving Home:

USE ONE DROP of each of the three drops (Vigamox, Voltaren, Prednisolone) every two hours until bedtime.

You are advised not to attempt to perform any task that requires skill, co-ordination, or judgment for 24 hours after the surgery. You must not drive a vehicle or operate machinery for 24 hours. Make arrangements for someone to be with you for 24 hours after the procedure.

Beginning the Day After Surgery:

Vigamox 1 drop four (4) times a day for 1 week. (Start counting the first day on the day after surgery). At the end of seven (7) full days stop.

Voltaren and Prednisolone:
1 drop four times (4) a day for the 1st week
1 drop three times (3) a day for the 2nd week
1 drop two times (2) a day for the 3rd week
1 drop once a day for the 4th week

Genteal Gel is to be used at night before going to bed for one week following surgery. Genteal Gel contains no active medication and can be used as necessary for irritation.
**How to Instill Drops:**

1. Wash your hands. Shake the eye drop bottle.
2. Lie with your head tilted back. Open both eyes and look up.
3. With one finger, draw the lower lid down and place one drop into the pocket made by pulling the lower lid down.
4. Close the eye gently and keep closed for one (1) minute.
5. With a tissue, gently remove excess drops from cheek.
6. Different types of eye drops should be instilled at least five (5) minutes apart.
7. There is no medication in the Genteal gel. It should be used for eye discomfort and instilled after drops. **Patients should use the gel at night time.** Pull down the lower lid and look up. Gently squeeze a drop from the tube.

**Reminders for After Surgery:**

* Take normal medications and normal eye drops. Take Tylenol as necessary for eye discomfort.

* Protect the eye with glasses. Tape the shield over the operated eye every night for the first three nights to avoid accidentally injuring your eye while you are asleep. Try to sleep on your back or on the opposite side of the operation.

* Use a clean face cloth moistened with tap water to clean your eyelid margins regularly. Do not exert any undue pressure, especially on the upper lid.

* You may resume most of your normal activities immediately including light physical activity. Avoid heavy (5kg +) lifting, bending (squat instead), sudden jarring motions (golf, aerobics) and activities which may injure the eye (mowing, grinding etc.). Do not swim.

**DO NOT DRIVE UNTIL APPROVED BY SURGEON.**
Follow-up visits will be required at the Doctor’s office:

* One day following surgery.
* One week following surgery.
* One month following surgery.

You must have a driver for each of these appointments unless otherwise instructed.

* Additional visits may be required.

Report any of the following to your eye surgeon:

1. Severe pain, swelling or unusual discharge.
2. A sudden decrease in vision.

Your surgeon may be contacted at the office or through the Valley Regional Hospital. Let the switchboard know that you are a recent surgical patient.
Non-insured Services Associated with Cataract Surgery

Fees levied by this office:

Technical Appointment:

IOL Master  The IOL Master uses a laser to perform precise measurements of your eyes. Having this test done will enable the doctor to place the best possible intraocular lens in the eye during surgery. This test is performed in the doctor’s office. Currently, the fee for this test is $75 per eye and is and payable at the visit.

Cell Count  The specular microscope counts and analyses the endothelial cells on the back of the cornea inside the eye. Some cell loss is unavoidable during surgery. Patients with a low cell count or abnormal cells are at a higher risk of post operative corneal complications.

Pre-operative Appointment:

PAM  The Potential Acuity Meter estimates your potential vision after the cataract is removed.

Other tests:

Topography  The corneal topographer provides a map of the surface contour of the eye. Astigmatic or irregular corneas can lead to reduced vision after surgery.

Pachymetry  The pachymeter measures the thickness of the cornea.

While these tests are useful for virtually all cataract patients, certain situations (large cataracts in elderly patients) or eye conditions (macular degeneration, diabetes, astigmatism and others) make some of these tests even more valuable. The technician or the surgeon will discuss the tests prior to surgery.

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No medically necessary test will be withheld for financial reasons.

**Other fees associated with cataract surgery:**

**Eye Drops**  Usually partially covered by Pharmacare or private plans.

**IOL**  Soldiers’ Memorial Hospital charges this fee for the intraocular lens implant.

**Spectacles**  Your glasses prescription will change after your cataract surgery which will require you to have a new lens in your glasses. The fee will vary depending on your prescription and the frames that you choose.

For patients that have private health insurance or DVA coverage, it is your responsibility to arrange for reimbursement from your own provider. Receipts will be given for all fees.

For patients receiving assistance from Social Services or Native Affairs, please note that it is strictly the responsibility of the patient to make arrangements with your case worker regarding any financial assistance.
WINTER SURGERY CANCELLATION POLICY

As patients are well aware, we live in a region with challenging winter weather. You may be booked for surgery in the winter months— it is not possible for everyone to have surgery in the summer. Your allotted office appointment time is important, so please do not spend valuable doctor/patient time discussing winter driving concerns with the surgeon at your pre-surgery appointments. The cataract office is available for discussing concerns such as these that you may have. Please remember we cannot control the weather.

Please note the office policies regarding missed surgeries:

Once you have confirmed your cataract surgery date (2 business days prior to surgery) you are expected to make every effort to attend your scheduled surgery. Patients who cancel at the last minute or who do not show up on the day of surgery cannot be guaranteed to be re-booked for surgery and may be billed for the missed surgical appointment. The number of patients receiving surgery on a weekly basis is dictated by the hospital, not by this office. The volume of people waiting for surgery simply does not allow for surgery spots to go to waste.

In light of this, please understand that if you have been scheduled for surgery in the winter, you are expected to make plans well in advance for what action you will take to attend your surgery in the case of bad weather.

As an alternative to cancelling surgery, if poor weather conditions are forecast, you should consider travelling to and staying in the area of the hospital the day before surgery. To reserve a room, feel free to contact The Fundy Spray Motel at (902) 825-3424 or Just Dropping In Bed and Breakfast at (902) 825-3062.

If you foresee it being absolutely not possible to travel in rough weather, please contact the Cataract office (678-4352) well before the winter months to arrange for a later surgery date.

Thank you for your cooperation in this matter.