

Eduardo Besser, M.D.
Surgery Information Package

IOL Calculations

Date of Appointment: ___ / ___ / ___ **Time:** _____

In preparation for your cataract surgery, you will need to return to the office in order to take precise measurements of your eye. These help determine the exact power of the intraocular lens that will be used to replace the natural lens.

IF YOU WEAR CONTACT LENSES, IT IS IMPERATIVE THAT YOU DISCONTINUE THEM:

HARD CONTACT LENSES - Must be discontinued **3 WEEKS** before this appointment

SOFT CONTACT LENSES - Must be discontinued **2 WEEKS** before this appointment

Lenses must also be discontinued 2 weeks before the date of your surgery

MEDICATIONS:

Start Lubricating Eye Drops 4 times a day for 1 week before your A-scan appointment.

If you take FLOMAX, make sure to discuss this with your surgeon during this appointment.

If you are on ASPIRIN or other blood thinners, you can usually continue these medications, but if you have any questions, you may discuss them with your doctor during this visit.

Date of Surgery: ____/____/____

Time: _____

Dear Patient:

Your physician has recommended eye surgery. The surgeon and staff want you to know that allowing us to provide you with the highest quality care is a privilege. We want you to feel as comfortable as possible before, during and after the surgery. To help you prepare for your surgery, please review the information below. If you still have questions or concerns, please call: (310) 838-0202.

Before the surgery:

1. Schedule an appointment with your primary care physician as soon as possible. For your safety, you should be evaluated for medical clearance approximately 2 weeks prior to the date of surgery.
2. Please provide your primary care physician the enclosed letter and History and Physical Evaluation Form for completion. **Important: Please ensure that our office receives all the required forms and test results from your primary care physician 3 days prior to your scheduled surgery or your surgery will be cancelled.**
3. If you are a diabetic, please ask your primary medical doctor for specific instructions on how to take your diabetic pills or insulin the night prior and day of surgery.
4. Continue to use your current eye medications (including the morning on the day of your surgery), unless instructed otherwise.
5. All other medications such as blood pressure and heart medications should be taken with a small sip of water if these medications are usually taken in the morning. However, ask your primary care physician if you should take any medication that is a diuretic or "water pill" such as hydrochlorothiazide (HCTZ) or Lasix (Furosemide) or any medication that may be combined with these medications.
6. If you currently take aspirin, Plavix, coumadin, ibuprofen or any other nonsteroidal anti inflammatory (NSAID) medication or blood thinners, please contact your primary medical doctor to determine if you should continue taking these medications. These medications decrease the clotting ability of the blood and therefore must be stopped prior to many surgical procedures. If you are having routine cataract surgery, it is often not necessary to discontinue these medications. Please discuss this with your eye surgeon prior to the procedure.
7. If you have ever used FLOMAX, please inform your eye surgeon. You should discontinue it's use prior to your eye surgery.
8. **Do not eat or drink anything after midnight of the night before your procedure.** This includes no gum, candy or mints. A small sip of water is only allowed for those patients taking morning medications. Please brush your teeth and rinse your mouth but do not swallow.
9. Bathing: Please bathe or shower before surgery. You should wash your hair. No facial make-up or eye make-up should be worn the day of surgery.
10. You are required to have an adult (someone over 18 years old) to arrive with you and then take you home. Public transportation is not an acceptable form of transportation home from the surgical center. If someone is not available to stay at the center during the surgical procedure, a ride by a friend or relative will be acceptable. Please come to the center with the name and telephone number(s) of the individual who will escort you home.

11. Please dress in loose comfortable clothing. Please wear a short sleeve shirt or tee shirt as this shirt may be left on during most procedures. Button down, pullover or zip-up is acceptable.
12. Do not bring valuables and please remove all jewelry prior to arrival. We do not have any way of securing personal valuables while you are in surgery.
13. Please bring all medications currently taken with you on the day of surgery for anesthesia to review; this includes any eye drops currently used. Even those medications taken the morning of the procedure should be brought along for review.
14. Appliances: On the day of surgery, you may wear your dentures and hearing aids.
15. Remember to bring insurance cards and any other important documents, such as power of attorney, that you may need or were asked to bring. Also, if any paperwork was given to you to fill out prior to your arrival, please have it filled out and with you.
16. If you wear eye glasses, contact lenses, hearing aids or dentures; please bring a personal carrying case to hold the item(s) during surgery.
17. If you were previously informed by your physician's office or Surgery Center about a co-pay due for services based on your health insurance plan or office fees, please be prepared to pay that amount prior to the surgery. Please be aware that the facility is a separate entity. Payments or questions should be directed directly to the facility and be prepared for payments due upon arrival at the Surgery Center.
18. If you become ill prior to your surgery (cold, fever, upset stomach) or need to cancel your surgery, please call the physician who scheduled your surgery.

After the surgery:

1. You will be taken to the Post Anesthesia Care Unit (recovery) where you will receive special care while recovering from anesthesia. Your family members or companion will be notified that you are in the recovery area.
2. The registered nurse taking care of you will notify your family members/companion when they may join you in the recovery area.
3. When you have recovered and are in stable conditions, you will be discharged home.
4. In the unlikely event that surgical or anesthetic procedures are unexpectedly prolonged or complicated, your doctor may arrange for regular hospital admission overnight.
5. Expect to be drowsy the remainder of the day.
6. Discharge instructions will be provided and any questions answered.
7. After discharge, you will be taken to the exit in a wheelchair.
8. Do not drive a car, sign legal documents, operate machinery, drink alcoholic beverages or use drugs not authorized by your surgery team for at least 24 hours after surgery.
9. When you arrive home, please take it easy. Let your family members or friends wait on you. Make sure a responsible adult stays the night.
10. You will be scheduled to see your surgeon later on that day or the day after surgery at the doctors office (not at the surgery center).
11. If you experience severe pain, loss of vision, heavy bleeding or a temperature greater than 101 degrees Fahrenheit, call your surgeon or immediately go to the emergency room.
12. You will not be able to drive or return to work on the day of surgery.

Eduardo Besser, M.D.

Postoperative Day 1 Appointment: ____ / ____ / ____ at ____ : ____

Postoperative Patient Instructions Following Cataract Surgery

It is extremely important for a successful recovery that you carefully follow your doctor's instructions after your surgery. Do not hesitate to call the office should any questions arise. If you have a medical emergency, call 911. For eye related emergencies call our office at (310) 838-0202.

YOU MUST BE EVALUATED BY YOUR SURGEON WITHIN 24 HOURS AFTER YOUR SURGERY. YOUR POSTOPERATIVE APPOINTMENT CANNOT BE MISSED!!!

EYE CARE ON THE DAY OF SURGERY:

- 1) Continue all other oral or eye medications you were taking before your surgery unless otherwise instructed by your physician.
- 2) Continue using any eye medications you were using in the NON-operated eye.

If there is NO patch on the operated eye (you will be asked to wear a shield):

- 1) Wash your hands before putting in the drops. Remove the eye shield. Avoid touching your eye with the tip of the bottle. Wait 5 minutes or more between each drop for adequate medication absorption.
- 2) Use also 1 drop of each of the following medications on the operated eye 4 times daily.
 - a. Ofloxacin (or the equivalents: Vigamox, Zymar, Ciprofloxacin, Zymaxid)
 - b. Ketorolac (or the equivalents: Acular LS, Nevanac, Xibrom, Acuvail)
 - c. Prednisolone Acetate (Pred Forte, Omipred, Durezol or Econopred) every. Please shake the bottle well before use.
- 3) **DO NOT RUB YOUR EYE.**
- 4) For eye protection, wear the eye shield held in place with tape, over the operated eye while you sleep for the next 2 weeks.
- 5) Do not wear any make up.
- 6) You may shower. Take care to avoid soap or shampoo in your eyes.
- 7) You may take Tylenol (acetaminophen) for pain if needed.
- 8) Do not get the eye wet.

If there is a patch on your operated eye, **DO NOT** remove the patch. The patch will be removed in the office. You may shower but avoid wetting the eye patch.

- 1) Please bring your eye medications with you to your follow up appointment.
- 2) Starting the day after surgery, you may use all three of the eye drops four times daily. Once again, please allow 5 minutes or more between use of drops and be certain to shake the Prednisolone Acetate.
- 3) You will be evaluated one week following your surgery, in most cases you may stop the antibiotic (Ofloxacin) after that visit. You will need to continue the other two medications three times daily for one month.

ACTIVITIES

- 1) You may resume your pre-operative diet as tolerated.
- 2) When you shower, avoid getting water, shampoo or soap in your eyes.
- 3) Remember to avoid activities that might subject the eye to injury or infection.
- 4) Do not go swimming for at least 2 weeks.
- 5) You may do most everyday activities, however avoid anything strenuous and do not lift anything weighing more than 15 pounds for 1 week. Please use common sense.
- 6) It is impossible to list and advise regarding every possible activity. You must carefully evaluate your activities using your own common sense. If in doubt about activities you can or cannot do, please speak with your doctor prior to engaging in these.

WHAT TO EXPECT AFTER EYE SURGERY

- 1) Your pupil may be irregular, large or small.
- 2) More tearing than usual.
- 3) A sandy, foreign body sensation or burning.
- 4) Redness of the eye
- 5) Double or blurry vision for a few days following surgery.
- 6) Dull ache in the eye or over the brow.

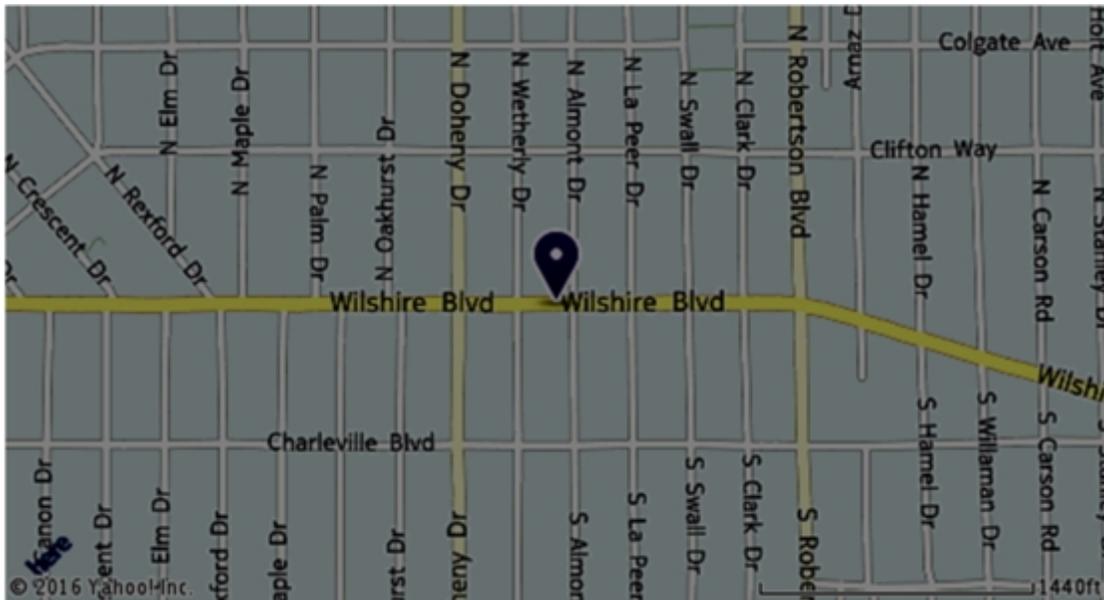
IF YOU EXPERIENCE ANY OF THE FOLLOWING PLEASE CALL IMMEDIATELY (310 838-0202)

- 1) Severe eye pain (greater than merely discomfort).
- 2) Sudden loss of vision or worsening of vision.
- 3) Shower of floating spots.
- 4) Flashes of light in one eye.
- 5) Area of blacked out vision.
- 6) Severe redness with discharge.

Your surgery will be performed at:



**9001 Wilshire Boulevard, #100
Beverly Hills, Ca 90211
(310) 275-2339**



If you have any questions about your arrival time or directions, please call the surgery center at (310) 275-2339 the day before your surgery.

**PLEASE REMEMBER NOT TO EAT OR DRINK ANYTHING ON THE
DAY OF YOUR SURGERY.**