

Name:

Date of Birth:

PATIENT INSTRUCTIONS AFTER CATARACT SURGERY

WHEN YOU GET HOME FROM SURGERY

- EYE PATCH:** You will leave the surgery center with an eye patch over the operated eye. DO NOT remove this eye patch. We will remove it for you at your next day visit.
- EYE DROPS:** DO NOT use your eye drops on this day. You will resume them the next day, after the patch is removed.
- DIET:** You may resume your normal diet once you get home.
- ACTIVITY:** You may need assistance for several hours after the surgery. If you live alone, we recommend that you have someone stay with you or check on you frequently. Rest as much as possible on this day.
- MEDICATIONS:** When the anesthesia wears off, you may feel pain or discomfort in the operated eye. You were given a special tablet to take by mouth after your surgery. This tablet decreases the pressure inside the eye to make it feel more comfortable. This tablet might cause tingling feeling in the fingers. This feeling is temporary and goes away the next day.

If needed, you can take Tylenol tablets, as directed on the label.

Call us at (310) 638-9391 if the pain is very severe or if you have nausea and vomiting.

YOUR NEXT DAY VISIT

You have been scheduled for a post-operative follow-up visit the day after your surgery at:

- 3510 Martin Luther King Jr. Blvd., Lynwood, CA 90262 Tel: (310) 638-9391 **TIME:** _____
- 8409 Florence Ave., Suite 100, Downey, CA 90240 Tel: (562) 862-4444
- 623 W. La Habra Blvd., La Habra, CA 90631 Tel: (562) 690-8887
- 7957 Painter Ave., Suite 203, Whittier, CA 90602 Tel: (562) 464-0590

PLEASE BRING YOUR EYE DROPS WITH YOU TO THE APPOINTMENT:

These are the same three bottles that you used before your surgery. We will check them, instruct you on how to use them, and answer any questions that you have.

YOUR EYE PATCH WILL BE REMOVED ON THIS DAY:

After the eye patch is removed, please wear your prescription eye glasses or plain sunglasses to protect your eye and decrease any glare.

AFTER YOUR SURGERY

EYE DROPS: These are the same three bottles that you used before your surgery.

Vigamox eye drops (antibiotic eye drops). It may be substituted with **Zymar**. Or generic **Ciloxan**.
Durezol eye drops (steroid eye drops). It may be substituted for **Pred Forte 1%**, or generic **Prednisolone 1%**.
Nevanac eye drops (anti-inflammatory eye drops). It may be substituted for **generic Acular LS**.

Resume all the 3 prescribed eye drops after your patch is removed the next day.
Shake the bottles really well before you use them.

Place one drop from each of the three bottles in the operated eye 3 times a day. It doesn't matter which eye drop you put in first.

Use the eye drops until all three bottles are empty. The 2 small bottles will last one to two weeks, while the third bottle might last for 3 to 4 weeks. No refills are usually needed.

EYE SHIELD: For your safety, you will need to wear the eye shield while taking a nap or sleeping at bedtime, for one week. There is no need to place an eye patch under the shield.

ACTIVITY: No lifting, exercising, or vigorous activities for one week.
You may resume sex one week after your surgery.
You may resume ALL normal activities after one week.
Please check with your doctor if you are in doubt about what you can do.

MEDICATIONS: You may resume taking all prescribed and over the counter medications as soon as you get home from the Surgery Center, the same way as you were doing before the surgery.

SHOWERS: Aim the water below your neck to avoid soapy water in the operated eye.
Tub baths are also permitted.

HEALING: It takes the eye approximately 4-6 weeks to heal.
During this time, it is common for the eye to tear, feel strained, or for your vision to fluctuate.
You will be prescribed new eye glasses 4 to 6 weeks after the surgery, when the eye is completely healed.

QUESTIONS: Please call your office if you have a problem or if you need additional information:

Lynwood office: (310) 638-9391

Downey office: (562) 862-4444

La Habra office: (562) 690-8887

Whittier office: (562) 464-0590

I have read and been offered a copy of these instructions:

<Signature Pending on Close of document>

Patient's Signature (or person authorized to sign for patient)

Date

Witness

Date