

Before Your Cataract Surgery: PRE-OP INSTRUCTIONS

SURGERY DATE: ___/___/___

WHAT YOU WILL NEED TO DO BEFORE YOUR SURGERY

BEFORE YOUR SURGERY

1. Contact your primary care doctor 4 weeks prior to your surgery date to make an appointment to be cleared for surgery. You need to bring the surgical clearance form from our office for your primary care doctor to fill out. If we do not receive a surgical clearance from your Primary care physician your surgery will be canceled and rescheduled.
2. Arrange to have transportation to and from your place of surgery.
 - a. Your ride will need to wait 2-3 hrs. at the surgery center.
3. Expect to here from the surgery center one to two days prior to your surgery.
 - a. Our Lady of the Lake Ponchartrain Surgery Center: 985-234-9700
 - b. Sterling Surgical Center: 985-690-8200
 - c. Eyecare Associates Surgery Center: 504-455-4046
 - d. Oschner Outpatient Surgery Suite: 985-646-4466
4. If you are on **FLOMAX**, **STOP** it 2 WEEKS prior to surgery.

THE DAY BEFORE YOUR SURGERY: ___/___/___

1. Begin your using your eye drops! (See Medication Instructions)
2. Do not eat or drink anything after midnight the day before your surgery.
 - a. Eating after midnight can result in the cancellation of your surgery or unnecessary delays.
 - b. If you are having surgery in the afternoon you may eat a light breakfast (toast and juice; no coffee) the morning of your surgery before 7am.

THE MORNING OF YOUR SURGERY

1. You may take your daily medications with a small amount of water.
 - a. Avoid taking medications that require a full stomach till after your surgery.
2. If you are **Diabetic please DO NOT TAKE YOUR DIABETIC MEDICATION the day of surgery.**
3. Do not wear any make up the day of surgery
4. Wear comfortable shoes and clothing
5. Remember to bring all of your drops with you to the Surgery Center and your postoperative visits.

AFTER YOUR SURGERY

1. Continue your Eye Drops (See Medication Instructions)
2. Follow any instructions given by the surgery center.
3. Go to your **DAY 1 Post Operative Appointment:** ___/___/___
10-12 DAY Post Operative Appointment: ___/___/___

Surgery Date _____ Eye _____ Start your drops on _____

*****REMEMBER TO WAIT 2-5 MINUTES BETWEEN EACH DROP*****

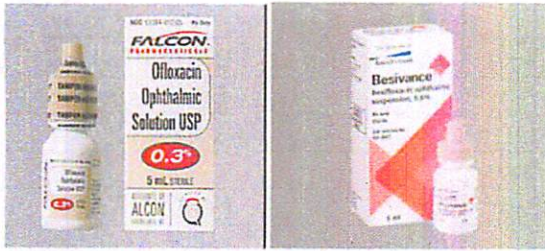
| | | |
|---------------|----------------------|----------------------|
| | | 1 day before surgery |
| 4 times a day | Ofloxacin | ○ ○ ○ ○ |
| 1 time a day | Prolensa | ○ |
| 3 times a day | Durezol/Prednisolone | ○ ○ ○ |

| | 1 st week | Surgery Day | Day 2 | Day 3 | Day 4 | Day 5 | Day 6 | Day 7 |
|----------|--------------------------|-------------|------------|------------|------------|------------|------------|------------|
| 4x a day | Ofloxacin | ○ ○ ○ ○ | ○ ○ ○ ○ | ○ ○ ○ ○ | ○ ○ ○ ○ | ○ ○ ○ ○ | ○ ○ ○ ○ | ○ ○ ○ ○ |
| 1x a day | Prolensa | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| 3x a day | Durezol/ Prednisolone | ○ ○ ○ | ○ ○ ○ | ○ ○ ○ | ○ ○ ○ | ○ ○ ○ | ○ ○ ○ | ○ ○ ○ |

| | 2 nd week | Day 1 | Day 2 | Day 3 | Day 4 | Day 5 | Day 6 | Day 7 |
|----------|--------------------------|----------|----------|----------|----------|----------|----------|----------|
| 1x a day | Prolensa | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| 3x a day | Durezol/ Prednisolone | ○ ○ ○ | ○ ○ ○ | ○ ○ ○ | ○ ○ ○ | ○ ○ ○ | ○ ○ ○ | ○ ○ ○ |

| | 3 rd week | Day 1 | Day 2 | Day 3 | Day 4 | Day 5 | Day 6 | Day 7 |
|----------|--------------------------|-------|-------|-------|-------|-------|-------|-------|
| 1x a day | Prolensa | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| 2x a day | Durezol/ Prednisolone | ○ ○ | ○ ○ | ○ ○ | ○ ○ | ○ ○ | ○ ○ | ○ ○ |

| | 4 th week | Day 1 | Day 2 | Day 3 | Day 4 | Day 5 | Day 6 | Day 7 |
|----------|--------------------------|-------|-------|-------|-------|-------|-------|-------|
| 1x a day | Prolensa | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| 1x a day | Durezol/ Prednisolone | ○ | ○ | ○ | ○ | ○ | ○ | ○ |



Ofloxacin will be used:
 4 times a day the day before surgery
 4 times a day for the first week after surgery
 Then Stop



Durezol will be used:
 3 times a day the before surgery.
 3 times a day the first 2 weeks after surgery
 2 times a day for week 3 after surgery
 1 times a day for week 4 after surgery
 Then stop



ProleNSA will be used:
 1 time a day the day before surgery
 1 time a day for 4 weeks following surgery
 Then stop