POST-CATARACT SURGERY INSTRUCTIONS

ATLEE GLEATON EYE CARE

207-622-3185

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<u>Day of Surgery</u>: Take it easy. Take all of your regular medications, **including any eye drops**, as directed. This includes any drops you are taking for glaucoma or dry eye unless you have been instructed otherwise. Resume your post-surgery eye drops in

Macinfacacia subsection bases of 50° Construction the eye that had surgery according to the following schedule. Please space drops 15 minutes apart. You may use the drops in any order.

Moxifloxacin: Use one drop around 3 pm and again before going to sleep.

<u>Pred-Brom</u>: Shake well before use. Place one drop in the eye around 3 pm and again before bedtime.

You may watch TV and read if you wish. Resume your normal diet. Do not drive or operate any heavy machinery on the day of surgery. Do not strain to lift (nothing over 20 pounds). Do not rub your eye. You may lightly dab the eye with a tissue if needed. Keep the protective eye shield in place overnight. It may be removed in the morning. You may wear it at night for the next week if you feel more comfortable doing so, but use is optional after the first night. You may wear your glasses if you choose. Some patients find they are light sensitive after surgery and you may wish to wear a pair of sunglasses outdoors.

Take 1-2 Tylenol tablets every 4-6 hours as needed for mild discomfort. Blurry vision, double vision, tearing and a sandy feeling in the eye are not unusual in the first 24 hours

after cataract surgery. Close your eyes and rest them if needed. You may also use Preservative Free Artificial Tears, available over the counter, as needed for minor irritation. Call the office if you have serious discomfort.

For the sake of safety, have someone stay with you the day of surgery and overnight. The anesthetics you have been given are short acting, but some patients are very groggy for hours afterward. Some patients are unsteady on their feet or are slightly confused.

The day after surgery: Remove the eye shield in the morning.



Use a lid wipe to remove any crusting from your lashes. If you have discharge, use a warm washcloth placed over the eye for 30 seconds before using the lid scrub. Return to the office for your check with the doctor as scheduled. Please bring your drops with you to your appointment. Bring your glasses along if you would like to have the

lens removed from your glasses by our opticians.

Begin your drops after you have used your lid scrub. Space all drops 15 minutes apart. You may use the drops in any order. Do not forget to also use any other eyedrops that have been prescribed for you, such as glaucoma or dry eye medications.



<u>Moxifloxacin</u>: Use one drop three (3) times a day about 8 hours apart for the next six (6) days and STOP use after the first week.

<u>Pred-brom</u>: Shake well before use. Use the drop two (2) times a day. You will continue this drop twice daily for the first two weeks after surgery.

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<u>During the first and second weeks</u>: Avoid getting soap in your eye. Avoid creams, lotions and make-up around the eye that had surgery. You may shower or bathe but avoid immersing the eye in water. Avoid rubbing the eye. Use a tissue or washcloth to gently remove tears or any discharge. Use moderation in your activities: walking, running and golf are fine. Do not lift anything over 20 pounds, swim or engage in contact sports, including tennis and racquetball.

Use the eye drops as directed and return to the office for your second visit as scheduled.

<u>During the third to sixth weeks</u>: Make-up is now okay to use. You may now get the eye wet and you may swim. Avoid rubbing the eye. You may resume all regular activities as tolerated. Return to the office about four weeks after surgery for a dilated eye examination and a glasses prescription check.

Continue the Pred-brom drops once a day until the bottle is empty. Shake well before use.

Call our office at:

(207) 622-3185

if you have increased redness or discharge, pain unrelieved by Tylenol, decreasing vision, or flashing lights in your peripheral vision.