

**HOME CARE INSTRUCTIONS FOLLOWING
EYE SURGERY**

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Date: _____

ACTIVITY

1. Normal daily activities may be done but no heavy lifting or bending.
2. Keep head in _____ position.

SURGICAL SITE CARE

1. Keep eye shield on and patch until evaluated by your doctor tomorrow.
2. Use drugs as labeled in operated eye after the first post-op visit.
3. Sunglasses may be worn either indoors or outdoors if bright lights bother you.
4. Bring the eye kit to eye clinic tomorrow.

COMFORT

1. You may need to use prescription pain medication regularly at first and then only as needed. If pain medication does not keep you comfortable, contact your doctor. If nausea occurs, take food in ½ hour prior to taking medication. **If nausea persists or rash occurs, STOP** taking medication and call your doctor.
2. You may use Tylenol, two tablets orally every four hours for milder discomfort.

MEDICATION

1. New Medications:

2. Last dose of pain medication:

DIET

Some of the sedative/anesthetic medication you received today may make you nauseated. Begin with clear liquids and then progress to solid foods as your stomach tolerates them. If you become nauseated, tea or carbonated beverages are helpful. If **vomiting** persists, call your doctor.

SAFETY

1. You can expect to feel dizzy, weak and drowsy for as long as:
 - 24 hours after receiving a general anesthetic.
 - 12 hours after receiving sedation.
 - While taking prescription pain medication.
2. Please follow these instructions for that time:
 - a. **DO NOT** drive a car or operate machinery. Your reflexes and coordination are not up to normal. Have standby assistance on stairways. Children should not ride bicycles or ride on toys.
 - b. No alcoholic beverages today.
 - c. Postpone signing any important papers or making any important decisions.
3. Because of the effects of anesthesia/sedation, we recommend that you have someone stay with you for 12-24 hours or overnight following your procedure.





Wausau, WI

715.847.2121 ~ 800.283.2881

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WHEN TO CALL

If any of the following symptoms occur: SEVERE EYE PAIN OR HEADACHE UNRELIEVED BY TYLENOL, FEVER (101° OR ABOVE), PERSISTENT NAUSEA AND VOMITING, RASH OR ANY CONCERN ABOUT YOUR RECOVERY.

WHO TO CALL

Eye Clinic Someone is available 24 hours a day to assist you.
Phone: 715.845.8201 ~ 800.472.0033

Aspirus Day Surgery Plus
6:00 am - 7:00 pm, Monday-Friday
Phone: 715.847.2907

RETURN APPOINTMENT

DR:

Date/Time:

A nurse will attempt to call you in the next few days to discuss your recovery and any questions or concerns you may have. If you have a question or concern before you hear from us, please don't hesitate to call. In case of an emergency, please go to your nearest emergency facility.

I have discussed the above information with a nurse and my questions have been answered to my satisfaction.

Patient or Responsible Party Signature

Date/Time

RN Signature

Date/Time