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Informed Consent for Cataract Surgical Procedure And/Or Implantation of Intraocular Lens

INTRODUCTION

This information is given to you so that you can make an informed decision about having eye surgery. Take as much time as you wish to make your decision about signing this informed consent. You have the right to ask any questions about any procedure before agreeing to have the operation.

Except for unusual problems, a cataract operation is indicated only when you cannot function adequately due to poor sight produced by the cataract. Please remember that the natural lens, with a slight cataract, may not be perfect but has some distinct advantages over any man-made lens.

After your doctor has told you that you have a cataract, only you and your doctor can determine if or when you should have a cataract operation. This important decision should be based on your own vision needs and medical considerations, unless you have an unusual cataract that may need immediate surgery.

ALTERNATE TREATMENTS

You may decide not to have a cataract operation at all. However, should you decide to have an operation, you should understand that modern cataract surgery includes the implantation of an intraocular lens.

1. <u>Intraocular lens</u> - an intraocular lens is a small plastic/silicon artificial lens with plastic supports which is surgically placed inside your eye. The intraocular lens is designed to remain in your eye permanently. The UV absorbing material absorbs UV light in a similar fashion to the natural lens that is being removed. With the intraocular lens, there appears to be no change in the size of objects seen. Conventional eyeglasses (not cataract spectacles) are usually needed in addition to an intraocular lens to give you the best vision possible, unless you choose one of our custom lens implants (see below).

In rare circumstances, an intraocular lens may not be appropriate. In these cases, there are two alternative methods of correcting your vision:

2. <u>Spectacles (glasses)</u> – cataract spectacles are usually thicker and heavier than regular eyeglasses. Cataract spectacles increase the size of objects by about 25 %. Clear vision is obtained only through the central part of cataract spectacles. This means you must learn to turn your head to see clearly on either side. Cataract spectacles usually cannot be used if a cataract is only in one eye (and the other is normal) because the spectacles may cause double vision.

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3. <u>Contact lens</u> – a hard or soft contact lens increases the size of objects only about 8%. Handling of a contact lens can be difficult for some individuals. Most lenses must be inserted and removed daily and not everyone can tolerate contact lenses. For near tasks, eyeglasses (not cataract spectacles) may be required in addition to contact lenses.

In giving your permission for a cataract extraction and/or for the implantation of an intraocular lens in your eye, it is very important that you understand the following information:

- 1. Cataract surgery in essence is the removal of the natural lens of the eye utilizing a surgical technique. The natural lens of the eye must be removed in order for an intraocular lens to be implanted.
- 2. If an intraocular lens is implanted, it is done utilizing a surgical procedure. It is intended that the small plastic/silicon lens with the plastic supports remain in your eye permanently.
- 3. The results of the cataract operation cannot be guaranteed in any case.
- 4. At the time of surgery, your doctor may decide not to implant an intraocular lens in your eye even though you may have given prior permission to do so.
- 5. Complications of surgery to remove the cataract include the following:
 Although rare, as a result of the surgery, it is possible that your vision may be made worse. In some cases, complications may occur weeks, months or even years later. Complications may include hemorrhage (bleeding), drooping of the upper lid, loss of corneal clarity, infection, detachment of the retina, glaucoma, and/or double vision. These and other complications may occur whether or not an intraocular lens is implanted.

6. Specific Complications Of The Lens Implantations:

Insertion of an intraocular lens may induce complications that otherwise would not occur. In some cases, complications may develop during surgery, days, weeks, months or even years later. Complications may include loss of corneal clarity, infections, uveitis, iris atrophy, glaucoma, bleeding in the eye, inability to dilate the pupil, discoloration of the lens and retinal detachment.

7. At some future time, the lens implanted in your eye may have to be repositioned or removed surgically (if medically necessary).

8. Complications Of Surgery In General:

As with all types of surgery, there is the possibility of other complications due to anesthesia, drug reactions or other factors that may involve other parts of your body, including a possibility of brain damage or even death. Since it is impossible to state every complication that may occur as a result of surgery, the list of complications included in this form is incomplete.

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- 9. Following cataract surgery with implantation of an intraocular lens, a prescription for spectacles or contact lenses is usually necessary. The prescription will include a spectacle or contact lens correction for your near vision and usually for your distance vision. In some cases, a distance correction will not be necessary but we cannot predict nor guarantee, in any fashion, that you will not need glasses (for near or distance vision) following cataract surgery. If you have decided to have one of our premium lenses, your dependence on glasses will be greatly reduced but may not be completely eliminated.
- 10. Following cataract surgery with implantation of an intraocular lens approximately 50% of all patients experience a clouding of the posterior capsule (the membrane inside the eye that holds the intraocular lens in place). These clouding results in a decrease in vision and can occur within months or years after the cataract surgery. This is a naturally occurring condition in some patients and not the result of the surgery, the post-op care or anything done or not done by the patient or the doctor. This condition is resolved by the use of a YAG laser in a painless procedure performed on an outpatient basis. This condition and treatment is not part of, or included with, the cataract surgery but is easily remedied with a short laser procedure. Should you experience a decrease in vision following your cataract surgery, please consult your doctor.
- 11. Following cataract surgery with implantation of an intraocular lens several examinations will be necessary to monitor the health of your eye and the healing process. We may suggest to patients that they return to their optometrist at some point during their process for appropriate post-operative examinations. We are fully confident in the post-operative care delivered by optometrists affiliated with our office and believe this to be very convenient for most patients. We have full confidence in the clinical competence on an on-going basis. Any unacceptable risks or complications during your surgery may result in modifications to our recommended post-operative care. The optometrist providing part or all of your post-operative care will bill for his/her services. Your payment obligations to the optometrist shall be determined by your insurance (Medicare/Medicaid) coverage. However, should you wish to receive all of your post-operative care at our office we will be happy to accommodate your request.

Custom IOLs

It is important that you are aware of the different lens implants that are available to you. The <u>basic</u> implant was described above. The Custom implants allow you to be less dependent on glasses. Toric implants correct for astigmatism and will help you to drive, watch TV and see people from across the room without glasses. If you desire this lens, please make your counselor or your doctor aware of this. Multifocal (presbyopic) implants will correct <u>both</u> distance and near vision so you are less dependent on glasses or contacts for both distances. In fact, most people are able to perform 90-95% of their daily activities without the need for glasses. The effect with these implants is permanent so you will enjoy your spectacle free vision for the rest of your life! If you elect to have these implants and you have astigmatism, you will need it corrected with an LRI incision and/or laser vision correction. This is included in your procedure for astigmatism <2.0 cylinder. Patients >2.0 cylinder are charged an additional fee. Also, be aware there is a slightly greater chance you will notice some halo and glare with these implants. This is usually temporary, however, 5% of people will notice significant halo and glare 6 months after surgery.

Also, an additional period of "Neuro Adaptation" may be necessary for you to learn to use these implants may be necessary. This usually takes a few days, but in some people, may take weeks or months. It is not uncommon for the clear capsule (that is part of your eye that helps support the implant)

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to become cloudy with time. A YAG laser procedure can be performed to open this capsule; this is a separate procedure that has a separate charge.

Laser vision correction is necessary in 5-10% of our patients undergoing cataract surgery with our premium presbyopic implants and there is <u>no additional fee</u> for this service. This is usually performed 6 weeks post operatively.

Patient Statement

The basic procedures of cataract surgery, the advantages and disadvantages, risks and possible complications and alternative treatments have been explained to me by my doctor. Although it is impossible for my doctor to inform me of every possible complication that may occur, the doctor has answered all of my questions to my satisfaction.

I give my permission for medical data concerning my operation and subsequent treatment to be submitted to the intraocular lens manufacturer. In signing this informed consent for a cataract operation and/or implantation of an intraocular lens, I am stating that I have read this informed consent (or it has been read to me). I fully understand the consent I am giving, and the possible risk, complications and benefits that can result from surgery.

If I decide to have a cataract operation, I agree to have the type of operation listed below. I have indicated my agreement by my signature:

Surgery Date:					
Type of Lens:	ConventionalPatie	ent's Initials	ECPPatient's Initials		
ReStorPatient's Initials	ReZoom		Crystalens Patient's Initials		
Exchange –IOL	Patient's Initials	Patient's Initials	LRIPatient's Initials		
	PHACO-IOL	OD OS (Circle one)			
PATIENT'S SIGNATUI	RE_		Date		

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