



Pediatric Ophthalmology, P.A.
and the Center for Adult Strabismus

Instructions for Surgery **Pediatric Ophthalmology, P.A. and Center for Adult Strabismus**

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INFORMATION AND INSTRUCTIONS FOR SURGERY

This instruction sheet will prepare you for as many of the pertinent facts as possible concerning your or your child's eye surgery. Please read carefully. We will be glad to answer any questions you may have.

Our patients' needs and family schedules are important to us, and we try our best to accommodate these whenever possible. Scheduling arrangements for surgery are quite complicated and time consuming; therefore we request your consideration in avoiding rescheduling or canceling your scheduled surgical time at the last moment.

A parent or legal guardian needs to be at the preoperative visit and the hospital at the time the patient is admitted. Adults will require a friend or family member for assistance in returning home after surgery.

If you are required by your insurance to obtain referrals for office visits, you **must** call your primary care doctor to request referral for pre and postoperative visits, as well as for the surgery itself.

Please notify our office of a number where you can be reached the evening before the surgery. Also, if there is any change in your health conditions please notify our office as soon as possible.

Patients are generally required to be at the hospital or surgery center 2 hours before surgery.

NO ASPIRIN, ASPIRIN DERIVATIVES, NSAIDS, VITAMIN E, GARLIC PILLS, OR HERBAL SUPPLEMENTS FOR TWO WEEKS PRIOR TO SURGERY. IF YOU ARE TAKING COUMADIN, WARFARIN, OR PLAVIX DISCUSS THIS WITH YOUR DOCTOR.

Tylenol may be taken.

Your anesthesiologist or our office surgery coordinator will call you the night before surgery to advise you of the diet restrictions and surgery arrival time.

Do not bring any valuables with you to the hospital. You may want to bring slippers and a robe. You will be given an identification armband. This is necessary for your surgery and should not be removed.

ADULT PATIENTS must have their physical and blood work completed within 2 weeks prior to surgery. All blood work and physical exam information must be faxed to the surgeon at (214)346-9267. Our office will provide you with the necessary lab and physical forms.



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EATING AND DRINKING BEFORE YOUR SURGERY

CHILDREN & ADULTS

- No Food After Midnight (if your surgery is 12:00pm or earlier).
- No Food 8 Hours prior to surgery (if your surgery is after 12:00 pm).
- Clear Liquids Up Until 3 hours before your surgery time:

INFANTS

- Formula Up Until 6 Hours before Surgery
- Clear Liquids (including Breast Milk) Up until 3 Hours before surgery

Surgery @ Cooks Children's Pediatric Surgery Center of Plano

(7000 W. Plano Parkway, Ste. 100 Plano, Texas 75093 P: (972)300-0215 www.cookschildrens.org)

Surgery @ Texas Pediatric Surgery Center of North Richland Hills

(4375 Booth Calloway Road, Ste. 100 North Richland Hills, Texas 76180 P: (817) 255-1010)

Surgery @ Ophthalmology Surgery Center

(10740 North Central Expressway, Ste. 400 Dallas, Texas 75231 P: (214)750-9288

You will be notified of an estimated arrival time on the day of your pre op appointment. This time is subject to change. If the time changes you will be notified no later than the day prior to surgery.

Surgery @ LoneStar Ambulatory Surgery Center

(2201 Westgate Plaza, Grapevine, Texas 76051: P: (817) 416-7988

Cook Children's, Texas Pediatrics and LoneStar will be telephoning you the day prior to your surgery Informing you of your surgery arrival time and any additional instructions.



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OUT PATIENT SURGERY FEE INFORMATION

Thank you for selecting the physician(s) of Pediatric Ophthalmology, P.A. and the Center for Adult Strabismus for your surgery. If you have any questions regarding precertification or fees, please contact the insurance department, in our Dallas office, directly at (214)369-6434 option 4

All out patient surgery patients will receive a separate bill from each of the following:

1. Pediatric Ophthalmology for the surgeon and assistant surgeon
2. Hospital or surgery center for the facility fee
3. Anesthesiologist for their services

Payment Policy for Pediatric Ophthalmology

Our insurance department will contact the patient's insurance carrier with the procedure(s) and diagnosis. At that time an authorization or notification for surgery will be obtained with your benefits. A letter will be mailed to the patient approximately two weeks prior to the surgery with the estimated cost. All patients will be expected to pay deductibles, co-pays, and coinsurance at their preoperative appointment. If you have not received your expected payment amount two weeks prior to the procedure, feel free to contact our insurance department, (214) 369-6434 Option 4.

Uninsured Patients

All uninsured patients are expected to pay at the preoperative appointment based upon the estimated charges. At the time of scheduling you may request your estimated fees or you may contact our insurance department after 72 hours for the estimate.

Other Entities

The facility and anesthesiologist will be contacting you prior to surgery to make payment arrangements.

Assistant at surgery fee disclosure

Through our years of experience with strabismus surgery, we feel that the use of an assistant surgeon when available during these procedures:

- Enables us to achieve better results for the patient, and
- Shortens the time the patient is under anesthesia.

For these reasons we use an assistant surgeon whenever possible. While many insurance plans cover the fees for such assistants, others do not pay for an assistant surgeon for these surgical procedures. The assistant surgeon fee may be considered a non-covered benefit under your plan. Our fee for the assistant surgeon is 20% of the primary surgical fee or \$220.00

At the time of your preoperative appointment the assistant surgeon fee of \$220.00 will be collected in addition to any co-payment, coinsurance, and deductibles.

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PREPARING YOUR CHILD FOR THE HOSPITAL

Children will not require blood work or any shots prior to surgery unless the child has a specific medical condition which would require blood work.

A short stay in the hospital can be stressful for children. It may consist of unfamiliar routines, people, and machines. Sometimes it may seem less stressful not to tell your child about having surgery, a test, or even going to the hospital. However, research and experience tell us that children benefit most from honesty and simple explanations. They will develop trust, understanding and confidence through these explanations. A child life specialist is available at the Cook Children's Pediatric Surgery Center of Plano, to assist with preparing your child for surgery. If you need their assistance, please contact them at (972)300-0215.

Infants to Three years – a simple mention of the upcoming event one to two days prior to surgery. Reassure your child that you will be going with them to the hospital and returning home with them. It is important for you to be there for your child. The more calm and relaxed you are the more relaxed and calm your child will be as well.

Preschoolers – One to two days in advance is sufficient time to provide explanations to the preschooler about the hospital. They tend to understand simple descriptions about surgery and procedures. Parents can reassure and support their children even before the hospital experience has begun.

School-Aged Child – School aged children unlike toddlers and preschoolers are more able to understand surgery. They can think and reason logically and tend to have a better understanding of the concept. It is important to let your child know the feelings that are experiencing (being scared) is OK and that you are there if they want to discuss their feelings.

Adolescents – Hospitalizations affects teenagers just as it does young children. However, there are different needs involved. During adolescence there is an increased need for independence and hospitalization may cause a loss of independence. Teenagers are private and sometimes would rather discuss their feelings with a friend instead of a parent. It is important to respect their privacy. Encourage your teenager to make a list of questions for the medical staff and bring them to the hospital. It will give them a sense of control.

For an informational video concerning anesthesia, please visit childrenarespecial.com.



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Surgery Cancellation Policy

Surgery is a very personal decision and due consideration should be given to the date you choose to schedule your procedure.

Please check your calendar carefully before choosing the date for your surgery. If surgery is cancelled and rescheduled it is labor intensive for the staff of Pediatric Ophthalmology, P.A. and Center for Adult Strabismus. Insurance verifications, anesthesia orders, and preoperative paperwork must be repeated and the facility has to be notified of all changes.

We certainly understand that certain personal medical circumstances may necessitate rescheduling of surgery. Accordingly, to defray a portion of additional costs, we are implementing a cancellation and rescheduling fee. One cancellation and rescheduling will be provided at no charge. Subsequent cancellations and reschedules will incur a fee of **\$150.00**. Of course, if your insurance plan requirements necessitate or our offices request a change, no fees will apply

When making this decision please remember that an adult will need to accompany you (the patient) on the day of surgery. The physician and the facility will not release you to go home without a driver.

It is our goal at Pediatric Ophthalmology, P.A. to give you quality care. We appreciate your consideration in scheduling of your surgery



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FREQUENTLY ASKED QUESTIONS ABOUT STRABISMUS SURGERY	
Where is my Preoperative appointment?	At the surgeon's office.
Where is my Postoperative appointment?	At the surgeon's office.
What kind of anesthesia is used?	General Anesthesia. Your child/you will be completely asleep. Regional/Eye Block. (ADULTS ONLY)
What kind of clothing should I/my child wear on the day of surgery?	Comfortable clothing like PJ's for kids and sweats for adults.
What time is the surgery?	The facility or anesthesiologist will call you the day before and let you know what time to be there.
I am allergic to latex . Is the facility prepared to handle that?	Yes
Does my child/I need to fast for surgery ?	Yes. No food or drink after midnight the night before surgery unless otherwise specified by the hospital or anesthesiologist.
Child: Does my child need to have blood work done prior to surgery.	No. Unless there are health issues.
Adults: I just had a physical last month. Can I use the blood work and EKG information from that appointment for my surgery?	The test results must be within two weeks of your surgery date to clear you for general anesthesia.
Where do I get my blood work and other tests done?	At your primary care physician's office. (PCP, pediatrician, family practitioner, internal medicine)
Will I need to fast for my blood work ?	Your primary care doctor will let you know.
Can I take my medicines before surgery?	Blood thinners like aspirin and Coumadin stop a minimum of one week before surgery. Other medications may be taken with a sip of water the morning of surgery at the direction of the anesthesiologist. Ask this question when they contact you about your surgery the day before.
What does my insurance cover?	The information about your surgical procedure and the location of the surgery are forwarded to our insurance department and they will mail you a letter stating your patient liability. You may be contacted by phone if time does not permit the mailing of a letter. The hospital will contact you separately about their charges.
Do you have payment plans ?	Payment is due at your preoperative appointment unless other arrangements are made with our billing office ahead of time. Care Credit is also another payment option that is offered.
Adult: How long do I (need to be off work)? Child: How long does my child need to stay home from school?	1-3 days is usually sufficient.
When can I/my child fly ?	Within one to two days.
How long does my child/I have to wait after surgery to go swimming ?	7 days for pool water and 14 days for pond, lake or ocean water.



POST OPERATIVE EXPECTATIONS FOR STRABISMUS SURGERY

The surgery will usually be done on both eyes. If you wear prism glasses you may need to get glasses with out prism. If you wear contact lenses you may need to get glasses.

NAUSEA

- Quite common after eye muscle surgery.
- May last 24-48 hours.

DIET RESTRICTIONS

- Go easy on food the day of surgery.
- Start with sips of clear liquids, carbonated beverages, Popsicles, or ice chips.
- Later in the evening you may have soft foods such as ice cream, pudding, Jell-O, soup if tolerated.
- Appetite usually back to normal by the second day and you may resume your regular diet.

PAIN/DISCOMFORT

- Light sensitive for 1-2 days post-op.
- Eyes will feel scratchy for several days after surgery.
- May have pain on rotating the eyes for approximately one week.
- Most stitches are buried and will dissolve on their own.
- Swelling next to conjunctiva and dry spots on the cornea may occasionally cause a scratchy sensation 3-5 days following surgery.
- Some may need Tylenol or Motrin for pain: occasionally something stronger but only in particular cases.
- If the eyes feel dry or scratchy it's okay to use over the counter drops to lubricate the eyes, such as artificial tears preservative free or cool compress.

APPEARANCE OF THE EYES

- Red eyes for 10 days to two weeks.
- 90% of redness clears within two weeks. The red will turn yellow before fading.
- Some pinkness remains and gradually fades over several months.
- Children heal faster than adults.
- May have bloody discharge/matting of lashes, lasting approximately two days after surgery: the eyes may stick together in the morning or after removal of any patches: wipe eyes with a damp cloth.

ACTIVITIES

- You'll be tired the day of surgery and will probably want to sleep the rest of the day.
- You'll feel much better the second day after surgery.
- May resume normal activity if desired, usually after the second day, okay to return to school/work 1-2 days after surgery.
- Normal activity will not damage the eyes.
- Each person is different regarding recovery time. Some may want to take 1-2 weeks off following the surgery while others are ready to return to their regular schedule a few days after surgery.
- Driving is okay when you feel that it is safe to do so.
- It's okay to fly anytime after surgery.

RESTRICTIONS

- No contact sports, eye make up, or playing outside in sand box/ dusty places for 2-7 days after surgery.
- No swimming in a lake for 2 weeks.
- No swimming in a pool for 7 days
- No contact lens wear for 2 weeks.



POST OPERATIVE MEDICATIONS/ TREATMENT FOR STRABISMUS SURGERY

- Continue with all medications the day after surgery.
- If Oral antibiotics are given take it for the first 5 days following surgery. Start the day after surgery.
- If eye drops are given, use it 3-4 times a day for about 5-7 days after surgery.
- Ice or cold packs to the eyes the first few days post-op will often reduce any swelling that may be present.
- There will be no patches or bandages after surgery unless local anesthesia is used.

POST OPERATIVE STRABISMUS/DIPLOPIA

- It takes approximately 6 weeks for the eyes to heal and gain their full function; therefore a lot of eye alignment changes take place during this time.
- You Must allow a full 6 weeks before the outcome of the surgery can be accurately assessed.
- Adult double vision usually fades during the first 6 weeks post-op.
- Adults may patch one eye if it becomes too uncomfortable from the double vision, but we recommend that they try to tolerate it so that the brain may try to get used to the two eyes working together.
- Children may experience double vision if the eyes cross inward after surgery; this usually clears in three weeks as the crossing goes away.
- Usually wait one week after surgery before resuming patching or Atropine for amblyopia.

DANGER SIGNS

- Increased swelling/pain of the conjunctiva (white part of the eye) and eyelids after the first 24-48 hours following the surgery may be serious and should be discussed with the doctor or nurse. Conjunctival swelling and a yellowish discoloration of the white part of the eye without pain may be just a reaction to blood absorbing.
- Adults with increased complaints of generalized pain (not just from looking in a particular direction) 2-3 days post op could be suffering from anterior segment ischemia (lack of blood to anterior segment). This is rare and should be seen by the doctor.
- SUDDEN changes in the eye alignment (overnight) may indicate a slipped muscle. This is also rare and should be seen by the doctor.
- The most critical time for infections and problems to occur is during the first week following the surgery.
- Our after hours answering service will always be available to take your calls if you are in need. The after hours number to call is 214-360-5622. During regular business hours please call the office.

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POSTOPERATIVE EXPECTATIONS/DIRECTIONS FOR *TEAR DUCT PROBE & IRRIGATION STENT PLACEMENT*

DIET RESTRICTIONS

- Nausea may last 24-48 hours
- Go easy on food the day of surgery
- Start with sips of clear liquids, carbonated beverages, Popsicles, or ice chips
- Later try soft foods such as ice cream, pudding, Jell-O, soup if tolerated
- Appetite usually back to normal by the second day

APPEARANCE OF THE EYES

- Eyes may have bloody **discharge/matting of lashes**, lasting 2-7 days after surgery. The eyes may stick together in the morning; wipe them with a damp cloth.
- For bloody nose, pinch the nose with the child sitting up for 5-10 minutes until the bleeding stops. For a severe bloody nose, you can use Afrin nasal spray (over the counter at the drug store) according to the directions in the box.
- Trying to keep the child from rubbing the inside corner of the eye. Some will accidentally pull the string out early. If that happens, do not panic, it will not harm the child. If the tube/string is part-way out, tape it to the cheek and call your physician's office for an appointment to pull it out. If the tube comes out completely by itself, bring it with you to the next office appointment. If the tube appears to be irritating the eye, call the physician's office.
- The tear duct stent is placed in the inside corner of the eye lid. You can sometimes see it. Sometimes it will fall out on its own.
- The tube does not drain anything. Therefore there may be tearing and crusting while the tube is in place.
- Any bruising after the surgery will fade after 2 weeks.
- Try to keep your child from rubbing their eyes.

ACTIVITIES

- Each person is different regarding recovery time. It's okay to fly anytime after surgery.
- OK to resume all activities after the surgery.

POST OPERATIVE MEDICATIONS

- Antibiotic eye drop 3 times per day for 5-7 days.
- Tylenol or Motrin for pain.
- Afrin nasal spray according to directions on the box as needed for 1-3 days.

FOLLOW UP CARE

- Your child will have an appointment in 4-6 months to remove the stent.

Danger Signs

- Increased swelling/pain of the conjunctiva and eyelids after the first 24-48 hours following the surgery may be serious and should be discussed with the doctor or nurse. Conjunctival swelling and a yellowish discoloration of the white part of the eye without pain may just be a reaction to blood absorbing.
- The most critical time for infections and problems to occur is during the first week following the surgery.



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POST OPERATIVE EXPECTATIONS FOR CHALAZION

DIET

- Nausea may last 24-48 hours
- Go easy on food the day of surgery
- Start with sips of clear liquids, carbonated beverages, Popsicles, or ice chips
- Later try soft foods such as ice cream, pudding, Jell-O, soup if tolerated
- Appetite usually back to normal by the second day

ACTIVITY

- Normal activity will not damage eyes.
- Avoid swimming in a pool for 7 days and lake water for 2 weeks.
- Avoid submerging incision until sutures dissolve if sutures present.
- It is ok to fly at any time.

MEDICATIONS

- Tylenol as needed for pain.
- Cool compresses as needed for 24-48 hours.
- Antibiotic ointment to eye 3 times a day for 5 days.

APPEARANCE OF THE EYE

- Eyelid will be swollen and bruised for up to 2 weeks
- You may see a pink tinge to tears for 1-2 days.
- Any sutures will dissolve on their own.



CHILD EYE LID SURGERY – INSTRUCTIONS

Before Surgery: (also read the first 3 pages of this packet.)

- If advised by Dr. Tong, get Refresh PM (or generic) eye ointment from the pharmacy BEFORE the surgery to use AFTER the surgery. You do not need a prescription.

After Surgery:

- If there is a patch over the eye, you can take it off the next morning. If the child pulls the patch off earlier, start using a cold compress over the eye. You do not have to start using the antibiotic ointment or drops until after the patch comes off. There will be some bleeding for the first 3 days.
- If you are prescribed an antibiotic ointment, use it 4 times a day for 14 days on the incision site. If you are prescribed and antibiotic drop, use it 3-4 times a day for 5-7 days in the eye.
- Start giving Tylenol when you get home and continue for the first 2 days (follow the directions on the bottle). It is easier before it hurts than to wait until it hurts before giving the pain medications.
- There will be some bleeding for the first 3 days. Gently wipe away with a clean tissue. There will be bruising (a black eye) for at least 2 weeks. Sometimes the white part of the eye will be red for 2 weeks.
- For older children, use a cold compress for 10 minutes every 1-2 hours while awake for 2 days after the surgery. (Wrap a clean washcloth around a cold-pack or a plastic bag of crushed ice or frozen peas.) This will help with the bruising and swelling.
- For older children, have them sleep on 2 pillows or in a recliner to keep the head up for the first few days. Try not to sleep on the operated side (difficult in younger children).
- The eyelid may not close all the way (especially while sleeping) for the first 2 weeks after the surgery. It will then close more and more as eyelid heals. However even when everything is healed, the eyelid will still stay a little open while sleeping. If the eyelid is opened a lot while sleeping, you may have to use a lubricating ointment to keep the eye moist at night. Get Refresh PM (or generic) eye ointment from the pharmacy (you do not need a prescription).
- The patient may shower the next day. Please apply antibiotic ointment on the incision site or put a drop in the eye afterwards. Pat the area dry; DO NOT rub it dry.
- No strenuous activities for 2 weeks after the surgery (this includes exercising, swimming, lifting > 10 lbs., bending over, or anything else that raise the blood pressure around the eye.) Also no swimming (in lake water/pools) or hot tub/Jacuzzi use for 2 weeks.
- If the patient has diabetes, auto-immune disease, or other disease, the healing process will be delayed.
- Call our office if the incision site becomes worse, rather than better, after the first day (pain, redness, or discharge). The bruising and swelling usually increase the day after surgery and then improves.
- The bruising and swelling will greatly improves over the first two weeks. However a small amount of swelling is usually left over for up to 6 months.
- Do Not expose the incision site to too much sunlight for the first 6 months as it may tan darker than the surrounding skin. Use a hat/sunglasses/ sunblock if you have to be in the sun for prolong periods.

Call our office or after hour answering service if there is any excessive pain, bleeding, discharge, or vision change/loss.



ADULT EYELID SURGERY-INSTRUCTIONS

After Surgery:

- If you are prescribed an antibiotic ointment, use it 4 times a day for 14 days on the incision site. If you are prescribed an antibiotic drop, use it 3-4 times a day for 5-7 days in the eye.
- Use a cold compress for 10 minutes every hour while awake for 2 days after the surgery. (Wrap a clean wash cloth around a plastic bag of crushed ice or frozen peas.) This will help with the bruising and swelling.
- Start taking Extra Strength Tylenol when you get home and continue for the first 2 days (or Tylenol PM at bedtime). It is easier to stay ahead of the pain than to wait until it hurts before taking pain medications.
- Drops of blood may seep from the incision site for the first 3 days. You may gently wipe these away with a clean tissue.
- Try to sleep on 2 pillows or a recliner to keep your head up for the first few days. Do not sleep on the operated side.
- On the third day after surgery, switch to a warm compress (4 times a day for at least one week or longer.) This will help with the bruising and swelling.
- You may shower the next day. Please apply the antibiotic ointment or drop afterwards. Pat the area dry; DO NOT rub it dry.
- No strenuous activities for 2 weeks after the surgery (this includes exercising, swimming, lifting > 10 lbs., bending over, or anything else that raises the blood pressure around the eye.) Also no swimming (in lake water/pools) or hot tub/Jacuzzi use for 2 weeks.
- Do Not smoke for two weeks after surgery, otherwise the healing process will be delayed.
- Call your physician if the incision site becomes worse, rather than better, after the first day (pain, redness, or discharge). This may be a sign of an infection. Then bruising and swelling usually increase the day after surgery and then improve.
- The bruising and swelling will greatly improve over the first 2 weeks. However a small amount of swelling is usually left over for up to 6 months.
- Do Not expose the incision site to too much sunlight for the first 6 months as it may tan darker than the surrounding skin. Use a hat/sunglasses/ sunblock if you have to be in the sun for a prolonged period.