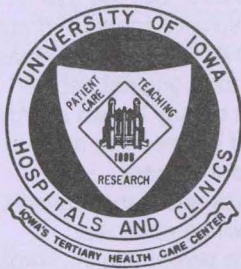


17  
U582HC  
7:S894  
1986

JAN 23 1987

# INFORMATION FOR PATIENTS HAVING STRABISMUS SURGERY



© The University of Iowa Hospitals and Clinics


DEPARTMENT OF NURSING

EENT Division

DEPARTMENT OF OPHTHALMOLOGY

STATE  
H  
DES M

STATE LIBRARY OF IOWA  
17 U582HC 7:S894 1986 sdoc  
/Information for patients having strabis



3 1723 00034 3095

You will be undergoing strabismus surgery for an eye muscle problem. Eye muscle surgery does NOT involve removing the eye from its socket or entering the inside of the eye. One or more of the eye muscles, which are attached to the outer surface of the eye, will be operated on during surgery. The desired effect is to change the position of the eye(s). Surgery may be necessary on one or both eyes.

Some patients have "adjustable sutures." In this case, during surgery a suture is placed through the eye muscle and temporarily tied. Several hours later when you are awake you will go to the Eye Clinic to have the sutures adjusted.

### **Before Surgery**

1. IF YOU SHOULD CATCH A COLD ONE WEEK OR LESS PRIOR TO THE DATE SCHEDULED FOR THE OPERATION, please call the Eye Clinic, 319/356-2215 and inform the surgery scheduling nurse.
2. When you come for surgery, please bring all your medications in their original, labeled bottles. Also provide information on any known allergies.
3. Bring all pairs of glasses you are currently wearing.
4. On the day before surgery
  - a. A nurse will ask questions about your general health.
  - b. Blood tests will be obtained.
  - c. The physicians performing the surgery will complete a thorough eye exam.
  - d. A doctor will listen to your heart and lungs and perform a general physical exam.
  - e. You will meet with the anesthesiologist.
  - f. You will receive further instructions from the nurse concerning surgery time and other details.

### **After Surgery**

1. A light ice bag will be applied over the operative eye(s) and the head of the bed will be elevated to help reduce the eyelid swelling.
2. An IV will be continued until liquids are tolerated. It is advisable to begin slowly with ice chips (adults) or a Popsicle or bland juice.
3. Adults and older children having adjustable sutures need to be awake and alert later in the day when the final

suture adjustment is made. Therefore medications that would promote drowsiness are withheld. If you should experience any pain or nausea, notify the nurse.

4. Prior to final suture adjustment, walking with assistance and activities requiring use of the eyes are encouraged.

### **Appearance of the Eye(s)**

1. There may be some clear to pink-tinged eye drainage accompanied by an itching sensation. This may continue for several days after discharge from the hospital.
2. The eye(s) will be "bloodshot." This eye redness may not clear for several weeks.
3. The sutures used in strabismus surgery will not be visible. The sutures are absorbable and do not need to be removed by the doctor.

### **Home Care Instructions**

1. Following surgery the doctor will examine the operated eye(s) and then discharge you. You will be given a tube of eye ointment and/or drops that are to be applied to the inside of the lower lid as your physician directs. The nurse will instruct you and your family on the proper instillation of eye medication.
2. Do not rub your eye(s); avoid hand to eye contact. Hands must be washed before and after eye care.
3. Gently clean your eyelids once a day. Use a clean, wet washcloth. Never use the same part of the washcloth twice. Avoid pressure on the eye.
4. Until your return appointment, avoid swimming and activities in which sand or dirt may enter the eye.
5. You may read or watch TV as much as you like.
6. Glasses may be worn, but your physician should be consulted concerning the use of contact lenses.
7. You may return to school or work as long as you are able to comply with the above activity restrictions.
8. **IF YOU FEEL YOU ARE HAVING PROBLEMS, OR IF THE FOLLOWING SIGNS DEVELOP, NOTIFY THE EYE DEPARTMENT.**
  - a. Increased redness of the eye(s).
  - b. Increased swelling of lids of the operated eye(s).
  - c. Yellow/green drainage from the eye(s).
  - d. Increased eye discomfort.

Contact: Department of Ophthalmology 319/356-2215.  
After 5:00 or on weekends or holidays call  
319/356-1616 and ask for the ophthalmologist  
on call who will notify your surgeon.

9. It is important to return for your scheduled appointments. Please call 319/356-2852 if you are unable to keep your appointment and need to reschedule it.

## **Administering Ophthalmic (Eye) Drops or Ointments**

### *Dosage*

Always follow the directions on your prescription label and the instructions given to you by your physician.

Do not skip doses and never use the medication more often or longer than prescribed.

### *Precautions*

1. Keep the tip of the dropper or tube clean. Avoid touching the tip of the dropper or tube to anything, especially the fingers or any part of the eye.
2. Store medication at room temperature; refrigerate only if you have been instructed to do so.
3. Use the medication only in the eye for which it is ordered.
4. Do not share your medications with anyone.
5. Use only the ophthalmic medication that your physician has prescribed.
6. Never use eye drops that have changed color.
7. Do not transfer the medication from one bottle to another.
8. Keep eye medication out of the reach of children.
9. When using both eye drops and eye ointment, administer eye drops first.

### *Technique for Administration of Drops*

(A family member may be able to assist you.)

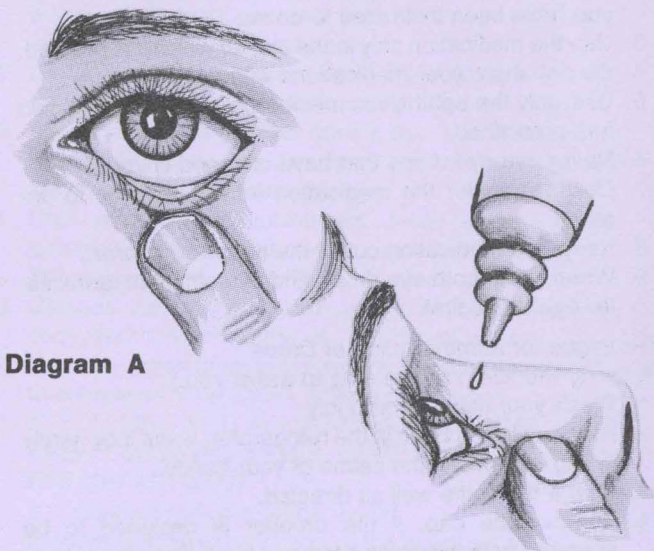
1. Wash your hands thoroughly.
2. If the bottle has been in the refrigerator, warm it by gently rolling it between the palms of your hands.
3. Shake the bottle well as directed.
4. Remove the cap. If the dropper is designed to be removed from the bottle before use, squeeze the rubber bulb to fill it with medication before opening the bottle.

5. Tilt your head slightly backward. You may find it easier to sit or lie down.
6. Look up and gently pull the lower eyelid down to form a pocket. See diagram A.
7. Instill the medication into the pocket. If you are uncertain that a drop went into the pocket, use another drop. See diagram B.
8. Immediately replace the cap or dropper.
9. Close the eyelids gently for one minute. Do not squeeze the lids. Then blink for a few seconds. Your vision may blur briefly as a result of the drops.
10. Close the eyelids again and wipe the lower lid with a clean tissue to remove any tears or excessive medication. Avoid applying pressure on the eye.
11. Wash your hands.

#### *Technique for Administration of Ointments*

(A family member may be able to assist you.)

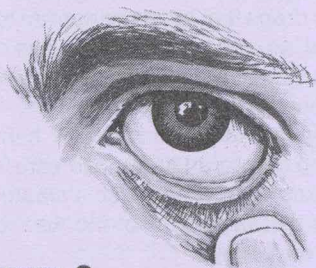
1. Wash your hands thoroughly.
2. Remove the cap.



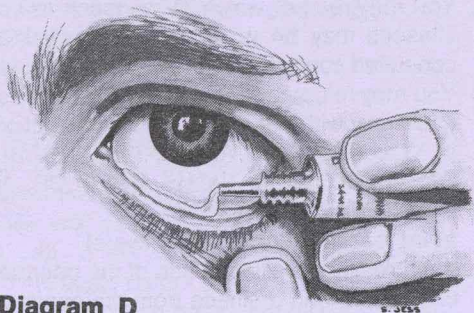
**Diagram A**

**Diagram B**

3. Tilt your head slightly backward. You may find it easier to sit or lie down.
4. Look up and gently pull the lower eyelid down to form a pocket. See diagram C. Another method is to gently grasp the skin of the lower lid between the thumb and index finger and pull the lid outward to form the pocket.
5. Squeeze a small amount of ointment ( $\frac{1}{4}$  to  $\frac{1}{2}$  inch) along the inside of the lower lid. See diagram D.
6. Immediately replace the cap on the tube.
7. Close the eyelids gently for one to two minutes. Do not squeeze the lids. To spread the ointment, keep the lids closed and slowly roll the eyes from side to side unless otherwise directed by your physician. Your vision may be blurred as a result of applying the ointment.
8. Close the eyelids and wipe the lower lid with a clean tissue to remove any excess medication from the eyelid. Avoid applying pressure on the eye.
9. Wash your hands.



**Diagram C**



**Diagram D**