

IMPORTANT INFORMATION FOR DR. GUPTA'S CATARACT SURGERY PATIENTS

Be sure to keep this information handy – place it near the fridge or medicine cabinet.

POST-OP INSTRUCTIONS

You should have three bottles of eyedrops:



One drop **MOXIFLOXACIN:**
4 times a day for 1 week

One drop **DEXAMETHASONE:**
4 times a day for 2 weeks,
then 3 times a day for 1 week,
then 2 times a day for 1 week,
then once a day for 1 week.

One drop **KETOROLAC:**
4 times a day for 5 weeks

Continue all your regular eye drops (IF you were using eye drops before your surgery).

WHEN USING EYE DROPS:

Shake bottle before using
Do not touch dropper to eye or eyelids
Wait 5 minutes between drops, if using more than one drop

1. Fill prescription for eye drops if you have not already done so. Use the eyedrops only during waking hours.
2. DO NOT rub your eye, swim, or immerse your face in water for 2 weeks.
3. Tape shield over eye at bedtime and for naps for one week.
4. Avoid heavy lifting (over 10 pounds) or straining for one week.
5. Refrain from bending forward to avoid striking your head or eye on anything. You may bend over to put on slippers or shoes.
6. Avoid being close to small children / pets to protect the eye from accidental trauma.
7. Your glasses will not be changed until the eye has healed and stabilized
8. It is also normal to feel a mild ache, or a scratchy feeling in your eye. You may use Tylenol and lubricating drops (available over the counter at a pharmacy) to help with this.
9. Take one or two plain Tylenol (if you are not allergic) for mild eye pain
10. If severe eye pain persists after using Tylenol call the office (905-648-9323) or go to the nearest hospital emergency room
11. It is common to see haloes around lights for a few days. It is common for the eyes to be dry/ irritated/ tearing after surgery. Use artificial tears (over the counter) as needed for discomfort for two months after surgery.
12. Bring your eye drops, instruction sheet and your glasses to all appointments.

Next Appointments:

First follow-up appointment: _____

Second follow-up appointment: _____