

PREOPERATIVE DIAGNOSIS: , Ruptured globe  
OX.,POSTOPERATIVE DIAGNOSIS:, Ruptured globe  
OX.,PROCEDURE: , Repair of ruptured globe  
OX.,ANESTHESIA:, General,SPECIMENS:,  
None.,COMPLICATIONS: ,None.,INDICATIONS:, This is a  
XX-year-old (wo)man with a ruptured globe of the XXX  
eye.,PROCEDURE:, The risks and benefits of eye surgery  
were discussed at length with the patient, including bleeding,  
infection, re-operation, loss of vision, and loss of the eye.  
Informed consent was obtained. The patient received IV  
antibiotics including Ancef and Levaeuin prior to surgery. The  
patient was brought to the operating room and placud in the  
supine position, where (s)he wad prepped and draped in the  
routine fashion. A wire lid speculum was placed to provide  
exposure.,Upon examination and dissection of the conjunctiva  
superiorly, a scleral rupture was found. The rupture extended  
approximately 15 mm in length superior to the cornea,  
approximately 2 mm from the limbus in a horizontal fashion.  
There was also a rupture at the limbus, near the middle of this  
laceration, causing the anterior chamber to be flat. There was  
a large blood clot filling the anterior chamber. An attempt was  
made to wash out the anterior chamber with BSS on a  
cannula. The BSS was injected through the limbal rupture,  
which communicated with the anterior chamber. The blood  
clot did not move. It was extremely adherent to the iris.,At that  
time, the rupture that involved the limbus from approximately  
10:30 until 12 o'clock was closed using 1 suture of 10-0 nylon.  
The scleral laceration was then closed using 10 interrupted

sutures with 9-0 Vicryl. At that time, the anterior chamber was formed and appeared to be fairly deep. The wounds were checked and found to be watertight. The knots were rotated posteriorly and the conjunctiva was draped up over the sutures and sewn into position at the limbus using four 7-0 Vicryl sutures, 2 nasally and 2 temporally. All suture knots were buried. ,Gentamicin 0.5 cc was injected subconjunctivally. Then, the speculum was removed. The drapes were removed. Several drops of Ocuflax and Maxitrol ointment were placed in the XXX eye. An eye patch and shield were placed over the eye. The patient was awakened from general anesthesia without difficulty and taken to the recovery room in good condition.