



# Taustine Eye Center

Laser Surgery Center

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## INSTRUCTIONS AFTER GLAUCOMA SURGERY

### I. ACTIVITY

After surgery the pressure in your eye is likely to be very low. If the eye is bumped or rubbed during this time it could deflate and seriously affect the result of your surgery.

During this time it is also important that you do nothing that raises the pressure in the blood vessels in the eye. If the pressure rises in the blood vessels they could rupture, causing bleeding inside the eye, which again could affect the outcome of your surgery.

**WEAR SOME PROTECTION IN FRONT OF YOUR EYE AT ALL TIMES UNTIL YOU ARE TOLD IT IS SAFE TO STOP. THIS CAN BE YOUR GLASSES OR THE SHIELD YOU WERE GIVEN AFTER SURGERY.**

**DO NOT LIFT ANYTHING HEAVIER THAN YOU CAN LIFT WITHOUT EFFORT (ABOUT 5-10 POUNDS). DO NOT ALLOW YOUR HEAD TO BE LOWER THAN YOUR HEART. DO NOT BEND OVER. LET SOMEONE ELSE TAKE CARE OF YOU FOR A LITTLE WHILE.**

**IF YOU HAVE QUESTIONS ABOUT A PARTICULAR ACTIVITY PLEASE ASK.**

I know that these restrictions are difficult. But they are temporary and hopefully the result of your surgery will make them worthwhile.

### II. PAIN MEDICATION

You may have some mild discomfort for the first day. Use over-the-counter pain medications if you need them. It is uncommon for you to need pain medications after the first day. If over-the-counter medications are not strong enough please call me.

### III. WASHING YOUR EYE

It is normal for the eye to be somewhat red and irritated. Cool wet compresses may make it more comfortable. You may get some

crusting of the eyelids and lashes. This can be removed by soaking it free with a wet washcloth.

#### IV. MEDICATIONS

It is very important that you use your medications to help your eye to heal properly and to prevent infection. You may be using different drops in your operated eye and your other eye.

##### IN YOUR OPERATED EYE:

PRED FORTE	8	times each day (White cap)
ZYMAR	4	times each day (Tan cap)
HOMATROPINE	2	times each day (Red cap)
_____	_____	times each day (_____ cap)

##### IN YOUR OTHER EYE:

_____	_____	times each day (_____ cap)
_____	_____	times each day (_____ cap)
_____	_____	times each day (_____ cap)
_____	_____	times each day (_____ cap)

IF YOU WERE TAKING PILLS FOR YOUR GLAUCOMA YOU SHOULD NOT TAKE THEM UNLESS TOLD TO DO SO.

#### V. APPOINTMENTS:

It will be necessary to check your eye frequently after surgery to monitor its progress and to make changes in your medications to keep it healing properly. You have been scheduled to be re-examined on \_\_\_\_\_ at \_\_\_\_\_ O'clock.

VI. I can be called at 502-458-9004 if you have any questions or concerns.