

Glenn B. Cook, M.D., Ph.D.
DIPLOMATE AMERICAN BOARD OF OPHTHALMOLOGY
Coronado Eye Associates

**INFORMED CONSENT FOR CATARACT OPERATION AND/OR
IMPLANTATION OF INTRAOCULAR LENS**

RIGHT / LEFT

INTRODUCTION:

This information is given to you so that you can make an informed decision about having eye surgery. Take as much time as you wish to make your decision about having the surgery. You have the right to ask questions about any procedure. You may also change your mind about agreeing to have the procedure up until you have the operation.

Except for unusual cases, a cataract operation is indicated only when you cannot function adequately due to poor sight produced by the cataract. You must remember that the natural lens has some distinct advantages over any man-made lens.

After a doctor has told you that you have a cataract, you and your ophthalmologist are the best ones to determine if or when you should have a cataract operation – based on your own visual needs and medical considerations. Rarely an unusual cataract may occur that may require immediate surgery.

ALTERNATIVE TREATMENTS:

I understand I may decide not to have a cataract operation at all. However, should I decide to have an operation, I understand these are the three methods of restoring useful vision after the cataract is removed:

SPECTACLES (GLASSES): Cataract spectacles required to correct your vision are usually thicker and heavier than conventional eyeglasses. Cataract spectacles increase the size of objects by about 25%; and clear vision is obtained only through the central part of the cataract spectacles, which means you must learn to turn your head to see clearly on either side. Cataract spectacles usually cannot be used if a cataract is only in one eye (and the other is normal) because they may cause double vision.

CONTACT LENS: A hard or soft contact lens increases the apparent size of objects only about 8%. Handling of a contact lens may be difficult for some individuals. Many lenses must be inserted and removed daily and not everyone can tolerate them. For near tasks, eyeglasses (not cataract spectacles) may be required in addition to contact lenses.

INTRAOCCULAR LENS: This is the technique most commonly performed to restore useful vision. A small artificial lens is surgically placed inside the eye, and stays in your eye permanently. Intraocular lenses do not require daily handling. With the intraocular lens there is no apparent change in the size of objects seen. Conventional eyeglasses (not cataract spectacles) are frequently required in addition to an intraocular lens, usually for both near and far vision.

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CONSENT FOR OPERATION:

In giving my permission for a cataract extraction and/or for the implantation of an intraocular lens in my eye, I declare I understand the following information:

Cataract surgery, by itself, means the removal of the natural lens of the eye by a surgical technique. In order for an intraocular lens to be implanted in my eye, I understand I must have cataract surgery performed either at the time of the lens implantation or before lens implantation.

If an intraocular lens is implanted, it is done by surgical method. It is intended that the small artificial lens will be left in my eye permanently.

The results in any cataract surgery cannot be guaranteed.

At the time of surgery, my doctor may decide not to implant an intraocular lens in my eye even though I may have given prior permission to do so. This is because my doctor may believe it is in my best interest not to have the lens implanted at the time of surgery

COMPLICATIONS OF SURGERY TO REMOVE THE CATARACT: As a result of the surgery, it is possible that my vision could be made worse. In some cases, complications may occur weeks, months or even years later. Complications may include hemorrhage (bleeding), loss of corneal clarity, infection, pupil distortion, detachment of the retina, glaucoma, and/or double vision. These and other complications may occur whether or not a lens is implanted and may result in poor vision, total loss of vision or loss of the eye. Additional surgeries might also be required.

SPECIFIC COMPLICATIONS OF LENS IMPLANTATION: Insertion of an intraocular lens may induce complications which otherwise would not occur. In some cases complications may develop from implanting the lens, days, weeks, months or even years later. Complications may include loss of corneal clarity, infection, uveitis (an inflammation inside

the eye), iris atrophy, pupil distortion, glaucoma, bleeding in the eye, inability to dilate the pupil, dislocation of the lens and retinal detachment resulting in poor vision or loss of vision. At some future time, the lens implanted in my eye may have to be repositioned or removed surgically due to complications.

COMPLICATION OF SURGERY IN GENERAL: As with all types of surgery, there is the possibility of other complications due to anesthesia, drug reactions or other factors which may involve other parts of my body, including the possibility of brain or cardiac damage or even death. It is impossible to state every complication that may occur as a result of surgery. The lists of complications in this form are just examples of some.

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MEDICAL TREATMENT AVAILABLE IN THE EVENT OF INJURY RELATED TO INTRAOCULAR LENS IMPLANTATION: In the event of injury related to intraocular lens implantation, my doctor and I will decide on the appropriate treatment. In some cases surgical re-intervention to remove, replace, or reposition the intraocular lens may be required. In the event that the intraocular lens is removed, a contact lens or aphakic spectacles may have to be used for visual correction.

The doctor has explained the basic procedures of cataract surgery and the advantages and disadvantages, risks and possible complications as well as alternative treatments to me. Although it is impossible for the doctor to inform me of every possible complication that may occur, the doctor has answered all my questions to my satisfaction. I give permission for medical data concerning my operation and subsequent treatment to be submitted to the lens manufacturer. In signing this informed consent for cataract operation, and/or implantation of intraocular lens, I am stating I have read this informed consent (or it has been read to me) and I fully understand it and the possible risks, complications and benefits that can result from the surgery.

If I decide to have an operation, I agree to have the type of operation listed that I have indicated by my signature:

I wish to have a Cataract Operation with an intraocular lens implant.

RIGHT / LEFT

PATIENT'S SIGNATURE: _____

DATE:

(Line 1)

Since my Cataract was previously removed and have been informed by the doctor that my eye is medically acceptable for lens implantation, I wish to have an Intraocular Lens Implant.

RIGHT / LEFT

PATIENT'S SIGNATURE: _____

DATE:

(Line 2)

PATIENT'S

NAME

(PRINTED):

WITNESS'

SIGNATURE:

DOCTOR'S

SIGNATURE:

Revised 1/12/2009 I have read and understood this page. Patient's Initials

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