

Notes:

After Your Retina Surgery

Eye Care Centre
Please bring this guide to the hospital
with you on the day of your surgery.

This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any questions, please ask your health care provider.

Find this pamphlet and all our patient resources here:
<https://library.nshealth.ca/Patients-Guides>

Connect with a registered nurse in Nova Scotia any time:
Call 811 or visit: <https://811.novascotia.ca>

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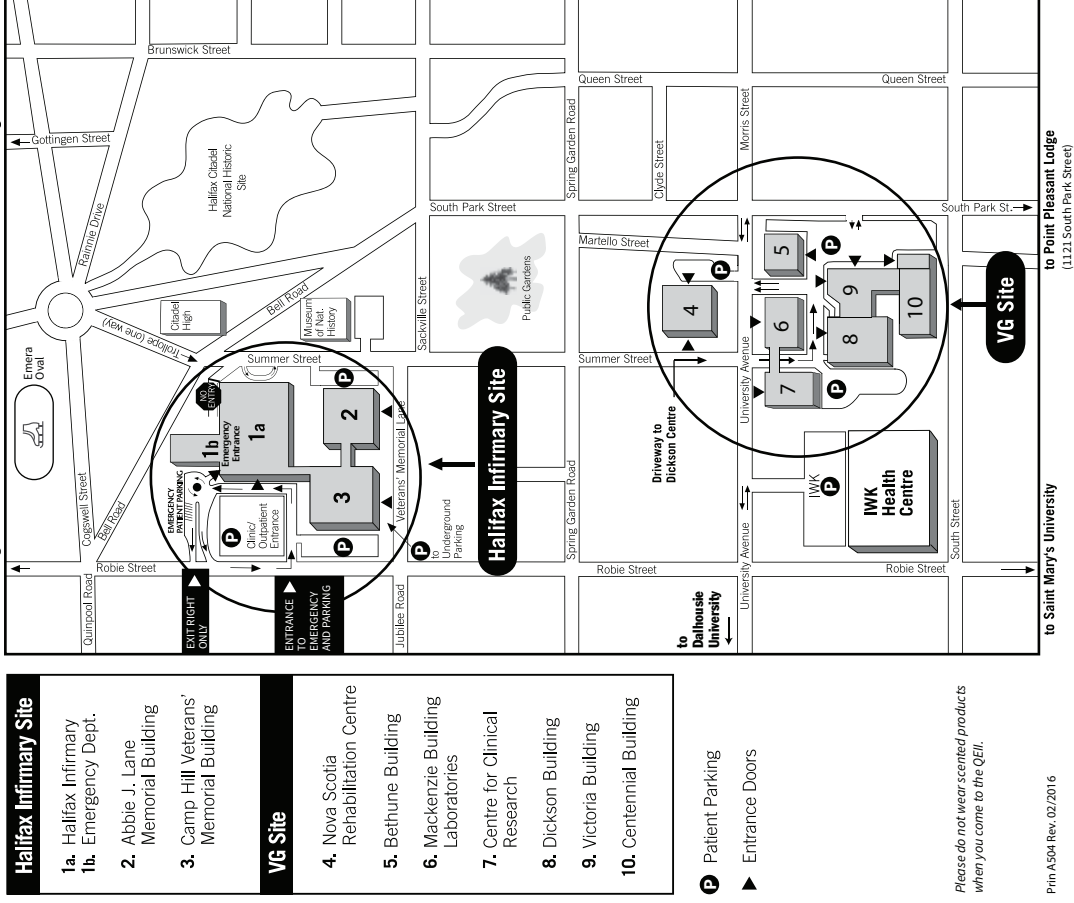
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Aussi disponible en français :
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QEII Health Sciences Centre

is made up of 10 buildings located on two sites



- Halifax Infirmary Site**
- 1a. Halifax Infirmary
 - 1b. Emergency Dept.
 - 2. Abbie J. Lane Memorial Building
 - 3. Camp Hill Veterans' Memorial Building
- VG Site**
- 4. Nova Scotia Rehabilitation Centre
 - 5. Bethune Building
 - 6. Mackenzie Building Laboratories
 - 7. Centre for Clinical Research
 - 8. Dickson Building
 - 9. Victoria Building
 - 10. Centennial Building

- P** Patient Parking
- ▶** Entrance Doors

Please do not wear scented products when you come to the QEII.

Follow-up appointment

- Keep follow-up visits with your eye doctor. Bring your medication(s) and eye drops with you to these visits.
- You will be given a follow-up appointment for the next day. Your appointment will be at the Eye Care Centre on 2A, Centennial Building, Victoria General (VG) site, or in your eye doctor's office.

Call your eye surgeon right away if you have:

- › Pain that is not helped by the pain medication we advised
- › Vision that gets worse
- › Very bad swelling
- › Nausea (upset stomach) and vomiting (throwing up) that is not helped by the medication we advised

If you cannot reach your eye surgeon, call Locating at the VG at 902-473-2222 and ask to have the ophthalmology resident on call paged, or go to the nearest Emergency Department.

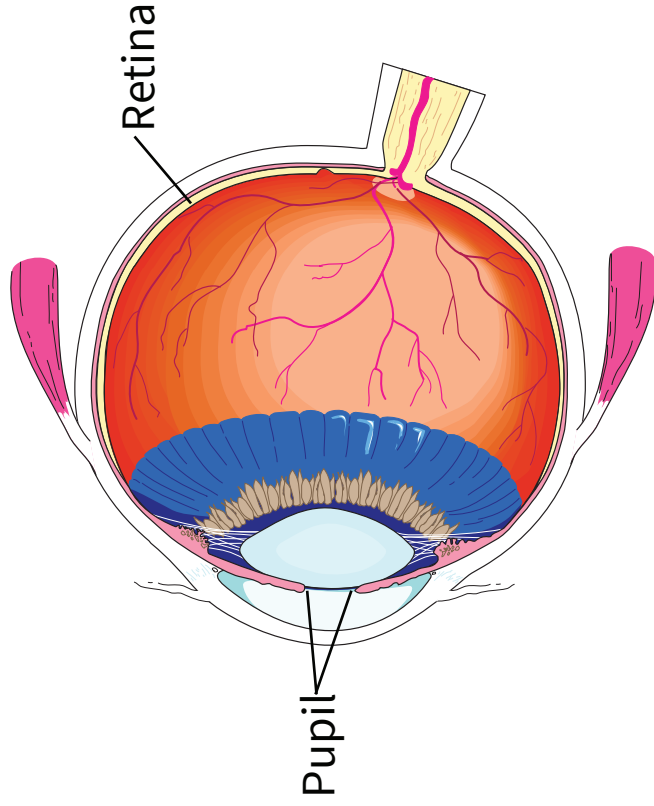
After Your Retina Surgery

After surgery

- **If you were given a local anesthetic (medication to freeze your eye):**
 - › You will be taken back to Day Surgery, where you will learn about your care at home. When your health care team says you are ready to leave, you will be discharged home with your driver (support person).
- **If you were given a general anesthetic (medication to put you to sleep during surgery):**
 - › You will wake up in the recovery area.
 - › A nurse will check on you often.
 - › Once you are fully recovered, you will be taken back to Day Surgery, where you will learn about your care at home. When your health care team says you are ready to leave, you will be discharged home with your driver (support person).

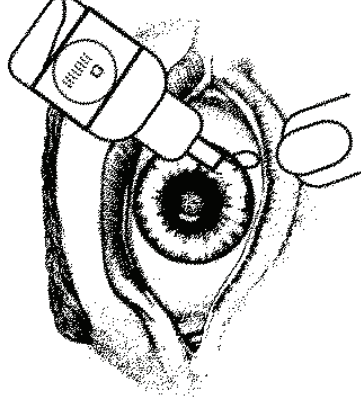
If you have gas or air placed in your eye during surgery:

- At the end of the surgery, gas or air is often left in the eye to help the retina heal. Your retina is in the back of your eye.



- Gas rises. When you lay face down, the gas pushes against your retina and helps keep it flat. If you lie on your back, the gas pushes against the lens of your eye. **This can cause serious complications.**

- Tilt your head back. You may sit or lie down.
- Open both eyes and look up. With 1 finger, pull your lower eyelid down gently.
- Place 1 drop of medication or ointment into the pocket made when your lower eyelid is pulled down.



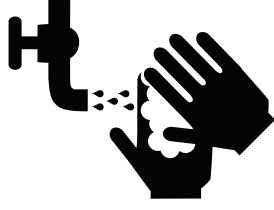
- **Do not** touch your eyelid or eye with the tip of the bottle.
- Close your eye gently. Keep it closed for 1 full minute. With a tissue, gently remove any extra drops from your cheek.
- Wait 5 minutes between drops.
- **Do not** stop using your drops for your other eye.
- Wash your hands well with soap and water.

Eye protection and/or glasses

- **Do not wear a cloth eye pad or patch at any time.** Only wear your eye shield.
- **For 1 week after your surgery, you must wear eye protection at all times:**
 - › Wear regular glasses or sunglasses during the day.
 - › Wear your eye shield at night.
- You **must** keep wearing your eye shield at night until your surgeon says it is OK to stop. This is usually for 7 days (1 week).
- You will be prescribed an eye drop that will keep your pupils dilated (bigger).
Wear sunglasses when you are out in the sun.

Using eye drops or ointments

- Take your eye medication as told by your nurse or eye doctor.
- Wash your hands well with soap and water.
- Shake the bottle well.



- Depending on what your surgeon finds during surgery, they may ask you to keep your face down and/or lay on 1 side or the other. **Do not lay on your back.**
- It is normal for the vision in your operated eye to be blurry while the gas bubble is there. As the gas bubble is absorbed (taken in), you will see the edge of the bubble in your vision as a dark line.
- As the bubble gets smaller, it will look like a dark circle getting smaller and smaller until it disappears. It may break up into 2 or more smaller bubbles. This is normal.

If you have a gas bubble or an air injection in your eye:

- **DO NOT LAY FLAT ON YOUR BACK.**
- **Do not** fly or drive at high altitudes. The gas will expand (get bigger) in your eye. This can cause pain and pressure in your eye.

If you need general anesthetic for another surgery, tell your surgeon and anesthesiologist (doctor who gives you medication to put you to sleep before surgery) that you have a gas bubble in your eye. Tell your surgeon about any other upcoming surgeries.

- Your operated eye may be sensitive to light, be red and swollen, feel scratchy or itchy, burn, be watery, or have bloody tears. This is normal. It should slowly get better during the first few weeks after surgery.
- Your vision will be blurry.
- It is normal to have a small amount of discharge on the edges of your eyelids. You can remove it by closing your eye and **gently** wiping the edges of your eyelids. Use a clean wash cloth that has been wet slightly with clean, warm water. **Do not** rub or touch your eye. You may use a tissue to wipe tears from your cheek.

- Your nurse will give you a gas bracelet and a card. A gas bracelet is similar to a MedicAlert® bracelet. It tells people that you have gas in your eye. **Keep your gas bracelet on and your card in your wallet at all times until the gas bubble is gone.**

Managing pain

- Some discomfort is normal. You may take ibuprofen (Advil®) and/or acetaminophen (Tylenol®) for discomfort, as needed.
- We recommend taking ibuprofen (**with food**) every 6 hours for the next 24 hours (1 day). **Do not** take ibuprofen if you are allergic to it or have kidney problems.

Do not do the following until your eye surgeon says that it is OK:

- › Drive a car
- › Push, pull, or lift anything heavier than 20 pounds
- › Play contact sports
- › Go back to work
- › Wash your eyes with tap water or any other cleaning solution

Your eye surgeon will tell you when you may go back to your usual activities.

What to expect after surgery

- After your surgery, your forehead and/or cheek on your operated side may feel numb from the anesthetic. This may last until the next day. You may not be able to move your operated eye fully. This may cause double vision. This is normal. It will slowly get better over time.

- **Do not** take any ASA products (like Aspirin®). Ask your surgeon before taking any ASA products or other blood thinners.
- It is normal for your eye to feel scratchy.

Medication and eye drops

Keep taking your other medication(s) as usual, including any eye drops for your other eye.

Activity

- Follow all head position instructions you were given.
- **Do not** move quickly.
- **Do not** bang or jerk your head.

Right after surgery you may:

- > Watch TV
- > Read
- > Use a computer
- > **Ride** in a car (**do not** drive)
- > Walk
- > Bathe, shower, shave your face, or wash your hair (**do not** get dirt or soapy water in your operated eye)

After 1 week (7 days) you may:

- > do household chores (like cooking meals, washing dishes). **Do not** scrub floors or lift heavy objects over 10 pounds.
- > get your hair done at a salon.
- > wear eye makeup.

For 6 weeks after surgery, **AVOID**:

- > gardening and working around dirt, dust, or chemicals.
- > heavy lifting (no more than 10 pounds).
- > heavy exercise or sports.
- > swimming.
- > straining or becoming constipated (not being able to poop) by drinking lots of fluids and eating healthy. If needed, take a mild laxative or a stool softener. Ask your pharmacist for more information.
- > holding back a cough or sneeze. Let it out gently.