

**CONSENT FORM FOR CATARACT SURGERY WITH OR WITHOUT
IMPLANTATION OF INTRAOCULAR LENS**

Patient Name: _____

Date of Birth: _____

Procedure proposed: **Right eye** **Left eye** **Cataract surgery with intra-ocular lens implant under suitable anaesthesia**

Topical anaesthesia **Local anaesthesia** **General anaesthesia**

Phacoemulsification In this method of cataract removal, the central nucleus of the lens is softened and sucked out using ultrasonic probe inserted in the eye.

Intraocular Lens implantation This is a small plastic artificial lens made of acrylic, silicone or HEMA material is surgically placed **inside** the eye, permanently.

Benefits: Improved vision and clearer sight

Risks: Posterior capsule rupture, vitreous loss, infection, retinal detachment, pain etc causing loss of sight or other problems which may cause decreased vision or sore eye or both. 5% chance of surgical complications, 1:100 chance of need for further surgery, approximately 1:500 chance of loss of sight are other risks. (see point 5 a,b,c,d,e)

Conventional glasses (spectacles), for both distance and near, are usually required in addition after cataract surgery and intra-ocular lens implant.

However during surgery, the surgeon may decide upon any other method of cataract removal and other procedures such as anterior vitrectomy or a decision not to insert a lens due to operative circumstances, technical or surgical issues.

Patient's name: _____

Patients signature: _____

Date: _____

Surgeon's name: Mr.M. U. Saeed MBBS, FRCS, FRCOphth

Surgeon signature: _____

Date: _____

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CONSENT FOR OPERATION:-

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

1. 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. The recovery time following the surgery is directly proportional to the density of the cataract. The very hard cataracts may take up to 2 months for full recovery of vision.

2. If an intraocular lens is implanted, it is done by surgery. It is intended that the small plastic lens (with supports) will be left in my eye permanently. At the time of surgery, my doctor may decide **not** to implant an intraocular lens in my eye, if for any reason he feels that the lens is not indicated or may prove deleterious to the well being of the eye even though I may have given prior permission to do so.

3. The optical and visual results of surgery in my case cannot be guaranteed. The intraocular lens implant power is calculated on the basis of a formula, after measurements of the eye with a biometry device. Accuracy of about +/-2.00 dioptres is to be considered optimal which again depends upon the type of corneal incision and the rate of healing of the wound, which again differs from patient to patient. Residual astigmatism, which may reduce with time, is to be taken as inevitable and normal. Usually the astigmatism will decrease with time. Intraocular lens implants are prescribed and implanted in the eye. **After surgery, spectacles for distance and near should be expected to get maximum benefit of treatment.**

4. The quality of vision obtained after successful cataract surgery may depend upon the status of the cornea, retina, optic nerve and other conditions of the eye. In some cataracts, even with the sophisticated instruments or scans, it is not possible to be certain that the retina is normal. In some patients it may not be possible to ascertain the potential for vision. The retina may have ageing changes (macular degeneration), may have wrinkles, water-logging, blood vessel blockages (old or new) that may be impossible to ascertain before surgery.

5. Complication during surgery: As a result of the surgery, it is possible that vision could be worse. In some cases, complications may occur weeks, months or even years later.

a. Complications may include a posterior capsule rupture, Vitreous loss, incomplete removal of lens, dropped nucleus, hemorrhage (bleeding), loss of corneal clarity, infection, detachment of the retina, glaucoma and or double vision. These and other complications may occur, as a complication of cataract surgery and may result

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in poor vision, a sore eye or both. In extreme cases there may be total loss of vision, or even loss of the eye.

b. Corneal complications: The innermost layer of the cornea, endothelial cell layer, has cells which decrease with age. Sometimes, during or after cataract surgery, the number of functioning endothelial cells may diminish further, leading to either temporary fall in vision or loss of corneal clarity and subsequently requiring a corneal graft. In hard cataracts, the ultrasound energy is liable to affect the endothelial cells. This is the reason why some patients recover their vision fast while other patients with very dense cataracts may need a longer time for recovery of their vision.

c. Specific complications of lens implantation: Complications may include uveitis, iris atrophy, glaucoma, slippage of the lens which may lead to reflections, coloured rings or distortion of objects. In some cases there is a possibility of a dislocation of the lens, either partial or total.

d. Complications due to infection after surgery, which may develop immediately or after a few weeks, may lead to pain and loss of vision.

e. Complications of surgery in general: As with all types of surgery, there is the possibility of other complications due to an anesthesia, including pain during surgery, globe perforation and other complications due to local anesthesia. Drug reactions, shock and rarely death may happen with local or general anaesthesia.

The basic procedures of cataract surgery and the advantages and disadvantages, risks and possible complications of alternative treatments have been explained to me by the doctor. 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 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.

Patient's name: _____ Patients signature: _____

Date: _____

Surgeon's name: Mr.M. U. Saeed MBBS, FRCS, FRCOphth

Surgeon signature: _____ Date: _____

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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 signing this informed consent. You have the right to ask questions about any procedure before agreeing to have the operation.

Except for unusual problems, 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 within your own eye with a **slight** cataract, although not perfect, has some distinct advantages over any man made lens.

A cataract is a cloudy natural lens in the eye which causes blurred vision. The purpose of cataract surgery is to provide clearer vision. The cataract removal will allow more light to get into the eye. 95% of cataract surgery goes ahead without any surgical complications. The improvement of vision may depend upon the status of other parts of the eye like the cornea, retina and optic nerve. If the other parts of the eye are diseased, the vision may not improve at all.

After your doctor has told you that you have a cataract, you and your doctor are the only ones who can determine if or when you should have a cataract operation - based on your own visual needs, and medical considerations, unless you have an unusual cataract that may need immediate surgery.

You may decide **Not** to have a cataract operation, **at all**.

However, should you decide to have an operation, you should understand the above documentation describes the current standard treatment for visual loss due to cataract.