

Informed Consent For Cataract Operation and/or Implantation of Intraocular Lens

 Patient _____
 First name

 Last name

D.O.B _____ SS# _____

 Surgical Eye  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 a 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.

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.

I have read and understand this page. Patient initials _____

Alternative Treatments

You may decide not to have a cataract operation at all. However, should you decide to have an operation, you should understand completely the three methods for restoring useful vision after the operation. One (1) of the three methods below is required to correct your vision after surgery:

1. Spectacles (glasses) – Cataract spectacles are usually thicker and heavier than regular eyeglasses. Cataract spectacles increase the size of objects by about 25%. Clear vision is obtained only through the central part of cataract spectacles. This 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.

2. Contact Lens – A hard or soft contact lens increases the size of objects only about 8%. Handling of a contact lens can be difficult for some individuals. Most 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.

3. Intraocular Lens – This is a small plastic artificial lens with plastic supports which is surgically placed inside your eye permanently. The intraocular lens may or may not be made from plastic that contains ultraviolet (UV) light absorbing material. The UV absorbing material absorbs UV light similarly to the natural lens that is being removed. Your doctor can help you to decide which intraocular lens is right for you, a non UV absorbing intraocular lens or a UV absorbing intraocular lens. The intraocular lens appears to show no change in the size of the objects you see. Conventional eyeglasses (not cataract spectacles) are usually needed in addition to an intraocular lens to give you the best vision possible.

Consent for Operation

In giving your permission for a cataract extraction and/or implantation of an intraocular lens in your eye, it is very important that you 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 your eye, you must have cataract surgery performed either at the time of the lens implantation or before the lens implantation.

I have read and understand this page. Patient initials _____

Consent for Operation

If an intraocular lens is implanted, it is done by surgical method. It is intended that the small plastic lens with the plastic supports will remain in your eye permanently.

The results of the cataract operation cannot be guaranteed in your or anyone's case.

At the time of surgery, your doctor may decide not to implant an intraocular lens in your eye even though you may have given prior permission to do so.

Possible Complications

Complications of Surgery to Remove the Cataract:

As a result of the surgery, it is possible that your 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, detachment of the retina, glaucoma and/or double vision. These and other complications may occur whether or not an intraocular lens is implanted.

Specific Complications of Lens Implantations:

Insertion of an intraocular lens may induce complications which otherwise would not occur. In some cases, complications may develop during surgery from implanting the lens, or days, weeks, months or even years later. Complications may include loss of corneal clarity, infection, uveitis, iris atrophy, glaucoma, bleeding in the eye, inability to dilate the pupil, dislocation of the lens and retinal detachment.

At some future time, the lens implanted in your eye may have to be repositioned or removed surgically.

Complications 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 your body, including a possibility of even brain damage or death. Since it is impossible to state every complication that may occur as a result of surgery, the list of complications in this form is incomplete.

I have read and understand this page. Patient initials _____

Patient Statement

The basic procedures of cataract surgery and the advantages and disadvantages, risks and possible complications of alternative treatments have been explained to me by my doctor. Although it is impossible for my doctor to inform me of every possible complication that may occur, the doctor has answered all my questions to my satisfaction. In signing this Informed Consent for Cataract Operation and/or Implantation of Intraocular Lens, I am stating that I have read the consent I am giving and the possible risks, complications and benefits that can result from surgery.

Surgical Eye  Right  Left

 Patient's Signature

 Date

 Patient's Name (please print)

 Witness' Signature

 Date

 Witness' Name (please print)

I have read and understand this page. Patient initials _____