

**D ISCHARGE A N D HOME CA RE IN S TRUCTIONS**

You have undergone an operation in our ambulatory surgery unit and are now being discharged home. It is important that you follow these instructions.

**GENERAL INSTRUCTIONS**

1) It is strongly recommended that a responsible adult stay with you for the first 24 hours following surgery.

2) The sedation you have received can impair judgment, coordination, and memory. Your activities must be restricted accordingly.

3) **No Driving, alcohol or signing of legal documents for 24 hours.**

4) Resume your regular diet and any medication you were taking from other physicians prior to surgery.

**SURGICAL SITE INSTRUCTIONS**

1) **Do not rub eyes at any time for 2 weeks.**

2) The anesthetic drops you received will wear off within 1-2 hours. It is normal to feel some mild

discomfort, scratchiness, or burning. You may use Tylenol or ibuprofen for mild discomfort every four hours if needed. You may use Refresh or Systane lubricating eye drops as needed.

3) It is important to keep the eye dry. You may shower after your next day post-operative visit. Do not get

 anything unclean in your eye including dust, grass clippings, shampoo, etc.

4) Please take it easy on the day of surgery. Do not exert yourself or lift anything over 15 pounds for 24 hours. For 1 week, please avoid weight training exercises (including Pilates, Yoga and weightlifting, cross fit, HIIT).

5) Avoid swimming and water related activities (spa, hot tub, sauna) for 2 weeks.

6) You may soften crusty, sticky or discolored matter from your eyelids and lashes by gently applying a warm washcloth for a few minutes and remove straight off. **Do not rub or wipe eyes.**

7) Use the eye shield/tape any time you will be sleeping (naps included) for 1 week.

8) Use sunglasses provided by NovaMed for protection any time you are outside (cloudy or sunny) for one week. They are designed to fit over regular glasses (if applicable to you).

8) **Call your surgeon immediately if y o u experience fever, severe pain, nausea, vomi ti ng, drainage, bl eeding, or redness/swell i ng of the operative eye.**

9) If applicable to you, follow the eye drop instruction sheet given to you starting today.

 10) May resume use of eye makeup in 1 week.

 11) It is normal for your vision to be blurry while the eye is dilated. The eye may remain dilated up to 48

 hours after surgery.

**POS T- OPERA TIV E A PPOIN TMEN T**

A follow-up appointment with has been made for you on at .

**IF YOU HAVE ANY PROBLEMS OR QUESTIONS, PLEASE FEEL FREE TO CALL AT ANY TIME. In case of emergency, contact: (608) 827-7705 or toll free (888) 708-3937. Please identify yourself as a surgery patient**

**and give your surgeon’s name.**

Signature of person giving instructions Date & Time

I hereby acknowledge that I have received these discharge instructions and have no other questions. I understand that it is important to follow these instructions

Signature of patient or authorized person Date