

Patient: \_\_\_\_\_

DOB: \_\_\_\_\_

Surgeon: \_\_\_\_\_

DOS: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Additional/Verbal Orders are to be written on reverse side

**PRE-OP ORDERS**

I. Have patient void, if needed, prior to entering preop area

**II. Medications**

 1.  Proparacaine 0.5% one drop to operative eye x 1 dose Use first in series of drops

**2. Antibiotics**
 Ciprofloxacin 0.3% one drop to operative eye every 5 minutes x 3 doses

 Ofloxacin 0.3% one drop to operative eye every 5 minutes x 3 doses

 Tobramycin 0.3% one drop to operative eye every 5 minutes x 3 doses

 3. **Pupillary dilation drops**  Yes  No If yes following antibiotic drops ordered above

 Tropicamide 1% (1) gtt given to operative eye every 5 minutes x 3 doses

 Phenylephrine 2.5% (1)gtt given to operative eye every 5 minutes x doses

 Cyclopentolate 1% (1) gtt, three doses given to operative eye every 5 minutes x 3 doses

 Atropine 1% to operative eye x 1 dose

**4. Other**
 Pilocarpine 2% one drop to operative eye x 2 doses, 5 minutes apart

 Brimonidine 0.2% one drop to operative eye x 1 dose

 Prednisolone Acetate 1% one drop to operative eye x 1 dose

 Acetazolamide 250mg Tab PO x 1 dose

 Nevanac 0.1 % one drop to operative eye x 1 dose

 \_\_\_\_\_

**III. Surgeon request for type of Anesthesia**
**OR Procedures**
 Start saline lock

 IV Sedation

 Peribulbar Block

 Retrobulbar Block

 Topical

 Honan

 Yes

 No

**Laser Procedures**
 Topical anesthetic eye drops only

**POST-OP ORDERS**
 Diet: Resume normal diet

 Discontinue saline lock when patient tolerates PO fluids

 Activity:  Return to preoperative activity  Other \_\_\_\_\_

 Medications:  Resume normal medications  Other \_\_\_\_\_

Return to the doctor's office on \_\_\_\_\_

Other instructions \_\_\_\_\_

 Discharge home when patient is alert, tolerating PO fluids and vital signs in expected range

Signature \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

 AM

 PM