



Do's & Don'ts with Refractive Surgery

Refractive Evaluation

- Make sure to check dominance and start a discussion with patient about monovision if the patient is over 40.
- Make sure to emphasize Allegretto technology & surgeon experience to patient
- Do an orbscan or pentacam in office if you have one, but please don't confirm LASIK or PRK for the patient until they have been sent for additional testing to Tylock Eye Care & Laser Center. (Dr. Tylock prefers to use the Belin analysis on the pentacam to determine candidacy and requires a corneal strength test prior to confirming LASIK.)
- Do introduce the possibility of Crystalens or Restor if patient is over 55 years of age. Please do not recommend preferred lens prior to additional testing by Tylock Eye Care & Laser Center, because each lens has limitations on efficacy based on certain conditions.

LASIK

1 Day Post-Op

- Make sure to check for infections, inflammation (DLK), or stria
- Stain stria with fluorescein to determine Micro vs. Macro
- Please send patient immediately or contact Tylock Eye Care if any of the above issues are found on one day visit

1-2 Week Post-Op

- Make sure flap is stable and in position
- Refract patient if BCVA is not at expectation level
- Treat Dry Eyes with Artificial Tears, PM ointment, and if really dry use Restasis & FML ointment
- Follow up accordingly

2-3 Month Post-Op

- Same as prior post-op
- If refractive error is significantly affecting patient's vision, resend to Tylock Eye Care for enhancement evaluation

6 Month Post-Op

- Same as prior post-op

1 Year Post-Op

- Congratulate patient and graduate to annual eye exam



PRK

1 Day Post-Op

- Check to make sure contact lens is in place and there are no infiltrates
- Emphasize importance of antibiotic

4 Day Post-Op

- Do not remove contact lens for at least 4 days
- On day 4 remove contact lens and check for Epi Zipper
- If corneal abrasion still present replace bandage lens with ne lens
- If epi Zipper present the discontinue antibiotic and start FML drops QID x 2 weeks, then taper to TID x 1 week then BID x 1 week.
- Refresh PM recommended for night time to decrease dry eye issues and prevent Recurring Corneal Erosion

14 Day Post-Op

- Check corneal epithelium for healing pattern
- Watch for haze post PRK
- Monitor medication schedule
- Emphasize importance of Vitamin C (1000 mg daily)
- Recommend UV protecting sunglasses

1 Month Post-Op

- Monitor corneal EPI for haze
- If haze noted alter steroid schedule to decrease
- Please keep Tylock Eye Care updated on patients haze status if noted

3 Month Post-Op

- Refract patient
- Monitor for haze

6 Month Post-Op

- Refract patient
- If patient needs enhancement, return to Tylock Eye Care for further evaluation
- Monitor for haze

1 Year Post-Op

- Congratulate patient and graduate to annual eye exams