

Patient Advisory on Eye Care, Dilation, and Injections

Practice healthy living to ensure optimal ocular health. This includes maintaining a healthy diet and taking supplements, if advised by your physicians. It is recommended that you avoid smoking as this can worsen many forms of eye disease, including uveitis and macular degeneration. Missing your medication can impact your eye condition negatively. If you are taking multiple eyedrops, it is recommended that you wait at least five minutes in between instillation of each drop so that one eye medication is not flushed out with the medication instilled after it.

If you have sensations of flashing lights, visual obscurations, multiple new floaters, a curtain in your vision, a decrease in visual acuity, metamorphopsia, eye redness, or eye pain, then you may be experiencing a serious problem and should report to a physician in our clinic, another eye clinic, or an emergency room urgently. Call 911 if you need immediate help and cannot travel. You can call our offices and ask to speak with the physician on call for any issues.

We offer electronic access to your medical records. This means you can get the results of any testing faster than by calling, emailing, or sending paper requests. Additional information about this service is available at the front desk and on or website.

Dryness of the ocular surface is very common and can be managed in a stepwise manner. We recommend initial management with preservative free artificial tears up to 6 times a day to the affected eye(s) and artificial tear ointment (such as Systane gel) every night before bed. Some patients with moderate to severe dry eye will improve with punctal plugs, which increase the tear reservoir.

Dilation with tropicamide, atropine, and/or phenylephrine is generally necessary to examine the posterior parts of eye. If you are dilated for the purpose of examination, your vision may be temporarily blurry. There are shades at the front desk to help with bright lights, but if you do not feel safe driving, we recommend you reach out for assistance. Patients with poor vision are recommended to avoid driving if they feel unsafe behind the wheel. We recommend patient awareness of state driving requirements. We are happy to refer patients to a low vision specialist for testing for license restrictions. If you wish to refuse dilation on any visit, please let your technician know.

Information on eye injections:

Injections of medication inside or around the globe of the eye are offered to patients with certain vision threatening eye conditions. The potential benefit of eye injection is improvement in the function of the eye and/or preservation of the function of the eye. Not all patients improve with eye injections, and most patients require several months of injections scheduled as frequently as monthly before they improve or are switched to a different medication. The potential risks of ocular and periocular injections include failure to obtain desired results, pain, need for further surgery, bleeding inside or outside the eye, infection, scarring, inflammation, loss of vision, double vision, lid drooping, damage to the eye surface, perforation of the eye, and loss of the eye. Injections may also potentially result in cataract formation, glaucoma (high eye pressure, which is treated with medications and/or glaucoma surgery), and retinal detachment. Rare adverse reactions to anesthetic agents include stroke, coma, and death. The alternatives to eye injections include observation (meaning no medication or treatment is given and the condition may worsen) and (in select cases) laser treatment.



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There are two main classes of drug injections given inside or around the eye globe:

- 1) Anti-vascular endothelial growth factor (anti-VEGF) agents: Drugs in this class include bevacizumab (Avastin), ranibizumab (Lucentis), aflibercept (Eylea), and brolocizumab (Beovu). These drugs have the potential to help with swelling (edema) inside the retina and abnormal blood vessel growth inside the eye. Patients are offered drugs in this class based on their clinical appearance and the best judgement of their physician.
- 2) Steroids agents: Drugs in this class include triamcinolone (Kenalog or Triescence), dexamethasone implant (Ozurdex), and fluocinolone acetonide implant (Iluvien, Yutiq). Steroid drugs have the potential to cause cataracts and increase eye pressure (glaucoma), which can require medication or surgery to treat. Steroid drugs are often used to improve swelling (edema) in the eye, inflammation inside or around the eye, and abnormalities related to retinal vascular disorders (such as retinal vascular occlusions).

By signing this form, I indicate that I have read and that I understand this patient advisory. I specifically understand that dilation may cause temporary blurring of my vision, that signs of serious eye disease should be brought to the immediate attention of a specialist, and that I have received information about the indications and safety of eye injections.

Patient or Legal Representative Signature:	
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Date of Signature:	