

Patient Name _____

DOB _____

Cataract surgery is such an exciting opportunity, and we're honored you chose Collins Vision for yours. See below for important tasks and considerations before surgery.

PRE-SURGERY TO-DOS:

- Arrange for someone to bring you to St. Mark's Surgery Center and pick you up after surgery. Please let us know if you would like assistance with transportation.
- Complete your St. Mark's Online Patient Pre-Admission
- Fill out the bed tags that you received at your Health & Physical appointment.

3 DAYS BEFORE SURGERY:

- Begin administering your drops per your **Cataract Surgery Drop Schedule** (be sure to read that document carefully)
- Start taking **Dry Eye Formula Supplements**: Take 1 tablet by mouth twice a day (morning and evening) with food to avoid an upset stomach.
- Start **OcuSoft Lid Scrubs**: Scrub the lids twice a day (morning and evening) to rid your eyelids of debris and bacteria.

DAY OF SURGERY REMINDERS:

If your surgery is in the morning, do not eat, drink or chew anything after midnight. If your surgery is in the afternoon, do not eat, drink or chew anything after 6:00 a.m. on surgery day.

Medication

- Use your prescribed drops (refer to **Cataract Surgery Drop Schedule**) the morning of your surgery in the surgical eye only.
- Do not take any supplements, including Dry Eye Formula, the morning of surgery
- Take your regularly prescribed heart or blood pressure medications with a small sip of water the morning of surgery unless instructed otherwise.
- If you are diabetic, do not use insulin or take diabetic medications.

Attire

- Wear loose-fitting clothing that buttons down the front.
- Please do not wear stockings or pantyhose.
- Please do not wear jewelry.
- Please do not wear makeup, face cream or body lotions.

Upon Arrival at St. Mark's Surgery Center

- Sign in at the reception desk
- Plan to be at St. Mark's for 3 to 4 hours.
- We will call whoever is picking you up after surgery once you've been moved to a recovery room.

Reminder: You will need your insurance cards, bed tags and valid photo ID to check in at St. Mark's

Patient Signature _____

Surgical Coordinator Signature _____