



## FAQ- Anesthesia for Eye Surgery

### Can I eat before my surgery?

You can NOT eat solids within 6 hours of your scheduled surgery. You can have clear liquids until 2 hours before surgery. If you are an Insulin dependent diabetic, please take ½ normal dose insulin medications, and eat a light meal (ex: tea and toast) prior to your surgery. You should carry a snack or juice if you get low blood sugar. Avoid any dairy products.

### Should I stop smoking before my surgery?

Yes. Do not smoke the day of your surgery.

### Should I take my medicine?

Almost all medication should be continued on the day of surgery.

There are two types of medications that should be altered before surgery:

1-If you are insulin dependent diabetic, take one half of your prescribed dose of Insulin. Since you won't be eating, it is important that your blood sugar does not get too low.

2-Stop any medication for weight loss especially GLP-1 Receptor Agonists (Ozempic, Mounjaro). These medications should be stopped at least one week before surgery.

### Do I need to see my primary care doctor (provider)?

Yes. It is a regulation that all patients need a full medical history and evaluation stating that they are an acceptable candidate for surgery in an outpatient center. It is a good idea to bring a list of medications that you take and the reasons you take each one.

### Who will give the anesthesia?

Your surgeon will determine which type of anesthesia is best for you. An anesthesiologist will administer the anesthetic that your surgeon wants.

### What are the different kinds of anesthesia for eye surgery?

There are two aspects of eye anesthesia, sedation and numbness.

Sedation-Most patients get a light sedative. That is the safest way to have the surgery. We do not have the equipment to administer general anesthesia. Being totally asleep is not an option we offer.

Numbness- there are two ways to make the eye numb: local injection and/or drops. Your surgeon will decide which type of numbness is best for you. Please note that patients have reported that the experience for the second eye was different than the first even though the same anesthesia was administered as the first eye. (The second eye effect).

### Can I have total anesthesia and wake up when the procedure is finished?

We do not have the equipment to administer general anesthesia. Being totally asleep is not an option.

### Can I have no anesthesia?

All patients have an IV placed and are monitored in accordance with our policy. You are not forced to have any sedation.

### How long will the anesthesia last?

If you receive a local injection for cataract surgery it will usually lasts 2-3 hours. The numbness may extend up to your forehead and down to your upper teeth.

Anesthesia for glaucoma procedures can last up to 8 hours.

Sedation usually lasts 1-2 hours. However, some patients are very sensitive and may be sleepy the rest of the day.

Plan to relax for the remainder of the day, and do not make any significant decisions on the day of surgery.

### Will I get nauseated?

We do not use any narcotics which are the most common reason for patients to get nauseous. Rarely patients get nauseated despite our precautions.

### Is there a separate charge for anesthesia?

Yes. The anesthesiologist is not an employee of the center. They are an independent contractor who is providing a service to you and will bill separately.

### What are possible complications from the anesthesia?

There are complications related to sedation, and complications related to administration of the numbing medicine. Most of these complications are rare.

Complications related to sedation include unresponsiveness, agitation, not breathing, shallow breathing, low blood pressure, dizziness, falling.

Complications related to administering the numbing medicine include allergic reactions, damage to the eye, damage to nerves or muscles near the eye resulting in vision loss or double vision, bleeding, and discoloration (black eye).

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