

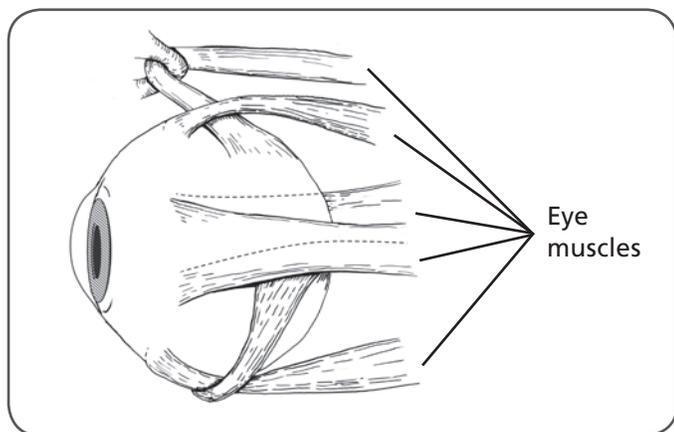
Let's Talk About...

Eye Surgery

Ophthalmology (op-thal-MAL-oh-gee) is the study of the eye. If your child has a disease or problem with their eyes, a doctor called an ophthalmologist will treat them. Some of the common childhood eye surgeries are described below.

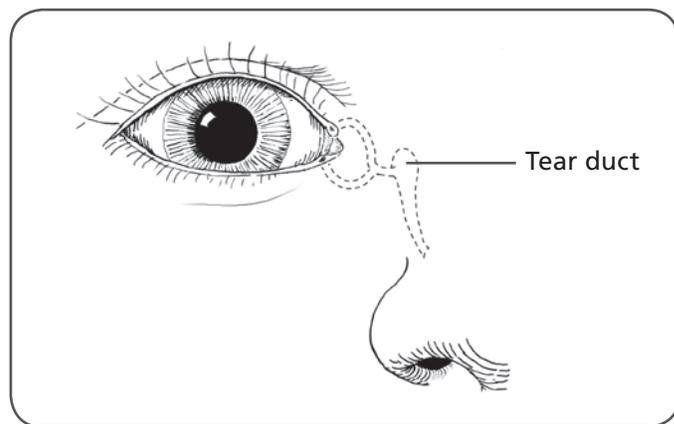
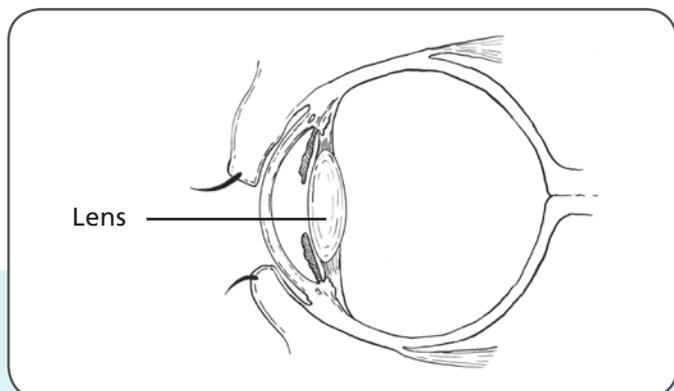
Eye muscle surgery

Eye muscles control eye movements. They control the ability to look straight ahead, up and down, left and right, and at an angle. There are 6 main eye muscles. This surgery corrects problems with how the eye muscles work.



Cataract (CAT-err-act) removal

A cataract is clouding of the lens in the eye. The lens is a clear part of the eye that adjusts to help you see close and far away. This surgery removes the cloudy lens and replaces it with a clear lens.



Nasolacrimal (nay-zo-LACK-rah-mall) drainage surgery

Tears nourish the cornea (the clear covering of the eye), prevent dry eyes, and smooth the surface of the eye. The nasolacrimal system, or tear drainage system, drains tears from the surface of the eye to the nose. The nasolacrimal or tear duct is the small opening in the lower, inner corner of your eye. In this surgery, the doctor uses a probe to help open the tear drainage system. This will keep the tears flowing properly.

Another type of nasolacrimal surgery is balloon dilation. The doctor puts a tiny balloon into the tear drainage system. The doctor inflates the tiny balloon. This makes the nasolacrimal duct bigger and improves tear drainage.

Sometimes the doctor places a "Crawford" tube in the tear duct after dilation. This tiny tube keeps the duct open and helps it to drain. If your child has a drainage tube after surgery, you do not have to do any special care. If a large loop of this tubing (looks like a tiny thread) appears at the inner corner of your child's eye, please tape the loop of this tiny thread to the bridge of your child's nose and call your doctor's office.

Diet

When can my child eat?

After your child wakes up from surgery, you can give small sips of clear liquids or ice chips every 5–10 minutes. If your child is under 2 years of age, try giving water, apple juice, or Pedialyte®. If your child is older, try a Popsicle®, Gatorade®, plain Jell-O®, decaffeinated Coke®, or 7-UP®. Help your child drink every 15 to 30 minutes, but do not force it. If your child feels like eating, try cooked cereal, toast, or crackers then progress to their regular diet.

What should I do if my child has nausea or vomiting?

Anesthesia, movement of the car, or pain medicine can cause nausea and vomiting. You can control nausea and vomiting by helping your child lie quietly and decrease movement. If your child vomits, wait 30 to 60 minutes for the stomach to settle down. Begin with small sips of clear liquids or ice chips every 5–10 minutes.

If your child is under 2 years of age, try giving them water, apple juice, or Pedialyte®. If your child is older, try a Popsicle®, Gatorade®, plain Jell-O®, decaffeinated Coke®, or 7-UP®. It is very important for your child to drink liquids after surgery to avoid dehydration (not enough body fluids). It is ok if your child does not want to eat solid foods for a day or two after surgery.

Once your child stops feeling sick, begin giving solid foods. Start with cooked cereal, applesauce, toast, crackers, or pasta. Avoid fatty or greasy foods such as french fries and hamburgers. Avoid restaurant food, if possible.

How will I know if my child is drinking enough?

After surgery, your child may not have enough body fluids. Some signs of not having enough fluids include dark yellow urine, a dry mouth (no spit), chapped lips, and the soft spot on your baby's head sinking inwards. If you notice any of these things, give your child more to drink. Your child should urinate (pee) normally within 24 hours after surgery.

A baby should have 6–8 wet diapers in a 24-hour period, and an older child should urinate every 6–8 hours.

Pain

How can I tell if my child is in pain?

No surgery is pain free, but it is important for your child to be comfortable so they can heal. If your child is older, your child can tell you about their pain and you can talk to them about it. If your child is younger or developmentally delayed, your child may communicate by moaning, whimpering, making a face of pain, crying, being irritable, being inactive, not eating, or not sleeping. In all cases, you should comfort your child and listen to their concerns.

Eye surgery may cause your child to feel like your child has something in their eye. It is important for your child not to rub or put their fingers in their eye after surgery. This can cause harm to the surgery. The eye may be red (blood shot) for several days or weeks after surgery. This is normal. The eye also may be sensitive to light or wind. Sunglasses or shading the eyes will help.

How can I help with my child's pain?

The best way to treat pain is to use the pain medicine your child's doctor prescribed. Use it according to instructions. You may also use Children's Tylenol®. Please note that many prescription pain medicines contain Tylenol®. Make sure your child is not receiving too much Tylenol® by talking with the nurse. You may also use children's ibuprofen. If your child is on antibiotics, ask the nurse before you go home about when your child received their last dose in the hospital. At home, adjust the antibiotic schedule to your child's routine and give it according to instructions.

What should I do about the patch on the eye and giving eye medicine?

If your child has an eye patch in place, please do not remove it to put medicine in the eye until the day after surgery. If, for any reason, the patch comes off before the next morning, start the eye medicine drops. Put the metal eye shield back over your child's eye and place a piece of tape across the eye shield from the forehead to the cheek. The hospital may send arm restraints home with you to keep the patch in place and your child's fingers out of the eye after surgery. You may use the patch when you think it is necessary to protect your child's eye.

You may need to restrain your child while you put medicine in their eye. You can swaddle an infant with a blanket. Toddlers will often resist anyone or anything coming near their faces, so you may need help from another person. Try keeping your child's head and shoulders still instead of their whole body and elevate their head a little. Pull the lower eyelid down gently and out to form a cup. Drop the solution into this cup.

Another way to give eye drops is to put a drop over the side of the closed eye next to the nose. Hold your child very still. When your child opens their eye the eye drops will go into the eye. This works well when you cannot get the eye open for the drops. Make sure the drop goes in the eye and do not let the tip of the dropper touch any part of the body. Dropper tips can pick up germs.

Wound care

What should I do about tearing and drainage from the eye?

Your child may have blood in their tears the day of surgery. This is normal. It is also normal to have mucous discharge. Tears and clear mucous discharge may continue for the first several days after surgery. This may cause your child's eyelids to stick shut. You can gently remove the discharge with a clean, warm washcloth. If the discharge is green or yellow, and there is quite a bit, there may be an infection. Please call your doctor's office. Otherwise, this should go away about a week after surgery.

What should I do about swelling?

It is normal to have a small amount of swelling during the first 24–48 hours after surgery. Put your child's head up on pillows or have your child sit up in a recliner chair to help decrease swelling. You can apply a cool washcloth for 10 minutes every hour. If there is a lot of swelling, you cannot open the eye, or the swelling goes into the cheeks and forehead, please call your doctor's nurse. If the swelling starts after the first 48 hours, please call your doctor's office.

Bathing and showering

When can my child take a bath or shower?

You can bathe your child the day after the operation. Be careful to wash their face and eyes gently with a soft warm washcloth. Do not let soap get in their eyes. Although soap is not harmful, it is painful.

Behavior

What is normal behavior after surgery?

It is very normal to see behavior changes after surgery. If they last longer than 3–4 weeks, call your pediatrician. Some examples of behavior changes include bed-wetting or acting out, changes in sleep and eating patterns, or nightmares. Be patient with your child, eventually the behavior will diminish. Understand that your child has been upset by surgery. Most changes in behavior only last a few days to 2 weeks.

Activity

How active can my child be?

In general, your child should avoid any activity that causes pain to the eye that had surgery. Surgery often affects coordination. To keep your child safe, it is important to follow these guidelines:

- Do not let an infant or young child walk without help.
- Keep side rails up on cribs.
- Keep your child from activities such as climbing up a ladder or going down a slide.
- Have your child avoid jungle gym equipment, a bike, scooters, snowboards, or roller blades.
- Do not let your child swim in a swimming pool or play in a sandbox for 2 weeks after surgery. Avoid hot tubs.
- Keep your child from rubbing their eyes or putting fingers in their eyes after surgery. This can cause harm to the surgery. Your child may feel like your there is something in their eye and it may be red

(blood shot) for several days or weeks after surgery. This is normal.

- If your child is older, limit driving a car or operating anything that requires quick decisions.
- Do not rush your child back to school. Talk with your child and decide together if it is time to go back to school. Generally, your child can return to school 2 days after surgery.

Calling the doctor...

When should I call the doctor?

If you have questions or problems about the surgery, please call your doctor's office. You should also call the doctor if your child has any of the following symptoms:

- Temperature more than 101°F
- Drainage from the wound increases
- Swelling increases
- Bleeding
- Uncontrolled pain
- Numbness of fingers and toes
- Signs of dehydration (dry mouth, less than six to eight wet diapers, lack of tears)
- Excessive diarrhea or constipation
- Signs of chest pain, shortness of breath, or any other emergency: Go to the Emergency Room or Call 911!

Follow-up appointment

Arrange a follow-up appointment at the time of surgery. If you did not make an appointment at that time, please call your doctor's office and make an appointment for one week after surgery.