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Board Certified Cataract/ Lens Implant Surgeon

***Consent to Remove a Cataract and  
Insert an Intraocular Lens Implant in its Place***

***What Is a Cataract?***

A cataract is a clouding of the normally clear focusing lens of your eye.

***Symptoms***

When your cataract becomes cloudy (opacified) enough it interferes with your vision. Depending on the size, thickness and type of cataract, you may notice a decrease in your distance vision only, a decrease in your near vision only, or a decrease in both your distance and near vision. With cataracts, your vision may vary depending on lighting. You may see halos around lights at night, glare, and you may experience ghosting (double/twin vision). Your sight may be dim, hazy, or cloudy and colors may look dull.

***Cause***

Cataract formation is a normal maturing process by which your clear lens proteins become cloudy, similar to the process of your hair becoming white. At birth your lens is clear. Around age forty your lens may begin to yellow. You begin to need reading glasses or bifocals at this age. Around age sixty your yellowing lens becomes cloudy and hardens to a rubbery consistency. You begin to need trifocals around this age.

When the clouding begins to interfere with your vision or an eye test shows poor vision, the cloudy lens of your eye is called a cataract.

Sometimes eye conditions and injuries, or medical conditions such as diabetes, lead to cataracts. Ultraviolet light or cortisone (steroids) may accelerate cataract formation.

### ***Cure***

Remove the clouded cataract lens. Replace the cataract with a clear artificial lens implant – a small man made lens placed inside the eye permanently.

The intraocular lens implant (IOL) provides normal vision. It is smaller than a contact lens and has supports to center and hold it inside the sac that formerly held the cataract. This plastic or foldable soft lens implant remains in your eye permanently. It lasts a lifetime and never needs cleaning. We custom calculate the power of your lens implant. We first measure the shape and size of your eye. Then a computer program assists us in selecting your implant power from the measurements obtained. Generally we try to use an implant that will improve distance vision, or to balance the visual needs of your fellow eye, or to meet an individual need.

Intraocular lens implants are available in a variety of types:

**1. *Standard IOLs*** are monofocal, meaning they have one power throughout the lens. They provide vision at one distance

only (far, intermediate or near). After surgery with a standard IOL you will require eyeglasses in order to read, use a computer or view objects in the middle distance. In a variation called “*monovision*” Dr. Niswander could implant standard IOLs with different powers, the first for near vision in one eye, and a second for distance vision in the other eye. This combination of a distance eye and a reading eye may allow you to read without glasses. It has been employed quite successfully in many patients, but not all. We will discuss this option if appropriate for you.

**2. Premium Multifocal IOLs** offer the possibility of seeing well at more than one distance, without glasses or contacts. They have a dual focus for far and near simultaneously. Best results are obtained when used in both eyes, but these lenses can be used in one eye only. Clinical studies show that 80 percent of people who received premium IOLs didn't need glasses for any activities after their cataract surgery; 15 percent required glasses part of the time, and 5% of patients still needed glasses full time. No guarantee is made that you will not need glasses after cataract removal. Dr. Niswander offers several types of premium lens implants.

### ***Alternative Treatments***

You may choose to live with your cataract. A cataract does not harm your eye, cause pain, or tearing. It simply interferes with your vision.

### ***Procedure Description***

Numbing drops put your eye to sleep, and relaxing medicine is given via an intravenous infusion (IV). The

procedure is performed through a no-stitch entrance, like the self-sealing one-way valve on a basketball.

In a cataract procedure, we remove the clouded (cataractous) lens of your eye. We replace your clouded natural lens with a clear artificial lens implant. Your natural lens has two parts: the clouded center, and the clear sac. Ultrasound (phacoemulsification) waves liquefy the clouded center and suction vacuums the liquefied material out of its clear sac. Into the clear sac we place an artificial lens implant. The clear sac shrink-wraps around your implant to hold it permanently in place without stitches. If we cannot save the lens sac, we place the implant in front of your iris.

The clear sack that shrink-wraps around your implant may later become cloudy. If it does, you will need another and different procedure called a YAG laser. The YAG laser clears the cloudy tissue (also called an after-cataract or a secondary cataract.) It is not a return of the first cataract. Neither cataract ever comes back.

### ***Risks***

The results of surgery in your case cannot be guaranteed. Complications may occur weeks, months, or years later and require additional treatment or surgery.

***Risks of surgery in general:*** There is the possibility of complications due to anesthesia, drug reactions, or other factors, which may involve other parts of your body, including the possibility of brain damage, death, heart attack and stroke. Risks of anesthetic injections include perforation of the eyeball, damage to the optic nerve, interference with

circulation to the retina (stroke to the eye), respiratory depression and high blood pressure. To prevent anesthetic injection complications, Dr. Niswander seldom uses anesthetic injections. Instead, he uses highly effective numbing eye drops.

***Risks of eye surgery in general:*** Total loss of the eye, total loss of vision, worse vision than you had before surgery, infection, hemorrhage, and failure of the incision to heal.

***Risks of cataract surgery:*** Inability to remove the whole cataract, requiring another procedure to remove cataract remnants; opening of the back of the lens sac (capsule); vitreous coming forward requiring removal (vitrectomy); unround pupil; sluggish pupil; inability to dilate the pupil; loss of corneal clarity; irritation and redness; light sensitivity; retinal swelling; retinal detachment; glaucoma; double vision; and lid droop.

***Risks of implant surgery:*** Inability to place the implant in the eye at all; inability to place the implant in the lens sac (capsule); the need to put the implant in front of the iris instead of behind the iris; and the possibility that at a later date the implant may have to be removed, replaced, or repositioned.

***Risks of Premium Multifocal Implant:*** While a multifocal implant can reduce dependency on glasses, it might result in less sharp vision, which may become worse in dim light or fog. It may also cause some visual side effects such as rings or circles around lights at night. Driving at night may be

affected. If you drive a considerable amount at night, or perform delicate, detailed, “up-close” work requiring closer focus than just reading, a standard monofocal lens in conjunction with eyeglasses may be a better choice for you. If complications occur at the time of surgery, a standard monofocal IOL may need to be implanted instead of a premium multifocal IOL.

It is impossible to state every complication that may occur.

### ***Benefits - Expectation***

You can expect both your distance and near vision to improve. You should see brighter colors, less haze, decreased glare, and decreased haloes around headlights. A cataract procedure does not cure tearing, burning, itching, tired eyes or dropped lids.

### ***Probability of Success***

You have a 98% probability that you will attain 20/40 legal driving vision or better if there are no other preexisting conditions such as hardening of the arteries of the retina, macular degeneration, old stroke of the eye, glaucoma damage, corneal dystrophy, etc. With today's technology, you have a 50% probability that after cataract replacement with a standard implant lens, you will need no glasses to pass your driver's license test.

### ***Permission***

I have read, or had read to me, all five pages of this consent form. I have received all the explanation that I wish to receive and I have been given the opportunity to ask questions. I have no further questions. I wish to have a cataract operation with an intraocular lens implant on my **RIGHT** or **LEFT** eye.

I choose to have near vision after cataract surgery provided by (Please write **“glasses,” “multifocal lens,”** or **“monovision lens,”**)

\_\_\_\_\_ Patient initials \_\_\_\_\_

\_\_\_\_\_

**Signature**

\_\_\_\_\_

**Date**

\_\_\_\_\_

**Witness**

\_\_\_\_\_

**Date**