

This information is to help you make an informed decision about having Laser Assisted In-Situ Keratomileusis (LASIK) surgery to treat your nearsightedness, farsightedness, and/or astigmatism. Take as much time as you wish to make a decision about signing this form. You are encouraged to ask any questions and have them answered to your satisfaction before you give your permission for surgery. Every surgery has risks as well as benefits, and each person must evaluate this risk/benefit ratio for himself/herself in light of the information that follows.

Spectacles and contact lenses are the most common method of correcting nearsightedness (myopia), farsightedness (hyperopia), and astigmatism. When tolerated well, they are likely to be a good alternative to LASIK surgery. Refractive surgery is continually evolving and other refractive procedures may be available as an alternative to LASIK. You should also be aware that having any refractive procedure could potentially disqualify you from some professions, including the military and certain law enforcement agencies.

LASIK permanently changes the shape of the cornea. The surgery is performed under a topical anesthetic (drops in the eye). The procedure involves folding back a thin layer of corneal tissue (corneal cap) and then removing a thin layer of corneal tissue with the light from an Excimer laser. After removal, the flap (corneal cap) is replaced and bonds back into place without the need for stitches. The result of removing thin layers of tissue causes the center of the cornea to flatten in the case of nearsightedness; steepen in the case of farsightedness; or become rounded in the case of astigmatism. This reshaping process changes the focusing power of the cornea. Although the goal of LASIK is to improve vision to the point of not being dependent on glasses or contact lenses, or to the point of wearing thinner (weaker) glasses, this result is not guaranteed.

You should understand that LASIK surgery will not prevent you from developing naturally occurring eye problems such as glaucoma, cataracts, retinal degeneration or detachment. There is also a 1 in 2,000 chance you may develop keratoconus (steepening and thinning of the cornea) following LASIK surgery. After the procedure, you should avoid rubbing the eye. Your eyes may be more susceptible to traumatic eye injury after LASIK, so protective eyewear is recommended for all contact and racquet sports where a direct blow to the eye could occur. Also, LASIK does not correct the condition known as presbyopia (or aging of the eye), which occurs to most people around the age of 40 and may require them to wear reading glasses for close up work. People over the age of 40 that have their vision corrected may find that they need reading glasses for clear, close vision.

During pregnancy, your refractive error can fluctuate which could influence your results. If you know you are pregnant or attempting to become pregnant within the next six months, it is important that you advise your doctor immediately.

POTENTIAL RISKS OF LASIK SURGERY

Loss of Vision:

LASIK surgery can possibly cause loss of vision or loss of best-corrected vision. This can be due to infection or irregular scarring or other causes. Unless successfully controlled by antibiotic, steroids or other necessary treatment, complications could even cause loss of the infected eye. Vision loss can be due to the cornea healing irregularly, which could add astigmatism and make wearing glasses or contact lenses necessary and useful vision could be lost. It is also possible that you may not be able to successfully wear contacts after LASIK.

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Visual Side Effects:

Other complications and conditions that can occur with LASIK surgery include: anisometropia (difference in power between the two eyes); aniseikonia (difference in image size between the two eyes); double vision; hazy vision; fluctuating vision during the day and from day to day; increased sensitivity to light, which may be incapacitating for some time and may not completely go away; glare and halos around lights, which may not completely go away. Some of these conditions may affect your ability to drive and judge distances driving should only be attempted when you are certain your vision is adequate.

Over Correction and Under Correction:

Variations in individual healing from patient to patient means LASIK is not a 100% accurate procedure. Many procedures result in the eye being under corrected, in which case it may be possible or necessary to have additional surgery to fine tune or enhance the initial result. These results cannot be guaranteed. It is also possible that your eye may be overcorrected to the point of remaining farsighted. It is also possible that your initial results could regress over time. In some, but not all cases, re-treatment could be considered.

Other Risks:

Macular hemorrhage can occur after LASIK even in eyes with no obvious predisposition. Previous choroidal neovascularization and predisposing lesions such as chorioretinal atrophy and lacquer cracks are factors that can put patients at risk for macular hemorrhage. Additional reported complications include: corneal ulcer formation, endothelial cell loss, epithelial healing defects, ptosis (droopy eyelid), corneal swelling, elevated eye pressure, cataract formation, retinal detachment, and hemorrhage.

Complications could also arise requiring further corrective procedures including either a partial (lamellar) or full thickness corneal transplant using a donor cornea. If a corneal transplant is necessary, complications from this procedure could include: loss of corneal disc, damage to the corneal disc, decentration, and progressive corneal thinning (ectasia). Sutures may also be required which could induce astigmatism.

There are also potential complications due to anesthesia and medications that may involve other parts of your body. It is possible that the microkeratome (if used) or the laser could malfunction and the procedure could be aborted. Since it is impossible to state all potential risks of any surgery, this form is incomplete.

You should also be aware that there are other complications that could occur that have not been reported before the creation of this consent form as LASIK surgery has been performed only since the early 1990's and longer term results may reveal additional risks and complications.

POST-OPERATIVE INSTRUCTIONS

After surgery, you will be given medications and instructions to help prevent infection and control healing. It is imperative that you follow ALL instructions exactly as they are given to you. It is also imperative that all follow-up visits be kept as directed.

By choosing to undergo LASIK surgery, you attest that you understand the absolute importance of post-operative care to your ocular health. **Minimal follow up is 1 day, 1 week, 1 month, 3 months, and 6 months**, and more may be required. Not following up as specified through Southern Eye Associates and/or your eye care provider for your post-operative period places you at risk for later complications and invalidates any consideration for future complimentary enhancement.

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In signing this form, you are stating that you have read this consent form and although it contains medical terms, which you may not completely understand, you have had the opportunity to ask questions and had them answered to your satisfaction. You also give your permission for medical data concerning your operation and related treatment and any video recording of your surgery to be released to physicians and others demonstrating a “need to know” for clinical study.

To assure that you have understood the information presented, please copy the following statement in your own handwriting:

I understand the information presented and am willing to accept the fact that I may need glasses, contact lenses, or further surgery following LASIK to achieve my best possible level of vision.

I understand that it is my responsibility to obtain clearance from my current occupation to have LASIK with Southern Eye Associates and that it is not Southern Eye’s responsibility to do so.

I have been diagnosed with early cataracts and have been offered, and have refused, cataract extraction with a multifocal lens implantation in lieu of LASIK. I understand that my cataracts will progress and potentially worsen the outcome of my LASIK surgery.

I am making an informed decision in giving my permission to have Laser Assisted In-Situ Keratomileusis (LASIK) surgery performed on my Right Eye Left Eye Both Eyes.

Printed Name of Patient

Signature of Patient

Date

Signature of Witness

Date

Signature of Surgeon

Date