BEFORE YOUR OUTPATIENT SURGERY

IMPORTANT INFORMATION

INSTITUT DE L’OEIL DES LAURENTIDES
INSTRUCTIONS
BEFORE
YOUR OUTPATIENT SURGERY

OCULOPLASTIC SURGERY

Oculoplastic surgery is a subspecialty of ophthalmology that deals with the structures surrounding the eyeball, including the eyelids, eyelashes, orbit of the eye and its contents, as well as the tear drain system (lacrimal gland and ducts).

As with the rest of the face, the skin of the eyelids and of certain underlying structures can loosen over the years. This loosening can cause eyelid malposition that can affect eye health and/or esthetic appearance.

Failure to notify us will result in a $50 fee being charged.

If you cannot come to your appointment, please call us at least 24 hours before at 450.419.6345.

The Institut de l’œil des Laurentides is a Specialized Medical Centre accredited for a second consecutive time with the highest distinction from Accreditation Canada: “Accredited with Exemplary Standing.”

The accreditation process serves to evaluate and improve the quality and safety of the health care delivered and to standardize policies and procedures.

Institut de l’œil des Laurentides
4800, rue Ambroise-Lafortune
Boisbriand, Québec
J7H 1S6

Telephone: 450.419.ŒIL (6345) or 1.888.419.ŒIL (6345)
Fax: 450.434.YEUX (9389)
institutdeloeil.com

If you cannot come to your appointment, please call us at least 24 hours before at 450.419.6345.

Failure to notify us will result in a $50 fee being charged.

INSTRUCTIONS
BEFORE
YOUR OUTPATIENT SURGERY

OCULOPLASTIC SURGERY

Oculoplastic surgery is a subspecialty of ophthalmology that deals with the structures surrounding the eyeball, including the eyelids, eyelashes, orbit of the eye and its contents, as well as the tear drain system (lacrimal gland and ducts).

As with the rest of the face, the skin of the eyelids and of certain underlying structures can loosen over the years. This loosening can cause eyelid malposition that can affect eye health and/or esthetic appearance.

If you cannot come to your appointment, please call us at least 24 hours before at 450.419.6345.

Failure to notify us will result in a $50 fee being charged.

The Institut de l’œil des Laurentides is a Specialized Medical Centre accredited for a second consecutive time with the highest distinction from Accreditation Canada: “Accredited with Exemplary Standing.”

The accreditation process serves to evaluate and improve the quality and safety of the health care delivered and to standardize policies and procedures.

Institut de l’œil des Laurentides
4800, rue Ambroise-Lafortune
Boisbriand, Québec
J7H 1S6

Telephone: 450.419.ŒIL (6345) or 1.888.419.ŒIL (6345)
Fax: 450.434.YEUX (9389)
institutdeloeil.com
COSMETIC EYELID SURGERIES

**Dermatochalasis** is an excess of skin and the appearance of fatty pockets in the upper and lower eyelids. The surgery, blepharoplasty, is generally performed under local anesthetic and consists of surgically removing the excess skin, excess orbicularis oculi muscle and fat to improve the cosmetic appearance.

**Xanthelasma** is a buff-coloured (yellowish orange) cholesterol deposit usually found on the inner corners of the upper eyelids. Complete excision of the lesions is the only treatment.

CORRECTION OF EYELID MALPOSITIONS

**Entropion** occurs when the eyelid sags and tends to spontaneously turn inward. The eyelashes then rub against the eye, causing irritation. Surgery to correct entropion consists of tightening the lateral ligament of the lower eyelid to restore its normal position against the cornea.

**Ectropion** occurs when the margin of the lower eyelid turns outward. Patients often complain of excessive tearing because the eyelid is no longer able to direct the tears toward the lacrimal ducts. The eyelid also acquires a noticeable unesthetic appearance. Surgery to correct ectropion consists of tightening the lateral ligament of the lower eyelid to restore its normal position against the cornea.

**Ptosis** occurs when the levator muscle of the eyelids loosens, causing the eyelids to droop. The treatment involves the surgeon making an incision in the skin of the upper eyelid to access the levator muscle and shorten it, thus lifting the eyelid. This surgery takes an average of 30 minutes per eye and is performed under local anesthetic. Sutures (stitches) are used to close the skin and are usually absorbable. A topical ointment is often applied for one to two weeks at bedtime to hydrate the eye.
Excision of Eyelid Lesions

**Tumour or cyst from the eyelids**

The processes by which cells are formed and age can become disorganized and cause a tumour or mass (tumefaction). This mass may be benign or malignant (cancerous).

The ophthalmologist must remove any lesion around the eye that is suspect and send it to the lab for analysis. Certain more invasive cancerous lesions (e.g. melanoma) may require more extensive surgery and a complete work-up.

The glands of the skin can become blocked and form a cyst. For esthetic or functional reasons, the ophthalmologist may remove these cysts. This surgery is performed under local anesthetic and usually requires a few days of convalescence.

**Chalazion or stye**

A chalazion is a blockage of one or more of the meibomian glands that are located on the edges of the eyelids, causing inflammation.

A chalazion is often the result of a chronic condition that requires long-term treatment to be effective. The simplest treatment is applying hot compresses and massaging the margins of the eyelids to express the secretions and unblock the glands. Daily washing of the eyelids and eyelashes with a cloth or special soap can also help.

If this conservative treatment fails, the ophthalmologist may decide to drain the affected gland. An incision is made in the gland at the inner corner of the eyelid to avoid leaving any visible scar. Topical antibiotics may be prescribed.

**Basal cell carcinoma**

Because the areas of the face are more exposed to the sun, the skin cells there experience more rapid aging. These cells can become disorganized and cause benign or malignant tumours. The scalp, tops of the ears and lower eyelids are especially susceptible to the effects of sun exposure.
The ophthalmologist must remove any lesion around the eye that is suspect and send it to the lab for analysis. Any lesion suspected of being cancerous must be removed entirely, along with a margin of healthy skin, and analyzed immediately. Certain more invasive tumours may require more extensive surgery and partial reconstruction of the eyelids, even including skin grafting. In the case of some rarer cancers (e.g. melanoma), a complete health work-up may be required.

**PUNCTOPLASTY OR CANALICULECTOMY**

Occasionally, the small openings that collect the tears (lacrimal puncta) are too small (punctal stenosis) or malpositioned (punctal ectropion). A simple surgical procedure consisting of widening (3 snips) or repositioning the puncta is performed to correct this.

**CONJUNCTIVAL SURGERIES**

**Pingueculitis** is a yellowish degenerative mass located on the conjunctiva. This lesion is benign and does not require any treatment. It can be removed for esthetic reasons or if it becomes uncomfortable.

**Pterygium** is an inflammatory growth of the conjunctiva, often in the form of a triangle that extends abnormally on the cornea. Exposure to ultraviolet rays (sun), dry eye and dust can cause a pterygium to form or make it grow faster. Surgical removal under local anesthetic is necessary if the pterygium is uncomfortable, is growing quickly or threatens to affect the pupil and reduce vision.

**Conjunctival lesions**

The conjunctiva of the eye is the outer layer (first layer) of the surface of the eyeball. It is essentially transparent and has blood vessels running through it. The conjunctiva is exposed to the sun throughout a person’s lifetime. Any clear or tinted lesion of any colour, flat or raised, must be assessed by the ophthalmologist.

The cells that comprise it may undergo a malignant transformation (cancerous). All pigmented conjunctival lesions suspected of being melanoma must be removed for analysis, without exception.
Conjunctivochalasis

The slackness of the conjunctiva may have consequences on the normal secretion of tears through the inferior lacrimal duct. As a result, the patient affected by this condition sheds tears for no apparent reason (epiphora).

Minor surgery is performed under local anesthetic to remove these redundant conjunctival folds (curing the conjunctivochalasis).

BOTOX™ INJECTIONS

BOTOX™ (botulinum toxin) injections are used therapeutically when a patient experiences abnormal and uncomfortable muscle contractions (facial blepharospasm or hemispasm). The action of the BOTOX™ is temporary and lasts an average of four months. Additional injections are necessary to prolong its effect.

Keratectomy is a procedure that removes the superficial layers of the cornea. It is performed to remove certain scars or calcium deposits or help with certain corneal diseases that can cause pain. The procedure takes 10-15 minutes and a bandage contact lens is then placed over the eye to help with comfort and healing. It takes anywhere from 1-2 weeks to heal after the procedure, and drops are prescribed. Medication is often prescribed for pain if needed.

CORNEAL SURGERY
PREPARING FOR SURGERY

THE DAY OF SURGERY

☐ Eat a light breakfast.
☐ Bathe or shower the morning of your surgery. Wash your hair.
☐ Do not apply any makeup or cream to your face. Be careful to remove all makeup from your eyelashes.
☐ Do not wear any jewellery or hairclips.
☐ If you have eyelash extensions, they will probably fall off during disinfection.
☐ Do not wear your contact lenses the day of the surgery.
☐ Bring your health insurance card.
☐ Wear comfortable clothing that can be easily removed.
☐ Bring a snack, especially if you are diabetic.
☐ Mention any health condition that could affect the outcome of the surgery (cold, redness, stye or other). A member of the team will call you to schedule another date for the surgery.

☐ If, during surgery, you need to cough or move, be sure to alert the nursing staff. Keep your hands under the sterile covering (blue sheet) at all times.
☐ The ophthalmologist may decide not to operate further on you or to reschedule your surgery, if deemed necessary.

PAYMENT

• You can pay by cash, debit card, Visa or MasterCard. We do not accept the American Express credit card or cheques.

The Institut de l'œil des Laurentides offers the Accord D financing plan (12 equal payments, no service charge or interest).
After some surgeries, you may be unable to resume normal activities immediately. If you require a letter to justify your absence from work, one can be issued to you.

**MEDICATION**

Unless otherwise indicated by your ophthalmologist, you should continue taking all your medication (including drops for the treatment of glaucoma, as needed).

**ASPIRINE, COUMADIN & OTHER ANTICOAGULANTS**

Advise your ophthalmologist if you are taking blood thinners.

To prevent major bleeding during surgery, you must stop taking these drugs, based on your surgeon’s recommendations, before the date of your surgery.

Failure to comply with these recommendations may result in the ophthalmologist deciding not to operate further on you or rescheduling your surgery to a later date.

**RISKS AND POSSIBLE SIDE EFFECTS**

Any surgery or procedure that involves the eye carries risks and may result in complications or ineffective results.

Complications include, but are not limited to:
- Allergic reaction to the suture thread.
- Ineffective procedure.
- Return of the pathology (in some cases).
- Discomfort (generally within the first 24-48 hours).
- Hemorrhaging (bleeding).
- Infection.
- Edema (swelling).

Serious complications are very rare.

**IMPORTANT**

You must arrange for someone to accompany you home, the day of your operation, since you will not be able to drive after your surgery.
Weekdays (Monday to Friday)
At the Institut de l’œil des Laurentides at 450.419.6345 or 1.888.419.6345
Evenings/weekends/statutory holidays
Go to your hospital’s emergency department. Tell the emergency physician that you recently had eye surgery. The physician will contact the on-call ophthalmologist, if necessary.

Institut de l’œil des Laurentides
4800, rue Ambroise-Lafortune
Boisbriand, QC, J7H 1S6

The INSTITUT DE L’OEIL DES LAURENTIDES offers the Accord D financing plan (12 equal payments, no service charge or interest).

* All prices are subject to change without notice.