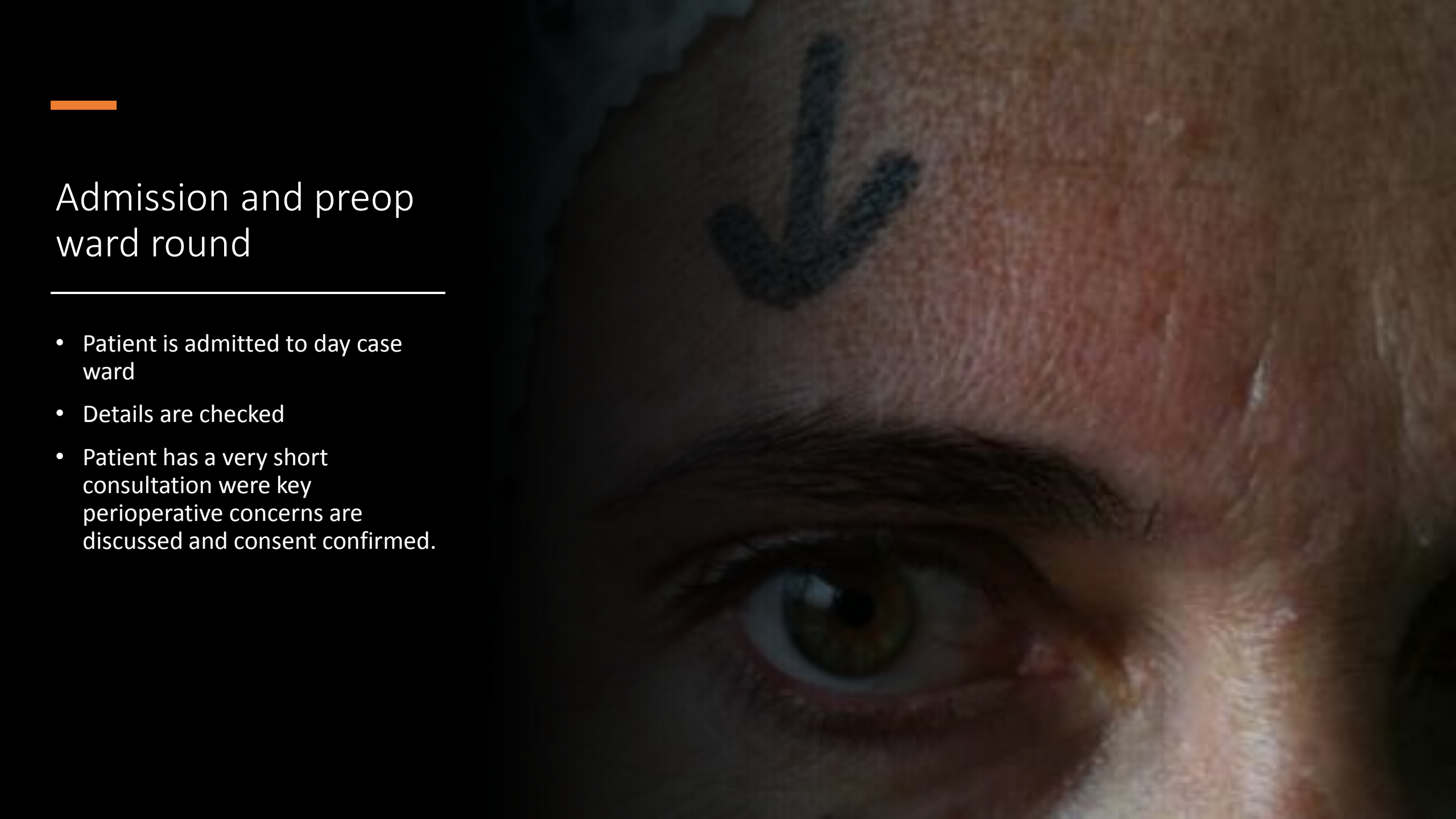


What happens on the day of cataract surgery

Konstantinos Giannouladis, FRCOphth
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Cataract Service Lead

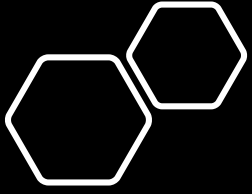
Overview

- Admission and preop ward round
- Dilation
- Anaesthetic
- Surgery
- Implants
- Intraoperative Complications

A close-up photograph of a patient's forehead and eye. A blue surgical mark, resembling a downward-pointing arrow, is drawn on the forehead. The patient's eye is visible below the mark.

Admission and preop ward round

- Patient is admitted to day case ward
- Details are checked
- Patient has a very short consultation were key perioperative concerns are discussed and consent confirmed.

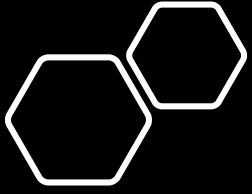


Dilation

- Usually drops (cyclopentolate and Phenylephrine)
- Mydriaserit
 - Insert that has to be removed before surgery

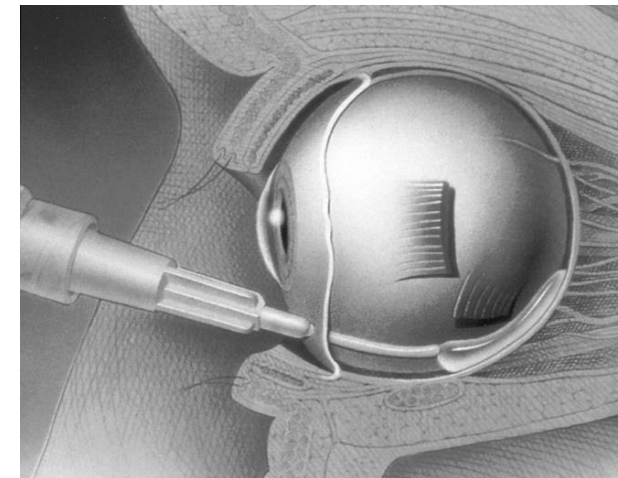


1a | 1b



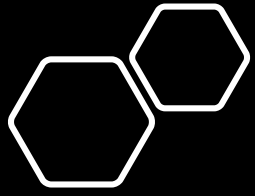
Anaesthetic

- Topical
- Local (some form of periocular injection, usually sub tenon's)
- Sedation and GA

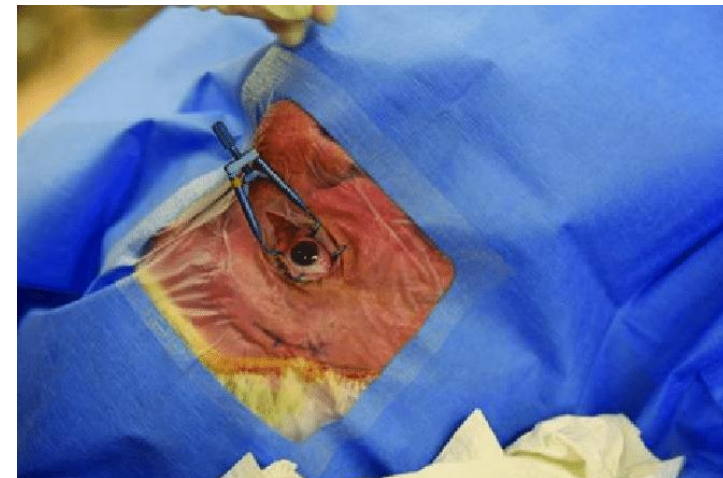
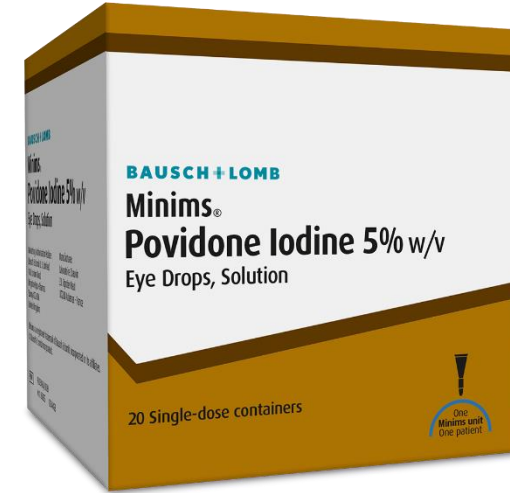


Surgery – Phacoemulsification

- Prep and drape
 - Incision
 - Capsulorhexis
 - Hydrodissection
 - Nucleus disassembly / phacoemulsification
 - Cortex removal
 - IOL insertion
 - Viscoelastic removal
 - Closure – sutureless / sutured
-

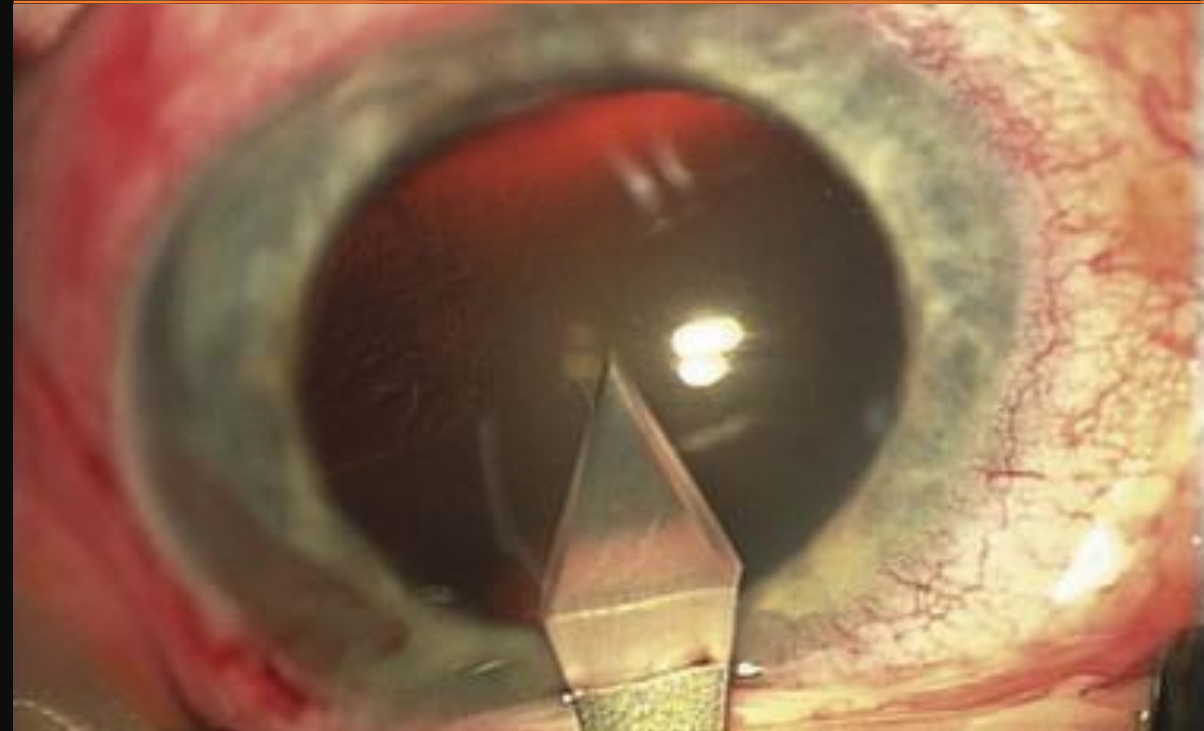


Prep and drape

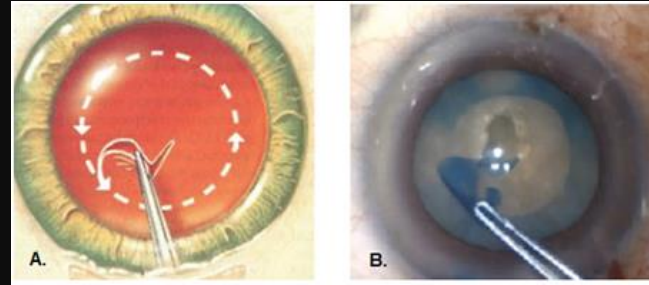


Incision

- Clear corneal
 - Limbus
 - Scleral tunnel
-

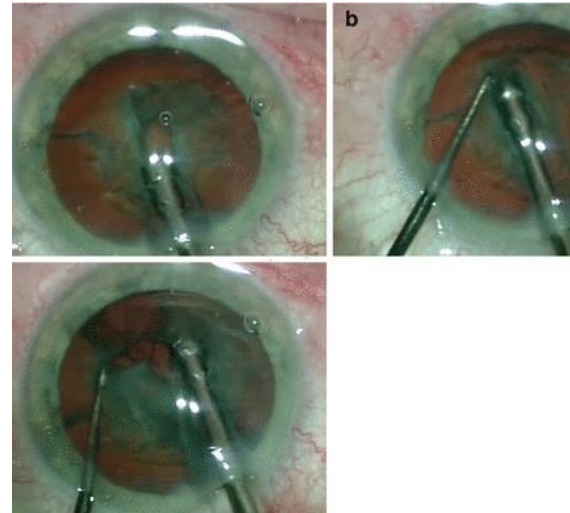
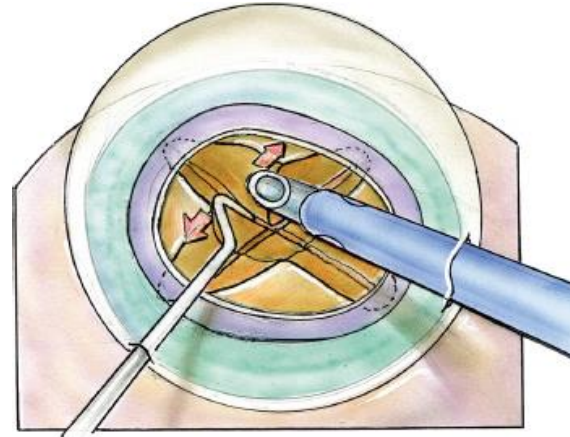


Capsulorhexis and hydrodissection



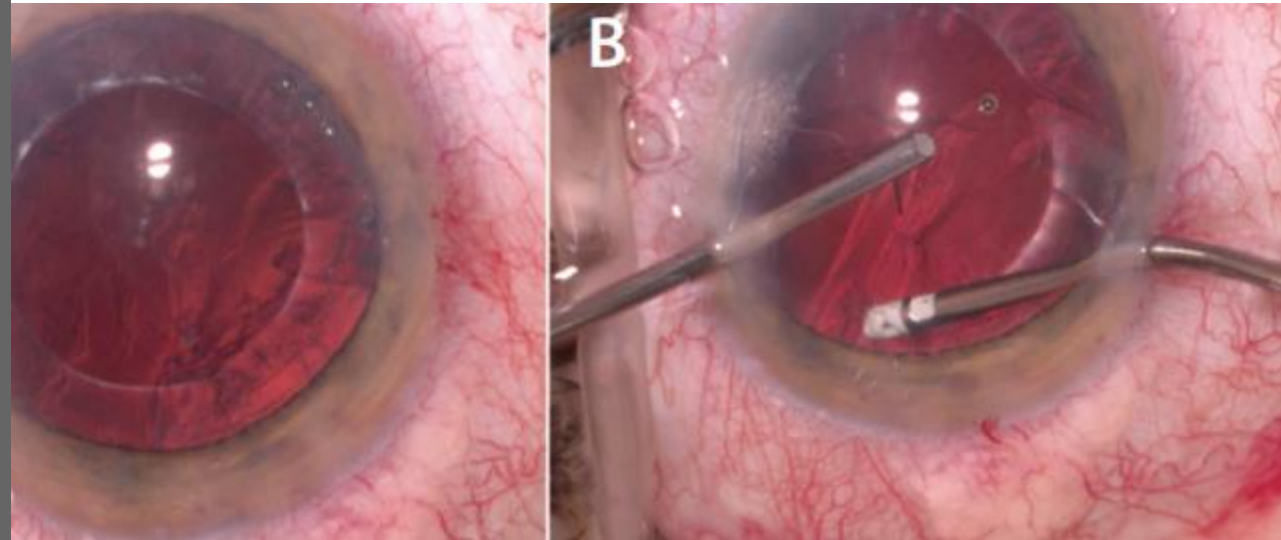
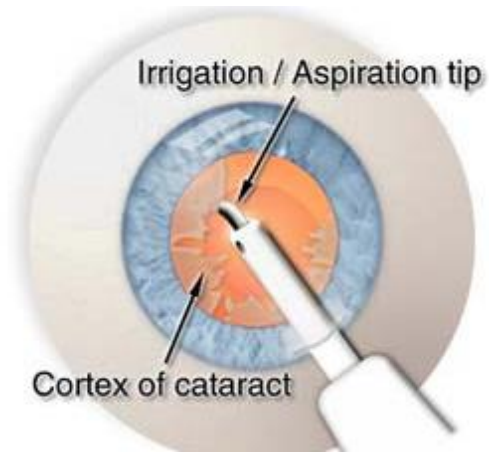
Nucleus disassembly

- Divide and conquer
- Chopping



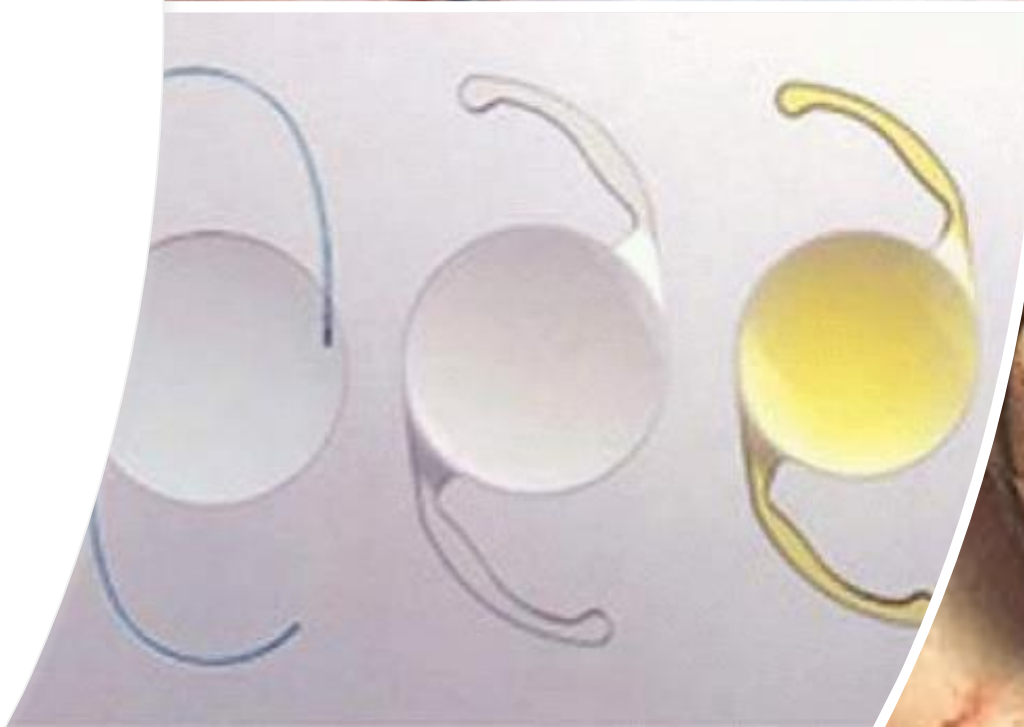
Cortex Removal

- Coaxial
- Bimanual



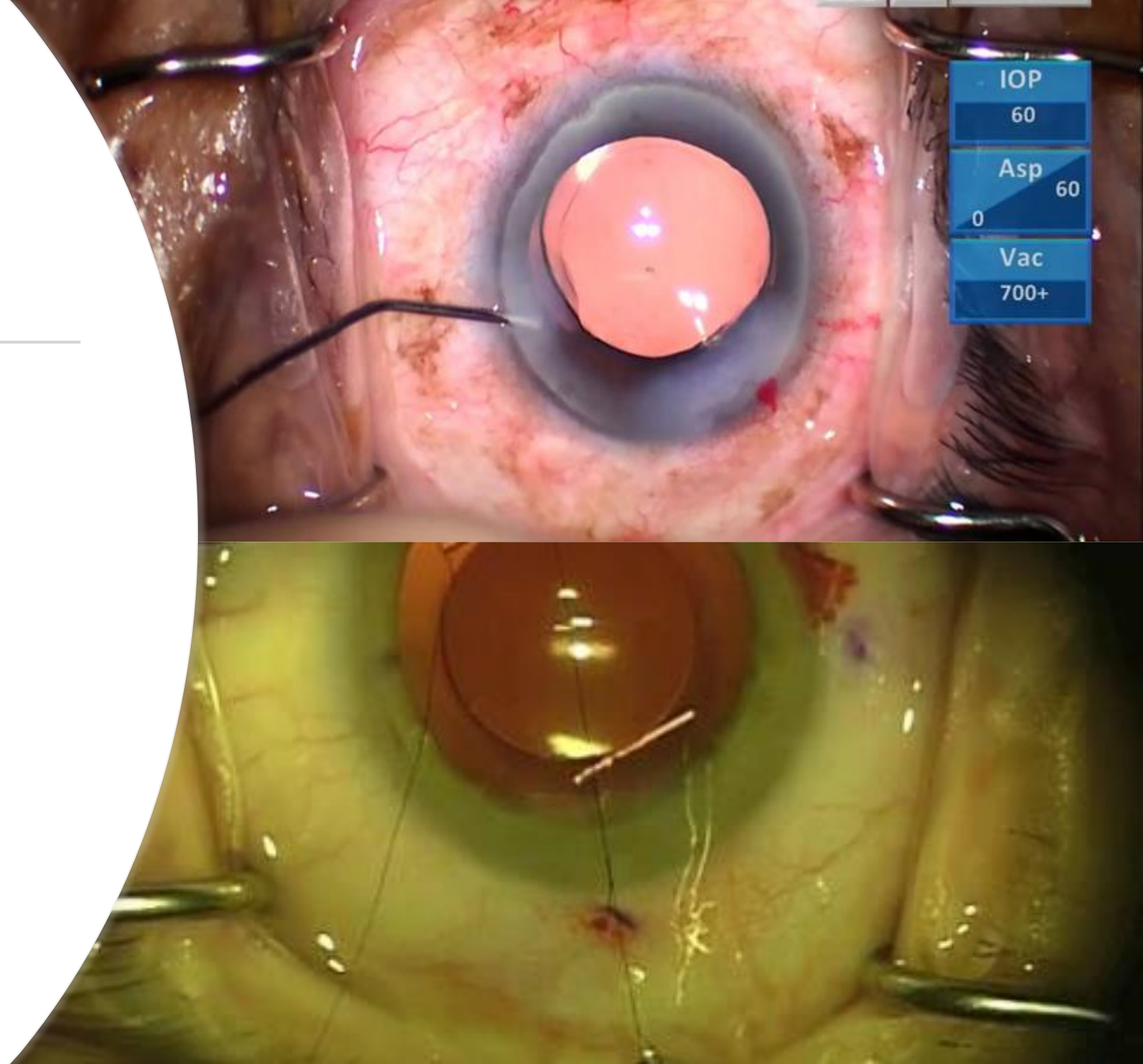
IOL types and insertion

- One piece
- Three piece
- Manual insertion
- Injector



Completion

- Sutureless wound hydration
- Closure with one or more sutures



Complications

- Posterior Capsule tears with or without vitreous loss
- Nucleus or nuclear fragment drop
- IOL drop
- Suprachoroidal effusions / haemorrhage