



Regional Eye Associates

Dr. Goel's Cataract Education Packet 2022

Please watch Dr. Goel's online cataract educational videos and complete the cataract packet



CataractVideos.com ---> ProtectingSight.com

- All patients:** Intraocular Lens Overview, Options & Informed Consent
- Multifocal:** PanOptix Trifocal IOL (Premium Cataract Surgery for Presbyopia)
 Vivity IOL Extended Depth of Focus (Premium Cataract Surgery for Presbyopia)
- Astigmatism:** Toric IOL (Premium Cataract Surgery for Astigmatism)
- Glaucoma:** Glaucoma and Cataracts - Trabecular Bypass Stents (iStent inject)
- Live Surgery:** Dr. Goel narrates live cataract surgery (OPTIONAL)

Dr. Goel operates on the following dates:

	1st Tuesday	2nd Wednesday	3rd Tuesday	4th Tuesday
May 2022	May 3	May 11	May 17	May 24
June 2022	June 7	---	June 21	June 28
July 2022	July 5	July 13	July 19	July 26
August 2022	August 2	August 10	August 16	August 23
September 2022	September 6	September 14	September 20	September 27
October 2022	---	October 12	October 18	October 25
November 2022	November 1	---	---	November 22
December 2022	December 6	December 14	December 20	---

(Dates may change without notice)



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News Release

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When is the Right Time to Have Cataract Surgery?

American Academy of Ophthalmology offers tips to help people considering whether to have the procedure

SAN FRANCISCO – June 2, 2015 – Nearly 25.7 million Americans over age 40 have cataracts and the number is projected to increase [to 45.6 million by 2050](#).¹ While the only way to remove cataracts – a clouding of the eye’s lens – is surgery, the right time to have surgery depends on the individual patient. In support of Cataract Awareness Month, the American Academy of Ophthalmology is offering tips for those who have been diagnosed with cataracts as they consider whether to have surgery to remove them and when.

[Cataracts](#) occur as part of the body’s natural aging process. Being diagnosed with cataracts does not always mean that surgery is immediately required. In the early stages, cataracts may not change vision significantly and minor changes may be improved with prescription glasses. But as the cataracts continue to [mature over time](#), they may cause vision loss that can interfere with daily life.

Although the prospect of [cataract surgery](#) can be intimidating, the procedure itself is the most common elective surgery among Medicare beneficiaries in the United States. Multiple studies have demonstrated its association with improved quality of life, reduced risk of falling and fewer car crashes.^{2,3,4} In addition, one study found that those who had cataract surgery had a 40 percent lower long-term mortality risk than those who did not.⁵

The American Academy of Ophthalmology has developed a list of four questions people should consider to help determine if they’re ready for cataract surgery:

Are your cataracts impacting your daily or occupational activities?

Symptoms of cataracts include dim, blurry or yellowed vision and can even double vision in a single eye. The lack of contrast and clarity can be difficult for those who need clear vision for work, driving or who enjoy hobbies like reading, cooking or sewing.

Are your cataracts affecting your ability to drive safely at night?

Cataracts can cause halos around lights and difficulty seeing in low-light settings, impacting the ability to safely drive at night. Advanced cataracts can even cause enough vision loss to fail the vision test required for a driver’s license.

Are your cataracts interfering with the outdoor activities you enjoy?

Cataracts can also increase sensitivity to glare, which can be especially troublesome for those who enjoy skiing, surfing and a number of other outdoors activities. They can also cause visual differences from one eye to the other, which can affect the distance vision golfers need.

Can you manage your cataracts in other ways?

Those who decide to put off cataract surgery can make the most of their vision with a few simple tools, such as incorporating brighter lighting and contrasting colors in the home. Polarized sunglasses and a wide-brimmed hat can reduce glare, while magnifying lenses can make reading easier.

““If cataracts aren’t disrupting your life, you can probably wait and have surgery when they really start to bother you,”” said Ravi D. Goel, M.D., cataract surgeon and a clinical spokesperson for the American Academy of Ophthalmology. ““But for those who are feeling impeded by their blurry or dulled vision, the procedure can make a significant beneficial impact.””

Cataract surgery is only recommended when the outcome is expected to improve vision, unless the cataracts obscure treatments for other eye diseases. Those considering cataract surgery should discuss how cataracts are affecting their daily lives with an ophthalmologist. Learn more about cataract risks, symptoms and treatments at <http://www.geteyesmart.org/eyesmart/diseases/cataracts/index.cfm>.

About the American Academy of Ophthalmology

The American Academy of Ophthalmology, headquartered in San Francisco, is the world's largest association of eye physicians and surgeons, serving more than 32,000 members worldwide. The Academy's mission is to advance the lifelong learning and professional interests of ophthalmologists to ensure that the public can obtain the best possible eye care. For more information, visit www.aao.org.

The Academy is also a leading provider of eye care information to the public. The Academy's EyeSmart® program educates the public about the importance of eye health and empowers them to preserve healthy vision. EyeSmart provides the most trusted and medically accurate information about eye diseases, conditions and injuries. OjosSanos™ is the Spanish-language version of the program. Visit www.geteyesmart.org or www.ojossanos.org to learn more.

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¹ <http://forecasting.preventblindness.org/>

² <http://www.ncbi.nlm.nih.gov/pubmed/22978526?dopt=Abstract>

³ <http://www.ncbi.nlm.nih.gov/pubmed/22851116>

⁴ <http://www.ncbi.nlm.nih.gov/pubmed/22273356>

⁵ <http://www.aaojournal.org/article/S0161-64201300143-7/fulltext>



Tell your doctor how your cataract affects your vision and your life. Your doctor cannot make the decision for you, but talking with your doctor can help you decide.

Please check the statements below that apply to you and share this list with your doctor.

Yes	No	
		I need to drive, but there is too much glare from the sun or headlights.
		I do not see well enough to do my best at work.
		I do not see well enough to do things I need to do at home.
		I do not see well enough to do things I like to do (for example, read, play cards, go out with friends, etc.)
		I am afraid I will bump into something or fall down.
		Because of my cataract, I am not as independent as I would like to be.
		My eyeglasses do not help me to see well enough.


Patient's Name: _____


Date: ____/____/____

Patient's Signature: _____

PRE-SURGICAL CATARACT PATIENT QUESTIONNAIRE

1. Have you ever had Refractive Surgery? (LASIK, PRK, RK, Surface Ablation) Yes (need records) No
2. Which is your **DOMINANT EYE** ? (ie. Before you were diagnosed with a cataract, which eye did you prefer to see in the distance?) RIGHT LEFT NOT SURE
3. Men: Have you ever been on Flomax, Tamsulosin, Or ANY Medication for Prostate issues? YES NO
Please list: _____
4. Do you have an allergy to Latex gloves? YES NO NOT SURE
5. Do you have an allergy to Iodine, Betadine, or IV Dye ? YES NO NOT SURE
6. Automated implantable cardioverter defibrillator (AICD) or Cardiac Rhythm Management Device (CRMD)? YES (need device card) NO
7. Do you need a Power-of-Attorney to undergo surgery? Yes (need POA copy) No

8.  I viewed videos on: www.YouTube.com/RaviGoelMD
- Part I – Introduction Part III – Alcon Restor Part V – Live Surgery
- Part II – Informed Consent Part IV – Alcon Toric Part VI,VII – Post-Restor Vision

9.  I visited www.geteyesmart.org to learn about cataracts YES NO

10. Please list any hobbies you enjoy, lifestyle, work conditions or other visual demands you have. Please also list any additional visual functioning or quality of life symptoms due to your cataracts:

11. Do you have difficulty with any of these activities? (Please circle all that apply and list additional.)

- Reading _____
- Writing _____
- Walking _____
- Driving _____
- Television _____
- Outdoor activities _____
- Night Vision _____
- Glare around lights _____

HEALTH SURVEY

Dear Patient:

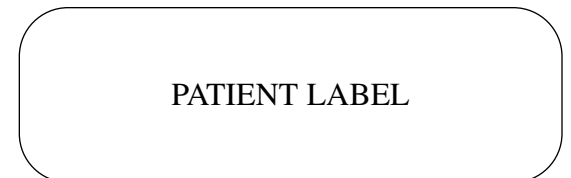
We at the Wills Surgery Center in Cherry Hill welcome the opportunity to participate in your surgical care. While all patients requiring the services of the Department of Anesthesiology will be seen personally prior to surgery, this Health Survey allows us to better identify those patients who may need specialized instructions. We depend on this survey along with the information provided by your surgeon to provide you with the appropriate care.

Thank you for your help.

Name				
Age	Height	Weight	Home Phone	Daytime Phone

	YES	NO	COMMENT
• Do you have high blood pressure	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Do you have heart trouble?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Do you have a heart murmur?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Do you have angina or chest pain?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Have you had a heart attack?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Have you had a cold recently?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Do you have a cough?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Have you had asthma?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Do you have emphysema or bronchitis?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Can you walk up a flight of stairs without getting short of breath?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Do you have diabetes?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Do you have a seizure disorder?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Do you have a weakness of or paralysis of your arms or legs?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Have you had a stroke?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Have you had hepatitis or jaundice?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Do you take a blood thinner?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Do you have any implanted device such as a cardiac defibrillator or pacemaker?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Do you snore?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Do you have Sleep Apnea?	<input type="checkbox"/>	<input type="checkbox"/>	_____
If yes, Do you use a CPAP machine?	<input type="checkbox"/>	<input type="checkbox"/>	_____

(Other side please)



	YES	NO	COMMENT
• Do you have any psychiatric problems?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Could you be pregnant?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Have you had anesthesia previously?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Have you ever had a problem with anesthesia other than nausea or vomiting?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Has anyone in your family had a problem with anesthesia?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Do you smoke presently? If so, how much?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Do you drink alcohol? If so, how much?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Do you have any loose, false, capped or bonded teeth?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Do you have any problems with your neck or opening your mouth?	<input type="checkbox"/>	<input type="checkbox"/>	_____
• Do you take any of the following medications or herbal supplements for prostate, urinary or high blood pressure problems such as: Saw Palmetto, Flomax (tamsulosin), Uroxatrol (alfuzosin), Doxazosin, Hytrin (terazosin), prazosin or minipress? (please circle the supplement/medication)	<input type="checkbox"/>	<input type="checkbox"/>	_____

List all previous surgery: _____

Do you have anything specific you want to discuss with the anesthesiologist? _____

 Signature

 Date

TO BE COMPLETED THE DAY OF SURGERY

I certify that I have had nothing to eat or drink since _____ a.m./p.m.

 Signature

 Date

I certify that the following individual will escort me home. Parent/Guardian of children 18 years and under must remain in the facility until patient is discharged.

 Signature

 Relationship

 Daytime Phone

 Signature

 Date

Near Vision Card

Computer Screen Text and Websites - Near

12 Point Font
J8.5

Having to frequently take reading glasses on and off is inconvenient for many people. Because of this, a person might wear reading glasses around their neck, scatter multiple pairs around the house, or wear bifocals all the time.

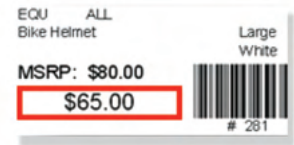
Internet - Wikipedia

<https://en.wikipedia.org/wiki/Internet>
The **Internet** (contraction of interconne
networks that use the **Internet** protocol
Internet service provider · Internet acce

Price Tags and Receipts - Near

10 Point Font
J7

Unlike conventional "single vision" intraocular lenses (IOLs), Extended Depth of Focus IOLs are lens impants that are designed to help patients see at varying distances, providing an extended range of vision.



Phones, Magazines, and Newspapers - Near

8 Point Font
J5

Although they might still prefer to wear glasses for prolonged reading, the vast majority of EDOF IOL patients wear glasses less often, overall, for activities such as driving, watching TV, using their cell phone and computer, looking at photos, reading magazines, price tags, product labels, receipts, and menus.

What time will you be over for dinner?

Should be there by 6pm

Ingredient Lists and Nutritional Facts - Micro

6 Point Font
J3

With bifocal glasses, a person initially needs to think about looking through the top part of the lens for distance and through the bottom part of the lens for near. An Extended Depth of Focus (EDOF) IOL, designed using advanced technology called diffractive optics, is entirely different, providing a continuous range of vision from distance to near seamlessly.

Nutrition Facts		
Serving Size 2/3 cup (51g)		
Servings Per Container About 9		
	Cereal with	1/2 cup
	Cereal	Skin Milk
Amount Per Serving	240	280
Calories	70	70
Calories from Fat	70	70
	% Daily Value**	
Total Fat 8g*	12%	12%
Saturated Fat 2.5g	13%	13%
Trans Fat 0g		
Cholesterol 0mg	0%	0%

Directions on Medications - Micro

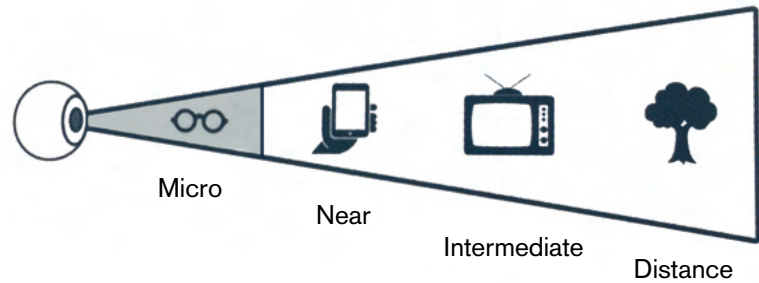
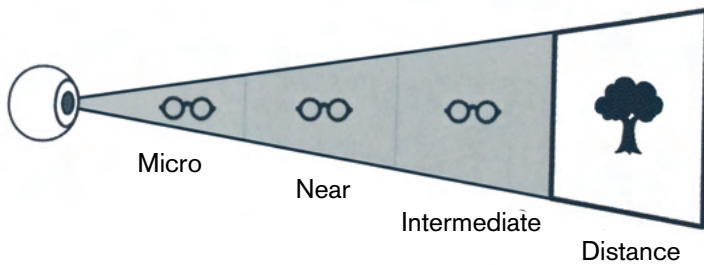
5 Point Font
J2

Extended Depth of Focus lenses use proprietary optic technology to create high quality vision across a range from distance to about 26 inches away. The technology used is much like that used in the highest quality professional cameras lenses, to dramatically reduce a phenomenon called chromatic aberration. You may recall from grade school how a prism separates light into the colors of the rainbow. The same effects occurs with the natural lens of the eye and intraocular lens implants used for cataract surgery.

Do not use with other cough and cold medications unless recommended by a doctor or pharmacist	
Ask a doctor or pharmacist before use if you	• have
• trouble breathing	• a persistent cough that has not gone away
• asthma or other chronic lung conditions	• are pregnant or breastfeeding
Stop use and ask a doctor if	• symptoms get worse or last for more than 1 week
• you have a high fever (>38° C) or headache that does not go away	• you cough up thick yellow or green mucus
• you develop a rash	
Keep out of the reach of children. In case of an overdose, call a poison control centre or get medical help right away.	
Directions	• adults and children 12 years of age and older: take 10–20 mL every 6 hours
	• do not take more than 80 mL in 24 hours

Monofocal IOL

EDOF IOL



Monofocal IOLs are used to restore vision for one area of focus - usually distance. Reading glasses will still be needed for intermediate and near activities.

Extended depth of focus IOLs provide high-quality continuous vision for activities without glasses overall - from near to intermediate and distance. Reading glasses may still be necessary for very small print.

Distance Activities



Driving



Live Sports



Large Television



Concerts and Theatre

Intermediate Activities



Computer



Cooking

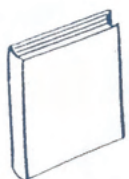


Smaller Television



Grocery Shelf

Near Activities



Magazines



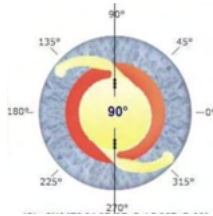
Mobile Phone



Tablet



Knitting



Monofocal vs. Advanced Technology **Intraocular Lens Selection Form**

Based on your answers below, Dr. Goel can help give you the optimal combination of vision quality and lifestyle convenience to achieve your goals.

1. What is the most important visual function for which you want to be free from glasses?

- DISTANCE (Driving/Watching TV, playing golf, tennis or other sports)
- MID-RANGE (Computer, menus, price tags, cooking, board games, items on a shelf)
- NEAR VISION (books, newspapers, magazines, detailed handwork, iPad/tablet)

2. Which of these describes your visual preferences?

- I want to reduce glasses needs for BOTH distance and near vision
- I would prefer very good distance vision with blurred vision at near.
- I would prefer good distance vision and blurred vision at near (bifocals for reading)
- I would prefer blurred distance vision and good vision at near (bifocals for driving)

3. Please place an "X" on the following scale to describe your personality as best you can:

Easygoing

Perfectionist

--	--

4. Are you interested in purchasing a **Premium Cataract Surgery** upgrade?

- Yes, I would like to correct a long-standing vision problem.
 - Premium Cataract Surgery - Advanced Technology for Presbyopia**
TREAT PRESBYOPIA AND ASTIGMATISM (Optimize vision in distance/near)
 - Premium Cataract Surgery - Advanced Technology for Astigmatism**
TREAT ASTIGMATISM (Optimize vision in distance, will need reading glasses)
 - I would like information on patient financing through **CareCredit**.
- No, I'd prefer the simplest and least expensive cataract surgery operation available.
basic monofocal lens (will need bi-focal glasses after surgery)

(*IOL pricing may change as new technologies are approved and without notice)