SANTA MONICA
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INFORMED CONSENT FOR CATARACT SURGERY

WHAT IS A CATARACT AND HOW IS IT TREATED?
The lens in the eye can become cloudy and hard, a condition known as a cataract. Cataracts can develop from normal aging, from an eye injury, or if you have taken medications known as steroids. Cataracts may cause blurred vision, dulled vision, sensitivity to light and glare, and/or ghost images. If the cataract changes vision so much that it interferes with your daily life, the cataract may need to be removed. Surgery is the only way to remove a cataract. You can decide not to have the cataract removed. If you don't have the surgery, your vision loss from the cataract will continue to get worse.

HOW WILL REMOVING THE CATARACT AFFECT MY VISION?
The goal of cataract surgery is to correct the decreased vision that was caused by the cataract. During the surgery, the ophthalmologist (eye surgeon) removes the cataract and puts in a new artificial lens called an intraocular lens or IOL. Cataract surgery will not correct other causes of decreased vision, such as glaucoma, diabetes, or age-related macular degeneration. Most people still need to wear glasses or contact lens after cataract surgery for either near and/or distance vision and astigmatism.

WHAT TYPES OF IOLs ARE AVAILABLE?
Your ophthalmologist will help you decide on the type of IOL that will replace your cloudy lens. There are IOLs available to treat nearsightedness (myopia), farsightedness (hyperopia), and astigmatism. IOLs usually provide either near or distance vision: these single focus lenses are called monofocal IOLs. Some newer IOLs can provide for near, intermediate, and distance vision: these multiple focus lenses are called multifocal IOLs. IOLs that treat astigmatism are called toric IOLs. You can also have one eye corrected for near vision, and the other for distance vision, a choice called monovision.

WHAT IS ASTIGMATISM? ARE THERE OTHER TREATMENTS FOR IT?
Patients with nearsightedness and farsightedness often also have astigmatism. An astigmatism is caused by an irregularly shaped cornea; instead of being round like a basketball, the cornea is shaped like a football. This can make your vision blurry. In addition to toric IOLs, astigmatism can be reduced by glasses, contact lenses, and refractive surgery (LASIK or PRK). There is also a procedure called a limbal relaxing incision (LRI), which can be done at the same time as the cataract operation, or as a separate procedure. A limbal relaxing incision (LRI) is a small cut or incision the ophthalmologist makes into your cornea to make its shape rounder. Any attempt at astigmatism reduction could result in over- or under-correction, in which case glasses, contact lenses, or another procedure may be needed.

WHAT ARE THE MAJOR RISKS OF CATARACT SURGERY?
All operations and procedures are risky and can result in unsuccessful results, complications, injury, or even death, from both known and unknown causes. The major risks of cataract surgery include, but are not limited to bleeding; infection; injury to parts of the eye and nearby structures from the anesthesia, the operation itself, or pieces of the lens that cannot be removed; high eye pressure; a detached retina, and a droopy eyelid. The major risks of a limbal relaxing incision are similar to those for cataract surgery, but also include loss of vision, damage to the cornea, and scarring; under- or over-correction could occur.

Depending upon your eye and the type of IOL, you may have increased night glare or halos, double vision, ghost images, impaired depth perception, blurry vision, and trouble driving at night. The ophthalmologist

might not be able to put in the IOL you choose. In addition, the IOL may later need to be repositioned or replaced.

Depending upon the type of anesthesia, other risks are possible, including cardiac and respiratory problems, and, in rare cases, death.

There is no guarantee that cataract surgery or astigmatism reduction will improve your vision. As a result of the surgery and/or anesthesia, it is possible that your vision could be made worse. In some cases, complications may occur weeks, months or even years later. These and other complications may result in poor vision, total loss of vision, or even loss of the eye in rare situations. You may need additional treatment or surgery to treat these complications. This additional treatment is not included in the fee for this procedure.

PATIENT'S ACCEPTANCE OF RISKS
I understand that it is impossible for the doctor to inform me of every possible complication that may occur. By signing below, I agree that my doctor has answered all of my questions, that I have been offered a copy of this consent form, and that I understand and accept the risks, benefits, and alternatives of cataract surgery. I have checked my choice for astigmatism correction and type of IOL.

STANDARD – BILLABLE TO INSURANCE

_____**Monofocal IOL (may still need glasses for both Near and Distance vision)**
I wish to have a cataract operation with a monofocal IOL on my _____ (state "right" or "left" eye) to correct for _____ ("distance" or "near").

ELECTIVE – NOT BILLABLE TO INSURANCE – PATIENT'S RESPONSIBILITY

_____**Monovision with 2 IOLs Option (may still need glasses)**
I wish to have a cataract operation with two different-powered IOLs implanted to achieve monovision. I wish to have my _____ (state "right" or "left") eye corrected for **distance** vision. I wish to have my _____ (state "right" or "left") eye corrected for **near** vision.

_____ **Multifocal IOL Option or Extended Depth of Focus (Symfony) (may still need glasses)**
I wish to have a cataract operation with a _____ Extended Depth of Focus IOL or multifocal implant (State name of implant) on my _____ (State 'right' or 'left') eye.

_____**Toric Monofocal IOL/Glasses Option for Astigmatism Reduction (may still need glasses)**
I wish to have a cataract operation with a toric Monofocal IOL on my _____ (state "right" or "left" eye) to correct for _____ ("distance" or "near").

_____**Limbal Relaxing Incision for Astigmatism Reduction (may still need glasses)**
I wish to have this procedure done in addition to the cataract operation.

_____ The covered and non-covered services listed above, have been fully explained to me. **(Please Initial)**

(Please Initial ONE Box)

_____ I accept any of the non-covered services if chosen and marked above, and I accept full financial responsibility for those services.	_____ I decline ALL non-covered services described above.

Social Media and Marketing Consent

I authorize the Santa Monica Eye Medical Group to reuse my image or likeness for marketing and media purposes. I understand that this authorization is voluntary. **I understand that my ability to receive health care services, eligibility for benefits, or reimbursement for services is not conditioned on the signing of this authorization**. I understand that all negatives, prints, digital reproductions, recordings, and videotapes shall be the property of Santa Monica Eye Medical Group and shall not be returned to me or the participant. I may cancel or revoke my authorization at any time.

_____ I hereby agree to release Santa Monica Eye Medical Group and those acting pursuant to their respective authority from liability for any violation of any personal or proprietary right I, or the participant, may have in connection with the use of the participant's image or likeness. **(Please Initial)**

LipiFlow and Meibomian Gland Disease

Your surgeon has recommended that you receive a LipiFlow treatment prior to cataract surgery due to Meibomian Gland Disease (MGD). During your cataract evaluation you received a LipiView Scan that allowed your doctor to identify both function and structure of the Meibomian glands. The top layer of the tear film requires oil, or lipid, produced by the Meibomian glands. Blocked glands and slowed oil production cans cause discomfort, fluctuating vision, reduced contact lens comfort, and the potential for worse symptoms following cataract surgery. If left untreated, Meibomian gland blockage causes structural damage and gland loss. Once glands are lost, there is no known way to regenerate the glands.

LipiFlow treatment is not something that health insurance carriers cover. However, the initial LipiFlow treatment is available to you at a reduced rate because your doctor feels that it would be a beneficial treatment prior to your cataract surgery.

_____ I would like to proceed with my doctor's recommendation of the LipiFlow treatment. **(Please Initial)**

_____ _____

Patient (or person authorized to sign for patient) Date

_____ _____

Patient Printed Name Witness Signature

_____

Surgeon Signature