Ophthalmic Discharge Instructions

1. Your eyes may be sensitive to bright light and your vision may be blurry for a period of time after your treatment. The eye shield is enough to get you home but if you go out later you may need to wear sunglasses.

2. Report any pain, decrease in vision, or unusual symptoms to:

   Dr. Yang at 437-9900

3. Medications: one drop to the affected eye
   - [ ] Besivance - twice today; starting tomorrow four times a day
   - [ ] Vigamox - twice today; starting tomorrow four times a day
   - [ ] Pred forte - twice today; starting tomorrow four times a day
   - [ ] Prolensa - once a day starting tonight
   - [ ] Other - ____________________________

4. Activity:
   - [ ] No strenuous activities
   - [ ] No restrictions

5. Follow up:
   - [ ] Tomorrow morning at 0830 in the office
   - [ ] One week

6. Eye shield must be worn during sleep but may be removed in the morning.

7. Other instructions: ____________________________

Patient/Representative Signature: ____________________________

Nurse Signature: ____________________________ Date: __________

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SCENIC VIEW
Outpatient Surgery Center
A DIVISION OF SCIMC

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Addressograph