

Patient Name (print) \_\_\_\_\_

**NOTICE:**

**PROCEDURES WILL NOT BE SCHEDULED  
UNTIL WE RECEIVE YOUR COMPLETED  
CONSENT FORMS**

**\*\*Please be aware that several pages of the  
consent forms require your signature\*\***

**Please read and complete your consent forms.  
When completed, please mail back to our office.**

**It may take up to 10 BUSINESS DAYS after we  
have received your consent forms to schedule  
your surgery.**

**Pre-Operative Health Questionnaire**

- 1. Are you Diabetic? YES / NO
- 2. Are you currently on dialysis? YES / NO
- 3. Are you currently taking FLOMAX or any drug to improve your urinary stream? YES / NO
- 4. Are you currently taking: LANOXIN DIGOXIN
- 5. Are you currently taking: COUMADIN WARFARIN
- 6. Please list any allergies to medications and/or medical devices:

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- 7. Please list any previous eye surgery:

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- 8. Please list your medications:

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## **Informed consent for goniosynechialysis surgery**

You have glaucoma. Glaucoma is a disease defined by optic nerve damage. The optic nerve connects the eye to the brain. Fluid imbalance or eye pressure problems damage the nerve. Glaucoma slowly gets worse over time and cannot be reversed. If it is not treated, it causes a painless loss of eyesight. In some cases, it can lead to blindness.

**Alternatives (choices and options).** The best choices for glaucoma treatment are those that lower the eye pressure with the fewest risks to the patient's eyesight and overall health.

- Usually eye drop medications or laser therapy are used first. Often, multiple medications are needed to get the desired pressure level.
- If medications and laser treatment do not work well enough, or if patients have trouble using eye drops because of cost, side effects, and other difficulties, then glaucoma surgery is required. There are many types of glaucoma surgery.
- You can decide to have no treatment. Without treatment, your glaucoma will get worse and you will lose more vision. You may even go blind.

**Your ophthalmologist is recommending goniosynechialysis surgery.**

This is a new type of glaucoma surgery called "minimally-invasive glaucoma surgery" (MIGS). MIGS provides control of the eye pressure at lower risk than more traditional glaucoma surgeries. It alters the eye's drainage system to lower the eye pressure and reduce the need for medications. MIGS is performed through an incision that is less than 3 mm long (smaller than 1/8 of an inch). Your ophthalmologist will inject a non-toxic jelly to inflate and stretch parts of your eye's drainage system (the trabecular meshwork, Schlemm's Canal, and collector channels). This will allow fluid to leave your eye.

**Benefits (how the surgery can help).** The goal of goniosynechialysis surgery is to lower your eye pressure and help you keep the vision you have now. It will not bring back vision you have already lost from glaucoma.

**Risk (problems the surgery can cause).** As with any surgical procedure, there are risks with goniosynechialysis surgery. In some cases, the surgery may not lower your eye pressure or control your glaucoma even when it is

properly performed. Your ophthalmologist cannot tell you about every risk. Here are some of the most common and serious risks:

- Failure to control eye pressure, with the need for eye drops, laser treatment, or another surgery
- Abnormal collection of fluid in the eye, with the need for another surgery
- Worse or lost vision
- Pressure that is too low
- Damage to the eyeball
- Infection
- Bleeding in the eye
- Inflammation
- Cataract (except if you have already had cataract surgery or if you are having cataract surgery at the same time as this glaucoma surgery)
- Pain, irritation, or discomfort in the eye or surrounding tissues that may last
- Drooping of the eyelid
- Double vision
- Problems during surgery that need immediate treatment. Your surgeon may need to do more surgery right away or change your surgery to treat this new problem.
- Other risks. There is no guarantee that the surgery will improve your vision. The surgery or anesthesia might make your vision worse, cause blindness, or even the loss of an eye. These problems can appear weeks, months, or even years after surgery.
- Careful follow-up is required after surgery. After your eye heals, you will still need regular eye exams to monitor your glaucoma and watch for other eye problems.

**Goniosynechialysis can be performed under topical or regional anesthesia.** With either type of anesthesia, the anesthesiologist, ophthalmologist, or nurse anesthetist may also give you intravenous sedative to help you relax.

- With topical anesthesia, eye drops are used to numb the eye. You must be able to cooperate with the ophthalmologist to make sure you do not move your eye during surgery. Risks of topical anesthesia

include injury to the eye by movement during surgery, drooping of the eyelid, and increased sensation during the procedure.

- With regional anesthesia, anesthetic medicine is injected around the eye to numb the eye and keep it from moving. Risks of regional anesthesia include needle damage to the eyeball or optic nerve, which could cause vision loss; interference with circulation of the retina, which could cause vision loss; drooping of the eyelid, double vision, and bruising of the skin around the eyes.
- Intravenous sedation can cause heart and breathing problems. In rare cases, it can cause death.

**By signing below, you consent (agree) that:**

- You read this informed consent form or had it read to you.
- You were told you have glaucoma.
- Your questions about the surgery were answered.
- You consent to have the ophthalmologist perform goniosynechialysis surgery on your \_\_\_\_\_ (“right,” “left”) eye.

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Patient (or person authorized to sign for patient)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date

Dear Patient,

You have been scheduled for surgery at Camp Lowell Surgery Center. Tucson Eye Care has a financial interest in this surgery center. Please inform our staff if for any reason you do not want your surgery performed at this surgery center. You will then be referred to another surgeon who will perform surgery at a different location.

I acknowledge the above and agree to have my surgery scheduled at Camp Lowell Surgery Center.

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Patient Signature

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Date