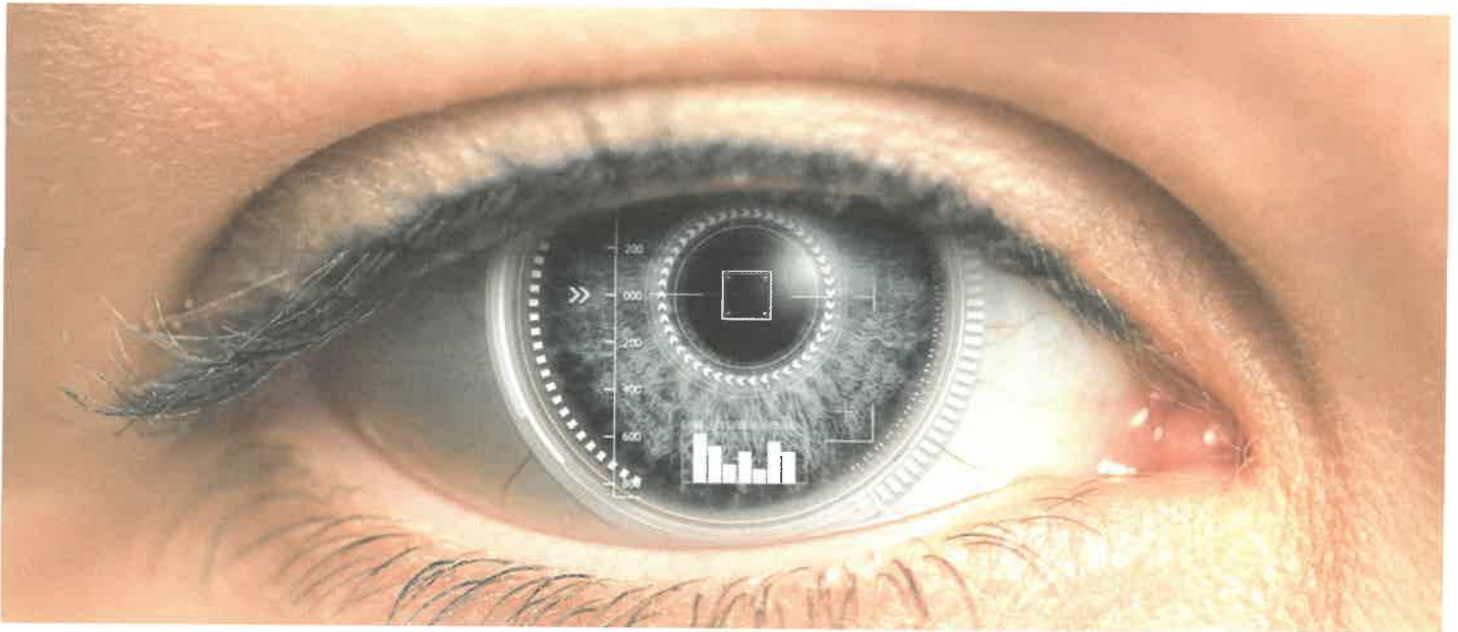




# Taking the next step to Cataract Surgery

## **A Guide to Help Prepare You to Meet Your Surgeon.**

**Please fill out the enclosed questionnaire and bring this packet back to your next appointment!**



**EYE SITE OF TAMPA BAY**  
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## Before meeting your surgeon...

1. Please take time to read “**Options for Vision Correction**” before meeting Dr. Knauf. This will ensure that you will know which technologies are available to you at the time of your evaluation.
2. Please take a few moments to fill out the **Pre-Surgical Cataract Patient Questionnaire**, *and bring it back with you to your next appointment*. Your answers will help the surgeon determine what procedure will give you the best vision after surgery.
3. When scheduling your evaluation, please know that cataract surgery is *never* an emergency. Your appointment with Dr. Knauf should be within **thirty (30) days** of when you would like to schedule surgery. If you have family commitments or vacations already planned, it is alright to postpone your evaluation with the surgeon. By planning ahead and making certain that your evaluation and your surgery date are within **thirty (30) days** of each other, you will eliminate the need for having to be re-evaluated by Dr. Knauf.
4. While we do everything we can to schedule patients on a surgery date that is convenient for them, we may not always be able to accommodate your exact wishes. Because Dr. Knauf also sees patients in clinic, we thank you in advance for your flexibility with your schedule. If you plan to have both eyes done, please note that the surgical process and follow up appointments can take up to **ten (10) weeks**. Again, if you have personal events such as family commitments or travel, you may want to wait to have surgery at a time when your schedule is more open.
5. Because each patient’s insurance plan is different, you may wish to call your insurance company to determine if you will have **additional co-pays or facility fees** that will be related to your cataract surgery. Please know that Eye Site charges **Refraction Fees (per eye)** that Medicare and most insurances will not cover.
6. *Thank you for choosing our office to provide for your eye care needs.* Now relax, and take comfort that Dr. Knauf and our staff wish to provide you the best care possible. We will answer all of your questions before surgery.

## OPTIONS FOR VISION CORRECTION

*EYE SITE OF TAMPA BAY*

### *Are you tired of your glasses or contact lenses?*

Today, cataract patients have more excellent options for vision correction than ever in the history of ophthalmology. Several new technologies have been FDA approved and are now available with **Herbert P. Knauf, MD**, a specialist in refractive cataract surgery.

### *Refractive Cataract Surgery*

The term “cataract” refers to a cloudy lens within the eye. Nearly every person will develop a cataract at some time in his/her life (if you live long enough!), and cataract surgery is the most commonly performed outpatient surgery in the United States. When a cataract is removed, an artificial lens is placed inside the eye to take the place of the human lens that has become the cataract. Although most ophthalmologists have been performing phacoemulsification and small incision, no-stitch cataract surgery for decades, there have been recent advancements in measurement techniques, formulas, intraocular lenses, and correction of astigmatism that have enabled many cataract patients to go without glasses after cataract surgery, even after wearing glasses for nearly their entire lives! Not all surgeons offer these techniques to their patients, but you can be sure you are getting the best technology from **Dr. Knauf**.

### *Topical Anesthesia*

**Topical Anesthesia** allows patients the freedom of seeing immediately after the surgery and eliminates the need for stopping blood thinners and other systemic medications. Patients are made comfortable during the quick, painless procedure, and may return to their activities right away with very few restrictions.

### *Single Vision IOLs*

**Intraocular lens implants**, commonly called **IOLs**, may be one of the most important ophthalmic developments in the last 50 years. These tiny prescription lenses are permanently placed inside the eye, to restore focusing power. Intraocular lenses replace the eye’s natural lens as part of cataract surgery. Single Vision IOLs allow the eye to see either far away or up close but not both, and they do not correct for astigmatism. Depending on the amount of pre-existing astigmatism, patients may still need to wear glasses for both distance and near vision. Patients wishing to correct a wider range of vision – such as a combination of distance, mid-range, or near vision – may want to consider a Deluxe Lens or femtosecond laser arcuate incisions at the time of cataract surgery. The single vision IOL is covered by insurance, but patients are responsible for their co-pays, deductibles, and refraction fees associated with cataract surgery.

### *Femtosecond Laser Assisted Cataract Surgery*

The **Femtosecond Laser** is a significant advance that adds computer-controlled laser precision to the otherwise “manual” cataract surgery. This state-of-the-art technology is designed to correct astigmatism, make a perfectly round and precise opening in the capsule surrounding the cataract, and soften and fragment the center of the cataract to minimize the use of ultrasound during cataract surgery. **Astigmatism** is the condition where the eye is not completely round, or spherical, and the resultant vision is blurry at both distance and near. **Laser arcuate incisions** can reduce or eliminate astigmatism, improving vision without glasses after surgery. Incisions are made at predetermined lengths, depths, and locations, depending on how much correction is needed. The laser arcuate incisions can correct the uneven shape of the cornea, by flattening its steeper axis and reforming it into a more rounded shape. The Femtosecond Laser procedure is an elective procedure that is performed at the same setting in conjunction with cataract surgery. If you choose to have **Femtosecond laser assisted cataract surgery**, there will be an additional charge at the time of cataract surgery.

### *Deluxe Lenses*

**Presbyopia** is the condition that affects nearly all patients at some point over 40 years of age. Gradually, the ability to focus up close when corrected for distance declines, and most people eventually need reading glasses. New technology in intraocular lenses has enabled many patients to see both distance and up close without glasses after either cataract surgery or refractive lens exchange. All of the deluxe lenses listed below also utilize the **Femtosecond laser assisted cataract surgery** when possible, to assure the most precise result.

The **PanOptix** and **ClearView** lenses are **multifocal** intraocular lenses, actually **Trifocal** lenses, which means that distance, intermediate, and near images are correctly focused on the retina, allowing the vast majority of patients to see far away, at intermediate range (computer, music, etc), and to read without glasses. With all multifocal lenses, patients may experience glare, halos, or rings around lights, especially for night-time driving. Most patients adapt to this and complaints about glare and halos usually reduce over time. If you choose to have the PanOptix or ClearView lenses, there will be an additional charge at the time of cataract surgery.

The **Vivity** and **Symfony** Intraocular Lenses were approved by the FDA as **extended depth of focus (EDOF) lenses**. They are designed to improve intermediate and near vision, though they may not be as good as a multifocal lens for fine print. These lenses demonstrated a lower incidence of glare and halos compared with the multifocal lenses. If you choose to have the Vivity or Symfony lens, there will be an additional charge at the time of cataract surgery.

The **Crystalens** is a **pseudo-accommodating** lens which theoretically changes its focus from distance to near when patients focus on close images. It does not have the rings in its design like the multifocal or EDOF lenses, so typically does not cause the same halos and glare at night. It is generally very good for intermediate vision, like using a computer, but may not be as good as a multifocal lens for reading. If you choose to have Crystalens, there will be an additional charge at the time of cataract surgery.

**Toric IOLs** are lenses that can reduce or eliminate the need for distance and/or near correction after cataract surgery. Toric IOLs are specifically designed to address astigmatism, and may be more beneficial than laser arcuate incisions for select patients, especially those who have higher degrees of pre-existing astigmatism. Once the lens is properly placed in the eye, it offsets the distortion of the cornea, focusing light clearly into the eye. Not every patient is a candidate for a Toric IOL, but many patients with high pre-existing astigmatism would benefit from a Toric IOL, even if they don't mind wearing glasses postoperatively. That is because their preoperative glasses likely won't work postoperatively, and correction of their astigmatism will allow them to return to their normal daily activities sooner postoperatively than waiting to get new glasses, which may take 6 weeks or more. Most of the Deluxe Lenses listed above also have a Toric model for patients with higher amounts of astigmatism. If you choose to have a Toric IOL, there will be an additional charge at the time of cataract surgery.

By using the Lifestyle questionnaire, Dr. Knauf can help you decide if you may be a good candidate for one of these elective refractive options. Let the doctor know at the time of your evaluation if you are interested in reducing your dependence on glasses or contact lenses for distance (or near) vision, or if you would like to correct your presbyopia with a Deluxe Lens. Our team of surgical counselors can provide you with the additional information that you will need before surgery.

**EYE SITE OF TAMPA BAY**  
*PRE-SURGICAL CATARACT PATIENT QUESTIONNAIRE*

Date: \_\_\_\_\_

Patient Name: \_\_\_\_\_ DOB: \_\_\_\_\_

**VISUAL FUNCTIONING**

*Please circle YES or NO to indicate if you have problems, even with glasses, with the following activities?*

Reading small print, such as labels on medicine bottles  
telephone books, or food labels? YES or NO

Reading a newspaper or book? YES or NO

Reading a large-print book, or large-print newspaper,  
or  
large numbers on a telephone? YES or NO

Recognizing people when they are close to you? YES or NO

Seeing steps, stairs or curbs? YES or NO

Reading traffic signs, street signs, or store signs? YES or NO

Doing fine handwork like sewing, knitting, crocheting,  
or carpentry? YES or NO

Writing checks or filling out forms? YES or NO

Playing games such as bingo, dominos, or card games? YES or NO

Taking part in sports like bowling, handball, tennis, or  
golf? YES or NO

Cooking? YES or NO

Watching television or reading the captions and print  
on the television? YES or NO

Driving at night due to excessive glare? YES or NO

Using the computer? YES or NO

## Cataract Lifestyle Questionnaire

1. After surgery, would you be interested in seeing well **without glasses** in the following situations?

**Distance vision (driving, golf, tennis, other sports, watching TV)**

Prefer no **Distance** glasses.

I wouldn't mind wearing **Distance** glasses.

**Mid-range vision. (computer, menus, price tags, cooking, board games, items on a shelf)**

Prefer no **Mid-range** glasses.

I wouldn't mind wearing **Mid-range** glasses.

**Near vision (reading books, newspapers, magazines, detailed handwork)**

Prefer no **Near** glasses.

I wouldn't mind wearing **Near** glasses.

2. Please check the **single** statement that best describes you in terms of **night vision**:

a. Night vision is extremely important to me, and I require the best possible quality night vision.

b. I want to be able to drive comfortably at night, but I would tolerate some slight imperfections.

c. Night vision is not particularly important to me.

3. If you **had** to wear glasses after surgery for one activity, for which activity would you be **most** willing to use glasses?  **Distance Vision.**  **Mid-range Vision.**  **Near Vision.**

4. If you could have good **Distance Vision during the day without glasses**, and good **Near Vision for reading without glasses**, but the compromise was that you might see some **halos or rings** around lights at night, would you like that option?  Yes  No

5. If you could have good **Distance vision during the day and night** without glasses, and good **Mid-range Vision** without glasses, but the compromise was that you might need glasses for reading the finest print at near, would you like that option?  Yes  No

6. Surgery to reduce or eliminate your dependence upon glasses by correcting several ranges of vision often are considered a refractive option that will not be covered by insurance. Are you interested in learning more about being less dependent on glasses, even if it means that you will have to pay more out-of-pocket expenses for your surgery?

Yes  No  Maybe, it depends on what options would be best for me.

7. Have you ever taken Flomax (Tamsulosin) for your prostate (men) or for urinary problems (men or women)?  Yes  No

8. Do You Yelp?  Yes  No Do you Google?  Yes  No

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

[-----I-----]  
Easy-going Perfectionist

*Please remember to fill this out and bring to your next appointment! Page 2 of 2*

Patient Name \_\_\_\_\_ DOB \_\_\_\_\_