



## Guidelines for Cataract surgery- Phacoemulsification

ANH/Ophthalmology/GUD/02/Vers.01  
Effective Date: November/ 2019  
Review Date: November/ 2022



**Institution Name: Al Nahdha Hospital**

**Document Title: Guidelines for Cataract surgery- Phacoemulsification**

### Approval Process

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### Acronyms:

|     |                   |
|-----|-------------------|
| IOL | Intra Ocular Lens |
|     |                   |



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### **Guidelines for Cataract surgery- Phacoemulsification**

#### **1. Introduction**

Cataract surgery is the treatment of visually significant cataract, which is the commonest cause of treatable blindness and visual impairment. Surgery is done by any of the following techniques:

- 1.1 Phacoemulsification.
- 1.2 Conventional extracapsular cataract extraction.
- 1.3 Manual small incision cataract surgery.
- 1.4 Lensectomy.
- 1.5 Intracapsular cataract extraction.

#### **2. Scope**

These guidelines are applicable to all secondary and tertiary care institutions in Ministry of Health.

#### **3. Purpose**

These clinical guidelines are intended to standardize the procedure for management of cataract in secondary and tertiary level health care institutions in Ministry of Health.

#### **4. Procedure**

##### **4.1 Indications:**

An individual who is unable to carry out his/her desired activities due to dimness of vision for which cataract surgery is likely to restore the visual function is the prime indication for surgery. The other reasons for a cataract removal include the following:

- 4.1.1 Clinically significant anisometropia in the presence of a cataract where cataract surgery is likely to facilitate binocularity.
- 4.1.2 Conditions in which the lens opacity is dense enough to interfere with evaluation and management of posterior segment conditions.
- 4.1.3 Lens induced ocular inflammation.
- 4.1.4 Lens induced glaucoma.



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### **4.2 Contra-indications for surgery:**

- 4.2.1 Patient not convinced about surgery.
- 4.2.2 Patient has satisfactory functional vision either with or without visual aids.
- 4.2.3 Patient is not fit for surgery.

### **4.3 Preoperative Care:**

The patient should be examined by an Ophthalmologist preoperatively:

- 4.3.1 Ensure that the evaluation accurately documents symptoms, findings and indications for treatment.
- 4.3.2 Inform the patient about the risks, benefits and expected outcomes of surgery.
- 4.3.3 Formulate surgical plan, including choice of anaesthesia and selection of an IOL.
- 4.3.4 Formulate postoperative plans including topical and systemic medications and follow up.

### **4.4 Intraoperative Care:**

#### **4.4.1 Infection Prophylaxis**

Greatest concern of an ophthalmologist after successful surgery is the endophthalmitis because of its serious consequences. Prophylactic strategies that are commonly practiced include using topical antibiotic eye drops before surgery, applying 5% povidone iodine to the conjunctival cul de sac, preparing the periocular skin with povidone iodine, careful sterile draping of the eyelid margins and eyelashes, and applying topical antibiotic eye drops after surgery.

Wound construction and closure should be meticulous. The surgery should end with a water tight incision.

#### **4.4.2 Surgical techniques**

- 4.4.2.1 Surgery can be under topical, local or general anaesthesia.
- 4.4.2.2 Surgical technique may depend on several factors, including the patient's orbital anatomy, the density of cataract, coexisting ocular pathology, the type of IOL to be implanted and surgeon preference and experience.



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### **4.4.3 Follow-up Evaluation:**

- 4.4.3.1 Postoperatively, patients should be followed up regularly till it is safe to discharge from the anterior segment clinic.
- 4.4.3.2 Postoperative checkup should include comprehensive ophthalmic evaluation.

### **5. Responsibilities**

The responsibility for the management of cataract is vested upon a team of health care staff including Optometrists, Ophthalmic technicians, Nursing staff and Ophthalmologists.



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### 6 Document History and Version Control

| Document History and Version Control |                          |                    |                    |
|--------------------------------------|--------------------------|--------------------|--------------------|
| Version                              | Description of Amendment | Author             | Review Date        |
| 01                                   | Initial Release          | Dr. Shiji Ummar    | Nov/2019           |
| 02                                   |                          |                    |                    |
| 03                                   |                          |                    |                    |
| 04                                   |                          |                    |                    |
| 05                                   |                          |                    |                    |
| <b>Written by</b>                    |                          | <b>Reviewed by</b> | <b>Approved by</b> |
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### 7 References:

| Title of book/ journal/ articles/ Website   | Author   | Year of publication | Page  |
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