



**Consent Form for
Laser Iridotomy (Iridectomy)**

This is a laser surgery used for people with narrow-angled glaucoma. The laser is used to make a small hole in the iris (colored part of the eye). The laser burn should let more fluid leak out through the drain in the eye. Furthermore, it will hopefully prevent scar formation between the iris and cornea which can lead to progression of the glaucoma.

There are some individuals who respond well to this and others who do not respond at all to the surgery. Your response is determined by the type of narrow-angle glaucoma you have and the basic make-up of your eye.

The procedure can be done in one or two trips to the laser area. The laser machine looks similar to the examination microscope that the doctor uses to look at your eye at each visit. The laser itself makes little noise and flashes a light about as bright as a flash on a camera. Almost everybody finds the procedure comfortable and without pain. Some individuals feel a little pressure during the laser. The procedure usually takes about ten to twenty minutes.

You may need drops before and after the laser. Most people will need to have their pressure checked one hour after the laser. This is because the pressure in the eye can go up after the laser treatment. This is the greatest risk for the procedure. If it does occur, you may require medications to lower the pressure, which will be administered in the office. Rarely, the pressure in the eye elevates to a very high pressure and does not come down. If this happens, you may require surgery in the operating room to lower the pressure. This is a most unusual event.

Most people notice some blurring in their vision after the laser. This clears within a few hours in most individuals. The chance of your vision being permanently affected from this laser procedure is very, very small.

You will need to use drops after the laser to help the eye heal correctly. You will probably use the new drops for about one week. In most cases, *you are asked to continue your other glaucoma medications after the laser procedure.* The doctors will notify you if there is any exception to continuing your medications.

Other risks from this procedure include inflammation in the eye, cataract formation, bleeding (usually a small amount, but can be a large amount), double vision, scar formation between the iris and the lens of the eye (synechia) that prevents the pupil from moving correctly, late closure of the iridotomy that requires repeat laser surgery to open the hole again, and (rarely) damage to the cornea or retina from the laser light. Most of these risks are somewhat decreased by having a skilled surgeon, but cannot always be prevented. I hereby give my informed consent for a laser iridotomy (iridectomy) in my RIGHT/LEFT eye.

Patient (or person authorized to sign for patient)

Date

Witness

Date

_____, M.D.
Surgeon's signature

Date

PAUL A. TARANTINO, M.D., P.A., F.A.C.S.
SANDRA Y. CHO, M.D.
TRACY BURROUGHS, O.D.

CONSENT FORM FOR **TARANTINO CHO**
LASER IRIDOTOMY (IRIDECTOMY) EYE CENTER

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