Vitreo-retinal procedures

Patient details sticker

Date: …../……/… **Elective / Non-Elective** Right / Left

Diagnosis:_____

Operation: _____

Anaesthesia: Subconj Subtenons GA **Surgeon:**……**Assistant:** ……

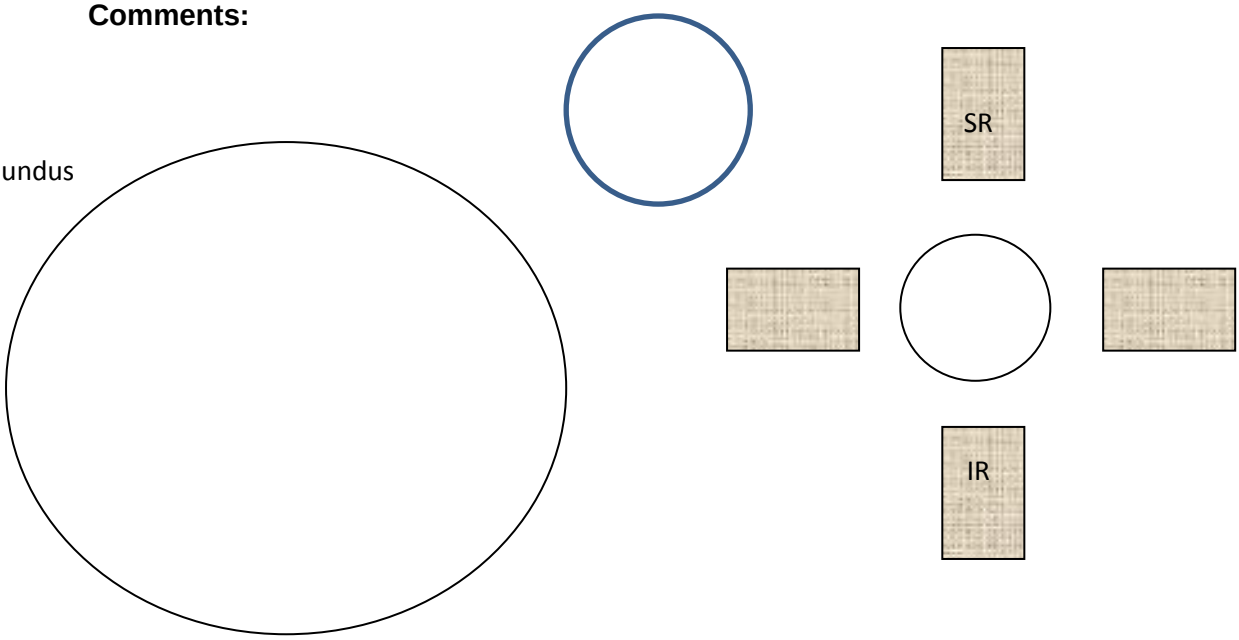
Local anaesthetic agents:

Procedure	Comment	Procedure	Comment
Vitrectomy/gauge C792		Phacoemulsification C712	
Vitreous sepn created		Incision type	
Anterior vitrectomy C791		Suture:Type C471	
Lensectomy C743		Suture Removal C473	
Revision vitrectomy C792		PCIOL Sulcus/bag C751	
Sclerostomy sutures C574		Other secondary IOL- type C752	
Comments:		IOL refixation C754	
SRF drainage through break C845		IOL removal C753	
SRF drainage retinotomy C845		Posterior capsulectomy C77	
External drainage C553		Comment:	
ILM Peeling C802		Buckle removal C546	
ERM Peeling C801		Conjunctival peritomy C411	
Segmentation of Membrane C804		Segmental Buckle C545	
Delamination of Membrane C803		Encircling Buckle C545	
Subretinal membrane removal C806		Comment:	
Relieving retinotomy & anterior retinectomy C846		Endolaser to breaks C812	
SubRetinal injection C893		Endolaser PRP C825	
Comment:		Indirect laser C826	
Dyes		Cryo C822	
BBG dye C794		Comment	
Dual blue C794		pneumatic retinopexy C855	
Triamcinolone C892		Gas/oil removal C797	
Other:		Air/fluid	
AC paracentesis C692		Gas/Type/% C795	
Pupil hooks C647		Oil/Type C796	
Capsule hooks C647		Oil removal/Route C797	
Intravitreal Injection C794		Heavy liquids/Type C796	
Intravitreal SR implant C891		S/conjunctival injections C434	
Peripheral Iridectomy C592		I/Cameral injections C693	
Other:		Other:	
Comments:			

	g.Povidone R/L g.Benoxinate R/L		

Comments:

Fundus



POST OP MEDICATION:

Name	Eye	Frequency	Duration

POSTURE:

Position	Duration

Other post op instruction:

Discharge arrangements	

FOLLOW UP

Clinic:	When:

Signature:

Name: