

## **INFORMED CONSENT FOR STENT SURGERY? ("Tear drain surgery")**

### **WHAT CAUSES THE NEED FOR THIS SURGERY?**

Because of age, injury, or chronic sinus disease, the bony tunnel that drains tears from the eye into the nose can become blocked. Tears may then back up and run down the cheeks and, in some cases, an infection can develop underneath the skin between the eye and the nose ("dacryocystitis"). Many patients complain also of a gooey discharge and eye irritation.

### **HOW IS TEAR DUCT STENT SURGERY PERFORMED?**

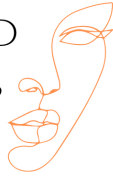
In a tear duct stent surgery, a silicone stent is then placed in the tear duct. A flexible stent tube may be left in place for three months (sometimes longer) to keep the new drain open. This tube can be removed in the office. The goal of surgery is to eliminate tearing, discharge, and irritation, and reduce the risk of infection. The stent serves to expand the hole in the eyelid that allows water into the tear duct (ie puncta) and open the exit of tear duct (nasolacrimal duct).

### **HOW WILL STENT SURGERY AFFECT MY VISION OR APPEARANCE?**

A stent will not directly affect your vision though many people see better after surgery because they no longer have tearing or discharge from the eye. The stent is barely noticeable in the corner of the eye.

### **WHAT ARE THE MAJOR RISKS OF STENT SURGERY?**

Risks of surgery include but are not limited to bleeding, trouble with eye closure infection, and scarring. Anytime any procedure is done near the eye, there is a risk of vision loss. In addition, the new drainage channel may not stay open; this happens in 25% of all cases, and may require additional surgery to correct. There are additional costs if the surgery needs to be repeated or if revisions are required. The stent that is placed may become infected over time or retained in the tear duct. Sometimes it is difficult or impossible to place the stent in the



normal tear duct.

### **WHAT ARE THE ALTERNATIVES?**

You may decide to live with the tearing, discharge, and irritation that a blocked tear duct can cause. However, if you have had an infection, your surgeon will likely advise surgery to prevent future infections, since these can, in rare circumstances, lead to vision loss. It is possible to elect to have a dacryocystorhinostomy with stent where a full bypass of the tear duct is performed or a balloon expand the tear duct before the stent is placed.

### **WHAT TYPE OF ANESTHESIA IS USED? WHAT ARE ITS MAJOR RISKS?**

Placing a stent can be performed under sedation with local anesthesia (injections around the nose and eye), or under general anesthesia. Risks of anesthesia include but are not limited to damage to the eye and surrounding tissues and structures, loss of vision, breathing problems, and, in extremely rare circumstances, stroke or death. The anesthesiologist determines usually which is the safest and best procedure for the patient.

### **PATIENT'S ACCEPTANCE OF RISKS**

I have read the above information and have discussed it with my physician. I understand that it is impossible for the physician to inform me of every possible complication that may occur. My physician has told me that results cannot be guaranteed and that adjustments and more surgery may be necessary, which can result in additional costs. By signing below, I agree that my physician has answered all of my questions and that I understand and accept the risks, benefits, and alternatives of stenting surgery, and understand the costs involved.

I consent to stent surgery on:

\_\_\_\_\_ Right eye    \_\_\_\_\_ Left eye    \_\_\_\_\_ Both eyes

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\_\_\_\_\_  
Patient (or person authorized to sign for patient)

\_\_\_\_\_  
Date

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