

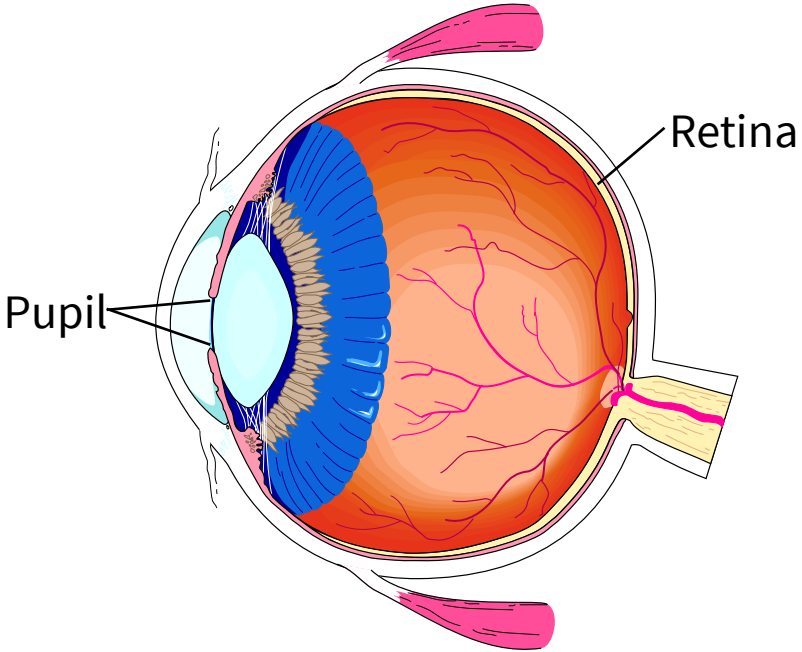
# After Your Retina Surgery

Register using a self check-in kiosk in the main entrance of the Centennial Building or the Dickson Building, Victoria General site.

Next, go to the Eye Care Centre in the Centennial Building, 2A.

# After Your Retina Surgery

Your retina is in the back of your eye.



## After surgery

If you had local anesthetic (medication to freeze your eye):

- You will be taken back to Day Surgery.
- Your health care team will teach you about your care at home.

- When your health care team says you are ready to leave, you will be discharged home with your support person.

**If you had general anesthetic (medication to put you to sleep during surgery):**

- You will wake up in the recovery area.
- A nurse will check on you often.
- Once you are fully recovered, you will be taken back to Day Surgery.
- Your health care team will teach you about your care at home.
- When your health care team says you are ready to leave, you will be discharged home with your support person.

**If you had a gas bubble or air put in your eye during surgery:**

- The gas or air is often left in the eye to help the retina heal.

## **If you have a gas bubble or air in your eye:**

- **Do not lie flat on your back. This can cause serious complications.**
  - › Gas rises. If you lie on your back, the gas will push against the lens of your eye.
  - › If you lie face-down, the gas will push against your retina and help keep it flat.
- **Do not fly or drive at high altitudes (heights).**
  - › This will cause the gas in your eye to expand (get bigger). This can cause pain and pressure in your eye.

- Depending on what your surgeon finds during your surgery, they may ask you to lie face-down and/or on 1 side or the other. **Do not lay on your back.**
- The gas bubble may cause the vision in your operated eye to be blurry. This is common.

- The gas bubble will go away on its own. As this happens:
  - › You will see the edge of the bubble as a dark line at the top of your vision.
  - › It will look like a dark circle getting smaller and smaller until it is gone. It may break up into 2 or more smaller bubbles. This is normal.

**Tell your eye surgeon about any upcoming surgeries.**

**If you need general anesthetic for another surgery:**

- Tell your surgeon and anesthesiologist (doctor who gives you medication to put you to sleep for surgery) that you have a gas bubble in your eye.
- Your nurse will give you a gas bubble bracelet (similar to a MedicAlert® bracelet) and a card. These things tell people that you have a gas bubble in your eye. **Wear your gas bracelet and keep your card in your wallet at all times until the gas bubble is gone.**

## Managing pain

- It is normal to have some discomfort. You may take ibuprofen (Advil®) and/or acetaminophen (Tylenol®) for discomfort, as needed.
- If you are taking ibuprofen, take it with food every 6 hours for the first 24 hours (1 day) after your surgery. **Do not** take ibuprofen if:
  - › You are allergic to it.
  - › You have kidney problems.
- **Do not** take any ASA products (like Aspirin®). Ask your surgeon before taking any ASA products or other blood thinners.
- It is common for your eye to feel scratchy.

## Medication and eye drops

- Keep taking your other medications as usual, including any eye drops for your other eye.

## Activity

- Follow any instructions you were given about how to position your head.
- **Do not** rub your eye.
- **Do not** move quickly.
- **Do not** bang or jerk your head.
- **Do not** do any activity that could:
  - › Get dust or dirt in your eye
  - › Cause something to hit your eye

### **For the first 4 weeks after your surgery:**

- **Do not** garden or work around dirt, dust, or chemicals.
- **Do not** lift anything more than about 10 pounds.
- **Do not** do heavy exercise or play sports.
- **Do not** swim.

## **Right after surgery**

- You may:
  - › Walk
  - › Watch TV
  - › Read
  - › Use a computer
  - › Ride in a car (**do not** drive)
  - › Bathe, shower, shave your face, or wash your hair (**do not** get dirt or soapy water in your operated eye)

## **1 week (7 days) after your surgery:**

- You may:
  - › Do chores (like cooking meals and washing dishes)
  - › Get a haircut
  - › Wear eye makeup

## **Until your eye surgeon says it is OK:**

- **Do not** drive.
- **Do not** play contact sports (like hockey, basketball, or football).
- **Do not** go back to work.
- **Do not** wash your eyes with tap water or any other cleaning solution

**Your eye surgeon will tell you when you may go back to your usual activities.**

## **What to expect after surgery**

- Your vision will be blurry.
- Your forehead and/or cheek on your operated side may feel numb from the anesthetic. This may last until the next day.
- You may not be able to move your operated eye fully. This may cause double vision. This is common. It will slowly get better over time.

- Your operated eye may:
  - › Be sensitive to light
  - › Be red and swollen
  - › Feel scratchy or itchy
  - › Burn
  - › Be watery or have bloody tears

These things are common. They should slowly get better during the first few weeks after your surgery.

- It is common to have a small amount of discharge on the edges of your eyelids.

### **To remove it:**

1. Wet a clean wash cloth slightly with clean, warm water.
2. Close your eye and **gently** wipe the edges of your eyelids. **Do not** rub or touch your eye.

You may use a tissue to wipe tears from your cheek.

## Eye protection and glasses

- Do not wear a cloth eye pad or patch at any time. Only wear your eye shield.
- For 7 days (1 week) after your surgery, you must wear eye protection at all times:
  - › Wear regular glasses or sunglasses during the day.
  - › Wear your eye shield at night.
- You **must** keep wearing your eye shield at night until your surgeon says it is OK to stop. This is usually for 7 days.
- Your eye doctor may prescribe eye drops to keep your pupils **dilated** (bigger). This will make your eyes more sensitive to light. Wear sunglasses when you are out in the sun.

## Using eye drops or ointments

- You will need to pick up eye drops at the pharmacy. Ask them to tell you what the drops are for and how to use them.

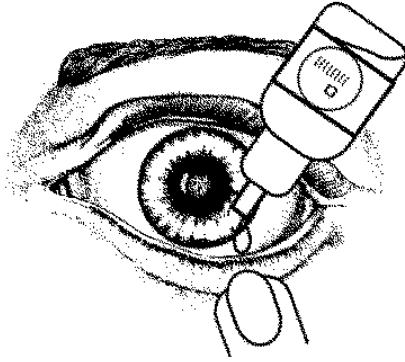
- You may be given different drops than the ones listed on the instruction sheet your eye doctor gave you after your surgery. Before you leave the pharmacy, make sure you know:
  - › What each type of eye drop is for
  - › How to use each type of eye drop
- Take your eye medication as told by your nurse or eye doctor.

### **To take your eye drops:**

1. Wash your hands well with soap and water.
2. Shake the bottle well.
3. Tilt your head back. You may sit or lie down.
4. Open both eyes and look up. With 1 finger, gently pull your lower eyelid down so it makes a pocket below your eye.



5. Place 1 drop of medication or ointment into the pocket made by your lower eyelid. **Do not** touch your eyelid or eye with the tip of the bottle.



6. Close your eye gently. Keep it closed for 1 full minute (60 seconds). Use a tissue to gently remove any extra drops from your cheek.
7. If you need more than 1 drop, wait 5 minutes between drops.

**Do not** stop using your regular drops for your other eye.

## **Follow-up appointment**

- Keep all follow-up appointments with your eye doctor. Bring your medication(s) and eye drops with you to these visits.

- You will be given a follow-up appointment for the day after your surgery. Your appointment will be at the Eye Care Centre on 2A, Centennial Building, Victoria General (VG) site, or in your eye doctor's office.

## **Call your eye surgeon right away if you have:**

- › Pain that does not get better after taking Advil® or Tylenol® as described on page 5.
- › Vision that gets worse
- › Very bad swelling
- › Nausea (upset stomach) and vomiting (throwing up) that is not helped by Advil® or Tylenol® as described on page 5.

**If you cannot reach your eye surgeon, call hospital locating at 902-473-2222 and ask to have the ophthalmology resident on call paged, or go to the nearest Emergency Department.**

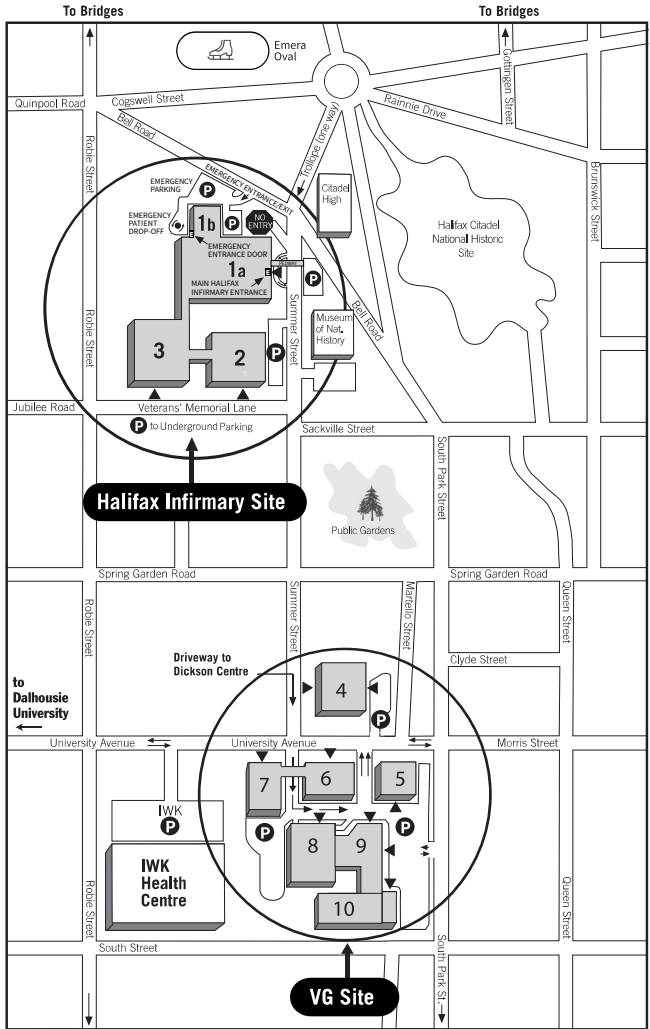
# QEII Health Sciences Centre

is made up of 10 buildings located on two sites

- | Halifax Infirmary Site |                                       |
|------------------------|---------------------------------------|
| 1a.                    | Halifax Infirmary                     |
| 1b.                    | Emergency Dept.                       |
| 2.                     | Abbie J. Lane Memorial Building       |
| 3.                     | Camp Hill Veterans' Memorial Building |
| VG Site                |                                       |
| 4.                     | Nova Scotia Rehabilitation Centre     |
| 5.                     | Bethune Building                      |
| 6.                     | Mackenzie Building Laboratories       |
| 7.                     | Centre for Clinical Research          |
| 8.                     | Dickson Building                      |
| 9.                     | Victoria Building                     |
| 10.                    | Centennial Building                   |

- P** Patient Parking
- ▶** Entrance Doors

*Please do not wear scented products when you come to the QEII.*



# Notes:

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This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any questions, please ask your health care provider.

Find all patient education resources here:  
[www.nshealth.ca/patient-education-resources](http://www.nshealth.ca/patient-education-resources)

Connect with a registered nurse in Nova Scotia any time:  
Call 811 or visit: <https://811.novascotia.ca>

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