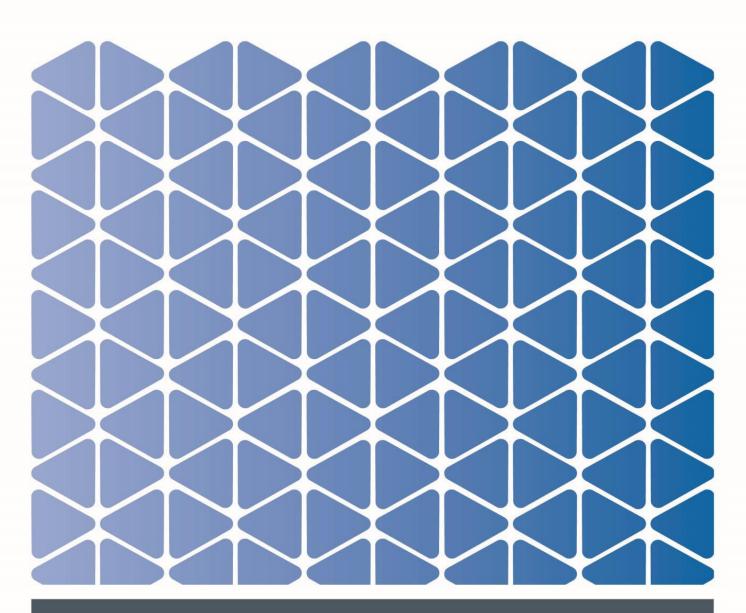




PATIENT INFORMATION - FOR PARENTS

EYE SURGERY





What to expect post-surgery.

You may notice slight redness and puffy area over the effected eyelid and surrounding area. This is quite normal as the skin around the eye is quite delicate. There may be some bruising that should return to normal quite quickly.

The effected eye may weep, gently wipe this away without putting pressure on the eye. Tears may be blood stained for a few days.

Keep skin around the eye dry as it prevents it from becoming sore.

The white of the eye may appear bloodshot; this is because of the trauma of the operation and should gradually return to normal.

Some redness of the eye may last until stiches have dissolved which could be up to one month

If your child's had a squint repair the eye may not look any different immediately.

The affected eye may or may not be padded; this should remain in place at least two hours post-surgery or as directed by surgeon.

Medication

You may be given eye drops, please use as directed.

Pain relief

Any discomfort can be eased by giving Paracetamol (Calpol) 4-6 hourly, no more than 4 doses in 24 hours and/or Ibuprofen (Nurofen) 6-8 hourly, no more than 3 doses in 24 hours.

Other information

Encourage your child not to rub the eye and avoid irritating the eye with soap, shampoo or smoke.

If necessary eyes may be cleaned by wiping closed eyelids with clean cotton wool that has been dipped in cooled boiled water.

If your child wears glasses they can continue to do so after the operation.

Most children return to nursery/school after a few days.

Your child should not swim or do contact sports for 4 weeks after surgery.

Follow up

Any outpatient appointments will be made known to you prior to discharge.

You will receive 24 hours open access to Riverbank Ward, Worcestershire Royal Hospital post discharge. The ward can be contacted on 01905 760588.

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If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PET@nhs.net

Opening times:

The PALS telephone lines are open Monday to Thursday from 8.30am to 4.30pm and Friday: 8.30am to 4.00pm. Please be aware that a voicemail service is in use at busy times, but messages will be returned as quickly as possible.

If you are unable to understand this leaflet, please communicate with a member of staff.

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