



Hello,

We look forward to seeing you soon at Central Texas Eye Center for your cataract evaluation. As your team, we want to help you make the most of your vision. At your last visit, the doctor discussed how cataract removal would give you the opportunity to optimize your vision.

We know a cataract diagnosis may sound scary, but we want you to know that millions of people are diagnosed with and treated for cataracts each year.

While cataract surgery is very common, every patient is unique. There are different preferences to consider and goals to set for life after your surgery. We'll take the time to discuss your hobbies, motivations, and lifestyle so that your doctor can better understand what's important to you and your visual needs.

Before your appointment please consider what you want from your vision.

- What hobbies and activities are important to you?
- How do you like to read (book, newspaper, digital device)?
- Do you drive at night or spend time in dimly lit environments?
- How do you feel about glasses and contacts?

***Please take the time to fill out the enclosed lifestyle questionnaire*** and bring it with you on the day of your visit. On the next page, you'll find a brief outline of your lens implant options, to help guide the discussion with our team.

Life after cataracts is something to look forward to, and this is a great opportunity to get the vision you've always wanted. By getting to know you better and understanding what matters to you, we can help you discover the vision that's right for your lifestyle.

It's time to live the life you want to see. We look forward to seeing you back soon!

Sincerely,

Dr. Jonathan C. Welch  
Dr. Joshua K. Hu  
Dr. Melissa Smith

\*\*\*\*Disclaimer: Prices subject to change, Please call Central Texas Eye Center (512-353-1300) and San Marcos Surgery Center (512-754-7999) for complete pricing\*\*\*\*



## ***Basic Lens***

Monofocal or single focus lenses help you see at one single focal distance, usually set for far away, which means you'll likely need glasses to focus on near objects. It can be set for near, or in some cases one set for each, also known as monovision. These lenses are covered by insurance and Medicare, with no added out of pocket costs.

## ***Astigmatism Reduction Lens***

**\$1100** per eye

*\$675 Surgeon Fee & \$425 Surgery Center Fee*

Astigmatism is an irregular curvature to the clear front part of the eye. If we find this on your pre-op testing you may qualify for a lens that addresses astigmatism at the time of cataract surgery. This implant will correct your vision at one distance, either near or far, and the astigmatism, giving you the chance to be free of glasses at one distance.

## ***Advanced Technology Lens***

**\$2495** per eye

*\$1500 Surgeon Fee & \$995 Surgery Center Fee*

Our clinic currently offers the newest and most innovative options for extended depth of focus and multifocal lenses. Advanced Technology lenses enhance your opportunity to reduce or eliminate your reliance on eye glasses after cataract surgery. Based on your lifestyle, preferences, and pre-op measurements our surgeons will find what is optimal for you. With Advanced Technology Lenses, there is always a possibility you may see halos, glare and starbursts, especially at night around bright lights.

## ***RxSight Light Adjustable Lens***

**\$3250** per eye

*\$2250 Surgeon Fee & \$1000 Surgery Center Fee*

The light adjustable lens from RxSight is the first and only intraocular lens that allows your physician to optimize your vision following cataract surgery. You will be able to preview and compare possible vision outcomes with your doctor based on your personal desires and lifestyle requirements. After light treatments the lens offers a combination of high quality vision at distance, intermediate, and near.

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# CENTRAL TEXAS EYE CENTER

## PRE-SURGICAL CATARACT PATIENT QUESTIONNAIRE

Patient Name: \_\_\_\_\_ Date: \_\_\_\_\_

Reason for exam today (patient words) \_\_\_\_\_

What specific improvements in your daily life do you hope to gain with surgery? \_\_\_\_\_

Eye Being Evaluated:     LEFT EYE         RIGHT EYE        **This must be filled out for each surgery eye.**

### Visual Function Status

Do you have difficulty, even with glasses, with the following activities?

1. Reading small print, such as labels on medicine bottles, telephone books, or food labels?  Yes  No
2. Reading a newspaper or book?  Yes  No
3. Reading a large-print book, or large-print newspaper, or large numbers on a telephone?  Yes  No
4. Recognizing people when they are close to you?  Yes  No
5. Recognizing people from across a room?  Yes  No
6. Judging distance such as in seeing steps, stairs, or curbs?  Yes  No
7. Reading traffic signs, street signs, or store signs?  Yes  No
8. Doing fine handwork like sewing, knitting, crocheting, carpentry, baiting a hook or other fine tasks?  Yes  No
9. Writing checks, reading bills, filling out forms, or telling time on a watch?  Yes  No
10. Playing games such as bingo, dominoes, or card games?  Yes  No
11. Taking part in sports like bowling, handball, tennis, or golf?  Yes  No
12. General household upkeep, cooking, or ironing?  Yes  No
13. Seeing television or movies?  Yes  No
14. If you live alone and wish to remain independent, are you able to care for yourself with your present vision?  Yes  No

### Visual Symptoms:

Have you been bothered by:

1. Poor night vision?  Yes  No
2. Seeing rings or halos around lights?  Yes  No
3. Glare caused by headlights or bright sunlight?  Yes  No
4. Glare on a cloudy day?  Yes  No
5. Hazy and/or blurry vision?  Yes  No
6. Seeing well in poor or dim light?  Yes  No
7. Poor color vision?  Yes  No

Pre-Surgical Cataract Patient Questionnaire

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8. Double vision?  Yes  No

**Driving**

1. Do you currently drive a car?  Yes (continue)  No (go to question 4)

2. How much difficulty do you have **driving during the day** because of your vision?

- No difficulty.
- A little difficulty.
- A moderate amount of difficulty.
- A great deal of difficulty.

3. How much difficulty do you have **driving at night** because of your vision?

- No difficulty.
- A little difficulty.
- A moderate amount of difficulty.
- A great deal of difficulty.

{ 4. When did you stop driving? }  Less than 6 months ago.  6 to 12 months ago.  More than 1 year ago. } Answer only if you answered no to question 1.

Cataract surgery can almost always be safely postponed until you feel you need better vision. If stronger glasses will not improve your vision anymore, and if the only way to help you see better is cataract surgery, do you feel your vision problem is bad enough to consider cataract surgery now?  Yes  No

Patient Signature: \_\_\_\_\_

# VISION FOR YOUR LIFESTYLE.

## SURVEY FOR CATARACT PATIENTS

**You have an important decision to make about your vision future.**

This survey is designed to help us understand your vision goals so we can provide you with the best possible lens for your lifestyle.

**1** Throughout the day, you perform activities that require your eyes to focus at different distances.

*Circle or write in the activities that are most important for your lifestyle:*

### DISTANCE

 Driving	 Golf	 Sporting events	 Scenery
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OTHER

### INTERMEDIATE

 Car dashboard	 Computer	 Grocery shopping	 Mobile phone or tablet
---	--	--	--

OTHER

### NEAR

 Fine print	 Games & puzzles	 Sewing	 Makeup
--	---	--	--

OTHER

2

**On average, how many hours per day do you spend:**

*please indicate the number next to the activity;*

- Driving
- Engaging in lifestyle activities (i.e. golf, gardening, cooking, etc.)
- Using media devices (i.e. mobile phone, tablet, e-reader)
- Reading books, newspapers
- Knitting, reading fine print

3

**Thinking long-term, how important is it that you rely on your glasses less often?**

- I don't mind
- It'd be nice
- Glasses are annoying
- I hate wearing them

4

**How often do you drive in low-light conditions (dusk, night, dawn, rain)?**

- Never
- Not often, but I'd like to
- Occasionally
- Often

5

**As best you can, mark where your personality type fits on this scale.**



6

**I know that my insurance may only cover some of the procedure, and I want to learn about my treatment options.**

- Agree
- Disagree

**If my procedure is not fully covered by insurance, I want to learn about financing options.**

- Agree
- Disagree

7

**To ensure your visit is a great experience, please share any questions or concerns you would like us to know about.**

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## **Standard Lens Option**

These lenses are covered by insurance and Medicare, with no added out of pocket costs.

### **Monofocal Lenses**

Monofocal or single focus lenses are your basic option. They help you see at one single focal distance, usually set for far away, which means you'll likely need glasses to focus on near objects. It can be set for near, or in some cases one set for each, also known as monovision. These lenses are covered by insurance and Medicare, with no added out of pocket costs.

## **Premium Lens Options**

These lenses are not covered by insurance or Medicare and are considered a refractive procedure. Premium lenses enhance your opportunity to reduce or eliminate your reliance on eye glasses after cataract surgery. ***With symfony lenses, you may see halos, glare and starbursts, especially at night around bright lights.*** This is normal and may potentially become less noticeable after a few months.

### **Toric Lenses** | **Approx. \$1003** per eye

*\$575 Surgeon Insert Fee & a Surgery Center Lens Fee (Approx. \$428)*

Astigmatism is an irregular curvature to the clear front part of the eye. If we find this on your pre-op testing you may qualify for a lens that addresses astigmatism at the time of cataract surgery. This implant will correct your vision at one distance, either near or far, and the astigmatism, giving you the chance to be free of glasses at one distance.

### **Multifocal Lenses** | **Approx. \$2163** per eye

*\$1350 Surgeon Insert Fee & a Surgery Center Lens Fee (Approx. \$813)*

In addition to providing excellent distance vision, multifocal lenses offer personalized near vision, depending on your most common daily tasks and lifestyle. You can focus where you use your vision most without always depending on glasses.

### **Symphony or Extended Depth of Focus Lenses** | **Approx. \$2163** per eye

*\$1350 Surgeon Insert Fee & a Surgery Center Lens Fee (Approx. \$813)*

This lens can give you a continuous range of high-quality vision: good distance (golf) and intermediate (dashboard) with *improved* near vision (cell phone).

### **PanOptix Trifocal Lenses** | **Approx. \$2295** per eye

*\$1350 Surgeon Insert Fee & a Surgery Center Lens Fee (Approx. \$945)*


This lens can offer you a combination of distance, good intermediate, and near vision. This may be a good option for someone who spends lots of time on the computer.

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**TECNIS<sup>®</sup>**  
Family of IOLs

# LIVE THE LIFE YOU WANT TO SEE.



When you imagine life after cataracts,  
what do you look forward to most?

**Talk to your doctor about what matters to you  
and discover the vision that's right for your life.**

**INDICATIONS:** TECNIS<sup>®</sup> 1-Piece Lenses are indicated for the visual correction of aphakia in adult patients in whom a cataractous lens has been removed by extra capsular cataract extraction. These devices are intended to be placed in the capsular bag.  
*See important safety information continued on page 14.*

**Johnson & Johnson** VISION



# HOW DO YOU SEE THE REST OF YOUR LIFE?

Whether you see yourself traveling around the world or in your own backyard, the things you love about life have a great impact on your visual needs.

Your doctor will talk to you about the ways you use vision so your cataract surgery can empower your plans for the future.



What activities are important to you?



Do you often use computers or mobile devices?



What do you do for a living?



Do you drive at night or spend time in dimly lit environments?



Do you prefer to read in print?



Do you use glasses to read? How do you feel about glasses and contacts?



Have you been diagnosed with astigmatism?



## FAST FACTS



More than **90%** of people develop cataracts by the age of 65.<sup>1</sup>



**Safe. Effective. Yours.<sup>2</sup>**

Cataract lens replacement is a very common<sup>2</sup> outpatient surgery — and an incredible opportunity to find the vision that fits your life.

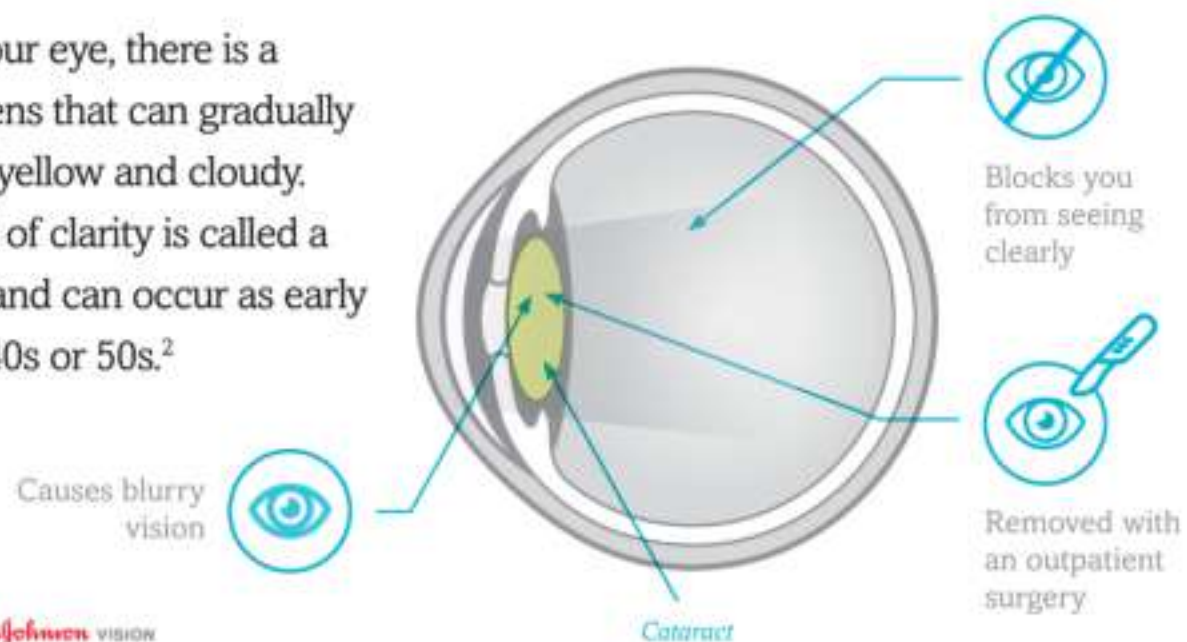


# OUT WITH THE CLOUDY. IN WITH THE CLEAR.



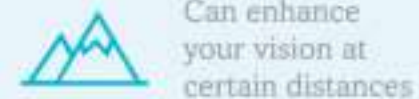
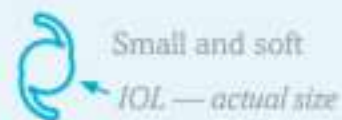
## Cataracts

Inside your eye, there is a natural lens that can gradually become yellow and cloudy. This loss of clarity is called a *cataract* and can occur as early as your 40s or 50s.<sup>2</sup>



## Intraocular Lenses (IOLs)

When your clouded lens is removed, it is replaced by an intraocular lens — or *IOL* for short. By learning about your visual needs and goals, your doctor can choose the type of IOL that is right for you.



With Cataracts



Without Cataracts

*These images are for illustrative purposes only and do not represent actual data derived from studies. These illustrative simulations are intended to help you better understand your vision in certain eye conditions.*



# VISION FOR LIVING.

## IOLs + Distances

Everything you see can be plotted on what we like to call the *visual range*.



**Multifocal IOLs**  
Near Vision

**Multifocal IOLs**  
Intermediate Vision

**Monofocal IOLs**  
Distance Vision

**Multifocal IOLs**  
Distance Vision

**Extended Depth of Focus IOLs**  
Near + Intermediate + Distance Vision

### Near Vision

Typically ≈ 16 inches from the eye

Examples:



Books



Cell Phones



Newspapers

### Intermediate Vision

Typically ≈ 26 inches from the eye

Examples:



Tablets



Cooking



Multimedia Work



### Distance Vision

Typically ≈ 13 feet from the eye

Examples:



Traffic Signs



Scenery



Stage Performances

The visual range plays a key role in IOL selection. The right IOL can do more than address cataracts; your doctor will choose a lens designed to meet your unique visual conditions and lifestyle.



# VISION FOR YOU.

IOLs are designed to stay in your eye for life. **TECNIS**<sup>®</sup> IOLs offer a variety of options designed for different conditions and lifestyles, but each one is built to help keep your vision clear and sharp over time.



## Monofocal IOLs



### **TECNIS**<sup>®</sup> Monofocal IOLs

Monofocal IOLs are your basic option. They help you see far away, which means you'll likely need glasses to focus on near objects.

The **TECNIS**<sup>®</sup> Monofocal IOL delivers **excellent, high-quality distance vision.**

## There's More to See

Read on to find out how other IOL options may be able to:



Enhance focus where you use your vision most



Address other visual conditions



Help you wear glasses less frequently



Cataract surgery is a unique opportunity to address other visual conditions, like presbyopia and astigmatism, without an additional procedure.



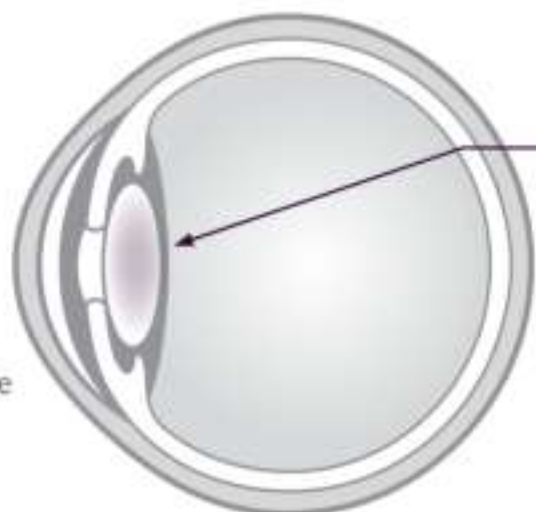
## Presbyopia

Age  
**40**

Typically becomes noticeable around 40 years of age<sup>1</sup>



Often requires reading glasses



Natural Lens With Presbyopia

Means the natural lens is losing flexibility



Makes it difficult to focus on things up close (near vision)

## Presbyopia-Correcting IOLs



**TECNIS®**  
Multifocal IOLs

In addition to providing excellent distance vision, **TECNIS®** Multifocal IOLs offer personalized near vision so you can **focus where you use your vision most without always depending on glasses.**



**TECNIS**  
**Symphony®**  
Extended Range of Vision IOL

**TECNIS Symphony®** Extended Depth of Focus IOLs can give you a **continuous range of high-quality vision:** excellent distance and intermediate with improved near vision.



With Presbyopia



Without Presbyopia

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## Day and Night

With a presbyopia-correcting IOL, you may see halos, glare and starbursts, especially at night around bright lights. This is normal and **may potentially become less noticeable after a few months.**<sup>4,5</sup>



Halos



Glare



Starbursts

*These images are for illustrative purposes only and are intended to provide guidance on halo, glare and starbursts. These are not real-life representations.*

**INDICATIONS:** The TECNIS® Multifocal 1-Piece Intraocular Lenses are indicated for primary implantation for the visual correction of aphakia in adult patients with and without presbyopia in whom a cataractous lens has been removed by phacoemulsification and who desire near, intermediate, and distance vision with increased spectacle independence.

**INDICATIONS:** The TECNIS Symphony® Extended Range of Vision IOL, model ZXR00, is indicated for primary implantation for the visual correction of aphakia, in adult patients with less than 1 diopter of pre-existing corneal astigmatism, in whom a cataractous lens has been removed. The lens mitigates the effects of presbyopia by providing an extended depth of focus.

**RISKS:** Whereas your use of glasses may decrease, it may come at the cost of some sharpness of your vision. **PRECAUTIONS:** There is a chance that your vision with a multifocal IOL may not be good enough to perform very near or detailed "up-close" work without glasses. Depending on the type of TECNIS® Multifocal 1-Piece IOL you choose, the lens is designed for near vision from 13 to 20 inches.

*See important safety information continued on page 14.*



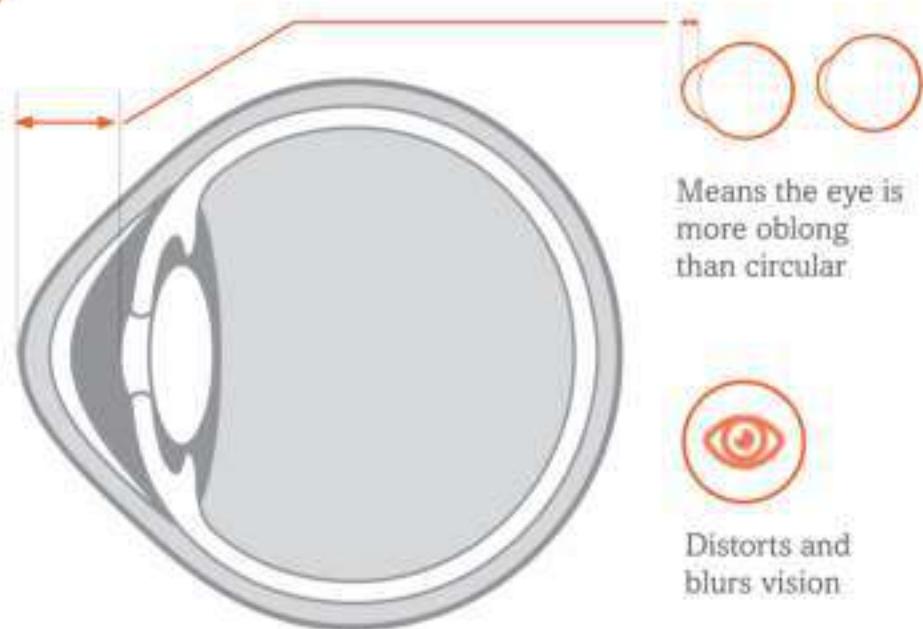
## Astigmatism



Most people are born with some degree of astigmatism<sup>6</sup>

**40%**

= 40% of people with cataracts also require astigmatism correction<sup>7</sup>



Means the eye is more oblong than circular



Distorts and blurs vision

*Eye Shape With Astigmatism*

## Astigmatism-Correcting IOLs



**TECNIS<sup>®</sup>**  
Toric IOLs

**TECNIS<sup>®</sup>** Toric IOLs address astigmatism at the time of cataract surgery. They are available in monofocal for distance vision and in extended depth of focus for continuous vision across the full range.



With Astigmatism

Without Astigmatism

*These images are for illustrative purposes only and do not represent actual data derived from studies. These illustrative simulations are intended to help you better understand your vision in certain eye conditions.*

**INDICATIONS:** TECNIS<sup>®</sup> Toric 1-Piece Posterior Chamber Lenses are indicated for the visual correction of aphakia and pre-existing corneal astigmatism of one diopter or greater in adult patients with or without presbyopia in whom a cataractous lens has been removed by phacoemulsification and who desire improved uncorrected distance vision, reduction in residual refractive cylinder, and increased spectacle independence for distance vision. The device is intended to be placed in the capsular bag.

**INDICATIONS:** The TECNIS Symphony<sup>®</sup> Toric Extended Range of Vision IOLs, models ZXT150, ZXT225, ZXT300, and ZXT375, are indicated for primary implantation for the visual correction of aphakia and for reduction of residual refractive astigmatism in adult patients with greater than or equal to 1 diopter of preoperative corneal astigmatism, in whom a cataractous lens has been removed. The lens mitigates the effects of presbyopia by providing an extended depth of focus. Compared to an aspheric monofocal IOL, the lens provides improved intermediate and near visual acuity, while maintaining comparable distance visual acuity. The model series ZXT IOLs are intended for capsular bag placement only. *See important safety information continued on page 14.*







Talk to your eye specialist about benefits and risks prior to your surgery.

## INDICATIONS AND IMPORTANT SAFETY INFORMATION

### FOR THE TECNIS® FAMILY OF 1-PIECE IOLs

**CAUTION:** Federal law restricts this device to sale and use by or on the order of a physician.

**CONTRAINDICATIONS:** None.

**IMPORTANT SAFETY INFORMATION:** Routine cataract surgery risks, irrelevant to lens selection, could be minor, temporary, or affect patients' vision permanently. Rare complications are worsening of vision, bleeding, or infection. Discuss all risks and benefits with your eye doctor before surgery. If the patient's eye is unhealthy (including glaucoma), vision may not be good even after cataract removal; patients may not get full benefit of the TECNIS Symfony® IOL. Before surgery, the eye doctor will check for any eye diseases. Patients' vision with the IOL may not be good enough to perform detailed 'up-close' work without glasses, and rarely, may make some types of retinal treatment (e.g., retinal tear repair) more difficult. You should avoid any activity that could harm your eye while you are recovering from surgery. Your doctor will tell you what activities to avoid while you are recovering from surgery. TECNIS® Multifocal and TECNIS Symfony® IOLs: Risks related to use of this lens include a slight loss in vision sharpness with decreased use of glasses. Even with glasses, loss of sharpness may worsen under poor visibility conditions such as dim light or fog. Patients may also notice halos, starbursts, glare, and other visual symptoms with extended range of vision and multifocal IOLs. This may lead to driving difficulties, and not detecting road hazards as quickly at night or in fog. This may impact patients when there are bright lights at night. Therefore, you may need to take extra care when driving, especially in poor light conditions. A small number of patients may want their TECNIS Symfony® or TECNIS® Multifocal IOL removed because of lens-related optical/visual symptoms. TECNIS® Toric IOLs: A toric IOL corrects astigmatism when it is placed correctly in the eye. There is a chance that the toric IOL could be placed incorrectly or could move within the eye. Your doctor may need to move the lens to the right position following surgery. If the toric lens is not placed correctly, you may have visual distortions. A second surgery may be needed to properly position the lens.

**SIDE EFFECTS:** Side effects of cataract surgery with the TECNIS® Family of 1-Piece IOLs may include swelling/thickening of an area of the retina, and/or the need for a second surgery to reposition the lens, repair the retina, or remove the new lens.

**ATTENTION:** Reference the Directions for Use for a complete listing of Indications and Important Safety Information.

#### REFERENCES:

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6. What is astigmatism? Your Sight Matters Web site. <http://yoursightmatters.com/what-is-astigmatism/>. Accessed December 7, 2017.
7. Freeman R. 2017 IOL Report: A Global Market Analysis for 2016 to 2022. MarketScope. Prepared 2017.

# LIVE THE LIFE YOU WANT TO SEE.

Your cataract surgery should set you up for life. Talk to your doctor about what you'd like to see after cataracts, and help make sure your results are right for you.



**TECNIS®**  
Family of IOLs



Thank you for choosing San Marcos Surgery Center. We hope you will find your experience here to be a positive one. In preparation for your upcoming procedure we invite you to enter your medical information on our website:

[www.onemedicalpassport.com](http://www.onemedicalpassport.com).

- 1 Click on "Register"
- 2 Enter information under "Medical facility/ Physician" tab (if it gives you the option)
- 3 Follow the prompts
- 4 Our facility ID number is 000487

**If you have internet access but have trouble with the program**

**or if you do not have internet access,**

please call our Pre-admissions Nurse at (512) 754-7999 ext. 104 for help.

Leave a message if call is not answered right away, so we can return your

call. **Preparation:**

1. **Do not eat or drink anything after the midnight before surgery**
2. **Wear comfortable clothes you can change into and out of easily.**
  - A) **for shoulder surgeries, wear extra-large button up shirt**
  - B) **for knee surgeries wear pants that will allow for a bulky bandage.**
  - C) **for Pain clinic injections wear clothes easy to change into and out of.**
- 3 **Do not bring valuables or wear jewelry. Remove all body piercings.**
- 4 **If you wear contact lenses, bring containers for these to be stored in during surgery**
- 5 **Arrange for someone to drive you home and to stay with you for 24 hours after surgery.**
- 6 **Bring your insurance cards (s) and driver's license**
- 7 **We generally want you to take your blood pressure medicines with just a sip of water by 6:00AM the morning of surgery. Do not take blood sugar lowering medications (insulin or pills) until after your procedure is done unless specifically instructed to take them by your Physician or the Pre-admissions nurse. Having low blood sugar can be very dangerous.**

**Our address is 1891 Medical Parkway in San Marcos,**

**Tx. 78666 Thank you for helping us help you.**