

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 back 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

Dr. Johnathan Jeffers



Basic Lens

Covered by insurance and Medicare

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.

Advanced Options

(An additional fee is required for these premium lenses which includes extra testing, calculations, and placement of IOL)

Astigmatism Reduction Lens

\$750 Surgeon Insert fee per eye + up to \$500 lens fee at San Marcos Surgery Center

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

\$1750 Surgeon Insert fee per eye + up to \$1000 lens fee at San Marcos Surgery Center

Advanced Technology lenses enhance your opportunity to reduce or eliminate your reliance on eyeglasses 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

\$2500 Surgeon Insert fee per eye + up to \$1000 lens fee at San Marcos Surgery Center

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. Additional appointments will be needed after initial post op appointments to meet with your surgeon for the adjustments.

CENTRAL TEXAS EYE CENTER PRE-SURGICAL CATARACT PATIENT QUESTIONNAIRE

	ason for exam today (patient words)	
WI	nat specific improvements in your daily life do you hope to gain with su	irgery?
Ey	e Being Evaluated:	s must be filled out for each surgery ey
	al Function Status ou have difficulty, even with glasses, with the following activities?	
1.	Reading small print, such as labels on medicine bottles, telephone bot or food labels?	oks, □ 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, bait or other fine tasks?	ing a hook
9.	Writing checks, reading bills, filling out forms, or telling time on a wa	atch?
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
Visu	al Symptoms:	
Have	e 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

3. Oriv	Double vision? ving		☐ Yes ☐ No
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 y	our 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 visi	on?
_	 □ 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. ☐ Answ	ver only if you answered no t	o question 1.
not ii	ract surgery can almost always be safely post mprove your vision anymore, and if the only n problem is bad enough to consider cataract	way to help you see better is	

Pre-Surgical Cataract Patient Questionnaire

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









OTHER

INTERMEDIATE









OTHER

NEAR



Fine print







OTHER

Driving _	lifestyle activities de (i.e. golf, gardening, mo	vices (i.e. bo	eadingKnittir oks, readin wspapers fine pr
Thinking lon	ng-term, how important is	it that you rely o	n your glasses less of
☐ I don't mir	nd	☐ Glasses a annoying	
How often d	o you drive in low-light co	nditions (dusk, n	ight, dawn, rain)?
☐ Never	☐ Not often,	Occasion	ally
•	but I'd like to		
As best you of the second of t	but I'd like to		on this scale. Perfectionis
Easygoing I know that a cover some of	but I'd like to	onality type fits If my proce	Perfectionis dure is not fully cove e, I want to learn ab
Easygoing I know that a cover some of	but I'd like to can, mark where your pers my insurance may only of the procedure, and I wan	onality type fits If my proce it by insurance	Perfectionis dure is not fully cove e, I want to learn ab



INDICATIONS: TECNIS® 1-Piece Lenses are indicated for the visual correction of aphabia 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?



What do you do for a living?



Do you prefer to read in print?



Have you been diagnosed with astigmatism?



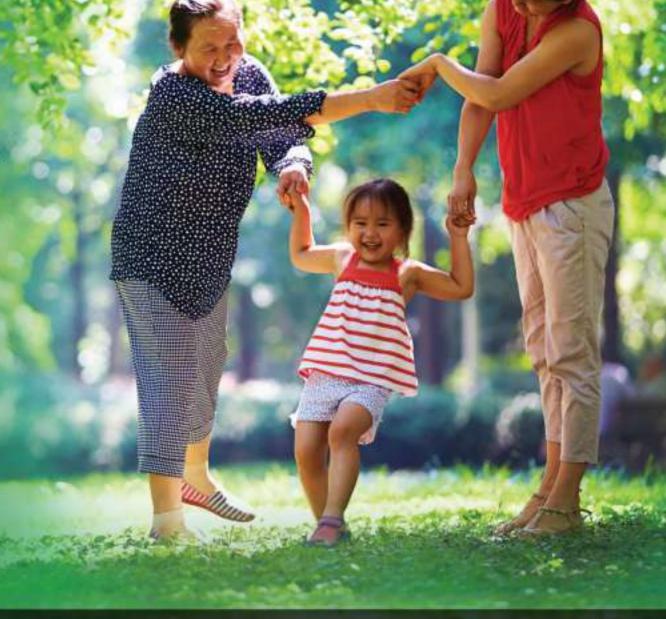
Do you often use computers or mobile devices?



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



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



FAST FACTS



More than 90% of people develop cataracts by the age of 65.1



Safe. Effective. Yours.2

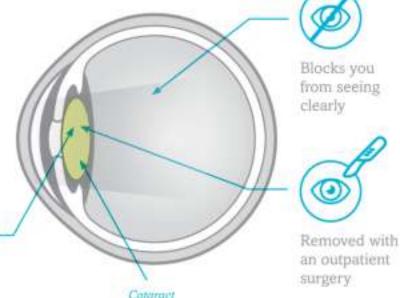
Cataract lens replacement is a very common² outpatient surgery and an incredible opportunity to find the vision that fits your life.



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.²





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.







Can enhance your vision at certain distances



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

Near Vision

Multifocal IOLs Intermediate Vision

Intermediate Vision

Typically = 26 inches from the eye

Typically ~ 16 inches from the eye



















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.



Multifocal IOLs Distance Vision

Extended Depth of Focus IOLs Near + Intermediate + Distance Vision

Distance Vision

Typically = 13 feet from the eye











VISION FOR YOU.

IOLs are designed to stay in your eye for life. **TECNIS®** 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



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® Monofocal IOL delivers excellent, highquality 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.

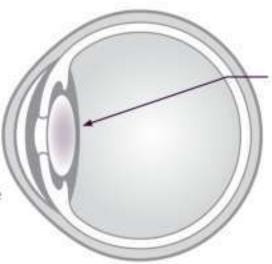
Presbyopia

Age 1

Typically becomes noticeable around 40 years of age³



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

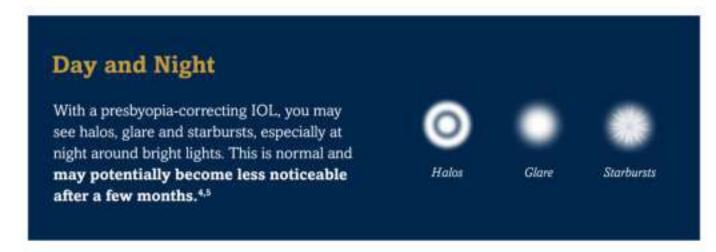


With Presbyopia



Without Presbyopia

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.



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 aphabia in adult patients with and without presbyopia in whom a cataractous lens has been removed by phacoemulaification and who desire near, intermediate, and distance vision with increased spectacle independence.

INDICATIONS: The TECNIS Symploys Extended Range of Vision IOL, model ZXR00, is indicated for primary implantation for the visual correction of aphalcia, 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.

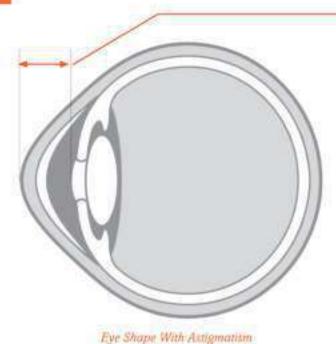
RISKS: Whereas your use of glasses may decrease, it may come at the cost of some sharpness of your vision, PRECAUTIONS: There is a chance that your vision with a multifocal IOL may not be good enough to perform very near or detailed "up-close" work without glasses. Depending on the type of TECNIS® Multifocal 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 astigmatism⁶

= 40% of people with cataracts also require astigmatism correction7



Means the eye is more oblong than circular



Distorts and blurs vision



Astigmatism-Correcting IOLs



TECNIS® 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® 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 phacoemulaification 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 Symfony® Toric Extended Range of Vision IOLs; models ZXT150; ZXT225, ZXT300; and ZXT375, are indicated for primary implantation for the visual correction of aphaloa 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 SAPETY INFORMATION: Routine caturact 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. Patientn' 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 fell 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, 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:

- Cataract. University of Michigan Kellogg Eye Center Web site. http://www.kellogg.umich.edu/patientcare/conditions/cataract.html. Accessed October 28, 2017.
- National Eye Institute. Facts About Cataracts. National Eye Institute (NEI). Web site. https://nei.nih.gov/hesith/cataract/cataract_facts. Updated September 2015. Accessed October 28, 2017.
- American Optometric Association. Presbyopia. American Optometric Association (AOA) Web site. http://www.aoa.org/patients-and-public/ eye-and-vision-problems/glossary-of-eye-and-vision-conditions/presbyopia. Accessed October 28, 2017.
- Rosa AM, Miranda AC, Patricio M, et al. Functional magnetic resonance imaging to assess the neurobehavioral impact of dysphotopsia with multifocal intraocular lens. Ophthalmology. 2017;124:1280-1289.
- Rosa AM, Miranda, AC, Patricio MM, et al. Functional magnetic resonance imaging to assess neuroadaptation to multifocal lenses. J Cararact and Refract Surg. 2017;43:1287-1296.
- 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.



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.

- 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 <u>Pre-admissions nurse</u>. 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.