LASER IRIDOTOMY (IRIDECTOMY) CONSENT

This is a laser surgery used for people with narrow-angle glaucoma. The laser is used to make a small hole in the iris (colored part of the eye). The laser burn should let the fluid circulate properly inside the eye. Furthermore, it will hopefully prevent scar formation between the iris and the cornea, which can lead to progression of the glaucoma.

The procedure can be done in one or two trips to the laser area. The laser machine looks similar to the examination microscope that the doctor uses at each visit to look at your eyes. The laser itself makes little noise and flashes a light as bright as a flash on a camera. Almost everybody find the procedure comfortable and without pain. The procedure takes about 10 to 20 minutes.

You may need drops before and after the laser. Most people need to have their pressure checked one hour after the laser. This is because the pressure in the eye can go up after the laser treatment. This is the greatest risk from this procedure. If the pressure does go up, you may require medications to lower the pressure, which will be administered in the office. Rarely, the pressure in the eye will elevates to a very high pressure and does not come down. If this happens, you may require surgery in the operating room to lower pressure. This is a most unusual event.

Most people notice some blurring in their vision after the laser. This clears within a few hours in most individuals. The chance of your vision being permanently affected from this laser is very, very small.

You may need to use drops after the laser to help the eye heal correctly. If so, you will probably use the new drops for about a week. In most cases, you are asked to continue your other glaucoma medications after the laser procedure. The doctor will notify you if there is any exception to continuing your medications. It will take several weeks to determine how well the laser has worked to lower your pressure. You may require additional laser surgery to lower the pressure if it is not sufficiently lower after the first laser treatment.

Other risks from this procedure include inflammation in the eye, cataract formation, bleeding (usually a small amount but can be large amount), double vision, scar formation between the iris and the lens of the eye (synechia) that prevents the pupil from moving correctly, late closure of the iridotomy that requires repeat laser surgery to open the hole again, and (rarely) damage to the cornea or retina from the laser light. These risks are not common and sometimes cannot be prevented.

I consent to have □ Russell Hayhurst M.D. / □ Blythe Monheit M.D. to perform this procedure on my □ right eye / □ left eye and had an opportunity to have my questions answered.
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