



EYELID SURGERY SUMMARY

- **Blepharoplasty** - removal of skin for dermatochalasis
- **Mullerectomy** - tightening of muller muscle for mild ptosis
- **Levator Advancement** - tightening of levator muscle for severe ptosis
- **Direct Brow Lift** - minimally invasive eyebrow lift for lateral eyebrow droop
- **Tarsal Strip** - lower eyelid tightening for ectropion
- **Quickert Suture** - lower eyelid tightening for entropion
- **Excisional Biopsy** - by simple or by wedge resection for eyelid lesions

PREOPERATIVE CONSIDERATIONS

- PCP or cardiologist help patients safely get off aspirin and other blood thinners.
- All patients must have a friend or family member stay with them for the first 24 hours after surgery
- A negative COVID-19 test within 1-2 days of surgery is currently required for all procedures which generate aerosols by electro-cautery.
- Insurance often covers eyelid surgery
- When cataract surgery is also needed, the cataract surgery is performed first (this is because one potential result of cataract surgery is ptosis)
- We wait 2-3 months after cataract surgery before eyelid surgery (there is compression on the globe with insertion metal laser conformer during eyelid surgery)
- Surgery by laser, and anesthesia by awake sedation- Mount Vernon ASC only
- Surgery by scalpel and/or cautery - Bellingham ASC only
- Anesthesia by general for high risk patients

PREOPERATIVE TESTING

- Dry Eye testing - by Shirmer or other means is helpful
- MRD = Marginal Reflex Distance, the distance from the pupil center to the upper lid margin

POSTOPERATIVE CARE



Medications - Same for all eyelid surgery patients (*except for Quickert done in office)

- Erythromycin BID x 10 days
- Cephalexin 500mg PO BID x 10 days (if allergic substitute with Azithromycin "Z pack")

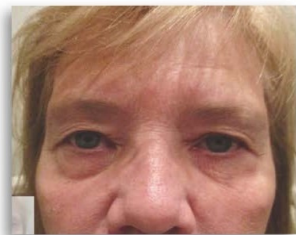
Visit Interval - Same for all eyelid surgery patients (*except Quickert done in the office)

- Post op visit #1 at 1-4 days & Post op visit #2 at 2-3 weeks
- Typically eyelid surgery post op visits are not recognized by insurance for co-management

Please contact the surgeon for patients who may have uncontrolled bleeding, cellulitis, wound dehiscence, incomplete eyelid closure, noticeable asymmetry, irregular scar tissue, etc. Or if patient is unhappy for any reason, include a photograph of the eyelids for assessment and documentation.

EXCLUSIONS

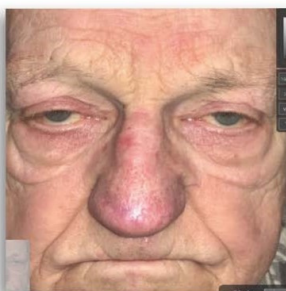
- Patients with previous eyelid surgery
- Implanted Material - ie: gold weight, silicone sling
- Surgery outside of eyelids and brows - forehead lift for nasal eyebrow droop; cheek or mid face lift for lower eyelid; malarsia festoons "bags" under the eyes; lacrimal gland pathology, bone such as DCR for tear duct obstruction
- Patients with pacemakers, as the electro-cautery may disrupt signal



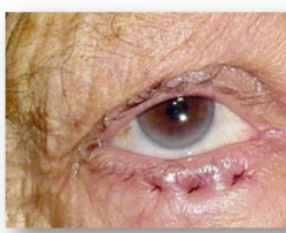
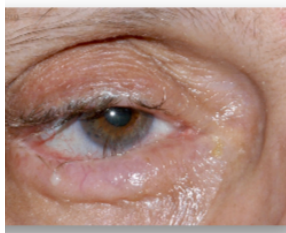
Blepharoplasty - removal of skin for dermatochalasis. MRD = 3 or 4. Surgical time is 30 minutes or less. Sutures are 6-0 polysorb to skin. Remove in office at 2-3 weeks. Eyelid edema may take 2-3 months to resolve.



Mullerectomy - tighten muller muscle for mild ptosis. MRD = 2 or 3. Surgical time is 45 minutes. Sutures are 6-0 polysorb to skin and 5-0 chromic buried at superior edge of tarsal plate. Skin sutures only removed in office at 2-3 weeks. Buried sutures stay in place until dissolved. Eyelid edema may take 2-3 months to resolve.



Levator Advancement - tightening of levator muscle for severe ptosis. MRD = 0 to 2. Surgical time is 60 minutes. Sutures are 6-0 polysorb to skin and 5-0 surgidac buried at superior edge of tarsal plate. Skin sutures only removed in office at 2-3 weeks. Buried sutures stay in place permanently and do not dissolve. Eyelid edema may take 2-3 months to completely resolve. (appearance shown at 2 weeks)



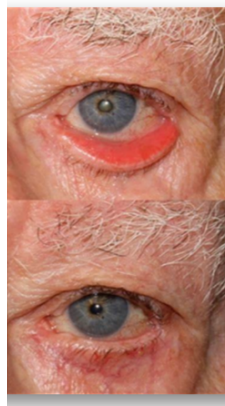
Quickert Suture - lower eyelid tightening for entropion (* In office procedure) Surgical time is 20 minutes. Sutures are 5-0 chromic from internal inferior fornix to external subciliary line. Do NOT remove. These sutures dissolve in 3-4 weeks. Eyelid edema may take 3-4 weeks to completely resolve. Medication is topical only. Oral antibiotics are not necessary.



Direct Brow Lift - minimally invasive eyebrow lift for lateral or temporal eyebrow droop. Surgical time is 30 minutes. Sutures are 6-0 polysorb to skin and 4-0 polysorb buried at periosteum of skull above brow. Skin sutures only removed in office at 2-3 weeks. Buried sutures stay in place until dissolved. Brow edema is usually minimal.



Nasal or medial eyebrow droop - requires an endoscopic lift of the forehead. Please send to Plastics or Oculoplastics



Tarsal Strip - lower eyelid tightening for ectropion Surgical time is 45 minutes. Sutures are 6-0 polysorb to skin and 4-0 polysorb buried at internal aspect of lateral orbital rim. Skin sutures only removed in office at 2-3 weeks. Buried sutures stay in place until dissolved. Eyelid edema may take 2-3 months to completely resolve.