



Information Guide

Ophthalmology

Administration of ophthalmologic medication

Definition:

The administration of ophthalmologic drops or ointment with sterile technique in order to avoid contamination.



General guidelines:

- If more than 1 drop of the same medication is to be administered in the same eye, wait 5 minutes between each drop to allow absorption: the eye can only contain the volume of 1 drop.
- If different drops or ointment need to be applied, wait 5-10 minutes between each medication.
- Do not share your drops or ointment with anyone to avoid any risk of contamination.
- 1 drop is enough: if by accident more than one is instilled, the extra will drain out.
- Make sure that the drop falls in the eye. If you are unable to feel/sense it drop in your eye, consult with your pharmacist to see if it's possible to keep the drops refrigerated. This will allow you to better feel them when applied.
- It's important to respect the schedule and the sequence of administration of your ophthalmologic medication, especially if you have more than one to apply.

Sequence for administration:

- Artificial tears
- Solution
- Suspension
- Ointment - gel

The order will be indicated with letters on the medication container:

Example: (1st A) (2nd B) (3rd C) (4nd D)

SIGN	MEDICATION
□	Antibiotic: Prevents or treats infections
▲	Anti-inflammatory: Decreases inflammation
▮	Ocular lubricant: Increases lubrication of the eye
○	Pupil dilator: Increases the size of the pupil
*	Ocular anti-hypertensive: Adjusts eye pressure by decreasing the amount and/or facilitating the drainage of the fluid in the eye.
✓	Allergic reaction: Decreases symptoms

Storage of containers (bottles, tubes, etc.):

- Keep in a clean and dry place;
- Do not refrigerate ointments, which would make the application more difficult;
- Always check the expiration date before use;
- Make sure to close the container properly after use.

Procedure:

- Wash hands.
- Avoid direct light in the eye.
- If secretions are present in the eye, use cooled boiled water and clean with a soaked compress, starting from the internal corner of the eye towards the exterior corner.
- In a standing, sitting or lying position as per your comfort, angle your head slightly back, looking up.
- Avoid any contact between the container lid and your eye, fingers, or any other surface that could contaminate or damage the eye.
- Pull down the lower eyelid in order to create a little pouch, as seen in the picture.
- To maintain stability during the application, position the hand holding the container on the other hand holding the eyelid, as seen in the picture.



Drops:

- Apply 1 drop in the center of the lower eyelid (see picture below).



Ointment:

- Spread a thin layer of ointment along the inner lower eyelid, starting in the interior corner (near the nose) going towards the exterior of the eye (see picture below). Twist the wrist when you reach the exterior corner to cut the ointment from the tube.



- In order to prevent the medication from leaking, slowly close the eye and make a rolling movement to spread the medication evenly.
- Apply a pressure on the interior corner of the eye to avoid the medication from being drained by the duct that drains tears (see picture beside).
- Keep the eye closed for at least 30 seconds, but ideally 2 minutes, to allow longer contact of the medication with the eye.
- Do not rub the eye after the application of the medication, as it could cause local irritation. Also avoid touching the upper eyelid after the surgery.
- Clean the eye with a tissue, if necessary, to remove excess medication from the internal corner of the eye to the external corner.
- It is possible to feel local irritation, a burning sensation, a sensation of having a foreign object in the eye, or an itching sensation during the application during the application of the medication. The ointment can also cause blurry vision for 10-20 minutes after the application of the medication.



Personal notes:

This guide makes recommendations in accordance with the scientific information available at the time of its publication, i.e. 10 mai 2013. However, these recommendations are in no way a substitute for the judgment of a clinician. If you have any questions, we invite you to contact your healthcare professional. If in one way or another you misuse the information contained in this document, the CHU de Québec cannot be held responsible for any damages of any kind in this regard.



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