



Kimberly Cockerham, MD, FACS
Neuro-Ophthalmology
Thyroid Eye Disease
Eyelid/Orbital Oncology
Oculofacial Restoration

Patient Name: _____ DOB: _____

Surgical Procedure: _____
[] Right Eye [] Left Eye [] Both Eyes

INFORMED CONSENT FOR ENUCLEATION AND EVISCERATION

WHAT IS AN ENUCLEATION?

An enucleation is a procedure to remove the eyeball from the eye socket. Evisceration is where all of the eye except for the white part (the sclera) is removed. These procedures are done for a variety of conditions, the most common being malignancy and a blind, painful eye. In most cases a temporary prosthetic shell will be placed in the eye socket at the time of surgery. Your prosthetic eye will be prepared by an ocularist and fitted approximately six weeks after surgery. You will have bruising for at least two weeks and swelling of your eyelids and face for a month or more.

WHAT ARE THE MAJOR RISKS OF AN ENUCLEATION?

(Please read carefully and initial)

- _____ Bleeding
- _____ Infection
- _____ An asymmetric or unbalanced appearance
- _____ Scarring
- _____ Difficulty closing the eye
- _____ Drooping of the eyelid
- _____ Ongoing pain
- _____ Numbness and/or tingling in the operated eyelid, near the eye or on the face

Additionally, the implant itself may cause complications such as:

- _____ Infection
- _____ Scarring
- _____ Allergic reaction
- _____ Foreign body reaction
- _____ Exposure or extrusion of the implant

WHAT ARE THE ALTERNATIVES TO ENUCLEATION?

- If you have a painful, blind eye this procedure is elective. You can choose to continue oral pain medications and topical drops instead.
- If you have a cancer inside your eye and radiation is not an option, you need to proceed with this surgery to try to prevent spread of the cancer and/or death.

By signing below, I am confirming that **Dr. Kimberly Cockerham** has answered all of my questions and that I understand and accept the risks of ENUCLEATION with placement of an implant.

Patient Signature: _____ Date: _____

Witness Signature: _____ Time: _____ AM/PM

Physician Signature: _____

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