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| <p>Status: Standard Procedure: Specifies the procedures to be followed, only in exceptional circumstances should these not be followed.</p> | <p>Policy No: CLSP 12 Version No: 0 Date Approved: 01/03/11 Review Date: 01/03/13</p> |
| <p>Title: Standard Procedure for Insertion of Eye Drops.</p> | |
| <p>Written by: Clinical Practice Project Group</p> | |
| <p>Approved by: National Risk Management Committee</p> | |
| <p>Cross Reference: CLSP 01, CLSP02, IG02, IGO5</p> | |

1.0 Purpose

The purpose of this procedure is to ensure the safe administration of insertion of eye drops for Cheshire Ireland service users.

2.0 Scope

All Cheshire Ireland services where medication is administered.

3.0 Responsibility

- It is the responsibility of all staff who administers medication to follow this standard procedure.
- It is the responsibility of service managers to ensure staff are familiar with the standard procedure and to monitor compliance.

4.0 Definition

Eye care is the practice of assessing, cleaning or irrigating the eye and / or the installation of prescribed ocular preparations (Stollery et al. 2005).

Eye care is required to relieve pain and discomfort, to prevent or treat infection and to prevent or treat injury to the eye.

A poor eye care technique may lead to the transmission of infection from one eye to the other or the development of irreversible damage to the eye. It is very important to prevent cross infection by using safe hand washing.

Eye swabbing:

Eyelids will need to be cleaned of discharge and dried before inserting eye drops or eye ointment:

- Wash and dry hands.
- Use a slightly moistened cotton wool dipped in sterile/cooled boiled water, ask the service user to look up and gently swab the lower lid from the inner part of the eye outwards.
- Using a new swab each time, repeat the procedure until all the discharge has been removed.
- Once both eyelids have been cleaned and dried, proceed.

5.0 Procedure

Insertion of eye drops:

- Wash and dry hands prior to administration of medication.
- Apply the 7 rights of medication administration. (CLSP 02)
- Staff member will engage with the service user and confirm that they are ready.
- Ensure the service user is sitting upright and there is an adequate light source, taking care not to dazzle the service user.
- Stand behind service user.
- Check one or both eyes, if there is any discharge proceed as for eye swabbing.
Remove the cap from the drop container, put on gloves.
- Tilt the head back slightly ensuring the service user is comfortable.
- Using your thumb and forefinger, gently separate the eyelids.
- Form a small pocket at the lower eyelid between the eye and the eyelid to catch the drop.
- Gently drop the prescribed drop in, following the manufacturer's and GP's instructions and catching the drop in the pocket.
- **DO NOT TOUCH** any part of the eye with eye drop container.
- Gently wipe away the excess when the service user blinks.
- If more than one drop is required, follow the sequence for each drop.
- Replace the cap on the eye drop container.
- Check with service user that they are comfortable.
- If at any point the service user is uncomfortable or distressed, stop before starting again.
- Remove gloves and wash hands.
- Medication Administration Record is signed and a note is made, with the service user's knowledge, if medication is refused or service user absent.
- On completion, drops container must be stored in fridge at recommended temperature following the manufacturer's instructions.

To apply eye ointment:

Follow the preparation of the service user as described above:

- Apply the ointment by gently squeezing the tube and -
- With the nozzle just above the lower lid, drawing a line along the inner edge of the lower lid from the nasal corner outwards.
- Ask the service user to close the eye and remove excess ointment with a swab to avoid excess ointment irritating the surrounding skin.
- Warn the service user that, when the eye is opened, vision will be a little blurred for a few minutes, to avoid anxiety.
- Remove and dispose of equipment.
- Report any adverse reactions; changes in vision, blurriness, infection, severe pain in one or both eyes, to lead clinical person/line manager/ GP/A&E.
- Record in Best Possible Health Daily Continuation Sheet.

Troubleshooting:

- If you are at all worried about the service user by any symptoms with his/her eyes, it is better to have them checked by an optometrist than to ignore it. A regular eye test can help detect eye conditions before one notices the effect on sight. Early treatment can often prevent the sight from getting worse. The test also looks for indications of general health conditions such as diabetes or high blood pressure, which can also affect the eye.
- The optometrist will advise on how often the service user should have his/her eyes tested. This can vary according to age, personal or family medical history and individual eye health.

6.0 References

An Bord Altranais (2003) *Guidance to Nurses and Midwives on Medication Management*. www.anbortaltranais.ie

An Bord Altranais (2007) *Guidance to Nurses and Midwives on Medication Management*. www.anbortaltranais.ie

Eye Care Procedure (2009) Joyce Young The Royal Marsden Manual of Clinical Nursing Procedures / NMC guidelines / DH Saving Lives *RNIB 2001*.

7.0 Appendices

Appendix 1

Medication Administration Record.

Appendix 2

Useful Addresses:

National Council for the Blind of Ireland,
Whitworth Rd, Drumcondra, Dublin 9
1850 33 43 53
Tel: + 353 1 8307033

Contact: eyehealth@rnib.org.uk

Appendix 3

Service user information ;

What happens at an Eye Test?

When you go for your eye test you should take with you any glasses that you wear, the names of any tablets or medicine you are taking and the name of your doctor.

Eye tests should normally include the following but the order may vary:

Discuss the reason for your visit

It may be a routine eye test, you may have specific problems with your eyes and vision, or you may have been sent by your GP. Special demands on your eyes created by work and hobbies may also need to be addressed. The optometrist may also want to know about your general health and health of your family, including if someone in your family has an eye condition.

Checking your eye sight

You will be asked to read letters on a chart. For those who are not able to read, there are other tests such as identifying pictures or matching letters and pictures.

Checking your outer eye

A light will be shone on the front of your eyes to check their health and how well they react to light.

Checking your inner eye

An ophthalmoscope is used to check the back of the eyes. The light of the ophthalmoscope will be shone into your eyes to check their health and you will be asked to look in different directions.

Checking your eye muscles

Your optometrist will check that the muscles that control your eye movement are working well.

Checking to see if you need glasses

If you need glasses to improve your vision, the optometrist will work out exactly what prescription you need. They may shine a light in your eyes and then ask you to look at letters or colours on a chart through various lenses in a special frame or machine.

Questions to ask the Optometrist

Do feel free to ask questions about any aspect of your eye test, for instance:

- When do I need to wear these glasses?
- What is the name of my refractive error?
- How large is the error in my eyes?
- Is my eye generally healthy, no signs of any eye condition?
- When should I come back for another test?
- How often do you think I should have my eyes tested?
- Why do you want to send me on to the hospital or GP?
- Do I need to tell anyone in my family to have their eyes tested?