

Oculoplastics

Mini-Fellowship Overview

At Vance Thompson Vision, our mini-fellowship education opportunities are specially designed to give primary eye care providers keen insight into the surgical and medical standards core areas of focus. The Oculoplastics Mini-Fellowship addresses various procedures within the area of aesthetics.

I. Grand Rounds Over Breakfast

Review of the day
VTV Philosophies
Setting Expectations
Q&A

II. Pre-Op Process

CC/HPI - Good history and ROS
Medication - especially Aspirin and Coumadin
Allergies
PFSH (Past Family, Social, and Surgical History)
Elective vs. functional surgeries

1. Irritation from excess folds of eyelid skin rubbing together
2. Forehead discomfort from overused muscles that strain to lift sagging skin in the eyelid area
3. Visual field loss

Asian descent - elimination of absent eyelid crease to “Westernize” appearance

Issues with circulatory, ophthalmological or serious medical conditions

Skin type

Age

III. Testing

Superior 36 visual field testing - taped/untaped

Slit lamp exam - evaluate for DES

MRD - margin-reflex distance

PF - palpebral fissure

LF - levator function

LC - lid crease

ISS - inferior scleral show

Ptosis determination

1. Do lids elevate after elevating excess tissue?
Y - pseudoptosis
N - ptosis
2. Does the patient exhibit a Hering's sign
3. Phenylephrine testing - Mueller's muscle
4. Pseudoptosis - excess skin adds weight to the eyelid - elevates after lifting skin

Photos and Documentation

Entropion

Ectropion

Dry eye evaluation

1. Schirmer's
2. Vital staining
3. Jones testing

IV. Eyebrow Determination

**Are they aligned with the superior orbital rim?
Is the patient raising the brows to compensate
for the ptosis?**

Unilateral or bilateral

How great is the disparity?

Consideration for a forehead lift

V. Other Factors

Extra skin resting on lashes

Lateral hooding

Lower lid factors

1. Steatoblepharon
2. Festoons

Overall facial symmetry

**Assessment of other skin conditions and
appearances - need for aesthetics consults**

VI. Treatment

Blepharoplasty

Browpexy

Ptosis repair

1. Levator aponeurosis advancement
2. Fasanella servat

Lateral Tarsal Strip

Medial Spindal suture

3 snip Punctal Plasty
Quickert suture
Aesthetic Procedures

1. BBL
2. Skin Tyte
3. Microlaser Peel
4. Profractional treatments

VII. Pre-Op Management

Arnica Montana - homeopathic to limit swelling and bruising x2 weeks

Cold compress onto eyelids

Lid hygiene

Eye shields until sutures removed

Maxitrol ung 3-4x daily until sutures removed - then OTC ung x3 months (Vaseline, Aquaphor, Bio Oil)

Sutures removed at 10-14 days after surgery

Objectives

- Develop a better understanding of eyelid procedures
- Screen and counsel patients better on elective vs. functional blepharoplasty procedures
- Have a foundation for post-op management of eyelid procedures
- Understand the importance for dry eye evaluation
- Have an overview of other skin aesthetic procedures
- Create a stronger relationship with partnering optometrists