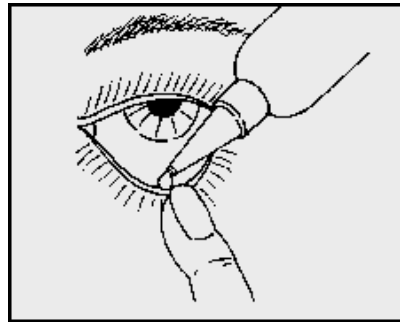


EYE DROPS/ OINTMENTS

TYPES OF EYE DROPS/ OINTMENTS	EXAMPLES	DURATION OF USE
Antibiotic	Chloramphenicol	Short course to treat infection
Glaucoma	Timolol, Latanoprost	Lifelong
Artificial Tears	Hypromellose, Carbomer	May be used 'regular' or 'when required' depending on indication
Corticosteroids	Prednisolone	Short course, often used post-operatively
Antihistamines	Sodium Cromoglicate	Often used seasonally during the hayfever months

HOW TO ADMINISTER EYE DROPS

1. Wash your hands and put on a pair of disposable gloves.
2. Shake the bottle gently and then remove the top from the bottle.
3. Ask the resident to tilt their head back and to look upwards. Gently pull the lower eyelid down.
4. Hold the dropper just above the eye and squeeze one drop inside the lower eyelid. Avoid touching the dropper tip against the eye, eyelashes, or any other surface.
5. Release the lower eyelid and encourage the resident to close their eyes for 2-3 minutes (to keep the medication in contact with the eye). When the eye is closed press gently but firmly on the tear duct for at least one minute to minimise systemic absorption and adverse effects.
6. Blot away any excess with a clean absorbent tissue.
7. Replace the top on the bottle.
8. If you need to put in more than one drop or if you are using another type of eye drop, then you should wait at least 5 minutes before putting the next drop in. If you do not wait then the first drop may be washed out by the second before it has had time to work.



HOW TO ADMINISTER EYE OINTMENTS

1. Wash your hands and put on a pair of disposable gloves.
2. Unscrew and remove the top from the eye ointment tube.
3. Ask the resident to tilt their head back and to look upwards. Gently pull the lower eyelid down.
4. Hold the tube above the eye, but DO NOT let it touch the eye or eyelashes.
5. Squeeze about 1cm of ointment along the INSIDE of the lower eyelid. Release the lower eyelid and ask the resident to close the eye and then blink to help spread the ointment over the cornea.
6. Blot away any excess ointment using a clean absorbent tissue.
7. Vision may be blurred initially but this should resolve as the ointment dissolves.
ENCOURAGE THE RESIDENT NOT TO RUB THE EYE
8. Replace the top on the tube.

EYE DROPS/ OINTMENTS GENERAL ADVICE

- Write the date that you open eye drops/ointments on the label. Most preparations have a 28 day expiry once opened and it is important to know when to discard them. (N.B not all products have a 28 day expiry after opening- always check the packaging to confirm how long it can be safely used.)
- NEVER share eye drops/ ointments between other residents.
- DO NOT allow the dropper, nozzle or tube to touch the eye, eyelashes or your fingers. If the dropper is separate, DO NOT put it down on any surface.
- When not in use, keep the bottle/ tube tightly closed in a cool, dark place. **(N.B. Some eye drops/ ointments may require storage in the fridge, check packaging/ label for full storage instructions.)**
- DO NOT allow contact lenses to be worn until the course of eye-drop/ ointment is finished, unless there are instructions otherwise.
- Single-dose units - Minims – SINGLE USE ONLY - once used they must be thrown away.

QUESTIONS TO ASK WHEN EYE DROPS/ OINTMENTS ARE NEWLY PRESCRIBED

Write This Information In The Resident's Care Plan

How long has the preparation to be used for?

Which eye/ eyes should these be used in?

Do any previous eye drops or ointments need stopping?

Will the resident need reviewing after stopping the preparation?

FREQUENTLY ASKED QUESTIONS

- *Does the resident need to be prescribed one bottle/ tube of eye drops/ ointment per eye?*

One bottle/ tube can be used for both eyes so long as there is no infection present. Residents should only require separate bottles for each eye when an infection is present and only until the infection resolves.

- *Are there compliance aids available to help administer eye drops?*

Yes, eye drop dispenser devices are available to aid the instillation of eye drops from plastic bottles (Speak to your local chemist for further advice). Product-specific devices may be supplied by the manufacturer – contact individual manufacturers for further information.

- *How long should I leave in-between applying multiple eye preparations?*

Leave a gap of at least five minutes between using the drops/ ointments. If you are using eye-drops as well as eye-ointments, you should use the drops first.

HINTS AND TIPS TO ASSIST RESIDENTS WITH DEMENTIA

- Ask the prescriber if all of the eye preparations are necessary, if the regime can be simplified or changed i.e. the resident may prefer eye drops to eye ointment.
- Ask the prescriber if the administration time can be altered to a time when the resident is most settled and likely to accept the eye preparations.
- Explain the procedure and reassure the patient. Consider using distraction techniques during administration e.g. playing music or asking the resident to hold a soft toy/ comfort aid.
- There is an alternative way of administering eye drops but it does not work as well as the standard method. Encourage the resident to tilt their head back or to lie flat on their back with the eyes closed then apply the drop onto the inside corner of closed eye, nearest the nose. As the eye opens, some of the drop should enter the eye. You should use this method as a last resort, if it is the ONLY way the resident will have the eye drop.

References: Patient.co.uk – www.patient.co.uk accessed March 2014.

BNF March 2013. North West Medicines Information Centre accessed December 2013.

Great Ormond Street Hospital - www.gosh.nhs.uk Ref: 2013F0774 & Ref: 2012F0748 accessed March 2014. Prepared by Medicines Management, East Lancashire CCG April 2014. Reviewed April 2015. Next review April 2020