LASIK
CHANGE YOUR LIFE FOREVER

Laser Vision Correction for Nearsightedness, Farsightedness and Astigmatism
This booklet is provided to further your understanding of LASIK. As you consider treatment, it is important to understand the procedure’s limitations as well as the potential risks and side effects. Before you proceed with surgically improving your vision, we encourage you to get straight answers to all your questions.

Pacific Cataract and Laser Institute

Having performed tens of thousands of LASIK procedures, Pacific Cataract and Laser Institute (PCLI) is at the leading edge of laser vision correction. PCLI is known for exceptional patient care and is one of the premier eye centers in North America.

Since its founding in 1985, the Institute has established a dependable, solid reputation among eye care professionals as a trusted center of excellence. Today, hundreds of eye doctors throughout Washington, Oregon, Idaho, Montana and Alaska refer their patients for specialized eye care and surgery. We pride ourselves in providing the finest LASIK care possible. Improving your sight is our passion.

You can Trust our Care
- We have gained a reputation as a center of excellence among hundreds of eye doctors throughout the Northwest.
- Having performed over 200,000 eye surgeries for various vision problems, we are one of the nation’s busiest providers of surgical eye care.
- Many eye doctors—and their family members—have selected us for their own laser vision correction.
- As early as 1990, we were one of the few sites in the country involved in FDA clinical studies of excimer laser treatment.
- Over a decade later, we remain at the forefront of laser treatment. We are one of the first centers in the USA to treat LASIK patients in an FDA study using the most advanced scanning spot excimer laser technology.
- Our team of LASIK surgeons is among the most experienced in the world.
- Our practice has led us to develop several surgical innovations that have significantly improved our LASIK outcomes.
- Our relentless commitment to providing the highest standard of care plays a significant role in our excellent LASIK results.

Visit www.pcli.com
- See our LASIK success rates
- Calculate your probable outcome
- Learn about our 0% financing and flexible monthly payment plans
- Get to know our organization
- E-mail your questions
LASIK—short for laser in situ keratomileusis—is the most advanced form of laser vision correction and is our treatment of choice for wide ranges of nearsightedness, farsightedness and astigmatism. In less than 15 minutes, this amazing procedure will change your life—forever.

Myths and Misunderstandings

Over 1 million LASIK procedures a year are performed in America. With a number of high profile athletes including Tiger Woods and Dallas Cowboy quarterback Troy Aikman singing LASIK’s praises, the procedure has gained a tremendous amount of public attention. However, two major myths have come along with this heightened awareness:

- Consumers have often been led to believe that high-tech lasers do all the work so that excellent surgical outcomes are a given, and that the only difference between surgeons is the cost of their surgery.
- Some advertising misleads people to believe laser vision correction will rid them completely of their need for glasses and contacts.

Unfortunately, both of these conceptions are untrue and potentially dangerous. The truth is—excellent outcomes are directly dependent on the surgeon’s abilities. LASIK has a lengthy learning curve and consistently good outcomes are gained only by complete mastery of the surgery details and the experience of performing a high number of cases. While laser correction is an amazing process, perfect visual outcomes cannot be guaranteed. As with any surgical procedure, there are limitations, risks and potential for side effects—even in the hands of highly experienced surgeons.

Choosing a Surgeon

Your choice of a LASIK surgeon can make a major difference in how well you will see. America is blessed with many eye surgeons. However, as in any profession, levels of ability and quality of outcomes vary. Your lifetime of vision is too valuable to risk with a surgeon selected simply on the basis of cost. Every laser center likes to think that their quality of care is unsurpassed. But, the likelihood of personal bias is strong and surgical providers are not the best judges of their own quality. To gain concrete knowledge of a surgeon’s abilities and outcomes, seek the guidance of a knowledgeable family eye doctor. Optometrists—also known as optometric physicians—are an excellent source of guidance because they:

- Do not perform LASIK surgery but are very experienced in before and after-surgery care.
- Have the unique opportunity of viewing first-hand the good and not-so-good outcomes of numerous surgeons as they participate in the long-term follow-up care.
- Can provide objective information on the quality of surgery.
- Are more apt to recommend patients for LASIK who have been appropriately selected and counseled about the potential downsides of treatment.

You should feel confident with your surgeon’s abilities. The results of LASIK will be with you the rest of your life.
Our surgeons use a tiny high-precision instrument called a microkeratome to separate the layers of corneal tissue and create a thin flap on the surface of the eye. This flap is folded back and the excimer laser is guided to gently reshape the underlying tissue. The corneal flap is replaced leaving the eye almost untouched.

The cornea’s new shape is what improves vision. The quality of the corneal flap is crucial to minimizing complications and achieving excellent results. Many surgeons recognize that creating an exceptional high quality flap is 80% of the procedure’s success.

What does LASIK mean?
It is an acronym for laser in situ keratomileusis, which means to reshape the cornea without disturbing the adjoining tissue. Translation of these Greek words: in situ means “in the natural or normal place,” kerato means “cornea,” and mileusis means “to shape.”

Laser Technology
The excimer laser was originally developed in the 1970s for precision etching of microcircuits on computer chips. It uses a charged mixture of argon and fluorine gases to produce a “cool” beam of light that cuts material without heat. The beam vaporizes corneal tissue, one microscopic layer at a time. Each laser pulse removes ten-millionths of an inch in twelve-billionths of a second. With the surgeon’s careful guidance, the excimer laser precisely sculpts the cornea with little or no effect on the surrounding tissue. In an average LASIK procedure, the amount of tissue removed is less than the thickness of a human hair.

Potential Risks
With the experience gained in tens of thousands of cases, our surgeons experience very few complications. However, outlined below are the potential risks and the rates of occurrence (listed in brackets) compiled from a study of 13,000 consecutive LASIK cases performed at PCLI. To learn more about their implications and treatment solutions, refer to our LASIK Success Rates document.

• Epithelial cell in-growth under flap (1 in 500)
• Abnormal corneal flap (1 in 500)
• Free corneal cap: no hinge (1 in 1000)
• Debris under the flap (1 in 1000)
• Inflammation, enough to affect vision (3 in 1000)
• Plicaic permanent droopy eyelid (no cases at PCLI)
• Infection (no cases at PCLI)
• Corneal thinning requiring corneal transplant (1 in 10,000)
• Loss of corneal flap (no cases at PCLI)
• Corneal perforation (no cases at PCLI)

Our Success Rates
Success rates can vary widely between laser centers. But, without outcome statistics, most patients do not have enough information to tell the difference. People who have LASIK are often delighted with any visual improvement and may not realize that their results could have been even better.

For detailed statistics outlining the vision our patients have achieved with correction similar to yours, please refer to our LASIK Success Rates document. Copies are available from your optometric physician and our Refractive Surgery Counselors—or you can visit our website.

Normal Vision
In normal vision, light rays coming through the cornea and lens converge and focus perfectly on the back of the eye.

Nearsightedness
People who are nearsighted see objects more clearly than distant ones. The nearsighted eye is longer than normal so light rays converge and focus before they reach the back of the eye.

Farsightedness
People who are farsighted see distant objects more clearly; however, all objects may be blurred. The farsighted eye is shorter than normal and light rays do not have enough space to converge and focus.

Astigmatism
Astigmatism is the inability to focus clearly at any distance because of an irregular or misshapen cornea. Light rays focus at various points within the eye causing distorted vision. Astigmatism is often combined with nearsightedness and farsightedness.

Presbyopia
Presbyopia is a normal, age-related change that occurs as we approach our mid-forties. The lens of the eye becomes less elastic and loses its ability to change focus, making it difficult to see up-close. As eyes age, they will experience presbyopia, even if LASIK is performed to correct nearsightedness, farsightedness or astigmatism.

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People who are nearsighted see near objects more clearly than distant ones. The nearsighted eye is longer than normal so light rays converge and focus before they reach the back of the eye.

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People who are farsighted see distant objects more clearly; however, all objects may be blurred. The farsighted eye is shorter than normal and light rays do not have enough space to converge and focus.

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Although this could interfere with night vision, untreated outer area of the cornea. produced by light passing through the pupil. A second ghost or faded image is formed due to the different refractive index between the cornea and air. As the pupil opens, the pupil dilates larger than the area of correction. As the pupil opens, the pupil dilates larger than the area of correction. Under or overcorrection can also occur if the cornea is not treated and repositioning is necessary. If your eye were to suffer injury early on the eye chart could be lost. Regression is the result of treatment, you may be disappointed. Even though the chance of losing more than 2 lines on the eye chart is less than 1%, it must be factored into your decision. There is a chance that contact lenses, if they are needed, may not fit easily or comfortably over the new surface. Microscopic corneal irregularities are possible: microscopic surface irregularities could result in a loss of best-corrected vision. There is a risk (less than 1 in 100) that two or more lines of vision on the eye chart could be lost. Regression is sometimes, especially with people who undergo high amounts of correction, the effect of surgery is partially lost over several months. Some, but not all cases, significant regression can be retreated. Halo effect is an optical effect that may manifest as a ring or glow around objects in dim light situations when the pupil dilates larger than the area of correction. As the pupil opens, a second ghost or faded image is formed due to the different refractive index between the cornea and air. Although this could interfere with night driving, it is rarely a significant problem. Inconvenience between surgeries is the result of treatment, you may be disappointed. It is also important that you are aware of the risks and side effects and that your motivation for LASIK is strong enough for you to accept them. Who qualifies? To determine if you are suited for treatment, schedule a LASIK surgery evaluation with your optometric physician. This careful exam will determine whether you are a good candidate. In general, you qualify for LASIK if:

- You are 18 years or older and are not functioning well with corrective lenses.
- Your vision problems involve nearsightedness, farsightedness or astigmatism.
- Your vision has been stable over the last 12 months—2 years if you require a high degree of correction.
- You understand that the best possible surgery results will not likely improve the vision you obtain with your best prescription for corrective lenses.
- You understand that LASIK has limitations and your expectations are realistic.

Throw away your glasses? LASIK has the potential to greatly reduce dependency on corrective lenses and in some cases glasses may not be required—but treatment is not a cure all. If you expect perfectly corrected vision as a result of treatment, you may be disappointed. It is also important that you are aware of the risks and side effects and that your motivation for LASIK is strong enough for you to accept them.

Monovision vs. reading glasses? Reading glasses or bifocal lenses are worn to relieve the age-related focusing problem of presbyopia. Contact lens wearers sometimes elect to have one lens fit for near vision and the other prescribed for distance vision. This is known as monovision and can also be achieved with LASIK—with one eye under-corrected for near vision and the other corrected for distance. The advantage is being able to both read up-close and see at a distance without corrective lenses. This might be particularly helpful for people, such as teachers, public speakers, politicians and clergy, who frequently shift their vision from near to far. However, monovision has possible disadvantages including decreased depth perception and blurred vision in certain instances. Because many people cannot tolerate monovision, it is important to approach it with care. In determining if this option is for you, we recommend having your optometric physician fit you with contact lenses to simulate the effect. Wearing these specially prescribed contacts for several days will give you the opportunity to “test drive” monovision in your normal daily activities.
How long have you been performing LASIK?
Our surgical team has performed LASIK almost exclusively as their laser vision correction procedure of choice since February 1996.

How many operations have you performed?
At the time of this printing, we have completed over 50,000 LASIK procedures. Our surgeons are among the most experienced in the world, routinely performing 400 to 600 cases every month.

Can you guarantee 20/20 vision?
Unfortunately, no surgical procedure can be guaranteed. Instead of hoping to forever eliminate your need for corrective lenses, a more realistic goal is to reduce your dependence on glasses and contact lenses. To learn more about your approximate chances of achieving 20/20 vision, please refer to our LASIK Success Rates document. Copies are available from your optometric physician and our Refractive Surgery Counselors—or you can visit our website.

How many patients require enhancements or retreatment?
Because of our surgeons’ innovative techniques, we are able to treat people requiring high amounts of correction. Those with higher degrees of correction can expect higher probabilities of requiring retreatment. People with average or moderate degrees of correction can expect a 5-10% chance of needing an enhancement. Those who undergo very high amounts of correction can expect increased chances that touch-up treatment will be required.

What is the cost if enhancement treatment is required?
If our surgeons perform your initial treatment, recommended retreatment or enhancement surgery is free of charge for life—as long as you are under the care of your optometric physician and are examined annually.

How much does the surgeon’s skill have to do with good results?
Some people mistakenly assume that with the high tech instruments used for LASIK the surgeon’s role in achieving superb outcomes is minimal. This is not the case. The surgeon’s skill and judgement are the most critical factors in achieving excellent visual outcomes with LASIK. The surgeon’s experience and expertise become even more crucial in the occurrence of an intra-operative complication. Although the equipment is highly sophisticated, the surgeon is directly involved in positioning the instruments and aligning your eye under the laser. We have learned that the accuracy and impeccable precision of numerous small details, controlled directly by the surgeon, are the key to achieving excellent outcomes.

Are some lasers better than others?
Laser companies have a lot to gain by leading consumers to believe that their machines produce better results than their competitors. However, this is usually not the case. There are several very good lasers on the market, but excellent surgical outcomes are much more dependent on the expertise of the surgeon. An excellent surgeon will achieve excellent outcomes on whatever laser he or she chooses to use. You can feel confident knowing that our surgeons carefully research the most current machines and continue to seek out the most refined laser technology.

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Over time, many optometric physicians have seen the good and not-so-good outcomes of numerous LASIK surgeons.

How are your lasers calibrated?
We constantly monitor calibration and make tiny adjustments, if needed, between cases. Rather than being dependent on the manufacturer’s service calls, our advanced laser technicians keep our instruments maintained and precisely calibrated at all times. You may be comforted to know that our maintenance and calibration specifications even exceed those provided by the laser manufacturer.

How long do you require contact lenses to be removed before treatment?
Contact lenses modify the shape of the cornea, they must be left out long enough for your eyes to return to their natural shape. Ask your optometric physician how long you should discontinue wearing them before your evaluation and surgery.

Will insurance cover the cost of treatment?
Although LASIK is an elective procedure, a number of plans are starting to provide full or partial coverage. You will definitely want to check with your employer or insurance provider.

Can I make monthly payments?
Yes, we offer flexible monthly payment plans with excellent terms. For more details, call our Refractive Surgery Counselors toll free at 1-800-884-7254.

Will your doctors do all my follow-up care?
Our doctors will work in close communication with your family eye doctor to coordinate your follow-up care. We are focused on providing specialized medical eye care and surgery and the patients we treat are referred back to the care of their family eye doctor as soon as their condition is stable. Should any complication arise, we will work closely with your doctor and be available for any care you may require.

If I am thinking about LASIK, why is an optometrist the best place to start?
One of the reasons your optometric physician can best determine if you are a candidate for LASIK is because he or she has followed your eye care needs and knows your vision history. Their pre-operative input and post-operative care is integral to obtaining a satisfactory result. Optometric physicians regularly provide before and after LASIK care. Over time, they have been able to see first-hand the outcomes of numerous surgeons. This unique opportunity gives your optometric physician excellent knowledge to help guide you to surgeons who consistently obtain excellent results with minimal complications.

Does my optometrist have a financial incentive to refer to your surgeons?
No. Doctors who provide before and after surgery care establish their fees based on the care they provide. No portion of our fee for LASIK is shared with referring doctors. We have also purposely steered clear of shared ownership of our lasers and facilities with other eye doctors to prevent the possibility of financial incentive for referrals. The relationship we have with doctors who trust us with their patients has been built by providing years of consistent, excellent care.

Who can I talk to about my LASIK questions?
The best sources of information are your optometric physician and our Refractive Surgery Counselors. You can call our counselors toll free at 1-800-884-7254.
Why do I need follow-up care with my optometrist after surgery? To achieve the best possible visual outcome, it is very important that your eyes are carefully examined and your vision closely monitored during your recovery. Examinations are prescribed at significant intervals to ensure proper healing and stability of vision. Follow-up care involves monitoring:

- the condition and healing of the flap
- your eye medications
- your internal eye pressure
- possible infection and healing complications
- your uncorrected and best corrected vision
- the need for enhancements
- any near vision problems
- the continued health of your eyes.

Eye movements during the laser procedure can result in less than satisfactory visual outcomes.

The Treatment

Does LASIK hurt? No, your eyes will be numb from the anesthetic eye drops so you will feel minimal if any discomfort.

You will feel a slight pressure sensation—like someone resting a finger on top of your closed eyelid—for a few seconds while the flap is created.

How will I keep my eyes from moving when the laser is working? This is a valid concern as we have found that even the smallest eye movements during the laser procedure can result in less than satisfactory visual outcomes. Instead of relying on you to keep your eyes still or trusting computerized eye trackers that are known to have shortcomings, we have developed a video-assisted eye stabilization system. This unique technology enables our surgeon to hold your eyes precisely on target (within 1/100ths of an inch) so you don’t have to worry.

What will the treatment be like for me? To give you insight we have included a patient’s personal experience in this booklet. (See page 19.)

How long does the treatment take? Although the actual laser time is usually less than a minute for each eye, patients are in the laser suite 10-15 minutes for both eyes. However, there is some preparation time before surgery when we double check critical eye measurements and perform additional tests. Plan to be in our office 2-3 hours on the day of your treatment.

What is a microkeratome? A microkeratome is a small, complex and highly engineered surgical instrument that the surgeon uses to create the micro-thin corneal flap. These instruments cost $20,000 to $60,000 each and generally consist of 3 main parts: the suction ring that uses vacuum pressure to hold the instrument in position on the eye’s surface, the head containing the plate and the blade, and a tiny motor that oscillates the blade and moves the instrument across the eye.

Can the suction used to hold the microkeratome on the eye cause damage? Yes, it has been shown that too much vacuum pressure for more than 1 minute can cause damage to the eye’s nerve fiber layer. For this reason we keep the suction ring in place for a very short time (5 to 10 seconds).

How will I keep my eyes open during surgery? The surgeon gently inserts an eye spring between your eyelids to keep your eye open during the procedure.

Can my family and friends watch? Yes, we actually encourage family involvement in your surgery. Your friends or family are invited to be with you and may view the entire surgery from our glass-walled observation area. A video-camera attached to the surgeon’s microscope provides a close-up view of surgery on a television monitor. One of our staff will accompany your guests and explain the procedure.

After LASIK

How well will I be able to see right after surgery? Most people notice immediate improvement. Setting up from the procedure they can often see the time on the clock and see details in the room. However, due to thick lubricating drops placed in your eyes, your vision will likely be blurry for several hours.

Will my eyes be patched after surgery? No, but you will be given clear plastic shields to wear to protect your eyes while sleeping the first night.

Can I drive home after LASIK? No, you should not drive after LASIK for at least 24 hours. In addition to having blurry vision, a mild sedative taken before the procedure can make you drowsy.

Will I need to use eye drops after the procedure? Yes, you will be given printed instructions on using medicated eye drops for one week and moisturizing comfort drops as often as needed.

How long is the visual recovery period? It varies with the individual since each person heals at a different rate. Most people experience some fluctuating vision for 2 to 4 weeks following surgery. Achieving your best vision can take up to 3 months.

What side effects can I expect after surgery? In the first few days and weeks, you will likely notice some of these normal side effects:

- Watery eyes—especially the first 6 hours.
- Temporary discomfort (like an eyelash in your eye)—usually for the first 12 to 24 hours. You will be given eye drops to use for pain, if needed.
- Fluctuating vision—normal for about 3-4 weeks while the eye is healing.
- Light sensitivity—usually decreases over the first few weeks, but you may need to wear sunglasses more than usual.
- Halo effect—around bright lights at night, but usually diminishes with time.

How secure is the flap after surgery? When the flap is folded back over the treated area after the laser treatment, it naturally adheres and is held to the surface of the eye by 4 natural forces within the body:

1. Within seconds—the exposed tissue sticks together as the flap returns to its position on the cornea.
2. Within minutes—endothelial cells pump fluid from the cornea to create a natural vacuum that further suctions the flap down.
3. Within hours—epithelial cells grow over the edge of the flap to further hold it down.
4. Within 6 weeks—the healing process bonds the flap in its original position.

Your Decision

As with any surgery, the most important factor in your successful outcome is the skill of the surgeon you select.

Our Advice

Surgeons who do not carefully track their LASIK outcomes and complication rates cannot objectively judge their own skill. Our best advice is to seek the recommendation of an unbiased eye care professional—someone who sees the results of surgeons’ work and understands the parameters of excellent surgery.

Optometrists fit this role. As primary eye care doctors, they routinely recommend and refer their patients to surgeon specialists for various problems including cataract surgery, glaucoma care, retinal surgery and LASIK. Regardless of the surgeon or facility your optometrist recommends, you can rest assured that their guidance will place you in excellent hands.
How long will I be off work?
We recommend allowing 1-3 days away from work. But, depending on how well you see and the type of work you do, many people are able to return to work the next day. If your job involves risk to your eyes from flying objects or dirty air, you may want to take off a few more days.

Can I play sports after LASIK?
Yes, but it is always wise to wear safety glasses when playing contact sports. You should definitely plan to wear them for the first month after LASIK.

If I’m corrected for distance vision, will I still be able to see up close?
As the eye ages the ability to focus for close work diminishes. Around 40 most people require some reading correction, and even earlier for some. However, your optometric physician can best determine if you could benefit from reading glasses or computer glasses after surgery.

If I wear reading glasses now, will I still need them after LASIK?
Yes, you will likely still need them for near vision after treatment.

If I don’t get fully corrected, can I be retreated?
Usually, but further treatment may be limited by the remaining thickness of your cornea. When your vision has stabilized, your optometric physician can help you determine if enhancement treatment is something to consider. However, due to the inherent risks of surgery, we do not generally perform enhancements unless your vision is 20/30 or worse.

Are the results of LASIK permanent?
Yes, after your eyes have healed and your vision has stabilized, your eyesight should not change except internally as the result of the normal aging process.

Will having LASIK interfere with cataract surgery when I’m older?
No, but the surgeon will need to know that you had LASIK so he or she can accurately select the correct power for the artificial lens implant.

Will I have to wear corrective lenses after surgery?
We try to fully correct your vision, but since each eye responds a little bit differently to surgery, a more realistic goal is to lessen your dependence on corrective lenses. If you still need glasses, they will likely be lighter and thinner, and you will probably be able to function more easily without them.

Can I still wear contact lenses after LASIK?
Wearing contact lenses after LASIK can be difficult. To learn more, ask your optometric physician.

Do you track patient satisfaction?
Yes, we regularly ask patients to provide feedback on their visual outcomes as well as our customer service. Constant input enables us to fine-tune and maintain our high level of care. The Patient Satisfaction statistics to the right show the results of a recent study involving over 500 randomly selected patients. This is how they responded to questions several months after LASIK.
Looking through the family photo album, I laugh at all the funky glasses I used to wear. Although stylish then—they look hilarious now.

In the '60s as a 19-year old college student, I bought my first pair of hard contact lenses. They provided wonderful visual freedom from glasses, but could be extremely unpleasant. To see on bright days required sunglasses that resembled welding goggles. If a speck of dust got under a lens while driving, it created a mini-disaster—trying to see through the flood of tears. With contacts, my eyes generally were sore, uncomfortable and squinty, but to go back to glasses was unthinkable!

With time, new technology created more comfortable lenses—gas permeable and soft contacts. But life still revolved around a ritual—seeing the world leap into focus when popping on my contacts every morning and watching it return to a useless blur when removing them at night. My visual world was like a light switch—seeing and not-seeing.

Laser vision correction promised hope and allowed me to dream of seeing without glasses or contacts. I did not think it was critical to have perfect 20/20 vision—to see well enough to function without artificial lenses would be thrill enough.

After a thorough eye examination, my family optometric physician discussed the pros and cons as well as my expectations. “Well, I don’t see any red flags,” he said settling back on his exam stool. “I’m going to give you a green light for LASIK surgery!” After referring me to Pacific Cataract and Laser Institute for surgery, his assistant explained the pre-op instructions—I was not to wear my contact lenses for 10 days before surgery. This would allow my eyes to return to their natural shape.

Not being able to wear my contacts proved the most difficult part of the entire LASIK experience. It was embarrassing to wear 30-year old scratched and super-glued spectacles that were about half the prescription power I needed. Clumsy and heavy, they slid down my nose causing pressure sores behind my ears and flopped all over my face when I exercised. On my LASIK day, I was almost more excited about removing my glasses than having surgery.

My LASIK procedure actually turned out to be very easy. It was quick and painless and any concerns or fears evaporated with the procedure’s rapid-fire pace and the calm, soothing touch of the surgery team.

First, a technician gave me pills to help calm the jitters and ensure my comfort after surgery. A nurse put in eye drops and explained the post-op procedures for the next 24 hours. After excitedly tossing the old “goggles” into my purse for the last time, the surgical nurse guided me to the laser suite and helped me recline on a comfortable dental-type chair.

As the surgeon carefully aligned my eye under the laser, I observed a ring of white light around a pulsating red light. It resembled the underbelly of a hovering UFO. My physician was a world-class surgeon who had performed thousands of LASIK procedures with excellent results. I felt no fear, only relaxed excitement.

Again, numbing drops were placed in my eyes and I was instructed to keep looking at the red light. The nurse’s soothing voice explained that the surgeon had complete control of the movement of my eye. She also explained that my other eye would be covered to make it easier to focus on the red light.

After inserting a small spring between my eyelids to hold them open, the tiny suction ring was centered on the eye. As vacuum pressure was gently applied, my vision momentarily dimmed, but there was no discomfort—only a slight pressure sensation like someone resting a finger on my eyelid. In a split second, the tiny microkeratome glided across my cornea, creating a thin, Saran Wrap-like flap.

When the flap was slowly folded back, the white lights became blurry and the red light disappeared, but it was still easy to focus on the center. Immediately the steady rat-a-tat-tat-tat of the laser began. As my corneal tissue evaporated, I could smell a faint odor like singed hair. When the laser
LASIK has given me a freedom I have not known since I was 9 years old. It is a gift that keeps on giving every day in a million ways.

It is difficult putting the visual adventure to sleep. Instead of patting the coverlet to find my kitty, I can see her curled at my feet on the bed. Instead of crawling halfway out of warm covers to read the time, I can peep through half an eye and see the clock, I can see her curled at my feet on the bed. Instead of crawling halfway out of warm covers to read the time, I can peep through half an eye and see the clock.

At dawn, I still grope for my glasses from habit before realizing I can already see. Small pleasures become individual trees with leaves, needles and branches. And instead of locating airplanes by sound, I can spot them in the sky.

Bright sunlight and fluorescent lights no longer cause squinting or photophobic distress. Looking quickly to one side does not cause discomfort by a contact moving off center. Whether outside in the wind or inside with forced air heating, my eyes do not feel dry or scratchy. At bedtime my vision is no longer removed and stored in a container. I am able to see the night as if it were a black screen that I could watch as an exciting movie.

At the one-week check up, my vision was still 20/20. “Everything looks beautiful!” said my optometric physician sliding back from the slit-lamp. And to me everything looks beautiful too. A flurry of brown wings has turned into sparrows, finches and chickadees. Massive clumps of green have become individual trees with leaves, needles and branches. And instead of locating airplanes by sound, I can spot them in the sky.

Today, I wear no correction except reading glasses for middle-age presbyopia, which only involves the reading area, which allows the eye’s natural lens to correct for near and far vision. I have not needed any reading glasses. At the one-week check up, my vision was still 20/20. “Everything looks beautiful!” said my optometric physician sliding back from the slit-lamp.

There is no sense of security in being able to see at night—no stumbling and stubbing my toe, no fear of falling in the dark. There is no longer the need to carry a flashlight or heavy book for reading in the dark. There is no_fogying and blurring from long hours of wearing contacts and there is no need to remove the lens and store it in a container.

At bedtime my vision is no longer removed and stored in a container. I am able to see the night as if it were a black screen that I could watch as an exciting movie.

Poor Candidates

People likely to be unhappy with the results of LASIK find most of the following sentiments to be true:

- I get stressed out easily when things don’t seem to happen in just the way I planned or expected.
- I worry about being incapacitated if I should ever lose my corrective lenses.
- I have not been a very successful contact lens wearer.
- I am a perfectionist and crave more freedom to participate in sports and other activities.
- I don’t like wearing glasses and would feel undressed without them.
- I do not have problems wearing contact lenses and they give me excellent vision for all activities.
- I feel handicapped by my dependence on corrective lenses.
- I am a very active person and crave more freedom to participate in sports and other activities.
- Perhaps I look better without my glasses.
- I feel handicapped by my dependence on corrective lenses.
- I worry about being incapacitated if I should ever lose my corrective lenses and not be able to function in a crisis situation.
- I am generally a fairly easy-going person.
- I am not a fanatic perfectionist.
- I would have better career opportunities if I had better natural vision.
- I would need some correction after surgery, and found out that I could not wear contacts as easily as before, I would be devastated.

Other Surgery Options

In addition to LASIK, several other surgery options are available. To learn more talk to your optometric physician, our Refractive Surgery Counselors, or visit our website at www.pcli.com. Photography Keratotomy

Phototherapeutic Keratectomy (PTK) is a treatment often recommended when patients’ corneas are too thin for LASIK. In PTK surgeries, the surgeon precisely removes tissue, with PRK the surgeon gently brushes aside a layer of protective surface cells that covers the tissue to be treated. Anesthetic drops are placed on the eye so there is very little if any discomfort during the procedure. A protective contact lens is placed over the treated area, which allows the eye’s natural lens to correct the surface cells to regenerate and heal during the next 3 or 4 days. In addition to helping the healing process, the contact lens reduces any discomfort associated with recovery.

Refractive Lens Exchange

Refractive lens exchange (RLE) involves the removal and replacement of the eye’s natural lens to correct moderate to high degrees of near and far sightedness. The surgeon uses a delicate ultrasonic instrument, inserted through a very small incision, to remove the lens. The new plastic lens implant, specially selected to provide the right correction, is the same procedure that is commonly performed to remove cataracts. The high rate of success and predictability of cataract surgery has led surgeons to use this procedure to correct focusing problems. The only difference is that the clear lens of the eye is removed because of its poor focusing ability—not because of cloudy vision due to a cataract. Because standard plastic lens implants lack the ability to focus both near and far, reading glasses are usually required after surgery.

Implantable Contact Lenses

Implantable contact lenses (ICLs) were used in Europe for more than a decade before becoming available in the USA. They are surgically placed in the posterior capsular bag behind the patient’s natural lens—where they rest without needing any care. In this position, ICLs work in conjunction with the eye’s natural lens to add more focusing power to correct moderate to high degrees of nearsightedness. For properly selected patients, ICLs offer dramatic results that are quite predictable.

General Conclusions

Surgery to correct focusing problems is not something to be taken lightly. If you are functioning well with contact lenses or glasses, we recommend that you not consider treatment. But, if you are highly motivated to proceed, we encourage you to carefully study this booklet, ask questions and get straight answers. The more informed you are the better your decision will be.
Robert O. Ford, MD
Cataract and LASIK Surgeon

Affectionately called “Dr. Bob” by friends and colleagues, Dr. Ford is the owner of Pacific Cataract and Laser Institute. Doctor respect his medical knowledge as well as intelligent approach to surgical care, and patients appreciate his generous manner.

Dr. Ford grew up in Northern California where his father practiced as a physician. A younger Bob spent hours tinkering with mechanical things to see how they worked. His father encouraged an interest in aviation and Bob obtained his pilot’s license while still in school.

Graduating from college with a degree in physics, Bob decided to go on to medical school to delve into medical care and respect for his father’s skills. After receiving his medical degree, Dr. Ford chose to pursue ophthalmology—the study of the eye—because this field is also medical. Furthermore, he was attracted to the diversity and respect for the patients’ skills.

His achievements are remarkable. Dr. Ford co-founded Pacific Cataract and Laser Institute, an early participant in the clinical trials of the excimer laser; performed the first LASIK and PRK procedures in the Northwest, designed sophisticated software for scanning spot laser technology, and made numerous innovations in cataract and LASIK surgery. Recognized as a world-class surgeon, Dr. Ford is one of the most experienced eye surgeons in the world.

Dr. Ford’s special interests include laser technology, computer programming, snow skiing and flying—having logged over 5000 hours in the cockpit. A devoted family man, Dr. Ford has a daughter and son—Laura and Marshall.

Efficient, pragmatic, yet generous and humble, Dr. Ford maintains an unassuming manner. He enjoys teaching as well as supporting numerous humanitarian endeavors. As President and CEO of PGZ, Dr. Ford’s goal is to “be able to make a positive difference. Changing one’s life is the best gift I can hear.”

Professional Profile

Medical School
1973—Loma Linda University School of Medicine, Loma Linda, CA

Ophthalmology Residency
1977—Loma Linda University Medical Center, Loma Linda, CA

Fellowship
1978—Cataract and LASIK Institute, Loma Linda, CA

ARTHUR W. GIEBEL, MD
Cataract Surgeon, Cataract and LASIK Surgeon

Curious, adventurous and up to a challenge, Dr. Giebel is a trained and experienced surgical specialist known for excelling standards. People appreciate his honesty and manners for their well-being and find his light-hearted approach refreshing.

Although born in Southern California, Art grew up in Long Beach with missionary parents. For his father is a surgeon and his mother an anthropologist. Young Art played football and put his heart into whatever he did. He liked to figure things out and understand how they worked.

In college, Art took dual majors in Chemistry and Biology and continued his studies in medical school. After earning a medical degree, Dr. Giebel completed an ophthalmology residency and went on to pursue specialty training in cornea and refractive surgery.

In addition to teaching 7 years in the Department of Ophthalmology at Loma Linda University in Loma Linda, CA, Dr. Giebel served as Chief of Ophthalmology at the VA hospital in Loma Linda and practiced near San Bernardino. He performed numerous refractive surgeries in Newport Beach and Beverly Hills. Before joining Pacific Cataract and Laser Institute in 2006, Dr. Giebel is an outdoor enthusiast who enjoys hiking, cross country running, roller blading, bicycling, mountain climbing, scuba diving, flying and digital photography. He is a certified flight, instrument and multi-engine instructor and enjoys working with veterinarians using his surgical skills to help animals.

A consummate surgeon, Dr. Giebel has a special interest in corneal transplants and is an advocate of heart and lung transplantation. He and his wife, Barbara, have four sons—James Jr., Nathan, Seth and David.

Bill is a natural leader and enjoys teaching as well as supporting numerous humanitarian endeavors. As President and CEO of PGZ, Dr. Ford’s goal is to “be able to make a positive difference. Changing one’s life is the best gift I can hear.”

Professional Profile

Medical School
1982—Loma Linda University School of Medicine, Loma Linda, CA

Ophthalmology Residency
1985—Loma Linda University Medical Center, Loma Linda, CA

Fellowship
1986—Wills Eye Hospital, Philadelphia, PA

JAMES L. MCENEIL, MD
Cataract Surgeon, Cataract and LASIK Surgeon

For 16 years, Dr. MceNeIl taught ophthalmology residents the art of surgery by deconstructing his gifted hands to performing surgical care of Pacific Cataract and Laser Institute. Doctors admire the depth of his expertise and experience in complex, detailed, and patients are drawn to his warmth and humor.

Jim grew up on a small farm in western Washington. His father, a surgeon, died when Jim was 15 years old, propelling him to the position of man of the house.

In college, Jim majored in physics, but also took numerous advanced courses in cataract and LASIK surgery. After graduating with his medical degree, Dr. MceNeIl completed an ophthalmology residency and went on to pursue specialty training in cornea and refractive surgery.

In addition to teaching 7 years in the Department of Ophthalmology at Loma Linda University in Loma Linda, CA, Dr. Giebel served as Chief of Ophthalmology at the VA hospital in Loma Linda and practiced near San Bernardino. He performed numerous refractive surgeries in Newport Beach and Beverly Hills. Before joining Pacific Cataract and Laser Institute in 2006, Dr. Giebel is an outdoor enthusiast who enjoys hiking, cross country running, roller blading, bicycling, mountain climbing, scuba diving, flying and digital photography. He is a certified flight, instrument and multi-engine instructor and enjoys working with veterinarians using his surgical skills to help animals.

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Professional Profile

Medical School
1982—Loma Linda University School of Medicine, Loma Linda, CA

Ophthalmology Residency
1985—Loma Linda University Medical Center, Loma Linda, CA

Fellowship
1986—Wills Eye Hospital, Philadelphia, PA

William D. Grulensky, MD
Cataract and LASIK Surgeon

Before moving to the Northwest, Dr. Grulensky taught ophthalmology residents the art of surgery at The Johns Hopkins School of Medicine in Baltimore, Maryland—one of the nation’s premier medical schools. Since 1988, he has been using his mastery of surgical techniques in caring for patients at Pacific Cataract and Laser Institute. Doctors admire his meticulous attention to detail and consistent outcomes, and patients appreciate his quiet dignity and calm demeanor.

Bill grew up on the countryside on the outskirts of Boulder, Colorado where his father worked as a Physicist. He and his siblings, Bill, too, loved the sport of scoun—tanning and, while a teenager climbed 5 of Colorado’s 14,000 foot peaks.

Graduating from college with a major in chemistry, Dr. Grulensky went on to earn his medical degree. His adventurous spirit led him to serve as a physician with the Public Health Service in Belfast, Alaska and then treat patients at a mission hospital in Ghana, Ethiopia. After a few years, Dr. Grulensky went back to school and completed a residency in ophthalmology and then finished a specialty in cornea and external eye disease. His skill and expertise are unparalleled by his ability to handle difficult and non-routine cases. Among surgeons, his exceptional surgical talent is highly respected.

With the love of his life, Dr. Grulensky enjoys skiing, backpacking, mountain climbing, dog sledding and piloting small aircraft. But his favorite activity is spending time with his family. Dr. Grulensky and his wife, Trish have two daughters—Beck and Nicole.

Richard, creator and host of the show, Dr. Grulensky’s gentle manner puts people at ease. As a surgeon, he is noted for his brilliance of the eye. “The ability to see is a miracle, and being able to restore sight is no less miraculous.”

Professional Profile

Medical School
1998—University of Illinois College of Medicine, Chicago, IL

Ophthalmology Residency
2002—The Wilmer Eye Institute, Baltimore, MD

Paul H. Shenk, MD
Cataract and LASIK Surgeon

Dr. Shenk has been performing eye surgery for almost 30 years. Despite his routine conscientious approach to surgical care and patients are comforted by his kind, soft spoken manner.

Growing up on a small farm in western Washington, Dr. Shenk discovered his medical career, went on to study ophthalmology, his passion became the restoration of sight—first, through cataract surgery and then, as new technology emerged, through laser vision correction.

Upon joining Pacific Cataract and Laser Institute’s medical team in 1995, Dr. Shenk’s interest in laser vision correction drove him to study and fine-tune the techniques of LASIK surgery. Having performed thousands of LASIK procedures, Dr. Shenk’s outstanding results have garnered the admiration and respect of doctors and patients throughout the Northwest. Today, he is considered one of the most experienced LASIK surgeons in the nation.

Dr. Shenk enjoys golfing, running and relaxing with a good book, but his family provides the greatest joy. He and his wife, Rar, have four daughters—Sara, Gia, Hannah and Rachel.

Quiet and unassuming, Dr. Shenk is gifted with a compassionate touch. He enjoys volunteering his surgical skills on an international medical team that performs eye surgery on South Sea Islands. Whenever talk he takes on Dr. Shenk’s goal is to always provide a good example through hard work and dedication. “I hope some small way my life and work can be a positive witness.”

Professional Profile

Medical School
1982—Loma Linda University School of Medicine, Loma Linda, CA

Ophthalmology Residency
1985—Loma Linda University Medical Center, Loma Linda, CA

Fellowship
1986—University of California Davis Medical Center, Sacramento, CA

Professional Profile

Medical School
1995—University of Wisconsin Medical School, Madison, WI

Ophthalmology Residency
2000—Baylor College of Medicine, Houston, TX

Fellowship
2001—The Eye Institute, Chicago, IL

Relaxed, comfortable and always the teacher, Dr. McNeill is a master of surgical technique in caring for patients at Pacific Cataract and Laser Institute. Doctors admire his confidence as well as intelligence and concern for their well being and find his lighthearted approach refreshing.

In college, Jim majored in physics, but also took double majors in Chemistry and Biology. As a youngster, Bob spent hours tinkering with mechanical things to see how they worked. His father encouraged an interest in aviation and Bob obtained his pilot’s license while still in school.

Graduating from college with a degree in physics, Bob decided to go on to medical school to delve into medical care and respect for his father’s skills. After receiving his medical degree, Dr. Ford chose to pursue ophthalmology—the study of the eye—because this field is also medical. Furthermore, he was attracted to the diversity and respect for the patients’ skills.

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1977—Loma Linda University Medical Center, Loma Linda, CA

Fellowship
1978—Cataract and LASIK Institute, Loma Linda, CA

When I would like my organization to cast a positive light on the Creator of this marvelous machine—the human eye.
ANCHORAGE, ALASKA
BELLEVUE, WASHINGTON
BOISE, IDAHO
CHEHALIS, WASHINGTON
GREAT FALLS, MONTANA
KENNEWICK, WASHINGTON
LEWISTON, IDAHO
PORTLAND, OREGON
SILVERDALE, WASHINGTON
SPOKANE, WASHINGTON
TACOMA, WASHINGTON
VANCOUVER, WASHINGTON
YAKIMA, WASHINGTON