

RECOVERY GUIDE

Your Recovery: Pterygium Removal

You have undergone pterygium excision with conjunctival autograft or amniotic membrane graft. This procedure removes the abnormal fibrovascular tissue invading the cornea. Diligent UV protection and proper use of all prescribed medications are critical to prevent recurrence and ensure lasting clarity.



Patient Guides

QIDOINTMENT + DROPS FIRST
2 WEEKS**QHS**NIGHTLY OINTMENT
AFTER WEEK 2**3 mo**STEROID DROP
DURATION**6 mo**TOTAL FOLLOW-UP
PERIOD

POSTOPERATIVE RECOVERY PLAN

DAY OF SURGERY / DAY 1 VISIT

- Eye may be patched — do not remove patch unless instructed
- Begin all prescribed medications as directed starting today
- Return for your scheduled Day 1 post-operative visit
- Mild redness, tearing, and foreign body sensation are normal
- Rest at home; avoid bending, lifting, or straining

WEEKS 1–2: ANTIBIOTIC OINTMENT PHASE

- Apply Maxitrol or Tobradex ointment 4× daily (QID) for 2 full weeks
- Apply Pred Forte or Lotemax steroid drops 4× daily (QID)
- Wear UV-blocking sunglasses outdoors at ALL times — UV is the #1 cause of recurrence
- 2-week follow-up visit to assess graft healing and suture sites
- Do not rub or touch your eye under any circumstances

MONTHS 1–3: STEROID MAINTENANCE PHASE

- After week 2: switch ointment to bedtime only (QHS — once nightly)
- Continue steroid drops 4× daily (QID) for a full 3 months
- Monthly follow-up visits at 1, 2, and 3 months post-surgery
- Punctal plugs to retain natural tears and support the ocular surface
- Premium dry eye therapy as recommended (IPL, LipiFlow, RF)

STEROID TAPER: MONTHS 4–6

- Month 4: Reduce steroid drops to 3× daily (TID)
- Month 5: Reduce to 2× daily (BID)
- Month 6: Reduce to 1× daily (QD), then discontinue
- Quarterly follow-up visits at months 3 and 6
- Continue UV protection and dry eye management indefinitely

ONGOING CARE AND IMPORTANT INFORMATION

UV PROTECTION IS ESSENTIAL

Wear UV-blocking sunglasses every time you go outdoors. Wide-brim hat strongly recommended year-round. UV exposure is the leading cause of pterygium recurrence. Choose lenses rated UV400 or 100% UVA/UVB protection

DRY EYE MANAGEMENT

Punctal plugs to retain natural tears. Premium dry eye treatments: IPL, LipiFlow, RF therapy. Prokera amniotic membrane therapy if indicated. Preservative-free artificial tears as needed throughout the day

CONTACT US IMMEDIATELY IF

Sudden or significant change in vision at any time.
Increasing pain, redness, or discharge after day 2.
Graft appears to be shifting, lifting, or detaching. Thick yellow or green discharge (possible infection). Fever accompanied by eye redness or swelling