Cataract Surgery Refractive Questionnaire

I.  Astigmatism

*The importance of astigmatic management increases depending on how much astigmatism you have. See website for details and simulators.*

T  F
☐ ☐ I have been told that I have astigmatism
☐ ☐ I have worn astigmatic contact lenses in the past
☐ ☐ I am detail oriented
☐ ☐ I am willing to pay extra to get the best optical result
☐ ☐ I have hobbies such as birdwatching or stargazing
☐ ☐ I am an outdoor person who likes to see detail at distance, for example while hiking
☐ ☐ I drive at night a lot
☐ ☐ I am particular by nature
☐ ☐ Detailed near tasks such as drawing, making jewelry, crafts, or reading music are important to me.
☐ ☐ The second number of my glasses (not contacts) prescription is 1.00 or larger in one or both eyes.

II.  Presbyopia

*Presbyopia correction during cataract surgery works well for many patients. Patients experience some glare at night and some loss of contrast. Vision may be good at near- but not always crystal clear. It is uncommon to completely get rid of glasses.*

T  F
☐ ☐ I don't like wearing glasses
☐ ☐ I don't like the way I look with glasses
☐ ☐ I would like to drive without glasses
☐ ☐ I would be willing to trade some glare and halos at night for the convenience of getting rid of glasses
☐ ☐ I don't sit down a lot
☐ ☐ I don't like having glasses between me and another person when we talk
☐ ☐ I use my near vision mainly for texting and checking my smartphone
☐ ☐ People describe me as having a low maintenance personality.
☐ ☐ I am ok with wearing readers occasionally, such as for reading a book.
☐ ☐ I would like to hike or sail without having to keep readers handy
☐ ☐ Detailed near tasks such as making jewelry or drawing are NOT important to me
☐ ☐ I do NOT have any of the following conditions: diabetic retinopathy, macular degeneration, optic neuropathy, corneal disease, history of corneal injury, severe dry eye, glaucoma
☐ ☐ I have NOT had LASIK, PRK, or radial keratotomy
☐ ☐ I do NOT have a history of lazy eye or wearing a patch over one eye as a child
☐ ☐ I do NOT have severe dry eye.
III. Custom Refractive Design

A. Near to Intermediate Refractive Path

T  F
☐ ☐ I spend most of my time reading or working on the computer
☐ ☐ I would like to read fine print, or perform fine crafts without glasses
☐ ☐ I want to see people’s faces clearly without glasses when I talk with them
☐ ☐ I currently read without glasses
☐ ☐ I currently use glasses to drive a car
☐ ☐ I am ok with wearing glasses to drive a car or watch a movie

B. Distance Refractive Path

T  F
☐ ☐ I want to see distance without glasses
☐ ☐ I am active and don’t sit down a lot
☐ ☐ I currently drive without glasses
☐ ☐ I currently need glasses to read
☐ ☐ I am ok with using readers

No single question rules in or out a particular strategy. Look for a pattern.

Consider giving a second copy of this questionnaire to your spouse, a family member, or someone who knows you well- ask them to fill it out as if they were you. If they answer the questions differently than you did, explore why.