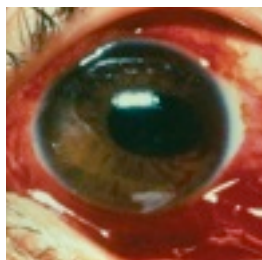
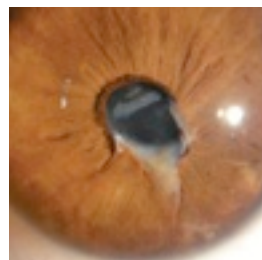


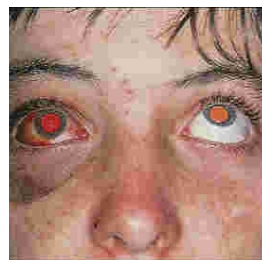
# MAJOR EYE INJURY



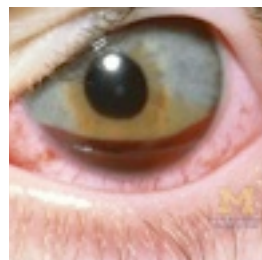
*Ruptured globe*



*Damaged iris*



*Blowout fracture*



*Hyphema*

Refer patients when there is

- Chemical burns or penetrating injury
- A history of hammering metal on metal, or using power tools (possible intraocular foreign body).
- Irregular pupil, or blood in front of the iris (hyphema)
- Blunt injury with double vision (a fracture may trap the eye muscles and prevent normal movement)
- Any abnormal or blurred vision

## Scenario

A 47 year old man was preparing to clean the toilet block when a bottle of chemical cleaner with a loose lid fell off a shelf. He received a large splash to the left eye. His colleagues help him to the medical centre. He is groaning and swearing and will not open either eye.

## Task

Some of you will be asked to tackle a similar practice scenario this month.

Discuss your approach with your colleagues before then.

## Question

Why is it important send the material data safety sheets to hospital if a patient has sustained a chemical burn? [Hint: What type of chemicals cause the worst injuries?]

## Step-by-step

- ★ **Remove contact lenses.**
- ★ **Check visual acuity (with glasses on).**
- ★ **Lie the patient down.**

### Chemical burns

- ★ **Apply local anaesthetic drops, if available. (Do not give anaesthetic to take home).**
- ★ **Turn head to the affected side, then irrigate with copious fluid (e.g. 3 litres saline via giving set over 15 minutes).**

- ★ **Remember to irrigate under the eyelid.**

### Blunt and penetrating injury

- ★ **Stabilise any penetrating object: Do not try to remove it.**
- ★ **Shield affected eye, pad other eye.**
- ★ **Give analgesia and antiemetic.**
- ★ **Do not give food or drink.**