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Morgan Lens Eye Irrigation

Sample Policy

PURPOSE:

To provide ocular irrigation to the cornea, cul-de-sac, and conjunctiva for the removal of chemical irritants or non-embedded foreign bodies.

GENERAL INFORMATION:

The device is a scleral lens, molded of medical grade materials to maximum quality, with directional fins, attached tubing, and standard luer loc adapter (which may be attached to the Morgan Lens Delivery Set, a standard IV set, or a syringe). One or both eyes may be irrigated simultaneously. The use of the Morgan Lens allows the concurrent treatment of other injuries and/or the transportation of the patient without stopping the irrigation process.

INDICATIONS:

- For continuous medication or lavage to the cornea, cul-de-sac, and conjunctiva
- Ocular injuries due to acid burns or solvents, gasoline, detergents, etc.
- Alkali burns
- Thermal or actinic burns
- Non-embedded foreign bodies
- Foreign body sensation with no visible foreign body
- Severe infections

CONTRAINDICATIONS:

- Penetrating eye injuries
- Suspected or actual rupture of the globe
- To instilling ocular anesthetic agents with known allergies

PERSONNEL UTILIZED TO PERFORM:

MorTan recommends a policy that allows all medical personnel be trained to perform all parts of this procedure in order to minimize the time necessary to initiate ocular irrigation.

Initial Assessment- (depends on institutional standards)

Medication Administration- (depends on institutional standards)

Procedure- (depends on institutional standards)

EQUIPMENT NEEDED:

MorTan recommends the following materials, with the possible exception of the anesthetic, but assembled and maintained in a suitable "eye tray" or cart in order to reduce the time necessary to initiate ocular irrigation.

-Morgan Lens (one per eye)

-Morgan Lens Delivery Set (one for irrigating one or both eyes) or IV set (one per eye)

-IV solution for irrigation (see note below)

-Medi-Duct (one per eye) or towels, blue pads, or other suitable fluid collection device

****Note:** MorTan, Inc. recommends the use of lactated Ringer's (Hartmann's Solution) for irrigation due to its pH and buffering capacity:

pH of normal tears: approximately 7.1

pH of Normal Saline: 4.5 to 7.0

pH of lactated Ringer's: 6.0 to 7.5

PROCEDURE FOR OCULAR IRRIGATION WITH THE MORGAN LENS:

1. Institute standing orders/protocols for use of the Morgan Lens, or obtain physician's order specifically approving use of the Morgan Lens, the type, amount, and strength of a local ocular anesthetic to be instilled, and the type and amount of irrigating solution to be utilized.
2. Gather necessary equipment
3. Follow institutional guidelines for necessary universal precautions
4. Prepare and explain procedure to patient
5. Instill prescribed ocular anesthetic, if no known allergies
6. Attach Morgan Lens to Morgan Lens Delivery Set or IV tubing
7. Prime tubing and lens with irrigating solution
8. Start minimal flow of irrigation solution
9. INSERT LENS: Have patient look down, insert lens under upper eyelid
10. Have patient look up, retract lower lid, drop lens in place
11. Release lower lid over Morgan Lens
12. Adjust flow to desired rate
13. Tape tubing to patient's forehead to prevent accidental removal
14. Direct and absorb outflow with Medi-Duct, towels, blue pads, or fluid collection device
15. Irrigate with amount specified in protocol or physician's order (generally continue irrigation until the pH of the eye returns to 7.5 to 8.0). Do not allow flow to stop.
16. REMOVE LENS: Continue flow, have patient look up, retract lower lid
17. Hold position and slide lens out. Terminate flow.
18. Wait 5 to 10 minutes and check pH of eye to ensure it remains in acceptable range. Repeat irrigation if necessary until pH stabilizes.
19. Document procedure, noting use of the Morgan Lens, type, amount, and strength of topical anesthetic and absence of allergy to medication, type and amount of irrigating solution used and length of time of irrigation, which eye/eyes were irrigated, patient tolerance to procedure, visual acuity (both pre- and post-therapy if available), pH readings (both pre- and post-therapy if available), and any treatment of other injuries or concurrent use of gross decontamination (if indicated).
20. Charge patient for supplies utilized