## Collaborative Regional Benchmarking Group



# **Eye Care in Critical Care**



To provide guidance on nursing care for the eyes of patients in Critical Care Aim:

Scope: All adult patients in Critical Care

### **ASSESS EYES / PATIENT**

- Within **2hours** of admission
- At least **12hourly** thereafter

#### PATIENT AWAKE & ABLE TO BLINK

- Allow patient to perform own eye care (or with assistance when required) by cleaning eyes as part of the patient facial wash or at patients request.
- If eye become sticky or encrusted use sterile gauze and sterile water

Seek senior medical / ophthalmology advice for patients with eye disease, infection or injury, including post-op surgery and chemo/radiotherapy related red eye.

#### Standard Eye Care

- Clean eyes with sterile water soaked gauze, cleaning from inner aspect of lids at the nose and sweep across the lids to outer aspect. This prevents the spread 1 of infection or debris being introduced into the lachrymal system.
- Clean along both sets of lashes; do not drag debris across the surface of the 2 eye.
- 3 Use new gauze swab for each sweep and for each eye.
- Apply prescribed ocular lubricant.

## **Sedated Patient (Difficulty** Blinking)

- Standard eye care 4 hourly
- Consider taping eyelids closed, especially during interventions e.g. proning, transfers and procedures.

## Sedated & Paralysed (Unable To Blink)

- Standard eye care 2 hourly
- Consider taping eyelids closed, especially during interventions e.g. proning, transfers and procedures.

**HIGH RISK OF EYE INJURY** 

Please see your units full guidelines for more information

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