

# Eye care in the ICU

## Grade 0: Lids completely closed



No action required

## Grade 1: Any conjunctival exposure (any white of the eye being visible) but no corneal exposure



### EYES NEED LUBRICATING EVERY 4 HOURS

- Clean off old ointment before putting in new
- Pull lower lid down and instil ointment onto eye between lower lid and conjunctiva
- Always check corneal clarity with bright light:

**IF NOT CLEAR – ALERT MEDICAL STAFF**

## Grade 2: Any corneal exposure, even a tiny amount



### EYES NEED LUBRICATING AND LIDS TAPING

- Apply ointment as for Grade 1
- Close lids, ensure lashes outside eye & lids free of ointment
- Tape upper lid down with micropore tape horizontally
- Always check corneal clarity with bright light:

**IF NOT CLEAR – ALERT MEDICAL STAFF**

## Prone patient? Major risk to eye in all cases

### EYES NEED LUBRICATING AND LIDS TAPING

- Apply ointment as for Grade 1
- Close lids, ensures lashes outside eye and lids free of ointment micropore tape horizontally
- Always check corneal clarity with bright light: **IF NOT CLEAR – ALERT MEDICAL STAFF**

## Red eye?

### Red and sticky

- Take swab
- Use chloramphenicol ointment QDS to eye
- Condition is contagious and can be transmitted to other patients
- **IF NO BETTER IN 24 HOURS, ALERT MEDICAL STAFF**

### Red, but not sticky

- Is the cornea clear or does it stain with fluorescein drops?
- If clear cornea, or simple abrasion, check lubrication schedule and consider lid taping
- **If corneal opacity or eye not dry, ALERT MEDICAL STAFF**