

Consent Form for Nasolacrimal Duct Probing

Condition and Proposed Treatment

Julie Calderwood, MD has evaluated your child and diagnosed a nasolacrimal duct obstruction. In normal newborn eyes, the tear or nasolacrimal duct allows for drainage of tears. Some babies are born with a blockage in the nasolacrimal duct that creates excessive tearing. This condition is known as congenital nasolacrimal duct obstruction (NLDO). Although the condition often resolves on its own prior to 12 months of age, children with NLDO have a greater chance of infections in the eye and eyelid. Treatment options for NLDO include regular observation to determine whether the condition resolves on its own, massaging the tear duct, or probing, which involves inserting a probe into the duct to relieve the blockage. Probing is a minor procedure that is performed with anesthesia.

Alternatives to Surgery

- 1. Tear Duct Massage
- 2. Antibiotic Ointment

Risks and Complications

No procedure is entirely risk free. While probing may resolve symptoms of NLDO, there are potential complications.

- 1. Infection Infections can be treated with topical or oral antibiotics.
- 2. Bleeding Normally controlled with gentle pressure.
- 3. Pain Minimal. Treated by alternating Tylenol and Motrin per package directions.
- 4. Recurrence –Probing may not be successful if the obstruction is due to a bony protrusion of the inferior turbinate into the nasolacrimal duct or when the duct is edematous (swollen) due to infection such as dacryocystitis.
- 5. Creation of a false passage and injury to the nasolacrimal duct, canaliculi and puncta.
- 6. Laryngospasm or aspiration during anesthesia.

Consent for Treatment

By signing below I acknowledge that I have read and understand the above, and have had my questions answered by Dr. Calderwood to my satisfaction. I consent to Nasolacrimal Duct Probing of my child's (state "right" or "left") eye.	
Patient Name	Parent Name
Parent Signature	 Date
Witness	