Certified Nursing Assistant
CNA RENEWAL REQUIREMENTS

- Every two years, CNAs in Florida have to renew certification with the Florida Board of Nursing.
- Each certified nursing assistant must complete at least 12 hours of in-service training each calendar year.
- PEAK articles (like this one) are provided monthly to help you meet the 12 in-service hours per year requirement.
- Self-test your knowledge by reading and answering the test questions at the end of the PEAK article.

Please remember that you must also complete the topics below every 2 years:
- The topics listed below count towards the 24 in-service training hours needed every 2 years to renew your certification.
- Go to the Florida Board of Nursing website to renew or learn more at www.floridasnursing.gov

Also available in Baptist Health University & Mandatory Every 2 Years:

- Bloodborne Pathogen Training for Certified Nursing Assistants
- Communication with Cognitively Impaired Patients Self-Study for CNAs
- Documentation and Legal Aspects Self-Study for CNAs
- Domestic Violence - What You Should Know Self-Study for CNAs
- Patient Rights and Dignity Self-Study for CNAs
- Preventing Medical Errors Self-Study for CNAs

Contact Clinical Learning Educator Regina Russell
(Regina_Russell@BaptistHealth.net or 786-243-8530 for questions)
Safety: Caring for the Patient with Cataracts

After reading the newsletter, the nursing assistant should be able to:
1. Describe how vision is produced in the normal eye.
2. Discuss risk factors, signs and treatment of cataracts.
3. Identify safety measures to reduce risk of injury in patients with cataracts.

Mr. Thomas, a 78-year old patient, has recently suffered two falls. He tells Ari, his nursing assistant, “I don’t know why this happens—I just trip and go down.” The doctor tells Mr. Thomas that his cataracts have gotten worse, and that his poor vision is likely the cause of his falls. He is referred to an eye doctor, and has a surgical procedure to correct his cataracts. Afterward, Mr. Thomas finds that his vision is much better, and he has not had another fall.

According to the CDC, the Centers for Disease Control and Prevention, cataracts are the leading cause of vision loss in the US. More than 20 million adults age 40 and over are affected by cataracts. An estimated 3 million Americans have cataract surgery each year, making it one of the most common surgeries in the US. Due to the aging population, the number of people in the US having cataracts is expected to rise to over 30 million by 2020.

This newsletter will discuss cataracts, including cause, risk factors, symptoms, diagnosis, and treatment. Safety measures and care of the patient after surgery will also be covered.

The Normal Eye
Normal, healthy eye structures are essential for good vision. To produce vision, light enters the front of the eye through the pupil and its clear covering, the cornea. The pupil can determine how much light enters by changing its size. The pupil is surrounded by the iris, the structure that gives eyes their color. The entering light flows through the lens, a thick, clear structure that bends the light and directs it toward the back of the eye. An image is formed on the retina, a group of special cells at the back of the eye. From the retina, the optic nerve is activated, sending the visual message to the brain, which interprets the image.

Cataracts
A cataract is a clouding of the lens of the eye. When this normally-clear structure becomes cloudy, light is scattered or blocked as it moves to the retina, resulting in decreased vision. The most common type is the age-related cataract, which usually affects those age 60 and over. These occur when proteins in the lens begin to clump together, causing cloudiness in one or both eyes. This is a progressive process. The clouding of the lens occurs over a period of years, slowly becoming worse. Often, this change in vision occurs so slowly that the person doesn’t notice it until significant loss of vision has occurred. Factors that may increase the risk of developing cataracts include prolonged exposure to UV light (sunlight), poor nutrition, excessive alcohol use, smoking and diabetes.
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In addition to age-related cataracts, there are several other types that may occur at various ages, from newborns to the elderly:

**Congenital:** A baby may be born with cataracts due to conditions such as congenital rubella or Down syndrome.

**Secondary:** Cataracts may occur following eye surgery for other problems and after radiation or use of certain medications, such as steroids.

**Traumatic:** Injury to the eye may result in the development of cataracts.

Symptoms, Diagnosis and Treatment

Symptoms of cataracts often begin slowly and are sometimes not noticed for years. These commonly include blurred or fuzzy vision, sensitivity to light, halos around lights, excessive glare, colors seeming faded, difficulty seeing at night, seeing “double”, and needing frequent prescription changes for glasses or contact lenses. The pupil, which is normally black, may appear hazy or whitish. Cataracts are diagnosed by a comprehensive eye exam that includes a vision test and visual inspection of the internal eye after dilating the pupils.

Even though cataracts can decrease vision, they, fortunately, do not cause harm or damage to the eye in most cases. Therefore, there is usually no urgency in treating them. The exception to this is with infants and children, who require prompt vision correction to promote normal development. Treatment for adults is indicated when the cataracts interfere with the person’s ability to perform daily activities, such as walk safely, drive, or read. Treatment may also be needed if the cataract interferes with the doctor’s ability to examine the eyes of persons who require careful eye monitoring, such as diabetics.

Treatment of cataracts involves surgical removal of the cloudy lens, and insertion of an artificial lens. The procedure is performed on an outpatient basis, with the person returning home shortly after. Eye drops are used to numb the eye, and light sedation may also be administered. A small ultrasound device is inserted into the eye to break up and remove the cloudy lens. A new lens is then inserted. There is normally no pain after the procedure. Mild discomfort may be managed with acetaminophen or other mild pain relievers. If both eyes require surgery, usually only one eye is treated at a time, and the procedures are scheduled several weeks to one month apart. This helps to ensure that any infection or other issue can be managed before the second surgery occurs.

Safety and Care After Surgery

Patients with cataracts may be at risk for fall injury due to decreased vision. Good vision is very helpful in preventing falls, as it allows people to see obstacles in their way, and also promotes balance. In one large study, those who had cataract surgery were less likely to suffer a hip fracture in the next year than those whose cataracts were not treated.

When working with patients who have cataracts, pay close attention to their ability to ambulate safely. The staff should work closely with the patient to plan for modifications that improve safety. Furniture should be arranged in an uncluttered fashion, so that it allows easy passage. Any items on the floor that may promote tripping should be put away. The patient may need assistance in ambulating or going up and down steps. Adequate lighting, without glare, should be available at walking areas and steps. Well-fitting shoes with non-slip soles should be worn. Let the nurse know if you notice that the patient cannot see well and tends to trip, stumble or bump into things.

There are no proven ways to prevent cataracts, but making healthy lifestyle choices may help. These include avoiding smoking and heavy alcohol use, wearing sunglasses and a wide-brimmed hat while in the sun, and taking in plenty of antioxidant vitamins from fresh vegetables and fruits. Since diabetes is a risk factor for cataracts, avoiding or managing this condition with good nutrition, daily exercise and weight control may also be helpful.

Cataract surgery is one of the most common surgical procedures performed in the US. Your observation and good care can help to promote patient safety both before and after treatment for cataracts.
**Self-Test  Safety: Caring for the Patient with Cataracts**

*Which is the best answer?*

1. By 2020, the number of people with cataracts in the US is expected to:
   - o significantly decrease, due to improved preventive measures
   - o remain the same, since factors that cause cataracts do not change
   - o significantly increase, due to increased numbers of elders
   - o do none of the above, as there is no information to predict this

2. Which of the following eye structures controls the amount of light that enters the eyes?
   - o Lens
   - o Cornea
   - o Retina
   - o Pupil

3. To produce sight, an image is formed on which of the following eye structures?
   - o Lens
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   - o Retina
   - o Pupil

4. A cataract is best described as:
   - o an increase in eye pressure
   - o a hazy film over the cornea
   - o a clouding of the lens
   - o an inflammation of the blood vessels of the retina

5. The most common type of cataract is:
   - o Age-related
   - o Traumatic
   - o Congenital
   - o Secondary

6. Risk factors for cataracts include:
   - o Smoking
   - o Prolonged exposure to sunlight
   - o Excessive alcohol use
   - o All of the above

7. Cataracts can occur in people of any age, from newborns to the elderly.
   - o True
   - o False

8. Which of the following is NOT a common symptom of a cataract?
   - o Halos around lights
   - o Excessive glare
   - o Improved night vision
   - o Blurry vision

9. Cataracts must be diagnosed and treated promptly to prevent permanent damage to the eye.
   - o True
   - o False

10. Which of the following activities should be avoided in the week after cataract surgery?
    - o Taking a bath
    - o Being in windy, dusty conditions
    - o Going up and down stairs
    - o Sleeping flat in bed

Answers next page......
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