**EVALUATION AND PREPARATION FOR EYELID SURGERY**

Because most surgical eyelid procedures require general anesthesia, it is important to perform a complete physical examination, preoperative lab work and a thorough ocular examination before anesthesia. Although eyelid tacking may not necessitate general anesthesia in most circumstances, it is imperative to evaluate the eye for preexisting pathology before surgery. This includes a Schirmer tear test, fluorescein corneal stain and examination of the eyelids and eye with an ophthalmoscope. Before surgery, the eyelid should be evaluated while the Pet is still awake to avoid overestimating or underestimating the amount of correction caused by distortion of normal eyelid tension while the Pet is under anesthesia. Failure to perform this evaluation could lead to a poor surgical outcome. The positioning of the animal for the best surgical approach may differ depending on the breed and the portion of the eyelid requiring repair.

Preparation of the surgical site requires care and gentle tissue handling. Ensure the Correcting eyelid disorders Surgical intervention can improve quality of life for animals with entropion, ectropion and small eyelid masses. clipper blades are sharp—a dull clipper blade will cause abrasion and swelling of the tissue before surgery, which further complicates gauging the appropriate amount of tissue resection. Clipping the hair may not be necessary for eyelid tacking or eyelid procedures on animals with short hair. The risk of preoperative swelling outweighs the risk of infection in most circumstances, so use your best judgment when deciding to shave the area. Great care should be exercised when cleansing the surgical site. An ophthalmic irrigating solution can be used along with gentle blotting of the area. Surgical preparation with a soap solution, such as chlorhexidine scrub, should be *avoided* due to possible irritation of the eyelid, cornea or conjunctiva. Diluted Povidone Iodine solution (not scrub) or dilutions of 1:10 to 1:50 are used instead. Use extreme caution, and do not allow the solution to contact the cornea or conjunctiva. Presoaked cotton swabs can also be used to remove debris. Using an eye lubricating ointment is not suggested because the tissue may become slippery and difficult to handle. A sterile eye wash solution should be used throughout the procedure to moisten the cornea and prevent drying and irritation.