

## Ask the Ethicist: Complications From Another Surgeon

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**Q:** *A patient called for a second opinion following her recent cataract surgery, as she was unhappy with her postoperative visual outcome. Once in my office, she asked if I could help her vision. I was unable to improve her visual acuity better than the 20/80 level; I also noted a vitreous strand to the surgical wound with a peaked pupil, and a sulcus IOL. An OCT revealed macular edema. The patient had a copy of her chart from her operating surgeon, which stated that the IOL was placed in the bag and there were no complications. How should I tell the patient about the surgical complications that are likely contributing to her suboptimal visual acuity?*

**A:** The 1996 *Argus* article "When Dissatisfied Patients Seek Second Opinions," by Jean R. Hausheer, MD, states: "When a dissatisfied patient seeks out a second opinion following cataract surgery, first collect all pertinent facts and data. This includes a thorough patient history, a comprehensive ocular examination, a review of the prior ophthalmologist's medical and surgical records, and, ideally, a discussion with the surgeon of possible etiologies for the patient's symptomatic lens implant problems. Only after all this information has been gathered can the patient be properly diagnosed and informed. Often, sympathetic and careful management is enough to mitigate a patient's dissatisfaction and avert unwarranted malpractice litigation."

**For further guidance,** view the Code of Ethics ([www.aao.org/about/ethics](http://www.aao.org/about/ethics)) Principles 4 and 7, and Rules 4 and 14.

To submit a question for this column, contact the Ethics Committee staff at [ethics@aao.org](mailto:ethics@aao.org).