

TABLE 3 RECOMMENDED GUIDELINES FOR FOLLOW-UP

Type of Lesion	Follow-up Interval
Symptomatic PVD with no retinal break	Depending on symptoms, risk factors, and clinical findings, patients may be followed in 1–8 weeks, then 6–12 months
Acute symptomatic horseshoe tears	1–2 weeks after treatment, then 4–6 weeks, then 3–6 months, then annually
Acute symptomatic operculated holes	2–4 weeks, then 1–3 months, then 6–12 months, then annually
Acute symptomatic dialyses	1–2 weeks after treatment, then 4–6 weeks, then 3–6 months, then annually
Traumatic retinal breaks	1–2 weeks after treatment, then 4–6 weeks, then 3–6 months, then annually
Asymptomatic horseshoe tears	1–4 weeks, then 2–4 months, then 6–12 months, then annually
Asymptomatic operculated holes	1–4 months, then 6–12 months, then annually
Asymptomatic atrophic round holes	1–2 years
Asymptomatic lattice degeneration without holes	Annually
Asymptomatic lattice degeneration with holes	Annually
Asymptomatic dialyses	<ul style="list-style-type: none">• If untreated, 1 month, then 3 months, then 6 months, then every 6 months• If treated, 1–2 weeks after treatment, then 4–6 weeks, then 3–6 months, then annually
Eyes with atrophic holes, lattice degeneration, or asymptomatic horseshoe tears in patients in whom the fellow eye has had a retinal detachment	Every 6–12 months

PVD = posterior vitreous detachment