LASIK DROP CHECKLIST

Start these drops BEFORE surgery:

BESIVANCE or OFLOXACIN

3 DAYS BEFORE	2 DAYS BEFORE	1 DAY BEFORE
☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐

Start these drops AFTER surgery:

BESIVANCE or OFLOXACIN

DAY 1	DAY 2	DAY 3	DAY 4	DAY 5	DAY 6	DAY 7
☐☐☐	☐☐☐	☐☐☐	☐☐☐	☐☐☐	☐☐☐	☐☐☐

LOTEMAX or PREDNISOLONE

DAY 1	DAY 2	DAY 3	DAY 4	DAY 5	DAY 6	DAY 7
☐☐☐	☐☐☐	☐☐☐	☐☐☐	☐☐☐	☐☐☐	☐☐☐