LASIK Drops Instruction Sheet

	STEROID	ANTIBIOTIC
WHICH EYE(S)	**PREDNISOLONE ACETATE**	**GATIFLOXACIN**

Please wait at least 5 minutes between each kind of drops!

	Breakfast	Lunch	Dinner	Bedtime	Breakfast	Lunch	Dinner	Bedtime
DAY OF Sx			☐	☐			☐	☐
	Breakfast	**Lunch**	**Dinner**	**Bedtime**	**Breakfast**	**Lunch**	**Dinner**	**Bedtime**
Day 1	☐	☐	☐	☐	☐	☐	☐	☐
Day 2	☐	☐	☐	☐	☐	☐	☐	☐
Day 3	☐	☐	☐	☐	☐	☐	☐	☐
Day 4	☐	☐	☐	☐	☐	☐	☐	☐
Day 5	☐	☐	☐	☐	☐	☐	☐	☐
Day 6	☐	☐	☐	☐	☐	☐	☐	☐
Day 7	☐	☐	☐	☐	☐	☐	☐	☐