

This form to be completed by the Rocky Mountain Lions Eye Bank technician and remain with the body



**ROCKY MOUNTAIN LIONS EYE BANK**

*Share the circle of light*

\_\_\_\_\_  
Donor Name

\_\_\_\_\_  
Date & Time of Recovery

Corneal Excision

Enucleation

**Pre-Recovery Examination:**

**Bruising/swelling present when recovery technician arrived?**

NO  YES If Yes, which eye? \_\_\_\_\_

**Head was elevated when recovery technician arrived?**  NO  YES

**Post-Recovery Treatment:**

**Eye caps placed?**  NO  YES

**Massage cream applied?**  NO  YES

**Head elevated after recovery?**  NO  YES

**ATTENTION FUNERAL HOME EMBALMER:**

**Donor families served by the Rocky Mountain Lions Eye Bank are informed they may choose a viewing and/or open casket for their loved one.** Thank you for honoring their wish to help another overcome blindness through transplantation and medical research. In doing so, you become part of the "Circle of Light."

The following **embalming recommendations** are provided as a reference and should not be deemed the only effective method of treatment. The embalmer should use his/her judgment and expertise to analyze each case involving eye tissue recovery or corneal excision individually. The Rocky Mountain Lions Eye Bank contracts with a mortuary science educator for expert advice. If you have questions not answered here, call the public & professional relations department at 1-800-444-7479.

**IN ALL CASES INVOLVING CORNEAL EXCISION OR EYE ENUCLEATION:**

- **Swelling is not a direct result of the enucleation or corneal excision.** Swelling may be ante-mortem or occur as a result of the events that take place after the recovery. This includes manipulation of the eyelids and excessive injection pressure and rate of flow, or leaving head lower than the chest for an extended period of time. ***The body may have been placed face down by the tissue bank for skin recovery.***
- The use of restricted cervical injection can be considered to control the amount of arterial solution entering the head.
- Do not pre-inject the body.
- A slightly stronger than average solution is recommended.
- Avoid excessive manipulation of the eye tissues before and during arterial injection.
- The embalmer should watch the eyes closely during the injection process to ensure the amount of pressure and rate of flow is accurate for the situation, and will not cause swelling. Start with a low injection pressure (which may be increased if needed).

**CORNEAL EXCISION:**

- If only the cornea has been removed then the embalming should proceed as normal, the eyes should be set after the arterial injection.
- After completion of the arterial injection, aspirate any accumulation of embalming fluid in the eye with a needle and syringe through the incision already made by the eye bank technician. A small amount of incision seal powder should be placed in the cavity, followed by the use of suitable filler and an eye cap.
- Once confident the eye is not purging fluid, secure the eyelid in place with an adhesive at the time cosmetics are applied.

**EYE ENUCLEATION:**

- Remove any packing left in the eye and fill the orbit with cotton saturated with autopsy gel.
- Embalm the body.
- Remove the cotton saturated with autopsy gel and dry out the orbit.
- Place a small amount of incision seal powder in the orbit and pack the orbital cavity with suitable filler.
- Place an eye cap over the filler and secure the eyelid in place with an adhesive at the time cosmetics are applied.