

1. Eye medication will need to be administered for life.
2. Auditory (vestibulocochlear) is responsible for balance and hearing.
3. Ineffective communication, Decreased interaction, withdrawal, suspicion, loss of self-esteem and insecurity.
4. Have the patient teach back. Also, have a family/friend at bedside to also get education.
5. Outer and middle ear
6. Inner ear damage (nerve pathways)
7. Tinnitus and vertigo
8. Ringing of the ears can cause suicidal ideation.
9. Room is spinning while the patient is still. Patient is a high fall risk.
10. Otitis media with effusion, poor eustachian tube function, impacted cerumen, tumors, objects present, middle ear disease, otosclerosis
11. Illness, genetics, loud noises, ototoxicity, and aging
12. 1. Vancomycin 2. Gentamycin 3. Cisplatin 4. Aspirin 5. Furosemide 6. Quinine
13. True.
14. Refers to the dilation of the endolymphatic system by overproduction or decrease reabsorption of endolymphatic fluid. (Basically, too much fluid causing pressure on cranial nerve #8.
15. Mild diuretics, vestibular rehabilitation, surgery.
16. Talk Low and Slow. Can also use written instructions for patient.
17. Nasolacrimal duct/conjunctival sac.
18. At least 15 seconds.
19. To prevent systemic absorption (Decrease of blood pressure and heart rate)
20. Age related macular degeneration, Cataract, Diabetic Retinopathy, Glaucoma.
21. Optic nerve is responsible for the visual acuity.
22. Oculomotor is responsible for opening of eyelids, eye movement upward/medial, upward/lateral, medial, downward/lateral.
23. Trochlear nerve is responsible for eye movement downward/medial)
24. Abducens nerve is responsible for eye movement lateral
25. Facial nerve is responsible for facial muscle movement (except chewing), and eyelid closing.
26. Opacification of the lens.
27. Age is the number one risk factor followed by diabetes mellitus, UV light, 2nd use of corticosteroids, and trauma.
28. Do not drive at night because of low visibility from light not being able to go through. There will be a glare/Halo around light sources at nighttime.
29. Surgery.
30. Call the surgeon even if it is just pain!
31. Peripheral vision (Glaucoma, Peripheral) Gatorade and Powerade
32. Open is gradual IOP build up. Closed is a rapid buildup 24-48 hour to fix before permanent damage.
33. Central vision (Macular-McDonald's, Central Chick fila)
34. Dry is drusen buildup that is gradual. Wet is drusen with hemorrhage and neovascularization that is rapid.
35. No cure just slowing of progression.
36. Within 5 years of diagnosis and then yearly.

37. Upon diagnosis and then yearly.

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