

PRE-OPERATIVE INSTRUCTIONS

Patient Name: _____

EVERY PATIENT MUST ARRIVE AT LEAST 10 MINUTES BEFORE SURGERY TO AVOID RESCHEDULING!!!

- **DO NOT EAT OR DRINK ANYTHING FOR EIGHT HOURS PRIOR TO YOUR SURGERY!** (Appointment will be rescheduled and a possible charge may occur.)
- Take prescribed medication the morning of surgery with a small amount of water (sips only).
- **NO SMOKING** 12 hours before surgery!
- No drinking alcohol for at least 24 hours before surgery.
- Brush your teeth thoroughly before surgery.
- **A RESPONSIBLE ADULT MUST ACCOMPANY THE PATIENT TO THE OFFICE AND MUST REMAIN IN THE OFFICE DURING THE ENTIRE SURGERY, DRIVE THE PATIENT HOME, AND SUPERVISE THE PATIENT FOR 24 HOURS FOLLOWING SURGERY!**
- Wear loose, comfortable clothing and a **SHORT-SLEEVED** shirt!
- Remove all makeup before surgery.
- **NAIL POLISH** must be removed before surgery!
- **ALL JEWELRY** must be removed before surgery.
- No **FLIP-FLOPS** or **SLIPPERS** can be worn on the day of surgery.
- Flu-like, head cold, or chest cold symptoms **MUST** be reported to the office before surgery.
- Schedule 48-72 hours off work and/or school.
- Do not operate a vehicle or machinery, or engage in any job or school-related activity for 24 hours following surgery or your last dose of pain medication.
- **CANCELLATIONS MUST BE MADE A LEAST 24 HOURS BEFORE YOUR APPOINTMENT OR THERE WILL BE A \$30 NO-SHOW/CANCELLATION FEE!!**

PATIENT/GUARDIAN SIGNATURE

DATE