



## PRE-OP INSTRUCTIONS

Our goal is to provide you with outstanding patient care. To achieve this, we request your patience. As with any surgery, unpredictable situations may occur that result in procedures taking longer than anticipated. We encourage you and your escort not to schedule any other commitments on the day of surgery. We appreciate your understanding and apologize for any delays in our schedule.

### MINORS

- Patients age 17 and under are required by law to be accompanied by a parent/legal guardian.
- In order to provide your child the safest, most comfortable and efficient care, we do not permit parents in the surgery room during the procedure.

### MEDICATIONS

- Any medications prescribed by the doctor will be called in to the pharmacy of your choice prior to your surgery appointment and should be picked up prior to the day of surgery and taken as directed. Do not take aspirin or any aspirin-containing medications (Excedrin®, Alka-Seltzer®) for 1 week prior to surgery unless otherwise instructed by a physician, as they cause prolonged post-operative bleeding. If you do take these medications, please check with your physician to confirm it is OK to stop before surgery.
- Patients who are required by their physician to take an antibiotic due to reasons such as a heart murmur or heart valve/joint replacement must follow the prescription instructions very carefully. Failure to do so could result in serious consequences.
- Patients should continue taking any prescription medications as prescribed by their physician unless otherwise instructed.

### RECOVERY

Each patient's recovery varies based on the individual and the type of procedure. Please make sure to make appropriate arrangements to be off school or work.

### CONSENT FORMS

Consent forms will be provided to you on the day of your consultation. The purpose of the forms is to help you understand the treatment that has been recommended and the potential risks involved. We ask that you read the consent forms thoroughly. Place your initials next to each number. Please ensure you bring the consent forms with you on the day of your procedure. This gives the doctor your authorization to perform the procedure. For minors (patients age 17 and under): a parent or legal guardian is required by law to complete and sign the consent forms.

### COPAYMENT

On the day of your consultation, you will be provided with a proposed treatment plan. The proposed treatment plan provides you with a detailed breakdown of the planned procedure and fees, including the medical and dental code(s) that will be used to submit a claim to your insurance. Please note the co-payment requested on the day of the procedure is only an estimate of what your out-of-pocket responsibility may be. We recommend you contact your insurance prior to surgery and verify your insurance benefits. If desired, we can send a pre-estimate to your insurance company which, once received back, should give a more accurate estimate of coverage and out-of-pocket costs.

### GENERAL ANESTHESIA INCLUDING ORAL SEDATION FOR CHILDREN

Patients going to sleep are required to observe the following:

- Do not eat or drink anything for 8 hours prior to surgery. This includes water, coffee, and juice.
- Take any prescribed pre-medication(s) with sips of water 1 hour before the procedure unless otherwise instructed.
- Continue taking all medications prescribed by your physician with a sip of water unless otherwise instructed.
- Wear clothing with loose-fitting sleeves. Long sleeves are OK as long as they are loose.
- Do not wear any jewelry on the head, neck, or wrists. This includes earrings and facial piercings.
- A responsible adult must accompany you and stay in the office during the procedure.
- A responsible adult must be present to care for you during the first 12 hours following surgery.



## PRE-OP INSTRUCTIONS (CONT.)

### **NITROUS OXIDE (LAUGHING GAS)**

Patients receiving nitrous oxide are required to observe the following:

- May eat a light meal up to 2 hours prior to surgery.
- Take any prescribed pre-medication(s) with sips of water 1 hour before the procedure unless otherwise instructed.
- Continue taking all medications prescribed by your physician with a sip of water unless otherwise instructed.

### **LOCAL ANESTHESIA (NOVOCAINE)**

Patients receiving local anesthesia are not required to fast. However, if you are unsure and there is any chance you may choose to go to sleep, please follow the general anesthesia instructions.

### **POST-OPERATIVE DIET**

You may want to prepare and have some of these suggested foods ready.

- It is IMPORTANT to increase fluid intake after surgery, preferably clear juices or water.
- Post-operative diet should be limited to cool foods (on the first day) and soft foods. Suggested foods: Pastas such as spaghetti or macaroni, Breakfast foods such as pancakes with syrup, JELL-O®, pudding, ice-cream, milkshakes.

### **INSURANCE**

We will gladly file all claims to your insurance company on your behalf. Claims generally take 30 days to be processed and paid. Most plans will send you an Explanation of Benefits, or EOB, which provides you with a breakdown of how the claim was paid according to your benefits coverage. It is your responsibility to follow up with your insurance company to ensure your claim is processed and paid.