



Pre-Operative Instructions

THE SURGERY CENTRE AT CRAIG RANCH

Phone(214)547-2700 Fax(214)547-2705

**Please bring this form with you
on the day of your surgery.**

1. Please do not eat or drink anything after midnight the night before surgery. Do not smoke, chew gum or eat mints. You may brush your teeth the morning of surgery, but **do not** swallow any water.
2. Please take any medications that you normally take in the morning, **unless instructed otherwise**. If you normally take your medication(s) in the evening, please take as usual. If you take Insulin, Coumadin or Plavix, please make sure your surgeon is aware so arrangements can be made for you to speak to an anesthesiologist prior to your scheduled surgery.
3. Please wear comfortable, loose fitting clothing (something easy to get off and on)..
4. Please **do not** wear jewelry, make-up or lotions. Leave all valuables **at home**. If you wear dentures, partials, contacts or hearing aids, please bring a container to put them in.
5. Take a shower or bath the morning of surgery.
6. **Do not** drink alcohol **24** hours before surgery.
7. PLEASE BE ABSOLUTELY SURE you have someone to drive you home after your procedure. You **will not** be able to drive for **24** hours after surgery. You should have someone **stay with you** for **24** hours after surgery.
 Home care taker _____ Driver _____
8. Patients under the age of 18 MUST be accompanied by a parent or legal guardian that must remain at the hospital until the patient is discharged.

- ✓ If your physical condition changes **in any way** (for example: you develop a fever, cold, cough, flu, chest pain or **any change** in the condition for which you are having surgery),
PLEASE NOTIFY YOUR SURGEON AS SOON AS POSSIBLE.
- ✓ If you need to cancel your surgery, for any reason,
PLEASE NOTIFY YOUR SURGEON AS SOON AS POSSIBLE.

Patient Signature: _____ Spoke With: _____ RN