

PRE-OPERATIVE INSTRUCTIONS (TEACHING RECORD)

Your surgery is scheduled: _____

Date: _____ Time: _____ AM / PM Please arrive at: _____ AM / PM

The following instructions are designed to provide you with safe and comfortable surgical and anesthesia experience. Please follow instructions carefully.

- DO NOT EAT OR DRINK ANYTHING, EVEN WATER AFTER MIDNIGHT on the night before surgery unless your anesthesiologist or physician instructs you differently.
- Unless otherwise instructed by your physician, take heart, blood pressure, asthma, acid reflux or seizure medication with a sip of water. Bring all prescribed inhalers, eye drops and insulin with you.**
- Discontinue all herbal products, any aspirin, anti-inflammatories, blood thinners one week prior to surgery unless your physician instructs you differently.**
- You may brush your teeth and gargle on the morning of surgery but do not swallow any water; no gum or mints.
- Shower or bathe the night before and/or the morning of surgery; no lotions or powder on your body.
- If you smoke, do not do so after midnight. Smoking cessation literature provided.
- Notify your doctor if you develop any signs of illness before the date of your surgery. Report symptoms such as fever, sore throat, breathing difficulties, chest pain, rash, or abrasion in area of surgery site.
- DO NOT wear or bring jewelry or valuables to the hospital. Do bring a case for glasses, contacts, hearing aids.
- Wear casual, loose fitting clothing. Patients remaining in the hospital bring robe, slippers and personal grooming items.
- Bring crutches/walker/other equipment i.e. CPAP machine, if applicable, to the hospital.
- You could be/will be admitted to the hospital after surgery.
- ARRANGE FOR SOMEONE TO DRIVE YOU HOME. For safety you will not be permitted to drive home after sedation or anesthesia. You must have a responsible adult available for the first 24 hours.
- Minors:** Patients under 18 years of age must be accompanied by a parent or legal guardian who must remain in the hospital until the patient is discharged.
- In-Patients: Bring only routinely prescribed medications in the original container with the prescription label. Do not bring narcotics, sedatives or over the counter medications with you.** Discharge time is 11:00am.
- ADDITIONAL INSTRUCTIONS: _____

- Must Pre-Register prior to day of surgery or case may be delayed.

RN Signature: _____ Date: _____ Time: _____

Patient / Significant Other Signature: _____ Date: _____ Time: _____

 **Thousand Oaks Surgical Hospital**
401 E. Rolling Oaks Drive • Thousand Oaks, CA 91361 • (805) 777-7750

Patient Label:

PRE-OPERATIVE INSTRUCTIONS
(Teaching Record) F210 Jan 09