



PATIENT NAME: \_\_\_\_\_

## AMBULATORY SURGERY CENTER INFORMATION SHEET

(708) 216-4573

The following information is given to you to provide ample time for you to make the necessary arrangements prior to your surgery. If you have any questions, please call your surgeon or call us at 708/216-4573.

### EATING AND DRINKING GUIDELINES:

- No solid food after Midnight.

#### Adults

- Only the following **clear liquids** may be consumed up until **4 hours** before your scheduled surgical time: Water, Apple Juice, Coke, Gatorade, 7-up, tea or coffee **without cream, milk, or non-dairy creamer.**

#### Infants or Children (under 13 years old)

- Only the following **clear liquids** may be consumed up until **3 hours** before their scheduled surgical time: Apple Juice, Pedialyte, Water.
- Infants may be fed **breast milk** up until **4 hours** before your scheduled surgical time.
- Infants may be fed **formula** up until **6 hours** before your scheduled surgical time.

### PREADMISSION TESTING:

The nurse from Preadmission Testing will call you approximately **1 week** prior to your surgery date to obtain your pertinent medical information.

Please have available:

- Your current medication list (prescription and non-prescription)
- Herbal supplements
- Weight control medications

Please note: It is important to inform your doctor if you are taking

- Blood thinners (Coumadin, Heparin, Plavix, Lovenox, etc...)
- Aspirin, Ecotrin
- NSAIDS (Ibuprofen, Advil, Motrin, Aleve, etc....)

### POSTOPERATIVE CARE REQUIREMENTS:

- **2** adults should accompany any **child** having a surgical procedure
- It is **required** that a responsible adult transport you home after surgery and be able and willing to provide home care overnight.
- Mandatory: The person bringing you and taking you home must be present during the entire surgical and recovery period.
- This is **required** for any procedure requiring sedation, sedation with local, or any form of anesthesia.

The **nurse from the Ambulatory Surgery Center** will call you after 1pm the day before surgery to confirm your surgery time and give you your pre-operative instructions. (708) 216 - 8123

**If these instructions are not followed exactly, your surgery will be CANCELLED, NO EXCEPTIONS.**

Patient Signature: \_\_\_\_\_

Date: \_\_\_\_\_