

PT UNDERSTANDING OF SURGERY APPOINTMENT:

_____ I understand that I can have nothing to eat or drink 8 Hours Prior to the procedure with the exception of a small sip of water to take prescribed medication(s).

_____ I understand that I must have an escort on the day of the procedure present upon check-in for my appointment.

_____ I understand that I will be called the Thursday prior to my appointment to confirm the appointment time and pay the estimated out-of-pocket patient portion.

_____ I understand that I cannot use recreational drugs, including marijuana, 24 hours prior to the scheduled surgery.

_____ I would like to be contacted if an appointment becomes available sooner than my scheduled appointment.

Best phone number to be reached when confirming the appointment _____

Patient Signature

Date

Staff Signature

Date