

IMPORTANT INFORMATION ABOUT YOUR SURGERY
(under general anesthesia or intravenous sedation)

FOR: _____

Surgery has been scheduled on _____.

On this date, please report to the office at _____ with your ride.

You have an important part to play in getting ready, so **READ ON.**

PLEASE FOLLOW THESE INSTRUCTIONS:

******Do not have anything to eat or drink, not even candy or gum from midnight the night before your surgery unless specifically instructed otherwise by the surgeon.**

- Arrange for a responsible adult to drive you home. Please check in with your ride upon arrival at the office. **All rides must remain in the office while the patient is having surgery.** Your ride must park in our patient parking lot only.
- You will need a responsible adult to be with you for the rest of the day.
- Arrange for a baby-sitter, if you have children. You will need someone to care for them for the whole day.
- You cannot drive, take public transit or operate heavy machinery for 48 hours.
- Please contact our office if you develop **cold or flu-like symptoms** just prior to surgery.
- **All patients should take their regularly prescribed medications with a minimum amount of WATER only!**

For patients with special diet needs, discuss 'before surgery preparation' with the oral surgeon before your surgery date.

BRING TO THE OFFICE

1. Your signed consent form and any other forms you were asked to complete.
2. Your health card (required for prescriptions)
3. Your reading glasses, if necessary, no contact lenses
4. An interpreter if you do not speak or understand English.

JUST A REMINDER

...when coming to the office

1. Leave your jewellery and large amounts of money at home.
2. Remove nail polish, makeup, tongue and lip piercings. Do not wear contact lenses. Wear loose, comfortable clothing with access to both arms.
3. If you take Asthma inhalers, please bring them to the office.
4. Take your regularly scheduled medications the morning of your surgery with a **SIP** of water.
5. Arrange for someone to be available to drive you home from the office and stay with you the rest of the day.
6. If you develop **cold or flu-like symptoms** just prior to surgery contact our office.
7. **IF YOU ARE PREGNANT**, tell your doctor when discussing the surgery and please tell us before surgery.

FOR FEMALE PATIENTS

Women taking the birth control pill should note that antibiotics may reduce the pills' effectiveness and alternative birth control methods should be considered.

Some women experience vaginal yeast infections when taking commonly prescribed antibiotics. If severe enough, this may require additional treatment by your physician.