

GENEVA WOODS SURGICAL CENTER

PRE-SURGERY INSTRUCTIONS & RELEASE OF INFORMATION

Patient Arrival:

Geneva Woods Surgical Center Arrival Time _____ AM/PM, DATE _____ (provide address)

Patient Instructions:

- Bring insurance card and driver's license
- Leave valuables at home (purse, money, etc.)
- Remove ALL jewelry/body piercings prior to arrival
- No smoking/vaping/recreational drugs the day of procedure
- Shower morning of surgery (or evening prior)
- Wear comfortable clothing (Button up or zipper)
- Do NOT wear makeup if you are having surgery on your eyes or face
- Parent/guardian must stay in building
- No perfume or lotion on surgical site
- Nothing to eat or drink after midnight, including mints and gum. (small sip of water up to 2 hours prior to arrival if medications are required)
- Do NOT take Aspirin, Motrin, Advil, Ibuprofen, Aleve unless otherwise instructed by your Doctor.
- Females of child bearing years, you may be asked to provide a urine sample upon arrival.
- ALL patients must have ride home and responsible adult to stay with you for 24 hours.

Release of information:

Escort Name: _____ Phone#: _____

Can we share medical information with them, Circle: YES/NO

Can we share financial information with them, Circle: YES/NO

I, in addition, authorize the release of medical and financial information to the following person:

Name: _____ Phone#: _____

Information is not to be released to anyone. _____ (patient initials)

This release of information will remain in effect until terminated by me in writing. _____ (patient initials)

Patient Name (print): _____ Date of Birth: _____

Patient/Guardian Signature: _____ Date/Time: _____

Call performed by: _____

Signature Witnessed by: _____

Patient Sticker