## **Important Instructions for Your Upcoming Surgery**

Dear [Patient's Name],

We are writing to provide you with important instructions to prepare for your surgery scheduled on [Date] at [Time]. Please carefully follow the guidelines below to ensure a smooth procedure.

## **Pre-Operative Instructions**

- **Medications:** Please notify us of all medications you are currently taking, including over-the-counter drugs and supplements. You may need to stop certain medications prior to surgery.
- **Fasting:** Do not eat or drink anything after [Time, e.g., midnight] on the day of your surgery.
- **Transportation:** Arrange for someone to drive you home after the procedure, as you may be drowsy from anesthesia.
- **Clothing:** Wear loose-fitting clothing and avoid jewelry or contact lenses on the day of surgery.

## Day of Surgery

Arrive at the hospital or surgery center at least [Time] before your scheduled surgery. Check in at the front desk and provide any necessary paperwork.

## **Post-Operative Care**

After your surgery, you will be given instructions for your recovery at home. Follow these instructions carefully to ensure proper healing and minimize the risk of complications.

If you have any questions or concerns, feel free to contact our office at [Phone Number].

Thank you for your attention to these important instructions. We wish you a successful surgery.

Sincerely,

[Your Doctor's Name] [Your Clinic or Hospital Name] [Contact Information]