

Essential Documents for Your Upcoming Surgery

Dear [Patient's Name],

As you prepare for your upcoming surgery on [Date], please ensure you bring the following essential documents:

- **Insurance Information:** Copy of your insurance card and any prior authorization documents.
- **Identification:** A valid government-issued photo ID (e.g., driver's license, passport).
- **Medical History:** A list of current medications and any relevant medical records.
- **Consent Forms:** Signed consent forms provided by your physician.
- **Emergency Contact:** Information for your emergency contact person.

Should you have any questions or need further assistance, please don't hesitate to contact our office at [Office Phone Number].

We wish you a smooth surgery and a quick recovery!

Sincerely,

[Your Name]

[Your Title]

[Hospital/Clinic Name]