## **Laser Eye Surgery Preparation Checklist**

Dear [Patient's Name],

As you prepare for your upcoming laser eye surgery on [Date], please review the following checklist to ensure you are ready for the procedure:

## **Preparation Steps:**

- Schedule a pre-operative consultation with your surgeon.
- Discontinue wearing contact lenses [number of days] prior to the surgery.
- Inform your surgeon about any medications you are taking.
- Arrange for someone to drive you home after the procedure.
- Plan to take a few days off work to recover.
- Follow any specific dietary instructions provided by your surgeon.
- Ensure you have someone available to assist you during the recovery period.

## **Day Before Surgery:**

- Avoid makeup, lotions, or perfumes on the day of surgery.
- Get a good night's sleep.
- Set reminders for your surgery appointment time.

## Day of Surgery:

- Arrive at the surgery center [Time] before your appointment.
- Wear comfortable clothing.
- Bring sunglasses to wear post-surgery.

If you have any questions or concerns, please don't hesitate to contact our office at [Phone Number]. We look forward to seeing you!

Sincerely,
[Your Name]
[Your Title]
[Clinic Name]
[Contact Information]