

# Hospital Admission Process for Elective Surgeries

Date: \_\_\_\_\_

Dear [Patient's Name],

We are pleased to inform you that your elective surgery has been scheduled for [Surgery Date] at [Hospital Name]. Below, you will find the details regarding the admission process:

## Admission Instructions

1. Please arrive at the hospital at least [X hours] before your scheduled surgery time.
2. Bring the following items:
  - Identification (e.g., ID card, driver's license)
  - Insurance information
  - Any required medical records or forms
3. Check-in at the [specific department/desk] upon arrival.
4. Ensure you have arranged for transportation home after your surgery.

## Pre-Operative Instructions

To ensure the best outcome for your surgery, please follow these instructions:

- Avoid eating or drinking after [midnight or specific time] the night before your surgery.
- Contact us if you develop any infections or health issues before your surgery.

If you have any questions or need further assistance, please feel free to contact our admissions department at [Phone Number] or [Email Address].

Thank you for choosing [Hospital Name]. We look forward to your successful surgery and recovery.

Sincerely,

[Your Name]

[Your Title]

[Hospital Name]