## **Pre-Surgical Advice and Recommendations**

Date: [Insert Date]

Patient Name: [Insert Patient Name]

Procedure: [Insert Procedure Name]

Dear [Patient Name],

As you prepare for your upcoming surgery on [Insert Surgery Date], we want to provide you with essential advice and recommendations to ensure a smooth process.

## **Before Surgery**

- Do not eat or drink anything after [Insert Time] the night before your surgery.
- Follow any prescribed medication instructions, including which medications to avoid.
- If you are feeling unwell or experiencing fever, please notify us immediately.
- Arrange for someone to drive you to and from the facility on the day of surgery.
- We encourage you to wear comfortable clothing and leave valuable items at home.

## Day of Surgery

- Arrive at the hospital at least [Insert Time] before your scheduled surgery.
- Bring a list of any medications you are currently taking.
- Report to the admissions desk for check-in.
- Ask any questions or express concerns you may have with your surgical team.

## **After Surgery**

- You will be monitored in recovery before being discharged.
- Follow all post-operative instructions provided by your surgical team.
- Schedule a follow-up appointment as advised.
- Do not he sitate to reach out if you have any questions during your recovery.

Thank you for your attention to these recommendations. We wish you the best for a successful surgery and recovery.

Sincerely,
[Doctor's Name]
[Medical Practice Name]
[Contact Information]