

Important Instructions for Your Upcoming Outpatient Procedure

Dear [Patient's Name],

Thank you for choosing [Clinic/Hospital Name] for your outpatient procedure. To ensure the best possible experience and results, please follow the instructions below:

Pre-Procedure Instructions

- **Fasting:** Please do not eat or drink anything after [time] the night before your procedure.
- **Medications:** Continue taking your prescribed medications unless otherwise instructed. Please inform us of any over-the-counter medications or supplements you are taking.
- **Transportation:** You will need someone to drive you home after the procedure. Please arrange for a responsible adult to assist you.
- **Clothing:** Wear loose, comfortable clothing on the day of your procedure.
- **Arrival Time:** Please arrive at [arrival time] to allow for check-in and preparation.

Day of the Procedure

On the day of your procedure, please report to [location]. Bring any necessary items such as:

- Your insurance card
- A valid ID
- Any forms provided by our office

If You Have Questions

If you have any questions or concerns before your procedure, please do not hesitate to contact us at [Phone Number] or [Email Address].

Thank you for your cooperation, and we wish you a smooth and successful procedure!

Sincerely,
[Your Name]
[Your Title]
[Clinic/Hospital Name]