

Outpatient Procedure Pre-Visit Instructions

Dear [Patient's Name],

We are looking forward to your upcoming outpatient procedure scheduled on [Date] at [Time]. Please review the following important pre-visit instructions to ensure a smooth experience:

1. Fasting Instructions

Please do not eat or drink anything after [Time] the night before your procedure, unless otherwise instructed by your healthcare provider.

2. Medications

Continue to take your regular medications unless advised otherwise. If you are on blood thinners or specific medications, please contact our office for further instructions.

3. Transportation

You will need someone to drive you home after the procedure. Please make arrangements accordingly.

4. Arrival Time

Please arrive at least [Number] minutes early to complete any necessary paperwork.

5. What to Bring

Bring your insurance card, photo ID, and any paperwork provided by our office.

If you have any questions or need to reschedule, please contact us at [Phone Number].

Thank you for your attention to these instructions. We look forward to serving you.

Sincerely,

[Your Clinic/Facility Name]

[Contact Information]