Your Procedure is Scheduled on		at	am/pm.
Please check in at	am/pm		
SURGICAL SCHEDULING AND PRE	-OPERATIVE INSTRUCTIONS:		
You will be scheduled for the following	g surgical procedure:		
Your surgery will be done at the fol	lowing facility:		
☐ Piper Outpatient Surgery Cel☐ Honor Health, 9003 E. Shea	nter, 9007 E. Shea Blvd, Scottsdale, AZ 8 Blvd, Scottsdale, AZ 85260	5260	
If your procedure requires an assistant telephone number:	t surgeon to help the doctor, below you'll	find the name and the	
Name	Telephone Number		

INSURANCE BENEFITS:

Your Procedure is Scheduled on

We ask that you check with your insurance carrier regarding benefits. We cannot quote hospital charges or pricing for your stay. If you require this information, please contact the patient financial services department of that facility. Please be aware that verification of coverage and precertification of the payment are not quarantees of payment.

PRECERTIFICATION:

Our office will contact your insurance carrier if precertification is required for the procedure.

PRE-OPERATIVE TESTING:

Any pre-operative testing or lab work needs to be done 2-4 weeks prior. Your physician will advise you if this testing is necessary and when it will be done.

PRE-OPERATIVE INSTRUCTIONS:

Avoid aspirin or products containing aspirin for 2 weeks prior to your surgery. Please contact our office if you have any questions about specific medications. The day prior to your procedure, you should have a regular breakfast and lunch followed by clear liquids until midnight. At approximately 8pm you will do ONE Fleet Enema Suppository (follow instructions on package). This can be purchased in the laxative isle of any drug store. NO LIQUIDS FOR AT LEAST 8-10 HRS PRIOR TO YOUR SURGERY!

THE DAY OF SURGERY:

- Dress is comfortable, loose fitting clothes with flat shoes.
- Leave all jewelry, including any piercing jewelry, and valuables at home.
- Do not wear contact lenses or makeup.
- You should be freshly bathed with no powders, deodorant, lotions, or colognes.
- If the patient is a minor child, a legal guardian must accompany the patient.
- Report to the hospital or outpatient center 2 hrs prior to the scheduled surgery time.
- In most cases the hospital will contact you 24 hrs prior to admission.
- For outpatient or day surgery, you should arrange for someone to drive you home.

PLEASE MAKE SURE TO SCHEDULE YOUR 2 WEEK POST-OP APPOINTMENT

If you have any questions or concerns, please contact our office at 602-466-1111

DESERT SAGE FOLLOW UP INSTRUCTIONS:

General for all procedures:

- Low-grade fever below 101.5 degrees is common and should subside with Tylenol. Please call the office if fever persists.
- Constipation is also very common and can be prevented with the use of stool softeners, high fiber diet
 foods (prune juice, bran cereals, fruits and vegetables) and increased water intake. If constipation does
 occur a suppository or fleets enema may be tried. Many narcotic medications such as Percocet,
 oxycontin, or vicodin can cause constipation and should be used only as needed. Motrin or Tylenol does
 not cause constipation.
- Urination may be painful secondary to bladder catheterized during surgery. In most cases this will subside in 24-48 hours. Increase fluid intake post surgery and cranberry juice is a good idea. If the discomfort does not subside, please call the office.

Laparoscopic Prodecures:

- Shoulder pain is very common and is created by the gas used during the procedure. The gas irritates the diaphragm, which shares nerves that supply the shoulder area. This will subside in 24-48 hours.
- Nausea is frequently caused by anesthetic drugs. Remain on clear fluids until the nausea subsides and then advance your diet slowly. You should start feeling like your normal self within 24-48 hours.
- Incision drainage is normal in small amounts. If redness, swelling or increased drainage occurs, please call the office.
- Vaginal bleeding in small amounts is normal. In uterine procedures your period may resume irregularly
 at first. Call if the bleeding is excessive. Please call the office if you are soaking more than one pad an
 hour.

Abdominal or Vaginal Hysterectomy Procedures:

- Post-operative pain should improve daily. Narcotics can be used during the first week to two weeks after surgery. Motrin is an excellent pain reliever after surgery and should be started as soon as possible in place of narcotics.
- Bowel disturbances after surgery are common. Constipation is very common. You should experience
 your first bowel movement 24-48 hours after discharge. If not please try suppositories first and then a
 fleets enema if needed. If you have had rectal surgery, enemas are NOT to be used. Please call the
 office for instructions.
- Gas pain is also common and can be relieved with increased movement and walking. Over the counter anti gas medications may be helpful.
- Incision drainage in small amounts is to be expected. If any active bleeding or leaking occurs, please call the office immediately.
- Fatigue in general is very common up to six weeks post-operatively. It is especially pronounced the first two weeks after surgery. Listen to your body and rest!
- Sexual intercourse in general is safe after six weeks post-op. Take it slow. There may be some pain and tenderness especially after vaginal surgery.
- Vaginal bleeding in small amounts is normal for the first two weeks. The bleeding should subside after that. If it becomes excessive and greater than one pad an hour, please call the office.
- Hormone imbalances are common post operatively and should be discussed with your doctor at you
 post operative visit.