



Surgery Guide

Surgery Date:

TESTING

Required testing such as blood work and EKG should be performed three months prior to surgery; otherwise, as soon as indicated.

We will gladly refer you to Quest Diagnostics for blood work and MD Urgent Care (located in Sacramento) for EKG's. If you decide to seek testing from your primary care provider, please make sure results are emailed: anasofia@idealsacramento.com or faxed: **(916) 665-0299**.

TESTING DATE: _____

SURGERY BALANCE

Final balance is due two weeks before your scheduled date. Our office is available for payments Monday-Saturday from 9am-5pm. For phone payment processing, please call our office directly.

MY BALANCE IS DUE BEFORE: _____

PREOPERATIVE APPOINTMENT

OUR PREOPERATIVE APPOINTMENT IS SCHEDULED FOR: _____

MEDICATION

You will receive your medication on the day of surgery. We will contact you 2 weeks before to advise you of any medication and supplements you must stop consuming.

ARRIVAL TIME

You will receive arrival time and post-op appointment information 3 days before surgery. You will receive this information via Klara, our medical messaging portal. You can also expect a pre-operative call in which we will review your final instructions for surgery.



I hereby acknowledge that I have received verbal information from my surgical coordinator at **IDEAL PLASTIC SURGERY** I accept the surgery date as presented above. I understand the significance of this commitment and agree to adhere to all pre-operative instructions and requirements associated with this scheduled procedure.

PATIENT SIGNATURE: _____ **DATE SIGNED:** _____

WITNESS SIGNATURE: _____ **DATE SIGNED:** _____