

ORAL AND MAXILLOFACIAL SURGERY PRE-OPERATIVE INSTRUCTIONS

NAME: _____

SURGERY DATE: _____ APPROXIMATE TIME OF SURGERY: _____

REPORT TO TVC SURGERY AT: _____ A.M. _____ P.M.

REPORT TO CHILDREN'S HOSPITAL AT: _____ A.M. _____ P.M.

REPORT TO ADMISSIONS OFFICE AT: _____ A.M. _____ P.M.

TVC SURGERY - located on the 3rd floor of The Vanderbilt Clinic.

VCH SURGERY - located on the 3rd floor of The Vanderbilt Children's Hospital

ADMISSIONS OFFICE - located on the first floor, main lobby of the Vanderbilt Hospital.

PRE-OPERATIVE INSTRUCTIONS:

1. TWO WEEKS BEFORE SURGERY:

DO NOT TAKE 1) Aspirin or Aspirin containing products (Darvon, Excedrin, Empirin, Bufferin, Midol, Ascriptin, Fiorinal, Norgesic, Percodan, etc.). **2)** Anti-inflammatory medicines (Ibuprofen, Advil, Nuprin, Aleve, Motrin, etc.). **3)** Herbal preparations containing Garlic, Ginkgo, Ginseng. **These drugs can cause excessive bleeding.** You may take Tylenol for pain.

2. THE DAY BEFORE SURGERY: You may eat a normal breakfast, light lunch but only a **LIQUID DINNER** (soup, shake, jello, etc.).

3. DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT THE NIGHT BEFORE YOUR SURGERY. If you take prescribed medications, you may take them with a small sip of water. If you are diabetic, please discuss management of your diet and diabetes medication with your surgeon.

4. DO NOT SMOKE for 48 hours before surgery

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PRE-OPERATIVE INSTRUCTIONS

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5. If you are donating your own blood for surgery, begin taking the prescribed iron with the first donation. Stop the iron on the day before surgery. Please call (615) 327-8248 to schedule your donation times. The first donation should be about 1 month before surgery, and the second donation should be two weeks after the first donation.

6. An **ANESTHESIA EVALUATION MUST BE PERFORMED 1-7 DAYS BEFORE** surgery. Please call (615) 343-2230 to schedule this evaluation.
Your diagnosis code is: _____

If you have any questions regarding these instructions, please call: (615) 343-9402.