

SURGERY INSTRUCTIONS

Dr. Wise has scheduled cataract surgery for **Right / Left** eye
On Wed. _____ at Norman Regional Hospital
901 N. Porter, Norman OK 73071 (phone 405-307-1000). Use the Northeast
Women's Outpatient Center Entrance.

Please call **405-307-2650** to make an appointment to **PRE-ADMIT** at the hospital
prior to the day of your surgery.

****On the DAY BEFORE** your surgery if you have not heard from the hospital by
5:00 p.m. please call the **AMBULATORY CARE UNIT AT 405-307-1250** to find
out what time to report to the **ADMITTING DEPARTMENT** on the day of your
surgery.

1. **NOTHING TO EAT OR DRINK AFTER MIDNIGHT** the night before your surgery. You may brush your teeth that morning as long as you swallow nothing.
2. If you take **BLOOD PRESSURE, HEART MEDICATIONS** or **INSULIN** please take them to the hospital with you.
3. Please complete the **MEDICAL ASSESSMENT** in **BLACK INK** and **TAKE IT TO THE HOSPITAL WITH YOU.**
4. **PLEASE LEAVE ALL VALUABLES AT HOME.** This includes all jewelry, wedding rings, watches and wallets. The hospital is not responsible for personal belongings.
5. Please wear **LOOSE COMFORTABLE CLOTHES THAT ARE EASY TO CHANGE (PREFEREABLY NOTHING THAT MUST PASS OVER YOUR HEAD) AND LOW HEELED SHOES.**
6. **LADIES: PLEASE DO NOT WEAR MAKEUP, HAIRPINS OR BARRETTES.**
7. **LADIES AND GENTLEMEN (Both patients AND guests)** Many of our patients and staff members have allergies to certain fragrances so **PLEASE DO NOT WEAR PERFUME OR COLOGNE TO THE HOSPITAL.**
8. Because you will receive medication in surgery, you **MUST HAVE A FAMILY MEMBER OR FRIEND ACCOMPANY YOU TO THE HOSPITAL AND DRIVE YOU HOME.**