SPECIAL INSTRUCTIONS FOR PATIENTS
DAY OF SURGERY

All Patients:
- If under 18 years of age, parental (or legal guardian) consent is necessary prior to any surgical procedure.
- Diabetics call for special instructions.
- Payment arrangements must be made prior to surgery.

Local Anesthesia Only Patients:
- If local anesthesia only is to be used, you may drink and eat as usual.

Intravenous (IV) Sedation, General Anesthesia or Nitrous Oxide Patients:
- No food or fluid (including water, coffee, and soda) within 8 hours of your surgery appointment. The previous meal should be light and easily digested.
- Wear loose-fitting clothing. Sleeves should be easily drawn up above the elbows.
- Please empty your bladder and bowel before the appointment.
- If you use contact lenses, please leave them out or bring their case and remove prior to surgery.
- On the day of surgery a responsible adult must accompany you to the Oral Surgery Clinic, remain in the building, be available to drive you home after your procedure, and be your caregiver at home.
- Following sedation or general anesthetic, you must not drive an automobile, operate any dangerous machine, or undertake any responsible business matters for the next 24 hours.
- If, prior to your procedure, you develop a cold, fever, or otherwise become ill, please contact us at 319-335-7457. Your appointment may need to be rescheduled.

To transfer patient records and radiographs electronically, please use our HIPAA compliant and secure website. Call Central Records at 319-335-7429 for instructions. Include your office name/phone number, patient name/date of birth, and date radiographs made.

Requested surgery/consultation:

Radiographs: □ Attached □ To be taken

To transfer patient records and radiographs electronically, please use our HIPAA compliant and secure website. Call Central Records at 319-335-7429 for instructions. Include your office name/phone number, patient name/date of birth, and date radiographs made.

Referring dentist: _____________________________
Address: ____________________________________
Telephone: _____________________________
E-mail: ________________________________