

EYE ASSOCIATES SURGERY CENTER

3024 N.PATTERSON ST.
VALDOSTA, GA. 31602

PRE-OP INSTRUCTION SHEET

- **ARRIVAL TIME:** You will be called 24 hours prior to your surgery date to confirm your arrival time.
- **2 DAYS PRIOR TO SURGERY:** Begin eye drops in the (RIGHT) (LEFT) eye
ZYMAXID - 1 drop in eye 3 times a day (6-8 Hrs. apart)
KETOROLAC 1 drop in eye 3 times a day (6-8 Hrs. apart)
(Wait 5- 10 minutes between each medication)
(Fill both prescriptions)
- **DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT** the day before surgery. Take heart or blood pressure medications the morning of your surgery with a small amount of water.
**DO NOT TAKE ANY DIABETES MEDICATION the morning of your surgery.*
- **CONTINUE** glaucoma or eye medications as directed unless instructed otherwise.
- **DO NOT** bring valuables or money with you the day of surgery. Leave purses with a family member or friend.
- **DO NOT WEAR:** CONTACT LENSES, MAKE-UP, JEWELRY, OR HAIR CLIPS on the day of your surgery. Wear loose fitting, warm comfortable clothing that buttons up the front.
- **DRIVING RESTRICTIONS:** ARRANGE TO HAVE A FRIEND OR FAMILY MEMBER TO DRIVE YOU THE DAY OF YOUR SURGERY. THEY ARE TO REMAIN INSIDE OF OUR FACILITY UNTIL YOU ARE DISCHARGED FROM OUR SURGERY CENTER. WE WILL CANCEL YOUR SURGERY IF SOMEONE DOES NOT REMAIN WITH YOU. BRING ONLY ONE VEHICLE PER PATIENT DUE TO LIMITED PARKING SPACE.
- **LENGTH OF STAY FOR SURGERY:** About 3 hours
- **YOUR FOLLOWUP APPOINTMENT** will be _____
- If you experience fever, coughing, cold or flu, etc. prior to your surgery please notify the surgery center at 229-247- 0557 (EXT. 232).

(Patient signature)

(Date and time)

(Witness)