

Patient Name:				
Hospital: Atlas Surgical Norton Pavilion	n Norton OBC	Baptist Health	Jewish Medical East	
Surgery Date:	Arrival Time:		AM/PM	
Registration Location:				
Instructions Before <u>SURGERY:</u>				
 Do NOT eat or drink anything, even directed otherwise by Dr. Digenis. P If you have high blood pressure and the surgery. Dr. Digenis or Anesthes you arrive. If Dr. Digenis has directed the use of your surgery. Shower as you would entire body from the neck down for near your eyes. Do not wash with refreshly laundered towel. DO NOT agenearly and any anticoagulant mediatached sheet for medications to a please bring your photo ID and hear any valuables. Inform your doctor of all medication diabetes, ask your doctor in advance please remove fingernail polish or a Have a ride arranged to take you he STOP SMOKING/VAPING OF ANY SAMOKING/VAPING OF ANY SAMOKING/	Please do not chew go take morning BP mesia will determine if your first Hibiclens® (chlorhed ald normally. Apply to cusing on the areas we apply any powders, do dication at least 2 we alwoid). Ith insurance card we have the about insulin inject artificial/gel nails beforme after discharge UBSTANCE AT LEAST	gum or mints after ledications, please you can take the lexidine), please us the Hibiclens® to a where incisions we have used the Heodorants, or loticeles before surge with you on the day fore surgery. If you have procedut 30 DAYS PRIOR D 2 WEEKS PRIOR	r midnight. (Initiale bring Rx to the hospital to medication with a sip of work see it the night before and a wet, clean, washcloth an ill be made. Never use the ibiclens®. Pat yourself dryons. ry unless otherwise instrucy of surgery but avoid bring on the surgery. TO THE SURGERY. (Initial R TO THE SURGERY). (Initial R TO THE SURGERY).	the day of vater when the morning of lather your e solution with a clean, acted (see anging . If you have
 At the time of your discharge, a nur 				
 If a problem develops at home or the please contact the office immediate 		our physical cond	ition (fever, nausea, bleed	ling, etc.)
FOR ROUTINE QUESTIONS AND/OF BUSINESS HOURS, MONDAY-THUR	R PRESCRIPTION REF			GULAR
Post-Op Appointment(s):				
· PP				

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