

PATIENT INSTRUCTIONS FOR HOSPITAL PROCEDURE

**\*\*If you are pregnant you can NOT have this procedure. Please notify the ordering doctor.\*\***

PREADMISSION TESTING (PAT'S)

You should have received an order for PAT's today if they are required for your hospital procedure. These can be done at any facility approved by your insurance company. Please complete these tests ASAP but no later than 5 days before your procedure.

SCHEDULING

Our hospital scheduler will coordinate everyone's schedules and select the date for the procedure. If you have an urgent matter that makes you unavailable please advise the office. We will advise you of the date and any additional instructions for your procedure.

HOSPITAL CONTACTS

The hospital will call you the evening prior to your procedure (between 2pm-6pm) to let you know what time to arrive and where to go. For Monday procedures they will call on Friday. If there is a holiday, they will call the day before the holiday for a procedure the day after.

If you have not heard by 6PM you may call the following numbers:

<u>Jersey Shore University Medical Center:</u>	<u>Ocean Medical Center:</u>
Catheterizations 732-776-4762	732-840-3347
TEE's 732-776-4588	732-836-4379
Cardioversion 732-776-4299	732-836-4379
EP 732-776-4772	732-840-3347

PREPARATION

- DO NOT eat or drink anything after midnight the day of your procedure.
- You will NOT be able to drive, please arrange for transportation home from the hospital.
- If you are pregnant or may be pregnant please advise this office ASAP.
- Leave all jewelry and valuables at home.
- Bring a list of your current medications.
- False teeth and dentures will be removed prior to your procedure.
- You will receive additional written or verbal instructions shortly that are specific to your medical condition and the procedure you are having.
- Notify the office if you become sick prior to your procedure

CONSENT

Your doctor has advised you of the risks and benefits of having this procedure. He may have presented you with a consent form or already obtained your written consent. This form must be submitted to the hospital prior to the procedure. If you have not already signed a consent please sign and return to our office ASAP. If you have any questions about the procedure please feel free to call us.

**IF YOU HAVE ANY QUESTIONS PLEASE CONTACT OUR OFFICE AT 732-458-6200 AND ASK TO SPEAK WITH THE HOSPITAL SCHEDULER.**