

IMPORTANT INFORMATION NEEDED TO HELP US PREPARE FOR YOUR VISIT

At the Center we want to take all steps to ensure your care is comfortable, effective, and safe. <u>To help your</u> <u>doctors and nurses select your treatments</u>, we need to be aware of all medications and supplements you take, whether by prescription or not, and the frequency and amounts of use.

Please complete the following table at your earliest convenience and have it available for when our nurse calls you before your surgery to discuss preparing for your visit. Additionally, please bring this completed page to the Center the day of your surgery. If needed, use the reverse side of this page to add other medications and frequency and dosages of use.

	Taken	
Press aniation Draw Norman	How	Deseus Talan Fash Time
Prescription Drug Names	Often?	Dosage Taken Each Time
	Talaar	
	Taken	
Non-Prescription ("Over the Counter")	How	
Medication Names	Often?	Dosage Taken Each Time
	Taken How	
Herbal Remedies and Supplements Names	Often?	Dosage Taken Each Time