



Jennifer A. Geoghegan, M.D.

Pre-Operative Medications to Avoid

- All patients anticipating surgery **MUST STOP SMOKING!** Chewing nicotine-containing gum or using nicotine patches should not be considered as alternatives since the nicotine causes vasoconstriction and compromises blood flow to the skin.
- The following medications or drugs **MUST BE DISCONTINUED** for three (3) weeks prior to surgery because all of these affect your blood's ability to coagulate. If any of these are used, bleeding problems or other potential complications may occur.

Aspirin and all of the following compounds must be avoided:

- | | | |
|-------------------------|----------------|---------------------|
| • Advil | • Ephedra | |
| • Alka Seltzer | • Excedrin | • Naprosyn |
| • Alleve | • Equagesic | • Norgesic |
| • Anacin | • Excedrin | • Pepto-Bismol |
| • A.P.C. | • Fiorinal | • Percodan |
| • Ascriptin | • Fish oil | • Panalgesic |
| • Aspirin suppositories | • Garlic | • Robaxial |
| • Bayer | • Ginger | • Saw Palmetto |
| • Bufferin | • Ginko Biloba | • St. John's Wort |
| • Butalbital | • Ginseng | • Sine-Aid |
| • Celebrex | • Glucosamine | • Sine-Off |
| • Condroitin | • Goldenseal | • Synalgos Capsules |
| • Cope | • Indocin | • Tolectin |
| • Coricidin | • Ibuprofen | • Triaminicin |
| • Darvon | • Kava | • Vanquish |
| • Dristan | • Midol | • Vicoprofen |
| • Duragesic | • Milk thistle | • Vitamin E |
| • Echinacea | • Midol | • Warfarin |
| • Ecotrin | • Mobic | • Zomax |
| • Empirin | • Motrin | |

*This is not a complete list of aspirin containing products!! Please do not take any other over the counter or prescription medications for three (3) weeks before surgery without checking with our office.

I have read the aspirin warning and understand the consequences should I take any aspirin containing products.

Patient Signature: _____ Date: _____



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Motor Vehicle Policy

Patient Name: _____

It is the policy of this office to insist that patients not operate a motorized vehicle or power equipment on the day of surgery. The drugs administered during the procedure can impair your driving ability. You must have someone drive you to and from our office and or surgery center on the day of your procedure. **Please be advised that each surgery is different, we may insist on a longer length of time as instructed by Dr. Geoghegan according to your procedure and recovery.**

I hereby release my doctor from any and all actions, loss or injury sustained by me as a consequence of my operation of any motorized vehicle or equipment that is not compliant with doctor's orders.

Patient Signature: _____

Date: ___/___/___

Witness Signature: _____

Date: ___/___/___



SURGERY INSTRUCTIONS

- No aspirin or Ibuprofen containing medications (list of med's to avoid given) two weeks prior to surgical date and two weeks after.
- Begin any medications or remedies as instructed.
- No alcoholic beverages 1 week prior and 1 week after surgery.
- Please arrange for transportation to and from clinic on day of surgery. Transportation may also be necessary for post-operative visits.
- Overnight stay as outpatient may be required however, in the case that you are released to go home after surgery, an adult must stay with you a minimum of 24 hours after surgery. This person must be comfortable with any post-operative care such as: changing dressing, administering medications, or applying ointment to incisions. Please advise our office of caretaker name and phone number.

Day before surgery

- Our office will contact you for any questions you may have.
- Nothing to eat or drink after midnight, not even gum or mints, unless otherwise indicated.

Day of Surgery

- Wear loose comfortable clothes. Suggestions sweats or loose fitting pants, zipper or button up shirt (Nothing that pulls over head). Tennis shoes/slip on shoes, socks.
- If you wear partials/dentures please be sure to wear them day of surgery.
- If you use an inhaler please bring it with you day of surgery.
- Do not wear contact lenses. You may bring your glasses.
- Do not wear make-up or hairspray to surgery.
- Please bring any medications for high blood pressure, diabetes or any other medical condition.

After Surgery

- If you develop any signs of fever, abnormal swelling or bruising, abnormal discomfort, please notify our office right away.
- You may have soft mild foods and beverage the first night after surgery as tolerated unless otherwise instructed. Avoid spicy foods and any beverages containing caffeine.
- Use prescriptions as directed.
- You will not be able to drive while under prescribed pain medications. You will need to make arrangements for transportation for your post operative visit.

Please note the following items if checked

____ In preparation of facelift procedure you may want to consider a longer hair style that will cover ears during the recovery period. It is suggested that if you want to cut and color your hair that it be done 1 week prior to procedure date.

____ Facial surgery patients may want to consider bring a large scarf or hooded sweat shirt with you the day of surgery.

Patient Signature: _____ Date: ____/____/____ Witness Initial: _____