**Pre-Operative Instructions: Lipo**

1. **DO NOT TAKE VITAMINS, HERBAL SUPPLEMENTS, ASPIRIN, IBUPROFEN, MOTRIN, NSAID** or products containing aspirin for **two weeks prior** to or following your scheduled surgery. Aspirin has an affect on your blood’s ability to clot and could increase your tendency to bleed at the time of surgery and during the post-operative period. **(Tylenol is okay to take)**
2. **DO NOT DRINK ALCOHOLIC BEVERAGES** for 5 days prior to surgery. Alcohol may create complications and increase bruising.
3. If you develop a cold, facial sore, fever or any other illness prior to surgery please notify us.
4. **AVOID** wearing makeup, facial or body moisturizers and remove all nail polish.
5. **REMOVE BODY PIERCINGS** in area to be treated.
6. **WEAR COMFORTABLE, LOOSE-FITTING CLOTHING** on surgery day- including a shirt that buttons all the way up the front. Wear nothing you must put over your head. Slip-on shoes are recommended for maximum post-operative comfort.
7. **DAY PRIOR AND SURGERY MORNING,** shower using only antibacterial soap.
* **Patients should shave areas to be treated.**
* **Patients receiving abdominal, thigh or flank treatments should shave half way down the pubic bone.**
1. Leave jewelry and valuables at home. Do not wear wigs, hairpins or hairpieces.
2. Surgery times are estimated only- you could be at the facility longer than indicated.
3. **ARRANGE FOR A DRIVER TO AND FROM SURGERY and ARRANGE FOR SOMEONE TO STAY WITH YOU THE 1ST 24 HOURS AFTER SURGERY.**
4. Do not smoke for two weeks prior to and two weeks after surgery. Smoking decreases your circulation and slows down healing time.
5. **PLEASE FOLLOW THE DIETARY GUIDELINES INDICATED BY CHECKBOX:**
* **NPO** (nothing by mouth) after midnight prior to surgery
* **Fluids only** after midnight prior to surgery
* **Light breakfast** day of surgery- (cereal, oatmeal, bagel or toast with jelly or peanut butter)
1. **24 hours before your surgery please start taking your antibiotic:** Keflex/ Avelox/ Z-Pack
2. Purchase sanitary napkins & tape (for home) to cover the incisions for drainage. Super or overnight pads are recommended.
3. Shower morning of or night before a procedure, as you will not be able to shower for 48 hours afterwards.
4. MP3 Players are strongly encouraged to be brought along on procedure day for comfort.
5. **BRING GARMENT WITH YOU TO THE PROCEDURE.**

Emergency Contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Surgery Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Arrival Time \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\*Please arrive 10 minutes before surgical time\*\***

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**I HAVE READ AND FULLY UNDERSTAND THE ABOVE ITEMS 1-17**

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Patient Signature Date

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Patient Name (Print) Date

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Witness Signature Date