



Surgical Scheduling and Patient Pre-Admission Visit Guidelines

- *Scheduling Office hours are Monday through Friday, 8:00 am to 5:00 pm*
- *OR Scheduling Office phone: 561-548-3641*
- *Please have the following information readily available when scheduling cases:*
 - *Patient full name*
 - *Patient SS #*
 - *Date of birth*
 - *Patient Insurance Information*
 - *Patient phone number*
 - *Physician name & Procedure*
 - *Start time requested*
 - *Patient location (i.e. coming from home, nursing home, or inpatient)*
 - *Any special equipment the physician will need for the procedure*
 - *Company name if any implants, etc are needed and verification that they have been notified. **It is the responsibility of the physician office to schedule any outside vendors needed for the procedure (i.e. orthopedic, gamma, pacer reps, etc).***
- *The patient will be scheduled for a Pre-Surgical Testing visit at the time the procedure is scheduled. This is generally 5-7 days prior to the procedure.*

Some Additional forms included for Physician Review:

Note: CPOE – Computerized Physician Order Entry

- **Anesthesia Guidelines:** outlines testing requirements by the anesthesia department. **Use as a guideline for ordering testing for your patients.** Additional tests may be ordered at the Pre-Surgical Testing appointment or Day of procedure.
- **Type & Screen/Crossmatch Guidelines:** Guidelines on which procedures may need a type & Screen or a type and crossmatch for blood products