

**VISION ONE LASER AND SURGERY CENTER
PHYSICIAN PREOPERATIVE HISTORY & PHYSICAL/CLEARANCE**

Dear Provider:

A pre-operative evaluation & clearance is required for this patient who is scheduled for elective outpatient surgery.

An EKG is not required for cataract patients but is required for oculoplastic and retinal surgery patients to include interpretation and tracing. All patients with extensive Cardiac hx i.e. Aortic Stenosis, Pulmonary Hypertension require a recent ECHO with EF% along with most recent Cardiology office visit note. If you feel additional testing is necessary, please indicate below. Please complete this form and then **FAX TO: 484-203-3019 as soon as possible**. Thank you.

Surgeon, Vision One Laser and Surgery Center

Patient's Name _____ Surgery Date _____
DOB: _____ Diagnosis _____
Proposed Surgery _____ Proposed Anesthesia Local
 MAC
 General Anesthesia

Significant Past Medical History:

Current Medications *Please note: all GLP-1 medications need to be held 7 days prior to surgery.**

Allergies:

B/P _____ / _____ Pulse _____ Resp _____ Weight _____ Height _____ BMI _____

Heart _____

Lungs _____

Cardio-Vascular _____

Abdomen _____

Extremities _____

Neuro/Psych _____

Remarks _____

Medical Condition Acceptable for Proposed Procedure Yes

Physician Name and Address (Print or Use Stamp)

AFFIX PATIENT LABEL HERE

Physician's Signature

Date



PREOPERATIVE INSTRUCTIONS

Thank you for choosing Vision One Laser and Surgery Center for your procedure. The following are instructions to help prepare you for your surgery:

1. You must have a History and Physical, EKG, and labs (if indicated) with your Primary Care Provider or other medical manager no more than 30 days prior to your scheduled procedure. The provider performing your History and Physical also must document that you are medically stable for your procedure.
2. If you take a Glp-1 receptor agonist/Semi-Glutide medication please contact Vision One as soon as your surgery is scheduled as some of these medications must be stopped at least a week before your surgery.
3. If these documents are not received by the center 24 hours prior to your scheduled surgery, you will have to cancel and reschedule with surgeon's office.
4. The day prior to your surgery a nurse from Vision One will call you prior to 3:00 p.m. with instructions and your arrival time. If you do not receive a call by 3:00 p.m., please call 610-280-9144. If you do not answer the call from the nurse with instructions, please check your voicemail for your arrival time and instructions.
5. Your total time at the center after you check-in is anywhere from 1 ½- 2 hours for cataract procedures only. Other procedures may take longer.
6. Absolutely no solid food after midnight the night before your surgery. You may have sips of clear liquids only up to 4 hours prior to your surgery, but no more than 4 ounces total. (the nurse will clarify this with you during the preoperative call).
7. You may brush your teeth, but do not swallow any liquid.
8. The nurse will instruct you on which medications you are to take the morning of surgery.
9. You must have an escort available at the time of discharge and have a responsible adult at home with you 24 hours after your procedure. If you are planning to take a bus, cab, Uber/Lyft, or Paratransit as your means of transportation, the driver cannot be considered as your escort, someone must accompany you.
10. Do not wear contact lenses, eye or face makeup, lotion, perfume, or cologne on the day of your surgery.
11. Leave jewelry and valuables at home, the Center is unable to store them and will not be responsible for lost or stolen items.
12. Wear loose comfortable clothing. For Plastic procedures do not wear clothing with any metal i.e. zippers, snaps, bras with underwire.
13. If you fail to follow these instructions, this may constitute a potentially dangerous risk and may lead to cancellation of your surgery.

**140 John Robert Thomas Dr.
Exton, PA 19341
Phone: 610-280-9144 Fax: 610-280-0797**

Eye Surgery Center of Chester County, LLC
DBA: Vision One Laser and Surgery Center
140 John Robert Thomas Dr.
Exton, PA 19341
610-280-9144

Cataract Surgery Information

If covered by your health care insurance (Medicare, IBC, United, etc.)

- At least three separate Claims will be filed:
 - One by the surgery center for use of the facilities
 - One by your surgeon
 - One by the professional anesthesia group (does not apply to individuals covered by-an Aetna HMO plan).
- You will be responsible for any co-payments and/or deductible amounts - check with your insurance carrier if you have questions about these amounts.
- You are responsible for any amounts charged by your surgeon for use of the FEMTO laser and/or for non-standard intraocular lenses.

If you are paying out-of-pocket for your cataract surgery:

- Fee for one eye: \$1,200.00
 - Does NOT include surgeon's fee
 - Does include surgery center fee
 - Does include anesthesia fee
 - Does include fee for a standard lens
 - **Must be paid in full**
 - On or before the day of surgery if paying by credit card
 - If paying by check, check must be received by the Center at least 3 business days prior to the date of surgery and should be made payable to; Eye Surgery Center of Chester County, LLC
- **WE DO NOT EXCEPT CASH FOR PAYMENT*****

Potential additional fees:

- Bilateral (both eyes) surgery on the same date of surgery; fee total= \$1,910.00, same parameters as listed above. This fee must be paid to the surgery center in accord with the cash/credit card/check parameters listed above. The surgery center does NOT accept Care Credit.
- You are responsible for any amounts charged by your surgeon for use of the FEMTO laser and/or for non-standard intraocular lenses.

Thank you.