Garden City Hospital

Surgery Medication List

Compassion. Community. Quality.

Dear Patient,

A Pre-Admission Testing nurse will be calling you prior to surgery to ask about any medication you take at home. If you do not already have a list compiled, please complete the form below and have it readily available for when you speak to the nurse. We also ask that you bring your medication list with you the day of surgery. Thank you for choosing Garden City Hospital for your surgical needs.

Medication Name	**Dose** (for example 100 mg)	**Frequency** (how many times a day)	**Comments** (any additional information)

Do you have any medication allergies? Please list them below.

Questions

We look forward to making your surgical experience a safe and comfortable one. If you have any questions regarding your surgery, please call us at Pre-Admission Testing: 734-458-3378.