



21 Laurel Avenue, Suite 120
Cornwall, New York 12518

(845) 458-7800 - Phone
(845) 458-7878 – Fax

Day of Surgery instructions

1. We are located at 21 Laurel Ave in Cornwall NY. Our number is (845)-458-7800 and select option 1 please call this number upon arrival at the parking lot to check in with our office staff. Please wear a mask.
2. The night prior to your surgery, nothing to eat or drink (including water) after midnight. If you take any blood pressure, heart, thyroid or seizure medications, you should take them in the morning with only a small sip of water. If you are an insulin dependent diabetic, call your primary care provider to get instructions regarding taking your diabetic medications. If you take oral diabetic medication, please do not take your medication on day of surgery.
3. Please do NOT bring any valuables on the day of surgery, which includes cash (if a copay is due, you may bring that payment method with you). Only bring your photo ID, insurance card, and proof of COVID-19 vaccination card, if you have one. Have your escort's contact information available. If you are a cataract patient, please bring in your prescribed eye drops pertaining to the cataract surgery. If you're having knee surgery please check with your doctor if you will need to obtain crutches prior to having your surgery.
4. Prior to the start of your procedure you will need to remove the following: dentures, glasses, hearing aids, jewelry, and contact lenses. So please use judgment and leave items at home, as we will provide plastic containers for storage.
5. Complete all pre-operative testing and exams if ordered by your doctor.
6. Your arrival time and instructions will be given via a phone call the day prior to surgery. Anticipate the calls to start at noon and a message will be left on the number provided to the office.
7. If you a woman of childbearing age, you will need to leave a urine specimen. Please wait to use the bathroom until you reach the pre op area. Only exceptions are women who had a hysterectomy or without a menstrual cycle for over a year.
8. You need to have transportation to and from our facility; the person taking you home must be present at discharge to sign off on the discharge instruction sheet.
9. If you begin feeling ill or having any COVID-19 symptoms (cough, fever, body aches, chills, sore throat, new loss of taste or smell), please notify our facility and your physician as soon as possible