



Datum:

Geagte Mnr/Mev:

U is geskeduleer vir 'n prosedure in teater op:.....

Opname Tyd:

Prosedure:
.....

- **Niks eet of drink vir 6 uur voor die teater tyd.**
- **Kroniese medikasie mag geneem word met klein slukkie water.**
- **Vermy bloedverdunners bv. Aspirin vir 7-10 dae voor die prosedure.**
- **Kontak asb die kamers van Dr FJ van Wijk 1 dag voor u prosedure, na 14h00 (012 342 9417) om u teatertyd en magtiging te bevestig.**

Die hospitaal sal skakel met u mediese fonds i.v.m. magtiging vir die prosedure, maar dit bly die pasient se eie verantwoordelikheid om magtiging te ontvang voor die prosedure kan plaasvind.

Enige verdere navraag i.v.m. magtiging, skakel gerus die hospitaal ontvangs by: Tel: 012 423 4000



Date:

Dear Mr/Mrs:

You have been booked for a procedure in theatre on:

Admission Time:

Procedure:
.....

- **No eating or drinking for 6 hours before the admission time.**
- **Chronic medication may be ingested with a small sip of water.**
- **Avoid blood thinning agents e.g. Aspirin for 7-10 days before the procedure.**
- **Please phone 1 day in advance regarding your theatre procedure at (012 342 9417) after 14h00, to confirm theatre time and authorization.**

The hospital will phone with your medical aid for the authorization.

It stays the patient's sole responsibility to obtain authorization before the procedure date.

Any queries regarding your authorization, please call the hospital on Tel: 012 423 4000.