

PRE-OP: Pred-Moxi-Brom Medication Instructions

Surgery Date: ____/____/____

RIGHT EYE

Surgery Date: ____/____/____

LEFT EYE



1 Day **BEFORE** Surgery

1 drop 3 times a day

Morning / Afternoon / Evening

DAY OF Surgery

1 drop 3 times a day

Morning / Afternoon / Evening



MORNING OF Surgery

1st 45 minutes before leaving home

2nd 15 minutes after the 1st drop

3rd 15 minutes after the 2nd drop

Pre-op Instructions

- **The surgery center will notify you a week before surgery of your arrival time.**
- **NO FOOD** after midnight the night prior to your surgery. This includes gum, candy, and mints. Surgery will be cancelled or postponed if this is not strictly adhered to.
 - Take your heart, blood pressure, Parkinson's, respiratory, epilepsy and reflux medications, unless instructed not to by your doctor
- You must arrange for a driver, at least **18 years** of age, to **STAY** at the surgery center during your procedure and then drive you home afterwards. You are **NOT** allowed to drive yourself home.