

Floyd G. Shon, M.D.

ORTHOPAEDIC SURGERY

16305 Sand Canyon Ave, Ste. 220, Irvine, CA 92618

Phone: (949) 855-2772

Fax: (949) 612-9171

PRE-SURGICAL PATIENT INSTRUCTIONS

1. Your surgery is scheduled for _____@ **Memorial Care Surgical Center Laguna Woods. Address: 24331 El Toro Road, Ste 150, Laguna Woods, CA 92637.**
2. You will be admitted to the Hospital/Surgery Center on the day of surgery. You will need to be at the Hospital/Surgery Center one (1) hour prior to your surgery. Your check-in time is _____.
3. You will receive a confirmation call the day before surgery from the Hospital/Surgery Center. If you have pre-admit, medical questions, contact the Hospital/Surgery Center where you are scheduled and speak with the Pre-op department.
4. If lab work is requested from Dr. Shon, the Hospital or the Surgery Center, please fulfill requests within 7 days of surgery. Contact numbers below. You may also choose to have your lab work done by your primary care physician.
5. Nothing to eat or drink (including water, candy and gum) eight (8) hours prior to surgery.
6. Please leave all jewelry at home as you will be asked to remove it before surgery.
7. Bring your ID (driver's license) and insurance cards with you.
8. Please make sure you have someone to drive you home and stay with you after your procedure.

Contact Numbers

Memorial Care Surgical Center Laguna Woods (949) 855-0562

Hoag Orthopedic Institute (949) 753-2071

Saddleback Memorial Hospital/ Surgery Center (949) 452-3939

Orange Coast Memorial Hospital/ Surgery Center (714) 378-7185

ORTHOPAEDIC SURGERY

HAND & WRIST. SHOULDER & ELBOW. HIP & KNEE. FOOT & ANKLE. JOINT REPLACEMENT. SPORTS. TRAUMA