

**Pre-Surgery Instructions**  
**Refractive Surgery Center Naval Hospital Bremerton**

Please read carefully as *failure to comply will result in cancellation* of your surgery appointment.

1. You must have a caregiver and a driver (not a Taxi) for at least 5 days which includes the day of surgery.
2. Due to possible complications during recovery, patients are required to be within the immediate area of their local eye doctor. **Do not schedule any TAD, travel during leave, underway, PCS, etc. until after the one month post-op appointment.**
3. Command Authorization Form: Drop off to clinic, email to [usn.kitsap.navhospbremertonwa.list.brem-rs-clinic@mail.mil](mailto:usn.kitsap.navhospbremertonwa.list.brem-rs-clinic@mail.mil) or fax to (360) 475-4411 no later than **1500 Monday the week of your surgery**. Please call clinic to verify receipt (360) 475-4295. You are required to bring the original on the day of surgery.
4. No contact lens use 2 weeks prior to surgery for soft lens users. No contact lens use 1 month prior to surgery for toric, gas permeable or hard contact lens users. Absolutely no sleeping in contact lenses, regardless of type for 1 month prior to surgery.
5. Call the clinic for any changes in your medical history including over the counter medications.
6. Day Before Surgery:
  - a. Pick-up medications by 1100 at the Naval Hospital Bremerton Pharmacy prior to checking in for your appointment. Choose **“Not in Stock Medications/Items Filled Prior to Today”** at the kiosk. You will get an “O” ticket and will be called immediately as your meds are prepared the night before. You are not required to be in uniform. **Your surgery will be cancelled if you are late.**
  - b. **FEMALE** patients stop by the laboratory prior to picking up medications.
  - c. The appointment is for a group teaching of pre/post op instructions & signing of informed consent; therefore, **it could last up to 1600.**
  - d. If you are not within 2 hours driving distance of the clinic, make arrangements to stay in the area the night before (for LASIK & PRK patients) and night of surgery (for LASIK patients).
  - e. Please be aware that your 0730 or 0800 surgery day appt time is a placeholder. You will be informed of your surgery check in time at the group meeting. **Please make sure you and your driver’s schedule is flexible on day of surgery.**
7. Surgery Day:
  - a. Eat breakfast/lunch/bring a snack. Pre-op meds needs to be taken with food.
  - b. Your military ID will be used for verification purposes.
  - c. We provide a free pair of sunglasses with 100% UVA and UVB protection.
  - d. **It is highly recommended that your driver waits for you here in the clinic. If not, they should be within a 30 minute distance from the clinic at all times.**
  - e. Please do not bring any personal belongings. Absolutely no cell phones, pagers, or electronic devices.
  - f. Do not wear: earrings, facial piercings, necklaces, make up (especially around the eyes), facial lotions or cream, perfume, cologne or aftershave.

I have read & understood the above instructions. *Failure to comply will automatically cancel my surgery appt:*

Patient Signature/Date: \_\_\_\_\_

Clinic Staff Initial: \_\_\_\_\_

I have received a copy of the above instructions:

Patient Signature/Date: \_\_\_\_\_