

Surgery Scheduling Checklist

Fax or email these completed items at least 7 days prior to your surgery

E-FAX: 833-442-0375 / Alternative Fax: 310-900-2774

Email: SFMC-SurgeryScheduling@primehealthcare.com

- Surgery/Admission booking form, list the procedure
- Pre-op surgery orders
- Insurance authorization for surgical procedure
- Sterilization consent as needed, following insurance protocol/rules for tubal ligation, vasectomy and hysterectomy
- Patient's correct phone numbers, include cell, home and other contact information
- Patient's ID with photo
- H&P within one month of date of surgery
- Results of Lab, ECG, CXR ordered
- Medical and/or cardiac clearance, as needed
- Any special medications, instruments, equipment, implants or representatives needed, etc.
- Any special needs such as type & screen, type & cross for blood work

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- Email/Fax documents to scheduling office

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- Scheduling office
- To schedule pre-op with pre-anesthesia testing in pre-op office
- Main OR

Phone: 310-900-2737

Phone: 310-900-8885

Phone: 310-900-2737