THE MEDICAL EYE CENTER

Gagan J. Singh, M.D.

19719 Executive Park Circle Germantown, Maryland 301 528 4500

Dear Doctor _____:

Our mutual Patient is scheduled to under go cataract extraction with intraocular lens implantation as an out-patient at the Palisades Eye Surgery Center on

_____.

The surgery will be performed with either local or MAC anesthesia with an anesthesiologist. The total operative time will be no more than sixty minutes.

We would most appreciate your cooperation in completing the enclosed pre operative history and physical form. Lab tests and EKG may be performed at your discretion as needed for the patient's health situation.

Please forward the history and physical and test results to our office (301) 528-4501 <u>1 week</u> before the date of surgery.

If your patient is on a blood thinner, anti-platelet agents or aspirin please have them stop those medications five (5) days before surgery.

If you have specific questions or comments, please feel free to contact us at your convenience.

Thank you for your cooperation.

Respectfully yours,

Gagan J. Singh, M.D.

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