

Affidavit of Food and Fluid Intake and Medical Conditions

I hereby certify that I have followed the written "Pre-op Instructions" provided and discussed with Dr. Laura Matsunaga regarding food and drink intake.

No food or non-clear beverages have been ingested within the immediate past 8 hours prior to this appointment.

No clear liquids (i.e. water and apple juice) have been ingested within the immediate past 4 hours prior to this appointment.

I also certify that I have completely disclosed all medical conditions in the written "Medical History".

I also certify that I am currently in good health and free of coughing and congestion related to a cold or flu.

Signature of Patient

Date