



166 Pasadena Dr. Suite 100
Lexington, KY 40503
(859) 279-2111

Patient Name _____

In order to prepare for your procedure, you will need to complete the following tasks that are checked below:

☐ Complete blood count

☐ Basic metabolic panel

☐ HGB A1C

☐ TSH, free T4

Operative report for: _____

Notes regarding: _____

Diagnosis Code: R63.4

Katie Dadi, APRN

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Fax number: 859-303-6005

You may scan and e-mail documents to admin@lexingtonps.com