



DALLAS
ENT
GROUP

Adult and Pediatric Otolaryngology
12720 Hillcrest Rd., Ste 900
Dallas, TX 75230
Phone 972-566-8300
Fax 972-566-8004

Your surgery is scheduled for: _____.

Since the schedule for the facility is not under our control, we will not know what **TIME** your procedure is scheduled for until **THE DAY BEFORE SURGERY**. Our office will call you once we have been informed to tell you what time you need to arrive at the facility. Please make sure you have someone to drive you home after your surgery. The facility will not allow you to drive yourself home.

If you have any questions regarding your instructions, please feel free to ask the surgery scheduler when they call you the day before surgery.

Your follow-up appointment is scheduled for: _____ at _____.

*Please note, due to certain insurance plans and regulations, this may be a charged visit.

Dallas ENT Group understands that certain insurance plans are difficult to understand. **There are usually three costs associated with surgeries: the surgeon's fee, the facility fee, and the anesthesia's fee.** We will check your surgeon's benefits for you. We cannot, unfortunately, check the benefits for the facility or anesthesia group. Any fees associated with lab work or pathology performed in the hospital will be additional and you may inquire about these fees when checking with the insurance representative of the hospital. Our insurance department will call you to explain your benefits before surgery and to collect any costs associated with your upcoming procedure. Your surgery cost is due **three days prior to your procedure**. If payment is not made by the due date, your surgery will be rescheduled to another day. We accept most major credit cards and also offer CareCredit as a courtesy to our patients. If you would like to contact the facility to inquire about any costs, please feel free to do so. Your procedure has been scheduled at:

- Medical City Hospital Dallas
 - Contact: 972-566-3222
- Ambulatory Surgical Center at Medical City Hospital (Building C, Suite 150)
 - Contact: 972-629-0500

Option 1: Cost for upcoming surgery; Option 2: Questions about a bill received
- Baylor Surgicare at North Dallas (12230 Coit Rd. Suite 200)
 - Contact: 469-374-6400
 - Towens@USPI.com (Preferred contact method)

CPT (procedure) code(s): _____

Estimated anesthesia time: _____

**This is only an estimate of the CPT codes and amount of anesthesia time needed for your procedure.

Thomas Y.L. Hung, MD
Facial Plastic & Reconstructive Surgery
Board Certified

Walter J. Humann, MD
Adult & Pediatric Otolaryngology

Kelly A. Briley, AuD
Audiology



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Anesthesia Services

If you would like to contact the anesthesia group to inquire about any costs, please feel free to do so. Your group will be:

Metro Anesthesia

Email: billing@metroanesthesia.com
Phone: 214-252-3500, choose option 1 for billing

Your anesthesiologist will contact you the night before surgery to go over your medical history and answer any questions you might have. **If you have not received a call between 5 - 9 PM, please call your group** and ask them to page your anesthesiologist.

It is very important that you have an empty stomach before anesthesia is administered. This is why we ask that you **DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT THE NIGHT BEFORE SURGERY**. If your procedure is in the afternoon, you may be allowed to eat a light breakfast, but you must check with your anesthesiologist. If the patient is a child on formula or breast milk, please ask the anesthesiologist about when to stop feeding. **If you show up to the facility and have not followed the instructions for not eating or drinking, your procedure will be cancelled.**

Certain medications are allowed to be taken pre-operatively, and some are not. You will be discussing your medication list in detail with your anesthesiologist. Please remember that any over-the-counter supplements ARE considered medications and may not be able to be taken before surgery. **Please ask the anesthesiologist about taking any medications the morning of surgery.**

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