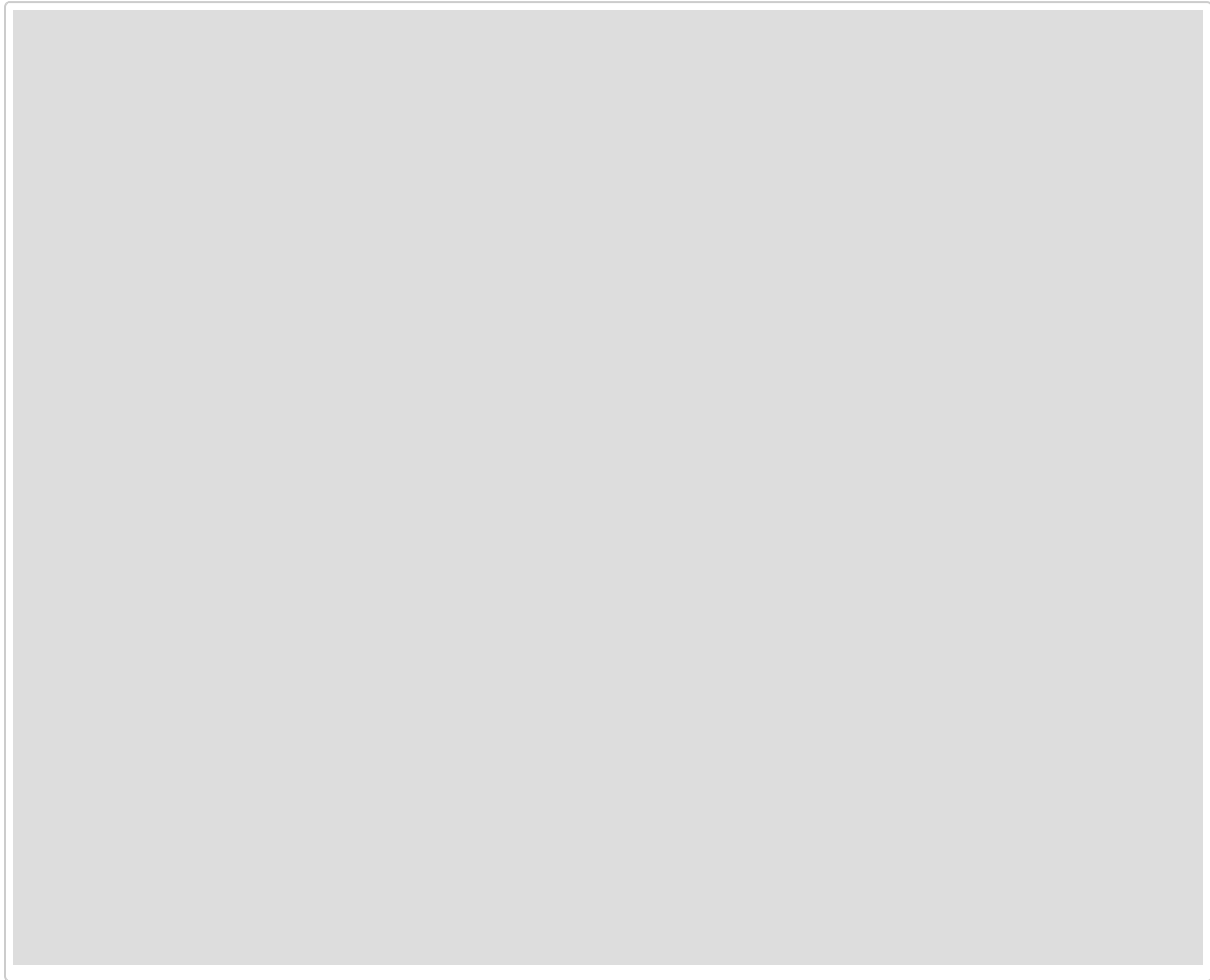


# Preanesthetic Patient Agreement

## Preanesthetic Patient Agreement

To download and print the document, click on the link below.

- [Preanesthetic Patient Agreement](#)



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[Certificate of Insurance](#)

[Contractor Site Rules](#)

[IROP Referral Form](#)

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[Mammography Requisition Form](#)

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[Mental Health - Treatment Agreement Form](#)  
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[Oxford County Counselling - Welcome Information](#)  
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[Preparing for Your Visit to the Pre-Admit Clinic](#)  
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[Surgery at Woodstock Hospital](#)  
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[WH Supplier Communication Handbook](#)  
[X-ray Requisition Form](#)

## **Related Pages**

- [Pre-operative Patient Questionnaire](#)
- [Preadmission Information for Surgery](#)
- [Preanesthetic Patient Agreement](#)
- [Preparing for Your Visit to the Pre-Admit Clinic](#)
- [Surgery at Woodstock Hospital](#)