

1/28/2012 ✓



Lodi Memorial Hospital

975 South Fairmont, Lodi, CA 95240

Main Hospital
(209) 334-3411
Emergency Dept.
(209) 339-7575

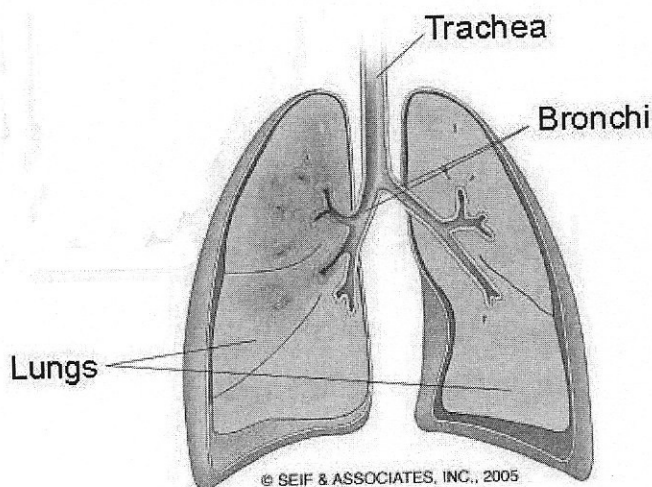
EXITCARE® PATIENT INFORMATION

Patient Name: HAZEL JOHNSONEmergency Physician: Xavier Salinas, MD

Acute Bronchitis

You have acute bronchitis. This means you have a chest cold. The airways in your lungs are *inflamed* (red and sore). Acute means it is sudden onset. Bronchitis is most often caused by a virus. In smokers, people with chronic lung problems, and elderly patients, treatment with antibiotics for bacterial infection may be needed. Exposure to cigarette smoke or irritating chemicals will make bronchitis worse. Allergies and asthma can also make bronchitis worse. Repeated episodes of bronchitis may cause long standing lung problems.

Acute bronchitis is usually treated with rest, fluids, and medicines for relief of fever or cough. Bronchodilator medicines from metered inhalers or a nebulizer may be used to help open up the small airways. This reduces shortness of breath and helps control cough. Antibiotics can be prescribed if you are more seriously ill or at risk. A cool air vaporizer may help thin bronchial secretions and make it easier to clear your chest. Increased fluids may also help. **You must avoid smoking, even second hand exposure.** If you are a cigarette smoker, consider using nicotine gum or skin patches to help control withdrawal symptoms.



Recovery from bronchitis is often slow, but you should start feeling better after 2-3 days. Cough from bronchitis frequently lasts for 3-4 weeks.

SEEK IMMEDIATE MEDICAL CARE IF YOU DEVELOP:

- Increased fever, chills, or chest pain.
- Severe shortness of breath or bloody sputum.
- Dehydration, fainting, repeated vomiting, severe headache.
- No improvement after one week of proper treatment.

MAKE SURE YOU:

- Understand these instructions.
- Will watch your condition.
- Will get help right away if you are not doing well or get worse.

FOLLOW-UP INSTRUCTIONS

02 - 03 days unless better: - () -

ADDITIONAL NOTES AND INSTRUCTIONS

TAKE MEDICATION AS DIRECTED

FOLLOW UP WITH YOUR PRIMARY CARE PHYSICIAN FOR RE-CHECK

Document Released: 1/25/2006 Document Revised: 11/30/2009 Document Reviewed: 12/18/2006

Cough

The body has a normal cough reflex. This helps expel mucous secretions and irritants from the lung and airway. Coughing helps to protect you from pneumonia. Most coughs are caused by virus infections. These often take 2 to 3 weeks to clear up. Cough spasms are periods of continuous coughing that go on for several minutes. If a cough can be controlled with medicine, and it clears up in 2 to 3 weeks, no special studies or treatment is usually needed.

A persistent cough lasting longer than 3 to 4 weeks requires medical evaluation. X-rays and other tests may be needed to determine the cause. A chronic cough is most often due to smoking, post-nasal drip from sinus disease, or asthma. Esophageal reflux disease or GERD can also lead to a chronic cough. ACE inhibitor blood pressure drugs may also cause a cough. Some infections like whooping cough can cause a persistent cough that lasts for weeks.

Treatment of cough includes measures to loosen the cough and thin the mucus. Warm liquids, cough drops, and non prescription cough medicine will help reduce dry hacking cough. Use a humidifier if necessary to moisten the air in your room. Some cough medicines also have antihistamines, decongestants, or alcohol in them, but there is no proof that any of these help control cough.

Cough suppressants may be used as directed by your caregiver. Keep in mind that coughing helps clear mucus and infection out of the respiratory tract. It is best to use cough suppressants only when rest is needed. For children under the age of 4 years, use cough suppressants **only** as directed by your child's caregiver.

Prescription cough medicine or those with dextromethorphan (DM) should be reserved for dry coughs that prevent sleep or cause spasms or chest pain. Avoid any exposure to cigarette smoke because this will worsen the cough or make it last much longer.

SEEK IMMEDIATE MEDICAL CARE IF YOU OR YOUR CHILD DEVELOPS:

- Increased difficulty breathing.
- A high fever or severe chest pain.
- A cough which has not improved within 3 weeks.

FOLLOW-UP INSTRUCTIONS

02 - 03 days unless better: - () -

Document Released: 12/18/2006 Document Revised: 3/14/2011 Document Reviewed: 5/28/2008

Dyspnea (Shortness of Breath)

Shortness of breath (*dyspnea*) is the feeling of uneasy breathing. Shortness of breath does not always mean that there is a life threatening illness. Dyspnea needs care right away.

DIAGNOSIS

Many tests may be done to find why you are having shortness of breath. Tests include:

- Chest x-rays.
- Blood tests.
- Exercise testing.
- Lung function tests.
- Electrocardiogram.
- A cardiac echo.
- Scans.

Serious medical problems will usually be found during your exam.

Your caregiver may not be able to find a cause for your shortness of breath after looking at you. In this case, it is important to have a follow-up and exam with your caregiver after a period of time.

HOME CARE INSTRUCTIONS

- **Do not smoke.** Smoking is a common cause of shortness of breath. Ask for help to stop smoking.
- Avoid being around chemicals that may bother your breathing (paint fumes, dust, etc)
- Rest as needed. Slowly begin your usual activities.
- If medications were prescribed, take them as directed for the full length of time directed. This includes oxygen and any inhaled medications, if prescribed.
- It is very important that you follow up with your caregiver or other physician as directed. Waiting to do so or failure to follow-up could result in worsening of your condition and possible disability or death.
- Be sure you understand what to do or who to call if your shortness of breath worsens.

SEEK MEDICAL CARE IF:

- Your condition does not improve in the time expected.
- You have a hard time doing your normal activities even with rest.
- You have any side effects from or problems with medications prescribed.
- You develop any new symptoms not discussed below.

SEEK IMMEDIATE MEDICAL CARE IF:

- You feel your shortness of breath is getting worse.
- You feel lightheaded, faint or develop a cough not controlled with medications.
- You start coughing up blood.
- You get pain with breathing.
- You get chest pain or pain in your arms, shoulders or belly (*abdomen*).
- You develop an oral temperature above _____, after not having a temperature for one or more days.
- You are unable to walk up stairs or exercise the way you normally can.
- If any of the symptoms, which brought you into the emergency room before, are getting worse and not better.

MAKE SURE YOU:

- Understand these instructions.
- Will watch your condition.
- Will get help right away if you are not doing well or get worse.

FOLLOW-UP INSTRUCTIONS

02 - 03 days unless better: - () -

Document Released: 1/25/2006 Document Revised: 11/30/2009 Document Reviewed: 4/30/2009

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EXITCARE® PATIENT INFORMATION

Patient/Visit Information:

Patient Name: HAZEL JOHNSON	Discharge Date/Time: 1/28/2012 10:10:04 AM
Attending Caregiver: Xavier Salinas, MD	Diag:

Drug Summary:

For your information, the following drug information sheets **were given to you while at our facility:**

AZITHROMYCIN 250/500 MG - ORAL

Drug Allergies: None Entered

Call your doctor for medical advice about side effects.

You may report side effects to the Food and Drug Administration (FDA) at 1-800-FDA-1088, the FDA does not provide any medical advice.

IMPORTANT: HOW TO USE THIS INFORMATION: This is a summary and does NOT have all possible information about this product. This information does not assure that this product is safe, effective, or appropriate for you. This information is not individual medical advice and does not substitute for the advice of your health care professional. Always ask your health care professional for complete information about this product and your specific health needs.

AZITHROMYCIN 250/500 MG - ORAL (ay-ZITH-roe-MYE-sin)

COMMON BRAND NAME(S): Zithromax

USES: Azithromycin is used to treat a wide variety of bacterial infections. It is a macrolide-type antibiotic. It works by stopping the growth of bacteria. This medication will not work for viral infections (such as common cold, flu). Unnecessary use or misuse of any antibiotic can lead to its decreased effectiveness.

HOW TO USE: Read the Patient Information Leaflet if available from your pharmacist before you start taking azithromycin and each time you get a refill. If you have any questions, ask your doctor or pharmacist. Take this medication by mouth as directed by your doctor, usually once daily with or without food. You may take this medication with food if stomach upset occurs. The dosage is based on your medical condition and response to treatment. Antibiotics work best when the amount of medicine in your body is kept at a constant level. Therefore, take this drug at the same time each day. Continue to take this medication until the full prescribed amount is finished, even if symptoms disappear after a few days. Stopping the medication too early may allow bacteria to continue to grow, which may result in a return of the infection. Antacids may decrease the absorption of azithromycin if taken at the same time. If you take an antacid, wait at least 2 hours before or after taking azithromycin. Tell your doctor if your condition persists or worsens.

SIDE EFFECTS: Stomach upset, diarrhea/loose stools, nausea, vomiting, or abdominal pain may occur. If any of these effects persist or worsen, tell your doctor or pharmacist promptly. Remember that your doctor has prescribed this medication because he or she has judged that the benefit to you is greater than the risk of side effects. Many people using this medication do not have serious side effects. Tell your doctor right away if any of these unlikely but serious side effects occur: hearing changes (such as decreased hearing, deafness), eye problems (such as drooping eyelids, blurred vision), difficulty speaking/swallowing, muscle weakness, signs of liver problems (such as unusual tiredness, persistent nausea/vomiting, severe stomach/abdominal pain, yellowing eyes/skin, dark urine). Get medical help right away if any of these rare but serious side effects occur: fast/irregular heartbeat, severe dizziness, fainting. This medication may rarely cause a severe intestinal condition (Clostridium difficile-associated diarrhea) due to a resistant bacteria. This condition may occur during treatment or weeks to months after treatment has stopped. Do not use anti-diarrhea products or narcotic pain medications if you have any of the following symptoms because these products may make them worse. Tell your doctor immediately if you develop: persistent diarrhea, abdominal or stomach pain/cramping, blood/mucus in your stool. Use of this medication for prolonged or repeated periods may result in oral thrush or a new yeast infection. Contact your doctor if you notice white patches in your mouth, a change in vaginal discharge, or other new symptoms. A very serious allergic reaction to this drug is rare. However, get medical help right away if you notice any symptoms of a serious allergic reaction, including: rash, itching/swelling (especially of the face/tongue/throat), severe dizziness, trouble breathing. An allergic reaction to this medication may return even if you stop the drug. If you have an allergic reaction, continue to watch for any of the above symptoms for several days after your last dose. This is not a complete list of possible side effects. If you notice other effects not listed above, contact your doctor or pharmacist. In the US - Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088. In Canada - Call your doctor for medical advice about side effects. You may report side effects to Health Canada at 1-866-234-2345.

PRECAUTIONS: Before taking azithromycin, tell your doctor or pharmacist if you are allergic to it; or to other antibiotics (such as erythromycin, clarithromycin, telithromycin); or if you have any other allergies. This product may contain inactive ingredients, which can cause allergic reactions or other problems. Talk to your pharmacist for more details. Before using this medication, tell your doctor or pharmacist your medical history, especially of: liver disease, kidney disease, a certain muscle disease (myasthenia gravis). Azithromycin may cause a condition that affects the heart rhythm (QT prolongation). QT prolongation can infrequently result in serious (rarely fatal) fast/irregular heartbeat and other symptoms (such as severe dizziness, fainting) that need medical attention right away. The risk of QT prolongation may be increased if you have certain medical conditions or are taking other drugs that may affect the heart rhythm. Before using azithromycin, tell your doctor or pharmacist of all the drugs you take and if you have any of the following conditions: certain heart problems (heart failure, slow heartbeat, QT prolongation in the EKG), family history of certain heart problems (QT prolongation in the EKG, sudden cardiac death). Low levels of potassium or magnesium in the blood may also increase your risk of QT prolongation. This risk may increase if you use certain drugs (such as diuretics/"water pills") or if you have conditions such as severe sweating, diarrhea, or vomiting. Talk to your doctor about using azithromycin safely. Before having surgery, tell your doctor or dentist about all the products you use (including prescription drugs, nonprescription drugs, and herbal products). During pregnancy, this medication should be used only when clearly needed. Discuss the risks and benefits with your doctor. This drug passes into breast milk. Consult your doctor before breast-feeding.

DRUG INTERACTIONS: See also How to Use section. Drug interactions may change how your medications work or increase your risk for serious side effects. This document does not contain all possible drug interactions. Keep a list of all the products you use (including prescription/nonprescription drugs and herbal products) and share it with your doctor and pharmacist. Do not start, stop, or change the dosage of any medicines without your doctor's approval. Some products that may interact with this drug include: live bacterial vaccines. Although most antibiotics probably do not affect hormonal birth control such as pills, patch, or ring, some antibiotics may decrease their effectiveness. This could cause pregnancy. Examples include rifamycins such as rifampin or rifabutin. Be sure to ask your doctor or pharmacist if you should use additional reliable birth control methods while using this antibiotic.

OVERDOSE: If overdose is suspected, contact a poison control center or emergency room immediately. US residents can call the US National

ExitCare® Patient Information - HAZEL JOHNSON - MR# M200166

Poison Hotline at 1-800-222-1222. Canada residents can call a provincial poison control center.

NOTES: Do not share this medication with others. This medication has been prescribed for your current condition only. Do not use it later for another infection unless your doctor directs you to do so. A different medication may be necessary in that case.

MISSED DOSE: If you miss a dose, take it as soon as you remember. If it is near the time of the next dose, skip the missed dose and resume your usual dosing schedule. Do not double the dose to catch up.

STORAGE: Store at room temperature away from light and moisture. Do not store in the bathroom. Keep all medications away from children and pets. Do not flush medications down the toilet or pour them into a drain unless instructed to do so. Properly discard this product when it is expired or no longer needed. Consult your pharmacist or local waste disposal company.

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EXITCARE® PATIENT INFORMATION DISCHARGE INSTRUCTION SUMMARY

Patient/Visit Information:

Patient Name: HAZEL JOHNSON	Discharge Date/Time: 1/28/2012 10:10:04 AM
Attending Caregiver: Xavier Salinas, MD	Diag:

Discharge Instruction Sheets Provided:

Acute Bronchitis-Brief
Cough-Brief
Dyspnea-Brief

Patient Instructions:

Additional Notes for Acute Bronchitis-Brief
TAKE MEDICATION AS DIRECTED
FOLLOW UP WITH YOUR PRIMARY CARE PHYSICIAN FOR RE-CHECK

Followup Appointments/Instructions:

Primary Follow-up Information

02 - 03 days unless better: - () -