Thank you for choosing the Memorial Hospital for your care.

Your discharge diagnoses were:

- 428.3 Diastolic heart failure
- 403 Hypertension, uncontrolled
- 782.3 Edema
- 455.8 Hemorrhoids, bleeding
- 715.1 Osteoarthritis, shoulder
- 427.32 Atrial flutter
- 780.97 Altered mental status
- 586 Renal failure, unspecified
- 789.0 Abdominal pain NOS
- 272.4 Hyperlipidemia
- 280 Iron deficiency anemia

Your new medications are:

- METOPROLOL TARTRATE 25 MG PO TWICE DAILY
- METOPROLOL TARTRAGE 25 MG ½ TABLET PO ONCE DAILY
- FERROUS SULFATE 325 MG PO TWICE DAILY
- LISINOPRIL 10 MG PO ONCE DAILY
SEVELAMER 800 MG PO THREE TIMES DAILY
HYDROCHLOROTHIAZIDE 12.5 MG PO ONCE DAILY
FUROSEMIDE 40 MG PO TWICE DAILY
KAY CIEL 10 MEQ PO TWICE DAILY
KAY CIEL 10 MEQ PO TWICE DAILY PRN
HYDROCODONE 5 MG/ACETAMINOPHEN 500 MG 2 TABS EVERY 4 HOURS
WARFARIN SODIUM 5 MG ONCE DAILY
PANTOPRAZOLE 40 MG PO ONCE DAILY
FUROSEMIDE 40 MG ½ PO TWICE DAILY PRN
HYDRAZINE 10 MG PO THREE TIMES DAILY PRN FOR SBP>180 MM HG
CRESTOR 40 MG PO AT BEDTIME
VENLAFAXINE 37.5 MG ½ TABLET PO QDAILY

New prescriptions: X PROVIDED _NOT PROVIDED

Your care was provided by:
GARCIA, JUANITA MD
SHARP, KEVIN DO
O’DONNELL, JOHN MD
ADAMS, TONYA MD

POST-DISCHARGE INSTRUCTIONS:

1. Low-salt, low-protein diet.
2. Check your weight every day.
3. Take all your medications as prescribed
4. Call if you experience any dyspnea, cough, edema or anginal symptoms.
5. Please keep your appointment with the geriatrics clinic on 2/13/12.
6. Call your cardiologist for an appointment.
7. You will need to have labs drawn within 2 weeks of discharge.

MEMORIAL HOSPITAL IS COMMITTED TO PROVIDING YOU WITH THE BEST POSSIBLE CARE. YOUR DISCHARGE INSTRUCTIONS WERE REVIEWED WITH YOU ON 1-18-12. CALL YOUR DOCTOR OR RETURN TO THE EMERGENCY DEPARTMENT IMMEDIATELY IF YOU EXPERIENCE ANY FEVERS, CHILLS, SWEATS, FATIGUE, CHEST PAIN, SHORTNESS OF BREATH, PALPITATIONS, ABDOMINAL PAIN, NAUSEA, VOMITING, DIARRHEA, DIZZINESS, LIGHTHEADEDNESS, OR BLEEDING.

***IT IS ULTimately YOUR RESPONSIBILITY TO FOLLOW THE DISCHARGE INSTRUCTIONS LISTED ON THIS FORM. ***