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whitlowmemorial.example

Whitlow Memorial Hospital

Discharge Summary

Patient: Lorraine M. Pruitt **Date of birth:** 02/11/1945 **MRN:** WM-0733916

Admitted: 02/02/2023 **Discharged:** 02/07/2023 **Discharged to:** Linden Court Rehabilitation & Nursing

Attending: Garrett Voss, MD, Orthopedic Surgery **Primary care:** Samuel Tolbert, MD

Allergies: penicillin, sulfa drugs.

Diagnosis

Displaced fracture of the left femoral neck after a fall at home.

Procedure

Left hip hemiarthroplasty (cemented bipolar), 02/03/2023, G. Voss, MD. Spinal anesthesia. Estimated blood loss 250 mL. No complications.

Hospital course

77-year-old woman with atrial fibrillation, type 2 diabetes and hypertension, found on her kitchen floor after a fall during the night. Apixaban was held before surgery and restarted on 02/05/2023. Brief confusion on the first night after surgery, resolved by day 3. Walked 40 feet with a walker and one assist on the day of discharge. Hemoglobin 9.4 at discharge.

Medications at discharge

Medication	Dose	How often
Apixaban (Eliquis)	5 mg	twice daily
Metoprolol succinate ER	50 mg	every morning
Losartan	50 mg	every morning
Amlodipine	5 mg	every morning
Metformin	1000 mg	twice daily with meals
Glipizide	5 mg	twice daily before meals
Levothyroxine	75 mcg	every morning

Medication	Dose	How often
Atorvastatin	40 mg	at bedtime
Gabapentin	300 mg	at bedtime
Omeprazole	20 mg	every morning
Alendronate	70 mg	once a week
Latanoprost 0.005%	1 drop each eye	at bedtime
Acetaminophen	650 mg	every 6 hours
Tramadol (new)	50 mg	every 6 hours as needed for pain, 14 days

Instructions

- Weight bearing as tolerated with a walker. Posterior hip precautions for 6 weeks: do not bend the hip past 90 degrees, do not cross the legs.
- Staples out 14 days after surgery.
- Follow up with Dr. Voss, Pine Knob Orthopaedics, on 02/21/2023.
- Bone health should be reviewed by primary care after a fracture on alendronate.

Dictated by G. Voss, MD, 02/07/2023.