1740 Hensley Fork Drive NW
Cleveland, TN 37311
(423) 555-0138
whitlowmemorial.example

Whitlow Memorial Hospital

Discharge Packet

Face sheet

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

Address: 2217 Larkmoor Lane NW, Cleveland, TN 37312 **Home phone:** (423) 555-0162

Admitted: 01/14/2025, 7:52 AM, through the Emergency Department **Room:** 2 West, 226

Discharged: 01/18/2025, 11:40 AM, to home, with family

Attending: Priya Nambiar, MD, Hospital Medicine **Cardiology:** Nadia Rahimi, MD

Primary care: Samuel Tolbert, MD

Insurance	Plan	Member number
Primary	Medicare Part A and Part B	4KT7-WL2-MS63
Secondary	Evermont Health Assurance, Medicare Supplement Plan G	EVG80447162

Allergies: penicillins (hives); sulfonamide antibiotics (rash, lip swelling).

Intolerances: codeine (vomiting); lisinopril (cough). Adhesive tape tears her skin; use paper tape.

Code status this admission: full code. Advance care plan on file, dated 03/14/2023.

Health care agent: Walter E. Pruitt Jr., son, (423) 555-0148. Alternate: Russell D. Pruitt, son, (423) 555-0124.

Preferred pharmacy: Sorrelwood Pharmacy, 3410 Keelwood Street NW, Cleveland, (423) 555-0130

In this packet

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Discharge summary

Diagnoses

1. Acute on chronic heart failure with preserved ejection fraction
2. Atrial fibrillation, rate controlled, on apixaban
3. Type 2 diabetes on basal insulin
4. Chronic kidney disease stage 3b
5. Hypertension
6. Hypothyroidism, osteoporosis, glaucoma

Hospital course

79-year-old woman admitted with three days of shortness of breath, inability to lie flat and leg swelling. Weight on admission 159 lb. BNP 1,240. Chest x-ray showed pulmonary congestion. Echocardiogram on 01/15: ejection fraction 55 to 60%, grade 2 diastolic dysfunction, no significant valve disease. Treated with intravenous furosemide with a net loss of 11 lb over four days. Amlodipine was stopped because it was adding to the leg swelling; blood pressure stayed controlled without it. Blood sugars ran 140 to 210 on her home insulin dose. No chest pain; troponin negative twice. On the day of discharge she walked 150 feet with her walker without shortness of breath. Oxygen saturation 96% on room air.

Condition at discharge

Stable. Lungs clear. Trace ankle swelling. Alert, and at her usual level of thinking according to her son.

Measured on 01/18/2025	Result
Weight	148 lb
Blood pressure	124/68
Heart rate	72, irregular
Creatinine	1.6 mg/dL
Potassium	3.9 mmol/L
Sodium	137 mmol/L
BNP	410 pg/mL
Hemoglobin A1c (01/15/2025)	8.6 %

P. Nambiar, MD, Hospital Medicine. Dictated 01/18/2025.

Your medication list

This list replaces every older list.

Medication	Dose	When	What to do
Furosemide (Lasix)	40 mg	every morning	**CHANGED** from 20 mg
Potassium chloride ER	10 mEq	once a day for 7 days	**NEW**, then stop
Amlodipine	5 mg		**STOP**
Apixaban (Eliquis)	5 mg	twice a day	continue
Metoprolol succinate ER	50 mg	every morning	continue
Losartan	50 mg	every morning	continue
Insulin glargine (Lantus)	14 units	at bedtime	continue
Metformin	500 mg	twice a day with meals	continue
Levothyroxine	88 mcg	every morning, empty stomach	continue
Atorvastatin	40 mg	at bedtime	continue
Sertraline	50 mg	every morning	continue
Famotidine	20 mg	at bedtime	continue
Gabapentin	300 mg	at bedtime	continue
Latanoprost eye drops	1 drop each eye	at bedtime	continue
Denosumab (Prolia)	60 mg	every 6 months	next due March 2025
Vitamin D3	2000 IU	once a day	continue
Acetaminophen	500 mg	if needed, 3 a day at most	continue

Do not take ibuprofen, naproxen or aspirin for pain. Morning doses were given in the hospital on 01/18/2025. Reviewed with Walter Pruitt Jr., son and health care agent, by T. Okafor, RN, and J. Whitson, PharmD.

About the medicines that changed

Furosemide (Lasix), a water pill

Furosemide makes the kidneys pass more salt and water. It is the medicine that keeps fluid out of the lungs and legs. Give it in the morning so that trips to the bathroom are over before bedtime. Stand up slowly; it can cause dizziness, especially in the first week at a new dose. Call the cardiology office for dizziness that does not pass, for muscle cramps, or if she is passing very little urine.

Furosemide can lower potassium and can strain the kidneys if she becomes too dry. That is why blood is checked on 01/24/2025 and again at the cardiology visit.

Potassium chloride, for 7 days only

Take with food and a full glass of water. Do not crush. Stop after the seventh day unless the office tells you otherwise after the blood test.

Amlodipine, stopped

Amlodipine is a blood pressure medicine that often causes ankle swelling. It has been stopped. Remove it from the pill organizer and from the cabinet. Her blood pressure is being controlled by losartan and metoprolol. Check her blood pressure at home three times a week and bring the numbers to her visits.

Apixaban (Eliquis), not changed

Apixaban lowers the risk of stroke from atrial fibrillation. Do not skip a dose and do not double a dose. Call for bleeding that does not stop in 10 minutes, black stools, or a fall with a blow to the head.

Insulin glargine (Lantus), not changed

Her bedtime dose stays the same. Appetite is often poor for a few days after a hospital stay. If she eats less than half of her meals for a day, check her blood sugar before the bedtime dose and call the endocrinology office for any reading under 100 at bedtime or under 80 at any time.

Living with heart failure: your daily plan

Heart failure does not mean the heart has stopped. In Mrs. Pruitt's case the heart squeezes normally but is stiff and does not fill well, so fluid backs up into the lungs and the legs. The water pill removes that fluid. Weight is the earliest sign that fluid is coming back, usually days before the breathing gets worse.

Every morning

1. Weigh after using the bathroom and before breakfast, in the same clothes, on the same scale, on a hard floor.
2. Write the weight on the log on page 7.
3. Look at both ankles and press a thumb over the shin bone for five seconds. A dent that stays is swelling.
4. Ask whether she is more short of breath than yesterday, and whether she needed more pillows to sleep.

Her dry weight at discharge is 148 lb. This is the weight to compare against. The cardiology office may reset it from time to time.

Green zone: no action needed

Weight within 2 lb of dry weight. No new swelling. Breathing as usual. Keep giving her medicines as listed on page 3.

Yellow zone: act today

- Weight up 3 lb or more from the day before, or 5 lb or more in one week
- New or increased swelling of the ankles, legs or belly
- More short of breath with usual activity, a new cough at night, or needing an extra pillow

In the yellow zone give one extra furosemide 20 mg tablet that day (a supply of 20 mg tablets is included with her discharge prescriptions for this purpose) and call Sourwood Heart & Vascular the same day, (423) 555-0176. Do not give the extra tablet more than two days in a row without speaking to the office.

Red zone: call 911

- Struggling to breathe at rest, or unable to speak a full sentence
- Chest pain or pressure that lasts more than a few minutes
- Fainting, or new confusion with a fast heartbeat
- Coughing up pink, frothy mucus

Eating less salt and limiting fluids

Sodium: no more than 2,000 mg a day. **Fluids:** no more than 1.5 liters a day, which is about 6 cups of 8 ounces.

Salt makes the body hold water. Most of the salt people eat is already in the food when they buy it, not added from the shaker. Read the Nutrition Facts label: look at the milligrams of sodium per serving, and then at how small the serving is.

Usually high in sodium	A better choice
Canned soup, bouillon, broth	Homemade soup with no-salt-added tomatoes or stock
Canned vegetables	Frozen vegetables, or cans marked "no salt added"
Saltines, chips, pretzels	Unsalted-top crackers, unsalted nuts
Ham, bacon, sausage, hot dogs, lunch meat	Fresh chicken, fish, pork or beef cooked at home
Pickles, olives, sauerkraut	Fresh cucumber, vinegar slaw
Tomato and vegetable juice	Low-sodium juice, or fruit
Frozen dinners, boxed rice and noodle mixes	Plain rice or noodles, seasoned at home
Soy sauce, ketchup, bottled dressings	Lemon, vinegar, herbs, salt-free seasoning blends

Do not use a salt substitute made with potassium unless her doctor says so.

Counting fluids

Everything that is liquid at room temperature counts: water, coffee, tea, milk, juice, soup, ice cream, gelatin and ice. Six cups a day is the limit. Many families set out the day's cups or mark a pitcher in the morning. If her mouth is dry, try hard candy, frozen grapes or rinsing without swallowing.

Do not cut fluids below the limit to make the weight look better. Too little fluid is hard on the kidneys.

A dietitian visit can be arranged by her primary care office and is covered by Medicare for patients with diabetes or kidney disease.

Daily weight log

Weigh every morning. Bring this page to every visit. Ask the office for more copies.

Date	Weight, lb	Swelling (none, some, a lot)	Breathing (same, worse)	Extra tablet given?
1/19	148	none	same	no
1/20	148	none	same	no
1/21	149	none	same	no
1/22	148			

Weight on the hospital scale at discharge, 01/18/2025: 148 lb. Home scales differ. Weigh at home on the first morning and use that number as her starting weight if it is different from ours.

If you call about a weight gain, have ready: today's weight, yesterday's weight, the weight one week ago, and whether the extra tablet has been given.

Follow-up appointments and results still pending

With	When	Where	For
Samuel Tolbert, MD	01/24/2025, 2:15 PM	Tolbert & Greer Internal Medicine, 1180 Paulmont Parkway NW	Hospital follow-up, with a basic metabolic panel the same day
Nadia Rahimi, MD	02/04/2025, 10:20 AM	Sourwood Heart & Vascular, 1740 Hensley Fork Drive NW	Heart failure visit, with a repeat echocardiogram
Mei-Ling Tsai, MD	March 2025, already scheduled	Longbranch Nephrology	Kidney function

If she cannot keep an appointment, call the office to move it. Do not skip the blood test on 01/24.

Results still pending

Thyroid stimulating hormone, drawn 01/17/2025. The result will go to Dr. Tolbert.

Activity

Walk every day, a little farther each day, with the walker. Rest when short of breath. No lifting over 10 pounds for two weeks. She may shower with help. She should not drive until Dr. Tolbert has seen her.

Help at home

Home health nursing was offered and declined. The family has a private home care aide three mornings a week and a medical alert pendant. A referral can be made later through primary care if her needs change.

When to come back to the Emergency Department

Shortness of breath at rest, chest pain, fainting, a fall with injury, black or bloody stools, or a blood sugar under 60 that does not come up with juice.

Your rights, your records and your bill

Your records

The discharge summary and test results from this stay are sent to your primary care doctor and to the specialists named on the face sheet. You, or a person you have authorized, can see them in the MyWhitlow patient portal about three days after discharge. A proxy who holds a health care power of attorney on file with the hospital may sign in with his or her own account. Paper copies are available from Health Information Management, (423) 555-0138, option 4. There is no charge for a copy sent to another doctor.

An important message from Medicare

As a hospital inpatient covered by Medicare, you have the right to receive the services you need, to be involved in decisions about your stay, and to appeal if you think you are being discharged too soon. This notice was given on 01/14/2025 and again on 01/17/2025. No appeal was filed.

Your bill

The hospital bills Medicare first and then any supplemental plan on file. You will receive a statement only after both have processed the claim, usually six to ten weeks after discharge. Doctors who saw you in the hospital may bill separately. Questions about a bill go to Patient Financial Services, (423) 555-0170, weekdays 8 to 4:30.

Advance directives

The hospital has on file an Appointment of Health Care Agent and Advance Care Plan dated 03/14/2023. If you change it, bring the new form to any registration desk.

Concerns

If you have a concern about your care, ask for the nurse manager of 2 West or call the Patient Advocate, (423) 555-0138, option 7. You may also contact the Tennessee Department of Health.

Acknowledgment

I have received this discharge packet of 10 pages. The nurse went over the medication list on page 3 and the heart failure plan on page 5 with me, and I had the chance to ask questions.

- The patient was weighed on the unit scale this morning and the use of the weight log was shown.
- Prescriptions were sent electronically to Sorrelwood Pharmacy: furosemide 40 mg, 30 tablets; furosemide 20 mg, 10 tablets; potassium chloride ER 10 mEq, 7 tablets.
- Belongings returned: glasses, upper denture and cup, hearing aids (2) with charger, robe, walker, cell phone.
- Intravenous line removed, site clean and dry. Identification band removed.

Signature of patient or representative	*Walter E Pruitt Jr*
Relationship	son, health care agent
Date and time	01/18/2025, 11:25 AM
Nurse	*T. Okafor RN*

Left the unit by wheelchair at 11:40 AM with her son, by private vehicle.