

DATE OF ADMISSION: 3-27-85

DATE OF DISCHARGE: 3-29-85

ADMITTING DIAGNOSIS:

- 1) Acute respiratory failure.
- 2) Bronchial asthma.

DISCHARGE DIAGNOSIS:

- 1) Acute respiratory failure.
- 2) Bronchial asthma.

HOSPITAL COURSE: The patient was admitted because of increasing shortness of breath over a two week period. He has a long history of bronchial asthma. The patient was on vacation in Santa Barbara and on the way back he had increasing difficulty breathing and his wife had to pull off the freeway and come to the hospital because of this. Arterial blood gases on admission on room air showed a PCO₂ of 82, a PO₂ of 59, and a pH of 6.99. He became unresponsive and had to be intubated in the emergency room. He was then placed in the ICU. He had previously been taking a steroid inhaler, Theo-Dur, another type of bronchodilator by inhaler. A Theophylline level was 6.2. He was given I.V. steroids in the form of Decadron 20mg stat and q6h and he was started on a Theophylline drip. His blood gases rapidly improved and he became more alert. The day after admission he was put on IM then a T tube, then extubated, and blood gases on 40% mask on the late afternoon of 3-28, showed a pH of 7.43, a PCO₂ of 20, and a PO₂ of 97. He was transferred to the floor. On discharge his wheezing is minimal, he has some cough productive of some yellowish sputum. He is being discharged on Prednisone 60mg in divided doses daily to be tapered over a ten day period, Theo-Dur 450mg q12h, Benlyn and Beclomethasone inhaler, and Vibra tabs, 100mg daily. He will be followed up at the Palo Alto Clinic.

ROGER STEELE, M.D.

ll

D&T 3-31-85

cc: Rex Hayworth
37 C Escondido Village
Stanford, CA 93405

HAYWORTH
REX

SIERRA VISTA HOSPITAL

DISCHARGE SUMMARY
PAGE 1

3133826
HEYWORTH, REX
44Y STEELE, R M.D.
03 26 40 M

SIERRA VISTA HOSPITAL



DISCHARGE INSTRUCTION

Room # 211

COURTESY DISCHARGE YES NO

CARE-GIVER AT HOME WILL BE _____ DISCHARGE DATE 2/29

NURSE SIGNATURE Koldham RN

1. POST-DISCHARGE APPOINTMENT
2. COMMUNITY RESOURCES FOR HELP
3. EQUIPMENT NEEDS
bed rails, trapeze, commode, walker, cane, bed table, bed pads, egg crate mattress, wheelchair, hospital gowns, Hoyer lift
4. ACTIVITY
assistive device, walker cane, safety features in home
5. BATHING
positioning, decubiti bath, safety rails
6. BOWELS
enema, diet colostomy, supplies
7. BREATHING PROBLEMS
cough, sputum, positioning, percussion
8. CONFUSION
safety measures
9. MEDICATION
dose, frequency precautions
10. NAUSEA AND VOMITING
11. NUTRITION
special diet, high nutrient feedings
12. OXYGEN
13. PAIN MANAGEMENT
pain medication
14. SLEEP
medication, other alternatives
15. SUCTION
16. URINE
incontinence-hygiene catheter: Foley, external catheter
17. WOUNDS
dressing changes, irrigation
18. OTHER

Theodur 300mg 1/2 tablets every 12 hours
Prednisone 20mg as directed - Dr. Steele
Ventolin Inhaler two sprays every six hours
as needed
Vibratabs one daily
Builometrasone Inhaler two sprays
four times per day
(Needs a copy of his history + physical)
"Take it easy for a couple of days"
may go back to school.
Regular diet

I have received a copy of these instructions and understand them all.