

PATIENT DISCHARGE INSTRUCTIONS

Memorial General Hospital – Department of Internal Medicine

Patient: [Your Name] | MRN: 00482917 | Discharge Date: February 18, 2026

Attending Physician: Dr. A. Sharma, MD, FACP

DIAGNOSIS

Primary: Community-Acquired Pneumonia (CAP), Right Lower Lobe

Secondary: Mild Hypoxemia; Type 2 Diabetes Mellitus (controlled)

MEDICATIONS – PLEASE TAKE AS DIRECTED

1. Amoxicillin-Clavulanate (Augmentin) 875mg/125mg
 - Take ONE tablet by mouth TWICE daily (every 12 hours) WITH food.
 - Duration: 7 days. Complete the full course even if you feel better.
 - Do NOT skip doses. If you miss a dose, take it as soon as you remember unless it is almost time for the next dose.
 2. Azithromycin (Z-Pack) 250mg
 - Take TWO tablets on Day 1, then ONE tablet daily for 4 more days.
 - Take on an empty stomach or with food if stomach upset occurs.
 3. Prednisone 40mg (Corticosteroid – anti-inflammatory)
 - Take ONE tablet by mouth ONCE daily in the morning WITH food.
 - Duration: 5 days. Do NOT stop suddenly without doctor approval.
 - Side effects may include: increased blood sugar, mood changes, insomnia.
 - IMPORTANT: Monitor your blood glucose more frequently while on this medication.
 4. Albuterol Inhaler (Rescue Inhaler – Bronchodilator)
 - Use 2 puffs every 4–6 hours AS NEEDED for shortness of breath or wheezing.
 - Shake well before each use. Wait 1 minute between puffs.
 - If you need it more than 4 times per day, call your doctor immediately.
 5. Metformin 500mg (continue your existing diabetes medication)
 - Take ONE tablet TWICE daily with meals as previously prescribed.
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ACTIVITY & DIET RESTRICTIONS

- REST: Limit strenuous physical activity for the next 2 weeks. Fatigue is normal during recovery from pneumonia. Gradually increase activity as tolerated.
 - DIET: Maintain adequate hydration – drink at least 8 glasses of water per day. Follow your diabetic diet plan. Avoid alcohol while taking antibiotics.
 - SMOKING: Do NOT smoke. Smoking significantly impairs lung healing and increases the risk of complications and rehospitalization.
 - DRIVING: Do not drive if you feel dizzy or short of breath.
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FOLLOW-UP APPOINTMENTS

1. Primary Care Physician: Within 5–7 days of discharge.
Call to schedule: (555) 234-7890
Bring this discharge summary and your medication list.
2. Pulmonology (Lung Specialist): In 4–6 weeks for repeat chest X-ray to confirm resolution of pneumonia. A referral has been placed; you will receive a call

within 3 business days to schedule.

WHEN TO SEEK EMERGENCY CARE – GO TO THE ER OR CALL 911 IF:

- Difficulty breathing or shortness of breath that is getting worse
- Oxygen saturation (SpO2) drops below 92% on home pulse oximeter
- Chest pain, especially with deep breathing
- Coughing up blood (hemoptysis)
- High fever above 103°F (39.4°C) that does not respond to Tylenol
- Confusion, severe dizziness, or loss of consciousness
- Blood sugar above 300 mg/dL or below 70 mg/dL with symptoms

CALL YOUR DOCTOR (non-emergency) IF:

- Fever above 101°F (38.3°C) persists beyond 48 hours on antibiotics
- Worsening cough or increased sputum production
- New rash or allergic reaction to medications (hives, itching)
- Any questions or concerns about your medications or recovery

Doctor's Office: (555) 234-7890 | After-hours nurse line: (555) 234-9999
Hospital Patient Portal: myhealth.memorialgeneral.org

By signing below, you acknowledge that you have received and understood these discharge instructions. If you do not understand any part of these instructions, please ask a nurse or doctor before leaving the hospital.

Patient Signature: _____ Date: _____
Nurse Signature: _____ Date: _____