**Discharge Summary**

**Patient ID:** PID003 **Admission Date:** 05-Mar-2025 **Discharge Date:** 12-Mar-2025 **Admitting Physician:** Dr. S. Chen

**REASON FOR ADMISSION:** Acute Pneumonia.

**HISTORY OF PRESENT ILLNESS:** The patient is a 28-year-old female with no significant past medical history who presented to the emergency department with a 3-day history of high-grade fever (102.5°F), a productive cough with yellowish sputum, and progressive shortness of breath. She also reported pleuritic chest pain on the right side.

**HOSPITAL COURSE:** Upon admission, the patient was in moderate respiratory distress. Physical examination revealed decreased breath sounds and crackles over the right lung base. A chest X-ray was performed, which confirmed the diagnosis of a dense consolidation in the right lower lobe, consistent with community-acquired pneumonia.

The patient was started on intravenous antibiotics (Ceftriaxone and Azithromycin) and supportive care, including oxygen therapy via nasal cannula and intravenous fluids for hydration. Blood cultures were drawn, which later showed no growth.

Over the next 48 hours, the patient's fever began to resolve, and her oxygen requirements decreased. By hospital day three, she was transitioned to oral antibiotics (Amoxicillin-clavulanate). Her cough and chest pain significantly improved. She worked with respiratory therapy for breathing exercises and was ambulating in the hallways without difficulty by the end of her stay.

The patient remained afebrile for the final 48 hours of her admission and was deemed clinically stable for discharge.

**DISCHARGE INSTRUCTIONS:**

1. **Medication:** Complete the full 7-day course of oral Amoxicillin-clavulanate.
2. **Activity:** Rest at home for the next week. Avoid strenuous activity.
3. **Diet:** Maintain good fluid intake.
4. **Follow-up:** Schedule a follow-up appointment with her primary care physician in 1-2 weeks.
5. **Warning Signs:** Return to the hospital if she experiences worsening shortness of breath, high fever, or chest pain.

**DISCHARGE CONDITION:** Stable.