

HOSPITAL DISCHARGE SUMMARY

Canvas Medical Center | HL7 FHIR US Core & C-CDA Compliant

PATIENT

Name: **Kiki Appgoal**
DOB: **1955-11-24 (69 y/o)**
MRN: **815799078**
Gender: **Female**
Address: **4444 Anderson St., Saginaw, MI 48603**

ADMISSION

Admit Date: **2026-01-19 20:13**
Discharge Date: **2026-01-23 20:13**
LOS: **4 days**
Discharge Disposition: **Home**
Account #: **ADM-2026-00892**

CARE TEAM

Attending: **Dr. Sarah Johnson, MD (NPI: 1234567890)** PCP: **Dr. Jane Smith, MD**
Hospitalist: **Dr. Michael Lee, MD** Consulting: **Dr. Robert Chen, MD (Cardiology)**

PRINCIPAL DIAGNOSIS

| Diagnosis | ICD-10-CM | SNOMED CT | Type |
|------------------------------|--------------|------------------|-----------|
| Community-acquired pneumonia | J18.9 | 385093006 | Principal |

SECONDARY DIAGNOSES

| Diagnosis | ICD-10-CM | SNOMED CT | POA |
|--|---------------|------------------|-----|
| Type 2 diabetes mellitus without complications | E11.9 | 44054006 | Y |
| Essential hypertension | I10 | 59621000 | Y |
| Hyperlipidemia, unspecified | E78.5 | 55822004 | Y |
| Acute hypoxemic respiratory failure | J96.01 | 389087006 | N |

PROCEDURES PERFORMED

| Procedure | CPT | SNOMED CT | Date |
|---------------------------|--------------|------------------|------------|
| Chest X-ray, 2 views | 71046 | 399208008 | 2026-01-19 |
| CT chest without contrast | 71250 | 169069000 | 2026-01-20 |
| Blood culture | 87040 | 30088009 | 2026-01-19 |

BRIEF HOSPITAL COURSE

69 y/o female with DM2, HTN, hyperlipidemia presenting with 3-day history of productive cough, fever, SOB. CXR showed RLL consolidation. Admitted for IV antibiotics (ceftriaxone + azithromycin) and supportive care. Initial hypoxia (2L NC) resolved by day 3. CT chest confirmed RLL pneumonia, no abscess/effusion. Blood cultures negative. Transitioned to oral amoxicillin-clavulanate, observed 24h, discharged stable. Diabetes well-controlled on home regimen.

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DISCHARGE MEDICATIONS

| Medication | RxNorm | Dose/Route/Freq | Status |
|-----------------------------------|--------|-----------------------|----------|
| Amoxicillin-clavulanate 875-125mg | 562251 | 1 tab PO BID x 5 days | NEW |
| Metformin 500mg | 861004 | 1 tab PO BID | CONTINUE |
| Lisinopril 10mg | 314076 | 1 tab PO daily | CONTINUE |
| Atorvastatin 20mg | 617312 | 1 tab PO at bedtime | CONTINUE |

CONDITION AT DISCHARGE

Condition: Stable, improved
Vital Signs: T 98.2°F, HR 76, BP 128/78, RR 16, SpO2 97% on room air
Activity: Ambulatory, resume normal activities as tolerated
Diet: Regular diabetic diet

FOLLOW-UP INSTRUCTIONS

| Provider | Specialty | Timeframe | Reason |
|-----------------|--------------|-----------|---------------------------------|
| Dr. Jane Smith | Primary Care | 5-7 days | Pneumonia follow-up, repeat CXR |
| Dr. Robert Chen | Cardiology | 2-4 weeks | Routine HTN/lipid management |

PATIENT INSTRUCTIONS

- Complete full antibiotic course (5 days) • Stay hydrated • Monitor blood glucose • Continue diabetic diet
- **Return to ED if:** fever >101°F, worsening SOB, chest pain, hemoptysis, confusion

Standards: HL7 FHIR R4 US Core (Encounter, Condition, Procedure, MedicationRequest), C-CDA 2.1 Discharge Summary template, ICD-10-CM, SNOMED CT, CPT®, RxNorm. POA = Present on Admission indicator.
FHIR IDs: Patient/3074158b3ac242c3a94fa527ffe3e0a4 | Encounter/ENC-20260123 | DocumentReference/DR-DS-20260123
Facility: Canvas Medical Center | NPI: 1234567893 | 123 Medical Center Dr, Healthcare City, CA 90210 | (555) 123-4567

Electronically signed: Dr. Sarah Johnson, MD | Attending Physician | 2026-01-23 20:13 EST

This discharge summary has been reviewed and approved. Patient/family received copy and verbalized understanding.