



SETMA I - 2929 Calder, Suite 100

SETMA II - 3570 College, Suite 200
Nederland/Port Arthur - 2400 Highway 365, Suite 201
Orange - 601 Strickland Drive, Suite 140
(409) 833-9797
www.setma.com

Mark Wilson Clinic - 2010 Dowlen

Post Hospital Plan of Care and Treatment Plan

Patient _____
Date of Birth ____/____/____
Age XX years
Ethnicity Caucasian
Sex Male

Encounter Date ____/____/____

Reason for Hospitalization

You have been hospitalized for abdominal pain.

Reason for Discharge

You have been discharged from the hospital because you have recovered from your acute condition.

You have been discharged from the hospital because you have reached the maximum benefit in the hospital setting.

You have been discharged from the hospital because your condition is now stable.

Discharge Diagnoses

Your diagnoses at the time of your discharge are as follows:

Pancreatitis

Gastric ulcer

History of testicular cancer

Hypertension

Active Medications

The following are medications which you should be taking. Please notify us if you are unable to obtain your medications for any reason. Do not just stop taking your medications without calling our office immediately.

<u>Start Date</u>	<u>Brand</u>	<u>Dose</u>	<u>Sig Desc</u>
05/10/2013	Protonix	40 Mg	take 1 tablet by oral route 2 times every day
05/10/2013	Norco	5 Mg-325 Mg	take 1 - 2 Tablet by oral route 4 times every day as needed for pain

<u>Start Date</u>	<u>Brand</u>	<u>Dose</u>	<u>Sig Desc</u>
05/10/2013	Miralax	17 Gram	take 1 packet by oral route every day mixed with 8 oz. water, juice, soda, coffee or tea
05/10/2013	Hydralazine Hcl	25 Mg	take 1 tablet by oral route 2 times every day with food
05/10/2013	Sucralfate	1 Gram/10 Ml	take 10 milliliter by oral route 4 times every day on an empty stomach 1 hour before meals and at bedtime

Follow-Up Appointments

You have been scheduled to see a SETMA provider (Dr. Halbert) in the office on 05/16/2013 at 14:00. Please be sure to keep this appointment. If you cannot keep this appointment for any reason, please call our office to reschedule or make other arrangements to make sure you are seen by a doctor.

Additional follow-up appointments have been made for you. The dates and times of those appointments are listed below. The address and phone number for each of the appointments is also listed. It is important that you keep each of these appointments. If you cannot keep these appointments for any reason, please call and reschedule them.

<u>Doctor</u>	<u>Date</u>	<u>Time</u>	<u>Address</u>	<u>City</u>	<u>Phone</u>
Raja Chennupati	5/15/2013	9:30 AM	950 N 14th St	Beaumont	4098335858

Pending Results

There are no test/procedure results from your hospital stay which you have not already received.

Care Transition Audit Results

The following are items of the care transition audit which are in compliance for your discharge from the hospital.

- The reason for your hospitalization has been documented.
- Your diagnoses at the time of your discharge have been documented.
- All of the medications you are taking have been updated and reconciled.
- Any allergies which you may have have been documented.
- Your cognitive status has been documented.
- All of your tests and any pending results have been documented.
- All of your major procedures have been documented.
- A follow-up care plan has been completed for you.
- Your progress toward goals and treatment has been documented.
- You have completed an advanced care plan or specified a reason for choosing to not completing an advanced care plan.
- The reason for your discharge from the hospital has been documented.
- Your physical status at the time of your discharge has been documented.
- Your psychosocial status at the time of your discharge has been documented.
- You have been given a list of referrals to other healthcare providers which have been coordinated on your behalf.
- Your current medication list have been given to and discussed with you and/or your family or designated caregiver.
- Your discharge orders has been discussed with you and/or your family or designated caregiver.
- Your follow-up instructions have been discussed with you and/or your family or designated caregiver.
- Your discharge materials have been printed and given to you and/or your family or designated caregiver.