

ED-DC-INSTRUCTIONS-for-Sharing

<CPRS_TEMPLATE>
<TEMPLATE_NAME="ED DC INSTRUCTIONS for Sharing">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DIALOG>1</DIALOG>
<INDENT_ITEMS>1</INDENT_ITEMS>
<BOILERPLATE_TEXT>
<p>NOTE: THE PATIENT INSTRUCTIONS IN THIS TEMPLATE ARE PROTECTED UNDER A
COPYRIGHT </p>
<p>AND MAY NOT BE USED WITHOUT THE LOCAL SITE SUBSCRIBING TO THE
KRAMES-STAYWELL</p>
<p>KRAMES ON DEMAND/EXIT-WRITER INTERNET OR ENTERPRISE VERSIONS. PLEASE
CONTACT </p>
<p>KRAMES STAYWELL DIRECTLY FOR INFORMATION ON PURCHASING/SUBSCRIBING TO THEIR
</p>
<p>SERVICES. <http://staywell.com/patient-education-2/krames-on-demand/></p>
<p></p>
<p>SAMPLES OF THE KRAMES HEALTH CARE SHEET CAN BE VIEWED AT THE DUKE
UNIVERSITY </p>
<p>HOSPICE SUPPORT WEBSITE: <https://dhch.kramesonline.com/></p>
<p></p>
<p>SITES MAY SUBSTITUTE EDUCATIONAL MATERIALS FROM OTHER SOURCES IN PLACE OF
THE </p>
<p>COPYRIGHTED MATERIAL INCLUDED IN THIS DEMO TEMPLATE. </p>
<p></p>

<p>_____</p>
<p>
<p></p>
<p>Site Name Patient: |PATIENT NAME|</p>
<p>Site Address DOB: |PATIENT DATE OF BIRTH|</p>
<p>Site City/State/Zip code HR#: |PATIENT HRCN|</p>
<p>Visit: |VISIT DATE|</p>

<p>_____</p>
<p>
<p></p>
<p>EMERGENCY DEPARTMENT</p>
<p></p>
<p>PATIENT DISCHARGE INSTRUCTIONS</p>

<p>_____</p>
<p>
<p></p>
<p>GENERAL INSTRUCTIONS: </p>
<p></p>
<p>(1) PATIENT RESPONSIBILITY: It is YOUR RESPONSIBILITY to obtain follow up
care </p>
<p>as instructed below. It is your responsibility to call the clinic you are
</p>
<p>referred to for follow up care and make an appointment. When you call to
make </p>
<p>an appointment advise the clinic that your were referred by the Emergency
</p>
<p>Department. </p>
<p></p>
<p>(2) MEDICAL CONDITION WORSENS: If you become concerned about your condition
</p>
<p>and are unable to contact your physician, or if your condition is a medical
</p>
<p>emergency go to the Emergency Department.</p>
<p></p>
<p>(3) XRAYs: If X-Rays were taken today, the interpretation in the Emergency
</p>

ED-DC-INSTRUCTIONS-for-Sharing

</p>
<p>Department is PRELIMINARY. If the final radiologist interpretation reveals
a </p>
<p>different significant finding, you will be contacted.</p>

<p>_____</p>
<p>

<p> </p>
<p>During today's visit at the Phoenix Indian Medical Center Emergency
Department, </p>

<p>you were seen by the following medical medical provider.</p>

<p></p>

<p> PIMC ER MEDICAL PROVIDER: {FLD: ED PROVIDERS}</p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="DIAGNOSIS">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>

<INDENT_ITEMS>1</INDENT_ITEMS>

<BOILERPLATE_TEXT>

<p>DIAGNOSIS: Your diagnosis for this visit was the following:</p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="POV Diagnosis">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

<p> |V POV|</p>

<p> </p>

</BOILERPLATE_TEXT>

</TEMPLATE>

<TEMPLATE NAME="Write in Diagnosis">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

<p> {FLD: WORD 2 LINES}</p>

<p> </p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="Condition Specific Care Instructions">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>

<INDENT_ITEMS>1</INDENT_ITEMS>

<BOILERPLATE_TEXT>

<p>CONDITION SPECIFIC CARE INSTRUCTIONS</p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="Site specific">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>

<INDENT_ITEMS>1</INDENT_ITEMS>

<BOILERPLATE_TEXT>

ED-DC-INSTRUCTIONS-for-Sharing

<p>Site Specific </p>

<p> </p>

A COPYRIGHT </p>

KRAMES-STAYWELL</p>

PLEASE CONTACT </p>

TO THEIR </p>

http://staywell.com/patient-education-2/krames-on-demand/</p>

<p></p>

UNIVERSITY </p>

<p>HOSPICE SUPPORT WEBSITE: <https://dhch.kramesonline.com/></p>

<p></p>

PLACE OF THE </p>

<p>COPYRIGHTED MATERIAL INCLUDED IN THIS DEMO TEMPLATE. </p>

<p></p>

<p> </p>

<p> </p>

<p></p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="MALE">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>

<I N DENT_ITEMS>1</I N DENT_ITEMS>

<BOILERPLATE_TEXT>

<p>MALE </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="Epididymitis">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>

<I N DENT_ITEMS>1</I N DENT_ITEMS>

<BOILERPLATE_TEXT>

<p>Epididymitis </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<BOILERPLATE_TEXT>

<p>Epididymitis</p>

<p></p>

swelling in your scrotum. The </p>

stores sperm. Epididymitis </p>

men, it is often caused by </p>

or gonorrhea. In boys and </p>

ED-DC-INSTRUCTIONS-for-Sharing

parts of the urinary tract

(abdomen) or low back. The

side is affected. The

red. You may have fever

have a discharge from the

and pain medicines. The

treatment. But it will

to go away. If your

your sexual partners may

home:

towel under the scrotum.

jockey-style underwear.

You can make your own ice

wrapped in a thin towel.

pain, unless another medicine

talk with your healthcare

your provider if you've

pain, and swelling get

swelling to go away.

worse. Avoid constipation

fruits, and whole-grain

laxative for constipation.

and all symptoms have

in men over 40, it can be from bacteria from other

(not an STD infection).

Symptoms may begin with pain in the lower belly

then spreads down into the scrotum. Usually only one

testicle and scrotum swell and become very painful and

and a burning when passing urine. Sometimes you may

penis.

Treatment is with antibiotics, and anti-inflammatory

condition should get better over the first few days of

take several weeks for all the swelling and discomfort

healthcare provider suspects that an STD is the cause,

need to be treated.

Home care

The following will help you care for yourself at

- o Support the scrotum. When lying down, place a rolled towel under the scrotum.
- o When walking, use an athletic supporter or 2 pairs of jockey-style underwear.
- o To relieve pain, put ice packs on the inflamed area. You can make your own ice pack by putting ice cubes in a sealed plastic bag wrapped in a thin towel.
- o You may use over-the-counter medicines to control pain, unless another medicine was given. If you have chronic liver or kidney disease, talk with your healthcare provider before taking these medicines. Also talk with your provider if you've ever had a stomach ulcer or GI bleeding.
- o Rest in bed for the first few days until the fever, pain, and swelling get better. It may take several weeks for all of the swelling to go away.
- o Constipation can make you strain. This makes the pain worse. Avoid constipation by eating natural laxatives such as prunes, fresh fruits, and whole-grain cereals. If necessary, use a mild over-the-counter laxative for constipation.
- o Mineral oil can be used to keep the stools soft.
- o Do not have sex until you have finished all treatment and all symptoms have cleared.

ED-DC-INSTRUCTIONS-for-Sharing

and do not stop early even

if you feel better.

Follow-up care

Follow up with your healthcare provider, or as advised, to be sure you are responding properly to treatment. If a culture was taken, you may call for the result as directed. A culture test can ensure that you are on the correct antibiotic.

When to seek medical advice

Call your healthcare provider right away if any of these occur:

- Fever of 100.4°F (38°C), or as directed by your healthcare provider
- Increasing pain or swelling of the testicle after starting treatment
- Pressure or pain in your bladder that gets worse
- Unable to pass urine for 8 hours

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="ABDOMINAL PAIN male">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI A LOG>1</DI A LOG>
<HI DE_DI A LOG_I T E M S>1</HI DE_DI A LOG_I T E M S>
<I N D E N T_I T E M S>1</I N D E N T_I T E M S>
<BOILERPLATE_TEXT>
<p>ABDOMINAL PAIN male </p>
<p></p>
</BOILERPLATE_TEXT>
<ITEMS>

```

ABDOMINAL PAIN, UNCERTAIN CAUSE [Male]

Based on your visit today, the exact cause of your abdominal (stomach) pain is not certain. Your condition does not seem serious now; however, the signs of a serious problem may take more time to appear. Therefore, it is important for you to watch for any new symptoms or worsening of your condition.

HOME CARE:

" Rest until your next exam. No strenuous activities.

" Eat a diet low in fiber (called a low-residue diet). Foods allowed include refined breads, white rice, fruit and vegetable juices

ED-DC-INSTRUCTIONS-for-Sharing

without pulp, tender intestine.

<p>meats. These foods will pass more easily through the

vegetables, meats, seeds and

<p>" Avoid whole-grain foods, whole fruits and

foods until your symptoms go

<p>nuts, fried or fatty foods, dairy, alcohol and spicy

instructed, or if your pain does

<p>away.

<p>FOLLOW UP with your doctor or this facility as

(cardiogram), it will be

<p>not begin to improve in the next 24 hours.

new findings that may

<p>[NOTE: If you had an X-ray, CT scan, ultrasound, or EKG

<p>reviewed by a specialist. You will be notified of any

occur:

<p>affect your care.]

<p>GET PROMPT MEDICAL ATTENTION if any of the following

abdomen

<p>" Pain gets worse or moves to the right lower

<p>" New or worsening vomiting or diarrhea

<p>" Swelling of the abdomen

<p>" Unable to pass stool for more than three days

<p>" Fever of 100.4°F (38°C) or higher, or as directed by

your healthcare

<p>provider

color)

<p>" Blood in vomit or bowel movements (dark red or black

<p>" Jaundice (yellow color of eyes and skin)

<p>" Weakness, dizziness or fainting

<p>" Chest, arm, back, neck or jaw pain

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="Urethritis Male">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>

<I N D E N T _ I T E M S > 1 < / I N D E N T _ I T E M S >

<BOILERPLATE_TEXT>

<p>Urethritis Male </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<BOILERPLATE_TEXT>

<p>Urethritis [Male, Infection Vs. Chemical]</p>

<p></p>

<p>In a man, the urethra is the channel in the penis that

passes urine. Urethritis

<p>is an inflammation of the urethra. This is usually due

to infection or chemical

<p>irritation. It causes pain and burning when passing

urine. There may also be some

<p>discharge from the urethral opening. The cause for your

urethritis is not

<p>certain. It is usually due to infection or chemical

irritation.

ED-DC-INSTRUCTIONS-for-Sharing

<p></p>

<p> </p>

<p></p>

<p>A chemical irritation causes temporary inflammation and

pain with urination. </p>

<p>Soaps, lotions, colognes, as well as contraceptive

jellies, creams or foams can </p>

<p>cause this. Symptoms improve within three days after

last exposure. </p>

<p></p>

<p>A sexually transmitted disease (STD) from Gonorrhea or

Chlamydia is the most </p>

<p>common cause for an infection of the urethra. If your

doctor thinks you may have </p>

<p>an STD, a culture may be taken. It will take about

three days to get a culture </p>

<p>result. Antibiotics may be started before the culture

test returns. </p>

<p></p>

<p>A bladder infection is a common cause for pain and

burning when passing urine, </p>

<p>but it causes no discharge from the urethra. </p>

<p></p>

<p>Urethritis becomes "chronic" when it lasts for weeks or

months, or goes away and </p>

<p>comes back. This kind of urethritis may be caused by a

narrowed urethra or an </p>

<p>untreated bacterial infection. A referral to a

specialist may be needed to </p>

<p>diagnose and treat chronic dysuria. </p>

<p></p>

<p></p>

<p>Home Care: </p>

<p>1) Avoid any chemical agents that you suspect may be

causing your symptoms. </p>

<p></p>

<p>2) If you were given a prescription medicine, take as

directed. </p>

<p></p>

<p>3) If an STD culture was taken, avoid sexual activity

until you have been told </p>

<p>that it is negative (no infection). Then, follow your

doctor's advice to treat </p>

<p>your condition. </p>

<p></p>

<p>4) If an STD culture was done and it is positive: </p>

<p></p>

<p>oBoth you and your sexual partner need to be treated,

even if your partner has no </p>

<p>symptoms. </p>

<p>oContact your doctor or go to an urgent care clinic or

the Public Health </p>

<p>Department to be examined and treated. </p>

<p>oAvoid sexual activity until both you and your partner

have completed all </p>

<p>antibiotic medicine and told that you are no longer

contagious. </p>

<p>oLearn about "safe sex" practices and use these in the

future. The safest sex is </p>

<p>with a partner who has tested negative and only has sex

with you. Condoms offer </p>

<p>protection from spreading some sexually transmitted

diseases including Gonorrhea, </p>

ED-DC-INSTRUCTIONS-for-Sharing

<p>Chlamydia and HIV, but are not a guarantee.</p>

<p>Follow Up</p>

was taken, call in three </p>

<p>days for the result, or as directed. If diagnosed with

an STD, follow up with </p>

<p>your doctor or the Public Health Department for

complete STD screening, including </p>

<p>HIV testing. For more information, contact the National

STD Hotline: 1-800-232-</p>

<p>4636.</p>

<p></p>

<p>Get Prompt Medical Attention</p>

<p>if any of the following occur:</p>

<p></p>

<p>-- No improvement after three days of treatment</p>

<p></p>

<p>-- Inability to urinate due to pain</p>

<p></p>

<p>-- Rash or joint pain</p>

<p></p>

<p>-- Painful sores on the penis</p>

<p></p>

<p>-- Enlarged painful lymph nodes (lumps) in the

groin</p>

<p></p>

<p>-- Testicle pain or swelling of the scrotum</p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="FEMALE">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>

<I NDE NT_ITEMS>1</I NDE NT_ITEMS>

<BOILERPLATE_TEXT>

<p>Female </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="Pregnancy">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>

<I NDE NT_ITEMS>1</I NDE NT_ITEMS>

<BOILERPLATE_TEXT>

<p>Pregnancy </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<BOILERPLATE_TEXT>

<p>Pregnancy</p>

<p> </p>

<p></p>

ED-DC-INSTRUCTIONS-for-Sharing

pregnancy, it is normal to develop tender swollen breasts, frequent urination and mild vaginal discharge. During the first three months, nausea is common.

Guidelines For A Healthy Pregnancy:

To ensure that your baby is born healthy there are certain things that you can do:

When you feel tired, you should REST. This is especially true in the later months of pregnancy.

You should drink 8-10 glasses of juice, milk or water. Eat well-balanced MEALS at regular intervals to supply your body with enough protein. You can expect a total weight gain of about 30 pounds during the pregnancy. Do not try to diet or lose weight while you are pregnant.

Because of the extra nutritional needs during pregnancy, take one prenatal VITAMIN daily. Do not take any other MEDICINE during your pregnancy (prescribed or over-the-counter) unless your doctor specifically recommends this. Many drugs can have harmful effects on the growing baby.

and fried foods. Eat several smaller meals throughout the day rather than three large meals.

if you SMOKE, you must stop. The nicotine you breathe in goes right to the baby.

Daily drinking will harm your baby and can cause permanent brain damage.

crack, and heroin. Marijuana RECREATIONAL DRUGS are harmful, especially cocaine, should also be avoided.

medicine when you found out that you were pregnant, talk to your doctor about possible effects on the fetus.

by your family doctor, and Call to arrange for prenatal care. This can be provided by your obstetrician (pregnancy specialist) or a primary care clinic.

Get Prompt Medical Attention

if any of the following occur:

- Vaginal bleeding
- Moderate or severe abdominal or back pain
- Excessive vomiting, unable to keep any fluids down for six hours
- Burning with urination
- Headache, dizziness or rapid weight gain

</BOILERPLATE_TEXT>

```
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="MASTITIS ">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>
  <I NDE NT_I TEMS>1</I NDE NT_I TEMS>
  <BOI LERPLATE_TEXT>
    <p>MASTITIS </p>
    <p> </p>
  </BOI LERPLATE_TEXT>
  <I TEMS>
```

```
    <TEMPLATE NAME="text">
      <TYPE>G</TYPE>
      <STATUS>A</STATUS>
      <DI ALOG>1</DI ALOG>
      <BOI LERPLATE_TEXT>
        <p>MASTITIS </p>
        <p></p>
        <p>Mastitis is a bacterial infection in the breast. It is
most common in nursing </p>
        <p>mothers and is usually a result of small cracks in the
nipple. The infection is </p>
        <p>treated with antibiotics. </p>
        <p></p>
        <p>If treatment is delayed or if the infection is severe,
a pocket of pus (abscess) </p>
        <p>can form. This requires minor surgery to drain the pus.
Sometimes the infection </p>
        <p>can spread into the bloodstream causing a more severe
illness with fever and </p>
        <p>chills. </p>
        <p></p>
        <p>HOME CARE: </p>
        <p></p>
        <p>1) It is important to keep the milk flowing from the
infected breast. Continue </p>
        <p>breast feeding from both breasts as usual. This will
not hurt the baby. If this </p>
        <p>is too painful, use a breast pump to remove milk from
the infected side. This can </p>
        <p>be fed to your baby or discarded. </p>
        <p></p>
        <p>2) Apply a warm compress (a heating pad, hot water
bottle or towel soaked in hot </p>
        <p>water) to the infected breast several times per
day. </p>
        <p></p>
        <p>3) After each feeding, express a small amount of breast
milk and apply to the </p>
        <p>nipples. This lubricates the nipples and helps heal
small cracks in the tissue. </p>
        <p></p>
        <p>4) Soap dries the skin and removes protective oils.
When bathing, clean the </p>
        <p>breast with water only, do not use soap. </p>
        <p></p>
        <p>5) Take all of the antibiotics prescribed. </p>
        <p></p>
        <p>6) Wearing a supportive bra can help with the pain. </p>
        <p></p>
```

ED-DC-INSTRUCTIONS-for-Sharing

for treatment or prevention of mastitis.

FOLLOW UP:

Make an appointment with your doctor in the next week to be sure your infection is healing properly.

GET PROMPT MEDICAL ATTENTION if any of the following occur:

- Fever over 100.4° F (38.0° C) for more than 2 days
- Shaking chills
- Increasing breast pain or firmness in the breast
- Spreading area of redness

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="STD, Suspected ">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HIDE_DI ALOG_ITEMS>1</HIDE_DI ALOG_ITEMS>
<IDENT_ITEMS>1</IDENT_ITEMS>
<BOILERPLATE_TEXT>
  <p>STD, Suspected </p>
  <p> </p>
</BOILERPLATE_TEXT>
</ITEMS>
<TEMPLATE NAME="text">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<BOILERPLATE_TEXT>

```

STD, Suspected [R/O GC & Chlamydia results are pending]

Your symptoms suggest that you may have a STD (sexually transmitted disease). The most common bacteria that cause STD's are chlamydia and gonorrhea. Both are highly contagious and are passed by sexual contact with an infected partner.

Symptoms begin within 1-3 weeks after exposure. There is usually a discharge from the penis or vagina and burning during urination. Many women with this infection will have only mild symptoms or no symptoms at all early in the disease.

Culture tests have been taken. These will show if you have an infection with chlamydia or gonorrhea. This infection can be treated and cured with antibiotic medication.

ED-DC-INSTRUCTIONS-for-Sharing

<p></p>

<p>HOME CARE: </p>

<p></p>

<p>1) Avoid sexual activity until you know that your test

result is negative. </p>

<p></p>

<p>2) If a culture was done and it is positive: </p>

<p></p>

even if your partner has no </p>

<p>symptoms. </p>

<p></p>

the Public Health </p>

<p>Contact your doctor or go to an urgent care clinic or

<p>Department to be examined and treated. </p>

<p></p>

have completed all </p>

<p>Avoid sexual activity until both you and your partner

contagious. </p>

<p>antibiotic medicine and told that you are no longer

<p></p>

future. The safest sex is </p>

<p>Learn about "safe sex" practices and use these in the

with you. Condoms offer </p>

<p>with a partner who has tested negative and only has sex

diseases including gonorrhea, </p>

<p>protection from spreading some sexually transmitted

<p>chlamydia and HIV, but are not a guarantee. </p>

<p></p>

the future. The safest sex </p>

<p>3) Learn about "safe sex" practices and use these in

sex with you. Condoms </p>

<p>is with a partner who has tested negative and only has

transmitted diseases including </p>

<p>offer protection from spreading some sexually

guarantee. </p>

<p>Gonorrhea, Chlamydia and HIV, but are not a

<p></p>

You may call us in three </p>

<p>FOLLOW UP with your doctor or as advised by our staff.

If your culture test is </p>

<p>days for the results of your culture, or as directed.

taken 4-6 weeks after </p>

<p>positive and you are treated, another culture should be

up with your doctor or the </p>

<p>treatment to be sure the infection has cleared. Follow

including HIV testing. For </p>

<p>Public Health Department for complete STD screening,

Hotline: 1-800-232-4636. </p>

<p>more information about STD's, contact the National STD

<p></p>

occur: </p>

<p>GET PROMPT MEDICAL ATTENTION if any of the following

<p></p>

pain</p>

<p>-- Fever over 100.4° F (38.0° C)</p>

<p></p>

<p>-- New or increasing lower abdominal pain or back

<p></p>

<p>-- Unexpected vaginal bleeding</p>

<p></p>

<p>-- Weakness, dizziness or fainting</p>

<p></p>

ED-DC-INSTRUCTIONS-for-Sharing

<p>-- Repeated vomiting</p>

<p></p>

<p>-- Inability to urinate due to pain</p>

<p></p>

<p>-- Rash or joint pain</p>

<p></p>

<p>-- Painful open sores on the penis or around the outer

vagina</p>

<p></p>

<p>-- Enlarged painful lymph nodes (lumps) in the

groin</p>

<p></p>

<p>-- Testicle pain or scrotal swelling in men</p>

<p></p>

<p>He must followup in the STD clinic in 4-5 day for test

results and further </p>

<p>testing at their discretion. </p>

<p> STD followup 602-263-1200 extension 1265</p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="Bacterial Vaginosis">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>

<I NDENT_ITEMS>1</I NDENT_ITEMS>

<BOILERPLATE_TEXT>

<p>Bacterial Vaginosis </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<BOILERPLATE_TEXT>

<p>Bacterial Vaginosis</p>

<p></p>

bacterial vaginosis (BV). It </p>

vaginitis. BV occurs when </p>

normally present in the </p>

discharge (most noticeable after </p>

urination. The burning is </p>

vaginal area. </p>

<p></p>

However, your risk is higher if </p>

had many sex partners in </p>

often. </p>

<p></p>

sexually active women, this </p>

<p>is not a true sexually transmitted disease. You did not

ED-DC-INSTRUCTIONS-for-Sharing

get this from your partner. You cannot give it to your partner. The infection may be related to temporary changes in the pH of vaginal fluids after being exposed to semen.

Home Care:

Keep the genital area clean and free of discharge. Do this by wearing an absorbent sanitary pad and changing it often. Shower daily. When you shower, clean the outer vaginal area with plain soap and water.

Do not douche during treatment unless advised to do so by your doctor. Routine douching after treatment is no longer recommended to clean the vagina. It raises your risk of vaginal infection and pelvic inflammatory disease.

Avoid having sex until you have finished all antibiotic medicine and all symptoms have gone away.

Wear cotton underwear or cotton-lined panty hose. Don't wear pants that are too tight.

Limiting the number of sex partners you have lowers your risk of this and other vaginal infections, STDs, and HIV.

Take all medicine as directed until it is gone, even if you are feeling better. If you don't do this, symptoms might return.

Follow Up with your doctor if symptoms don't go away after the medicine is finished.

Get Prompt Medical Attention if any of the following occur:

- Fever of 100.4°F (38°C) or higher, or as directed by your healthcare provider
- Lower abdominal pain
- Rash or joint pain

ED-DC-INSTRUCTIONS-for-Sharing

partner's penis

Painful sores around the outer vaginal area or on your

Ovarian Cyst

Ovarian Cyst

Ovarian Cyst

The ovary is a small organ located on each side of the

uterus. During each menstrual cycle a tiny egg sac forms in the ovary. If the egg is released but

Sometimes, the sac may fill with fluid. It then enlarges into a painful cyst.

Usually the cyst will rupture or shrink on its own. In either case, the pain gradually goes away over the next 1-3 days. If the cyst does not shrink or rupture, it may cause continued pain.

Home Care: Rest in bed and avoid heavy exertion until you are feeling better.

Hot packs -- a small towel soaked in hot water.

You may use acetaminophen (Tylenol) or ibuprofen (Motrin, Advil) to control pain, unless another pain medicine was prescribed. [NOTE: If you have chronic liver or kidney disease or ever had a stomach ulcer or GI bleeding, talk with your doctor before using these medicines.]

Follow Up: See your doctor within the next 2-3 days if your pain doesn't improve. Otherwise, follow up with your doctor after your next period or as

ED-DC-INSTRUCTIONS-for-Sharing

directed by our staff. </p>

```

<p></p>
<p>Get Prompt Medical Attention</p>
</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Irregular vaginal bleeding">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
<I NDE NT_I TEMS>1</I NDE NT_I TEMS>
<BOILERPLATE_TEXT>
<p>Irregular vaginal bleeding </p>
<p> </p>
</BOILERPLATE_TEXT>
<I TEMS>

```

unexpected times of the month. </p>
 Heavy bleeding may lead to </p>
 pale and feel weak or </p>
 little exertion. </p>

```

<TEMPLATE NAME="tetx">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<BOILERPLATE_TEXT>
<p>: Irregular vaginal bleeding</p>
<p></p>
<p>This is a condition in which bleeding occurs at
<p>The bleeding may be heavier or lighter than usual.
<p>anemia. If severe enough, anemia may cause you to look
<p>fatigued. You might have shortness of breath even with
<p></p>
<p>The female hormones produced in your body every month
may be out of balance. This </p>
<p>imbalance leads to bleeding. Causes could include an
ovarian cyst, emotional </p>
<p>stress, pelvic infection. Failure to ovulate during
your last cycle may also </p>
<p>cause this problem. </p>
<p></p>
<p>HOME CARE: </p>
<p></p>
<p>- If bleeding is heavy, rest and avoid heavy

```

exertion. </p>
 (Motrin, Advil) to control </p>
 [NOTE: If you have chronic </p>
 GI bleeding, talk with </p>

```

<p></p>
<p>- You may use acetaminophen (Tylenol) or ibuprofen
<p>pain, unless another pain medicine was prescribed.
<p>liver or kidney disease or ever had a stomach ulcer or
<p>your doctor before using these medicines. ]</p>
<p></p>
<p>- Iron supplements may be prescribed for anemia. It
takes about 4-6 weeks for the </p>
<p>iron to correct the anemia. Take the medicine as
directed. See your doctor for a </p>
<p>repeat blood test after you finish the iron

```

treatment. </p>
 <p></p>
 <p>- If hormones were prescribed to control your bleeding,

ED-DC-INSTRUCTIONS-for-Sharing

take them exactly as

directed. If you were prescribed a medicine called Provera (medroxyprogesterone), the bleeding should stop while you are taking it. Another period will start a few days after you finish the medicine.

FOLLOW UP with your doctor or women's clinic within the next 1-2 days .

GET PROMPT MEDICAL ATTENTION if any of the following occur:

- Bleeding becomes heavy (soaking one pad an hour for three hours)
- Fever of 100.4°F (38°C) or higher, or as directed by your healthcare provider
- Increase in abdominal pain
- Weakness, dizziness or fainting

Threatened Miscarriage

Your Diagnosis: Threatened Miscarriage

FOLLOW-UP CARE WITH PHYSICIAN - As noted above, if you become concerned about your condition and are unable to arrange any other follow-up, you may return to the Emergency Department

Follow up: Within 2 days at express care or your family doctor or women's clinic

POSSIBLE MISCARRIAGE

During early pregnancy (first three months), it is not uncommon to have a small amount of bleeding. This can be entirely normal. But heavy bleeding or severe cramping can be an early sign of miscarriage. A "miscarriage" means unexpected

ED-DC-INSTRUCTIONS-for-Sharing

<p>loss of your pregnancy.</p>

<p></p>

during early pregnancy, these

<p>In about half of patients with bleeding or cramping

normally. However, half of the

<p>time a miscarriage will occur. A miscarriage may occur

due to various causes.

<p>These include a problem with the baby's chromosomes

(genes that carry the

<p>information needed for life) or with fertilization or

implantation that didn't

<p>happen correctly. In most cases no cause can be found.

Be reassured that this is

<p>not the result of anything that you did wrong, and it

will not interfere with

<p>your ability to become pregnant in the future.</p>

<p></p>

pregnancy, you should do the

<p>following:</p>

<p></p>

<p>- Rest in bed until the pain and bleeding stop.</p>

<p></p>

weeks.

<p>- Do not have sexual intercourse for the next 3

<p></p>

<p>- Use sanitary napkins instead of tampons.</p>

<p></p>

<p>- Do not douche.</p>

<p></p>

the next week, or as

<p>FOLLOW-UP: Make an appointment with your doctor within

<p>directed by our staff.</p>

<p></p>

a specialist. You will be

<p>Note: If you had an ultrasound, it will be reviewed by

care.

<p>notified of any new findings that may affect your

<p></p>

occur:

<p>GET PROMPT MEDICAL ATTENTION if any of the following

<p></p>

<p>- Vaginal bleeding or pain for more than three days</p>

<p></p>

three hours)</p>

<p>- Heavy bleeding (soaking one new pad an hour over

<p></p>

your healthcare provider</p>

<p>- Fever of 100.4°F (38°C) or higher, or as directed by

<p></p>

<p>- Increasing lower abdominal pain</p>

<p></p>

<p>- Weakness, dizziness, or fainting</p>

<p></p>

grayish membrane or solid

<p>- Passage of anything that resembles tissue: pink or

bring to the doctor)</p>

<p>material (save the tissue in a clean container and

<p></p>

<p>- Or anything else that concerns you</p>

<p></p>

</BOILERPLATE_TEXT>

ED-DC-INSTRUCTIONS-for-Sharing

```
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Abdominal pain female">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
  <I NDENT_I TEMS>1</I NDENT_I TEMS>
  <BOI LERPLATE_TEXT>
    <p>Abdominal pain female </p>
    <p> </p>
  </BOI LERPLATE_TEXT>
  <I TEMS>
    <TEMPLATE NAME="text">
      <TYPE>T</TYPE>
      <STATUS>A</STATUS>
      <BOI LERPLATE_TEXT>
        <p>ABDOMINAL PAIN, UNCERTAIN CAUSE (Female)</p>
        <p> </p>
        <p>Based on your visit today, the exact cause of your
abdominal (stomach) pain is </p>
        <p>not certain. Your condition does not seem serious now;
however, the signs of a </p>
        <p>serious problem may take more time to appear.
Therefore, it is important for you </p>
        <p>to watch for any new symptoms or worsening of your
condi tion. </p>
        <p>HOME CARE: </p>
        <p>Rest until your next exam. No strenuous activities.</p>
        <p>Eat a diet low in fiber (called a low-residue diet).
Foods allowed include </p>
        <p>refined breads, white rice, fruit and vegetable juices
without pulp, tender </p>
        <p>meats. These foods will pass more easily through the
intestine. </p>
        <p>Avoid whole-grain foods, whole fruits and vegetables,
meats, seeds and nuts, </p>
        <p>fried or fatty foods, dairy, alcohol and spicy foods
until your symptoms go away. </p>
        <p>FOLLOW UP with your doctor or this facility as
instructed, or if your pain does </p>
        <p>not begin to improve in the next 24 hours.</p>
        <p>GET PROMPT MEDICAL ATTENTION if any of the following
occur: </p>
        <p>Pain gets worse or moves to the right lower abdomen</p>
        <p>New or worsening vomiting or diarrhea</p>
        <p>Swelling of the abdomen</p>
        <p>Unable to pass stool for more than three days</p>
        <p>Fever of 100.4°F (38°C) or higher, or as directed by
your healthcare provider. </p>
        <p>Blood in vomit or bowel movements (dark red or black
color)</p>
        <p>Jaundice (yellow color of eyes and skin)</p>
        <p>Weakness, dizziness or fainting</p>
        <p>Chest, arm, back, neck or jaw pain</p>
        <p>Unexpected vaginal bleeding or missed period</p>
      </BOI LERPLATE_TEXT>
    </TEMPLATE>
  </ITEMS>
</TEMPLATE>
<TEMPLATE NAME="BLADDER INFECTION, Female ">
  <TYPE>G</TYPE>
```

ED-DC-INSTRUCTIONS-for-Sharing

```
<STATUS>A</STATUS>
<DI A LOG>1</DI A LOG>
<HI DE_DI A LOG_I TEMS>1</HI DE_DI A LOG_I TEMS>
<I NDENT_I TEMS>1</I NDENT_I TEMS>
<BOI LERPLATE_TEXT>
  <p>BLADDER INFECTION, Female </p>
  <p> </p>
  <p> </p>
</BOI LERPLATE_TEXT>
<I TEMS>
```

```
  <TEMPLATE NAME="text">
    <TYPE>G</TYPE>
    <STATUS>A</STATUS>
    <DI A LOG>1</DI A LOG>
    <BOI LERPLATE_TEXT>
      <p>BLADDER INFECTION, Female (Adult) </p>
      <p></p>
      <p> </p>
      <p></p>
      <p>A bladder infection ("cystitis" or "UTI") usually
causes a constant urge to
      </p>
      <p>urinate and a burning when passing urine. Urine may be
cloudy, smelly or dark. </p>
      <p>There may be pain in the lower abdomen. A bladder
infection occurs when bacteria
      </p>
      <p>from the vaginal area enter the bladder opening
(urethra). This can occur
      </p>
      <p>sexual intercourse, wearing tight clothing, dehydration
and other factors. </p>
      <p></p>
      <p>HOME CARE: </p>
      <p></p>
      <p>oDrink lots of fluids (at least 6-8 glasses a day,
unless you must restrict
      </p>
      <p>fluids for other medical reasons). This will force the
medicine into your urinary
      </p>
      <p>system and flush the bacteria out of your body. </p>
      <p></p>
      <p>oAvoid sexual intercourse until your symptoms are
gone. </p>
      <p></p>
      <p>oAvoid caffeine, alcohol and spicy foods. These can
irritate the bladder. </p>
      <p></p>
      <p>oA bladder infection is treated with antibiotics. You
may also be given Pyridium
      </p>
      <p>(generic = phenazopyridine) to reduce the burning
sensation. This medicine will
      </p>
      <p>cause your urine to become a bright orange color. The
orange urine may stain
      </p>
      <p>clothing. You may wear a pad or panty-liner to protect
clothing. </p>
      <p></p>
      <p>PREVENTING FUTURE INFECTIONS: </p>
      <p></p>
      <p>oAlways wipe from front to back after a bowel
movement. </p>
      <p></p>
      <p>oKeep the genital area clean and dry. </p>
      <p></p>
      <p>oDrink plenty of fluids each day to avoid
dehydration. </p>
      <p></p>
```

ED-DC-INSTRUCTIONS-for-Sharing

intercourse. </p>

<p>oBoth sexual partners should wash before

bladder. </p>

<p></p>

<p>oUrinate right after intercourse to flush out the

avoid tight-fitting pants. </p>

<p></p>

<p>oWear cotton underwear and cotton-lined panty hose;

frequent bladder infections, </p>

<p></p>

<p>oIf you are on birth control pills and are having

<p>discuss with your doctor. </p>

if ALL symptoms are not </p>

<p></p>

<p>FOLLOW UP : Return to this facility or see your doctor

<p></p>

<p>gone after three days of treatment. </p>

occur: </p>

<p></p>

<p>GET PROMPT MEDICAL ATTENTION if any of the following

your healthcare provider</p>

<p></p>

<p>*Fever of 100.4°F (38°C) or higher, or as directed by

<p></p>

<p>*No improvement by the third day of treatment</p>

<p></p>

<p>*Increasing back or abdominal pain</p>

<p></p>

<p>*Repeated vomiting; unable to keep medicine down</p>

<p></p>

<p>*Weakness, dizziness or fainting</p>

<p></p>

<p>*Vaginal discharge</p>

area)</p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

<p></p>

ED-DC-INSTRUCTIONS-for-Sharing

<p> </p>
</BOILERPLATE_TEXT>
<ITEMS>
<TEMPLATE NAME="text">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<BOILERPLATE_TEXT>
<p>Shoulder Fracture [Shoulder Immobilizer]</p>
<p></p>
<p>You have a break (fracture) of the shoulder. This may
be a small crack in the </p>
<p>bone. Or it may be a major break with the broken parts
pushed out of position.</p>
<p></p>
<p> </p>
<p></p>
<p>If there is only a crack in the bone and no bone
fragments are out of place, a </p>
<p>shoulder fracture is usually treated with a shoulder
immobilizer. This is a </p>
<p>special type of sling. (Casts are not used for this
type of fracture.) Healing of </p>
<p>the bone usually occurs in 4-6 weeks. More serious
injuries may require surgery </p>
<p>to put the bones back into the correct position for
healing.</p>
<p></p>
<p>Home Care: </p>
<p>oLeave the shoulder immobilizer in place. This will
support the injured arm at </p>
<p>your side. This is the best position for bone
healing.</p>
<p>oThe shoulder immobilizer is adjustable. If it becomes
loose, adjust it so that </p>
<p>your forearm is horizontal (level with the ground).
Your hand should be level </p>
<p>with the elbow.</p>
<p>oApply an ice pack (ice cubes in a plastic bag, wrapped
in a towel) over the </p>
<p>injured area for 20 minutes every 1-2 hours the first
day. Continue with ice </p>
<p>packs 3-4 times a day for the next two days, then as
needed for the relief of </p>
<p>pain and swelling.</p>
<p>oYou may use acetaminophen (Tylenol) or ibuprofen
(Motrin, Advil) to control </p>
<p>pain, unless another pain medicine was prescribed.
(NOTE : If you have chronic </p>
<p>liver or kidney disease or ever had a stomach ulcer or
GI bleeding, talk with </p>
<p>your doctor before using these medicines.)</p>
<p>oDo not remove the sling before your next exam unless
you were instructed to do </p>
<p>so.</p>
<p>Follow Up</p>
<p>with your doctor in one week, or as advised by our
staff, to be sure the bone is </p>
<p>healing properly. A shoulder joint will become stiff if
left in a sling for too </p>
<p>long. Ask your doctor when it is safe to begin
range-of-motion exercises.</p>
<p></p>

ED-DC-INSTRUCTIONS-for-Sharing

<p>Get Prompt Medical Attention</p>
<p>if any of the following occur:</p>
<p></p>
<p>oFingers become swollen, cold, blue, numb or tingly</p>
<p>oLarge amount of swelling or bruising of the shoulder

or upper arm</p>

<p>olncreasing shoulder pain or arm swelling</p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="DI SLOCATI ON SHOULDER (Reduced)">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>

<I NDENT_I TEMS>1</I NDENT_I TEMS>

<BOILERPLATE_TEXT>

<p>DI SLOCATI ON: SHOULDER (Reduced) </p>

<p></p>

</BOILERPLATE_TEXT>

<I TEMS>

<TEMPLATE NAME="text">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<BOILERPLATE_TEXT>

<p>DI SLOCATI ON: SHOULDER (Reduced)</p>

<p></p>

<p></p>

<p></p>

force tears the ligaments </p>

<p>holding the joint together. This allows the bones to

move apart and become stuck </p>

take about six weeks for </p>

ligaments, you are at </p>

care should be taken to </p>

<p>avoid a similar injury in the future.</p>

<p></p>

immobilizer (special type </p>

of arm </p>

prevent a recurrent dislocati on </p>

exercise program may be started. </p>

strength at the shoulder and </p>

<p>This will gradually restore range of moti on and

<p>decrease the risk of another di slocati on.</p>

<p></p>

<p>HOME CARE: </p>

<p></p>

immobilizer at all times . Do </p>

dislocate your arm again in </p>

do not move your arm away </p>

the sling was holding it </p>

<p>not take it off at night to sleep. It is possible to

<p>your sleep. You may take it off to bathe or dress, but

<p>from your body. Keep your arm in the same position that

ED-DC-INSTRUCTIONS-for-Sharing

visit, ask your doctor

in, until you reapply the sling again. During your next
how long you should wear the sling.

in a towel) over the

Apply an ice pack (ice cubes in a plastic bag, wrapped
injured area for 20 minutes every 1-2 hours the first

day. Continue with ice
needed for the relief of

packs 3-4 times a day for the next two days, then as
pain and swelling.

(Motrin, Advil) to control

You may use acetaminophen (Tylenol) or ibuprofen
pain, unless another pain medicine was prescribed.

[NOTE: If you have chronic
GI bleeding, talk with

liver or kidney disease or ever had a stomach ulcer or
your doctor before using these medicines.]

advised by our staff. Shoulder

No sports or P.E. until cleared by your doctor.

for more than a few weeks

FOLLOW UP with your doctor within one week or as
immobilizers and slings should not be worn continuously

joint. If you have had

or you may lose some range-of-motion at the shoulder
repeated dislocations of the same shoulder, that means

there has been permanent

ligament damage. Ask the orthopedic doctor about
surgery to prevent another

surgery to prevent another

dislocation.
GET PROMPT MEDICAL ATTENTION if any of the following

occur:

Another dislocation of your shoulder
Increasing swelling or pain in the shoulder or arm
Fingers become cold, blue, numb or tingly

```
</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Nursemaid's Elbow">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_ITEM>1</HI DE_DI ALOG_ITEM>
<I N DENT_I T E M S>1</I N DENT_I T E M S>
<BOILERPLATE_TEXT>
<p>Nursemaid's Elbow </p>
</BOILERPLATE_TEXT>
<I T E M S>
<TEMPLATE NAME="text">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<BOILERPLATE_TEXT>
<p>Nursemaid's elbow is the name given for an injury where
```


ED-DC-INSTRUCTIONS-for-Sharing

one bone of the elbow </p>
<p>joint is pulled out of place and gets stuck in that
position. This usually occurs </p>
<p>when lifting or pulling the child by one or both arms.
Sometimes a playmate will </p>
<p>tug hard enough on the arm to cause this injury.</p>
<p></p>
<p>This injury is due to a weakness in the ligaments of
the elbow that some children </p>
<p>have at this age. It is usually easy to correct by your
doctor, but may recur if </p>
<p>the arm is pulled again. Ligaments strengthen by five
years of age and </p>
<p>nursemaid's elbow will usually not occur after
that.</p>
<p></p>
<p>After the bone is put back into position, it usually
takes about 30-60 minutes </p>
<p>before the child will start using that arm normally
again. In some cases, it may </p>
<p>take up to 24 hours before the child starts using the
arm again. If the child is </p>
<p>not using the arm normally by 24 hours, there may be
other injuries present. X-</p>
<p>rays will be needed to determine this.</p>
<p></p>
<p>Home Care:</p>
<p>1. If all symptoms improve before you leave this
facility, there is no further </p>
<p>treatment required.</p>
<p></p>
<p>2. If your child is still having arm pain, a splint and
sling may be applied. </p>
<p>Leave this in place until the next scheduled exam or as
advised by your doctor.</p>
<p></p>
<p>3. Use acetaminophen (Tylenol) for fussiness or
discomfort. In infants over six </p>
<p>months of age, you may use ibuprofen (Children's
Motrin) instead of Tylenol. </p>
<p></p>
<p>Prevention</p>
<p>Until your child is older (at least age five), this
injury may occur again with </p>
<p>any type of lifting or pulling on the arm. To prevent
recurrence:</p>
<p></p>
<p>Do not lift or pull your child by the arm. Hold your
child under the arms to </p>
<p>lift.</p>
<p>Teach siblings and playmates not to tug or pull on the
arms, as well.</p>
<p>Follow Up</p>
<p>with your doctor as advised by our staff. If a splint
was applied, follow up for </p>
<p>a repeat exam within the next 24 hours or as
directed.</p>
<p></p>
<p>Get Prompt Medical Attention</p>
<p>if any of the following occur:</p>
<p></p>
<p>Increasing pain or continued crying</p>
<p>Swelling or bruising around the elbow</p>

ED-DC-INSTRUCTIONS-for-Sharing

<p>Not using the arm normally by the next day</p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="SCIATICA ">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI A LOG>1</DI A LOG>

<HI DE_DI A LOG_I TEMS>1</HI DE_DI A LOG_I TEMS>

<I N DENT_I TEMS>1</I N DENT_I TEMS>

<BOILERPLATE_TEXT>

<p>SCI AT I CA </p>

<p> </p>

</BOILERPLATE_TEXT>

<I TEMS>

<TEMPLATE NAME="text">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI A LOG>1</DI A LOG>

<BOILERPLATE_TEXT>

<p>SCI AT I CA </p>

<p>Sci at ica ("Lumbar Radiculopathy") causes a pain that

spreads from the lower back </p>

<p>down into the buttock, hip and leg. Sometimes leg pain

can occur without any back </p>

<p>pain. Sci at ica is due to irritation or pressure on a

spinal nerve as it comes out </p>

<p>of the spinal canal. This is most often due to a bulge

or rupture of a nearby </p>

<p>spinal disk (the cartilage cushion between each spinal

bone), which presses on a </p>

<p>nearby nerve. Other causes include spinal stenosis

(narrowing of the spinal </p>

<p>canal) and spasm of the piriform muscle (a muscle in

the buttocks that the </p>

<p>sci at ica nerve passes through). </p>

<p></p>

<p>Sci at ica may begin after a sudden twisting/bending

force (such as in a car </p>

<p>accident), or sometimes after a simple awkward

movement. In either case, muscle </p>

<p>spasm is commonly present and contributes to the

pain. </p>

<p></p>

<p>The diagnosis of sci at ica is made from the symptoms and

physical exam. Unless you </p>

<p>had a physical injury (such as a car accident or fall),

X-rays are usually not </p>

<p>ordered for the initial evaluation of sci at ica because

the nerves and disks </p>

<p>cannot be seen on an x-ray. If signs of a compressed

nerve are present (for </p>

<p>example, loss of tendon reflex or strength in the leg),

an MRI (magnetic </p>

<p>resonance imaging) scan will need to be scheduled as an

outpatient. </p>

<p></p>

<p>Most sci at ica (80-90%) gets better with medicine,

exercise, physical therapy. If </p>

<p>symptoms continue after at least three months of

medical treatment, surgery </p>

<p>be considered. </p>

ED-DC-INSTRUCTIONS-for-Sharing

<p></p>

<p>HOME CARE: </p>

<p></p>

as soon as possible, begin rest. </p>

<p></p>

firm mattress is best. Try lying flat on your back with pillows under your knees. You can also try lying on your side with your knees bent up towards your chest and a pillow between your

<p>knees. </p>

<p></p>

lower back than standing or walking. </p>

<p></p>

bath or heating pad) and massage, while others prefer cold packs (crushed or cubed ice in a plastic bag, wrapped in a towel). Try both and use the method that feels best for 20 minutes

<p>several times a day. </p>

<p></p>

(Motrin, Advil) to control pain, unless another pain medicine was prescribed. [NOTE: If you have chronic GI bleeding, talk with

<p>your doctor before using these medicines.]</p>

<p></p>

anything over 15 pounds until all the pain is gone. </p>

<p></p>

symptoms do not start to improve after one week. Physical therapy or further testing may be needed. </p>

<p></p>

radiologist. You will be notified of any new findings that may affect your care.]</p>

<p></p>

occur: </p>

<p></p>

medicine</p>

<p></p>

<p>Weakness or numbness in one or both legs</p>

<p></p>

<p>Numbness in the groin, genital area</p>

<p></p>

<p>Loss of bowel or bladder control</p>

</BOILERPLATE_TEXT>

</TEMPLATE>

ED-DC-INSTRUCTIONS-for-Sharing

```
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Bursitis, Elbow ">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>
  <I NDE NT_ITEMS>1</I NDE NT_ITEMS>
  <BOI LERPLATE_TEXT>
    <p>Bursitis, Elbow (Olecranon) </p>
    <p> </p>
  </BOI LERPLATE_TEXT>
  <I TEMS>
    <TEMPLATE NAME="text">
      <TYPE>G</TYPE>
      <STATUS>A</STATUS>
      <DI ALOG>1</DI ALOG>
      <BOI LERPLATE_TEXT>
        <p>Bursitis, Elbow (Olecranon)</p>
        <p></p>
        <p>Your elbow joint contains a small fluid-filled sac
called a bursa. The bursa </p>
        <p>helps the muscles and tendons move smoothly over the
bone. It also cushions and </p>
        <p>protects your elbow. Bursitis is when the bursa is
inflamed or swollen. This is </p>
        <p>most often due to overuse of or injury to the elbow.
Symptoms include swelling </p>
        <p>and pain. If the elbow is red and feels warm to the
touch, the bursa itself may </p>
        <p>be infected. </p>
        <p></p>
        <p>In most cases, elbow bursitis resolves with medications
and self-care at home. It </p>
        <p>may take 2 to 3 weeks for the bursa to heal and the
swelling to go away. In some </p>
        <p>cases, excess fluid is drained from the bursa.
Medication can also be injected </p>
        <p>directly into the bursa to help relieve symptoms. In
severe cases, surgery to </p>
        <p>remove the bursa may be needed. </p>
        <p></p>
        <p></p>
        <p>Home Care</p>
        <p>Medications: Medications may be prescribed to help
relieve pain and swelling. </p>
        <p>This may be an over-the-counter pain reliever or
prescription pain medication. </p>
        <p>Take all medications as directed. To help treat or
prevent infection, antibiotics </p>
        <p>may be given. If these are prescribed, take them as
directed until they are gone. </p>
        <p></p>
        <p>General Care: </p>
        <p></p>
        <p>Apply an ice pack or bag of frozen peas wrapped in a
thin towel to your elbow </p>
        <p>for 15 to 20 minutes at a time. Do this 3 to 4 times a
day until pain and </p>
        <p>swelling improve. </p>
        <p>Keep your elbow raised above the level of your heart
whenever possible. This </p>
      </BOI LERPLATE_TEXT>
    </TEMPLATE>
  </I TEMS>
</TEMPLATE>
```

ED-DC-INSTRUCTIONS-for-Sharing

place your arm on a pillow side. Use an Ace wrap around the elbow joint to compress the area while it is healing. Make the wrap snug but not tight to the point of causing pain. Rest your elbow to give it time to heal. You may need to wear an elbow pad to help protect and limit the movement of your elbow. During and after healing, avoid leaning on your elbows. Follow Up as advised by the doctor or our staff. If you have been referred to a specialist, make that appointment promptly. Get Prompt Medical Attention if any of the following occurs: Fever of 100.4°F (38°C) or higher; Increased pain, swelling, warmth, redness, or drainage from the joint; Trouble moving the elbow joint; Open cut or wound at the joint; Numbness or tingling in the hand; Severe pain or swelling in forearm or hand; Loss of pink color and slow return of color after squeezing fingertip or hand

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Muscle spasm">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
<I NDE NT_I TEMS>1</I NDE NT_I TEMS>
<BOILERPLATE_TEXT>
<p>Muscle spasm </p>
<p> </p>
</BOILERPLATE_TEXT>
<ITEMS>

```

Muscle spasm is a prolonged contraction of the muscle fibers. This may be caused by strain or over exertion of the muscle, injury, or metabolic changes. If it goes on long enough the muscle spasm causes pain. Common locations for muscle spasm are the legs (especially at night in older persons), in the neck and back. HOME CARE: A MUSCLE SPASM is a prolonged contraction of the muscle fibers. This may be caused by strain or over exertion of the muscle, injury, or metabolic changes. If it goes on long enough the muscle spasm causes pain. Common locations for muscle spasm are the legs (especially at night in older persons), in the neck and back.

ED-DC-INSTRUCTIONS-for-Sharing

muscle spasm. </p>

<p>1) Heat, massage and passive stretching will help relax

<p></p>

stretch the muscle passively by </p>

<p>2) When the spasm is in your arm or leg, you may

below the muscle until you </p>

<p>having someone bend or straighten the joint above or

for 5-30 seconds, as </p>

<p>feel the stretch on the sore muscle. Hold this tension

the spasm is relieved. </p>

<p>tolerated. Release. Rest for one minute. Repeat until

<p></p>

(Motrin, Advil) to control </p>

<p>3) You may use acetaminophen (Tylenol) or ibuprofen

If you have chronic liver </p>

<p>pain, unless another medicine was prescribed. [NOTE :

bleeding, talk with your </p>

<p>or kidney disease or ever had a stomach ulcer or GI

<p>doctor before using these medicines.]</p>

<p></p>

not improving within the </p>

<p>FOLLOW UP with your doctor or this facility if you are

<p>next 1-2 days. </p>

<p></p>

any of the following </p>

<p>GET PROMPT MEDICAL ATTENTION or contact your doctor if

<p>occur: </p>

<p></p>

tingly</p>

<p>-- Fingers or toes become swollen, cold, blue, numb or

<p></p>

<p>-- You develop weakness in the affected arm or leg</p>

<p></p>

measures</p>

<p>-- Pain increases and is not controlled by the above

<p></p>

<p>-- Fever</p>

<p></p>

<p>-- Or anything else that concerns you</p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="SPRAIN: Hip">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>

<I N DENT_I TEMS>1</I N DENT_I TEMS>

<BOILERPLATE_TEXT>

<p>SPRAIN: hip </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<BOILERPLATE_TEXT>

<p>Hip Strain</p>

<p> </p>

<p></p>

<p>You have a strain of the muscles around the hip joint.

ED-DC-INSTRUCTIONS-for-Sharing

A muscle strain is a pain, especially with motion bruising.

stretching or tearing of muscle fibers. This causes of that muscle. There may also be some swelling and

can walk on it without or a walker may be pharmacies and surgical or regarding when to begin

Home Care: Stay off the injured leg as much as possible until you pain. If you have a lot of pain with walking, crutches prescribed. (These can be rented or purchased at many orthopedic supply stores). Follow your doctor's advice bearing weight on that leg.

in a towel) over the day. Continue with ice needed for the relief of fourth day you may begin water) 3-4 times a day while

Apply an ice pack (ice cubes in a plastic bag, wrapped injured area for 20 minutes every 1-2 hours the first packs 3-4 times a day for the next two days, then as pain and swelling. Unless otherwise instructed, on the hot soaks or hot packs (small towel soaked in hot you gently exercise the involved area.

(Motrin, Advil) to control [NOTE: If you have chronic GI bleeding, talk with

You may use acetaminophen (Tylenol) or ibuprofen pain, unless another pain medicine was prescribed. liver or kidney disease or ever had a stomach ulcer or your doctor before using these medicines.]

when you are able to hop and symptoms do not begin to needed.

if you play sports, you may resume these activities run on the injured leg without pain. Follow Up with your doctor, or as advised by our staff, if your improve after one week. Further tests may be

radiologist. You will be care.]

[NOTE: If X-rays were taken, they will be reviewed by a notified of any new findings that may affect your

side

Get Prompt Medical Attention if any of the following occur: Increased swelling or increased bruising Pain becomes worse Decreased ability to bear weight on the injured

that concerns you.

SPECIAL INSTRUCTIONS Please return for: Worsening symptoms or anything else

ED-DC-INSTRUCTIONS-for-Sharing

```
<p></p>
</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Sprain: Knee">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HIDE_DI ALOG_ITEMS>1</HIDE_DI ALOG_ITEMS>
  <INDENT_ITEMS>1</INDENT_ITEMS>
  <BOILERPLATE_TEXT>
    <p>Sprain: Knee </p>
  </BOILERPLATE_TEXT>
  <ITEMS>
```

```
<TEMPLATE NAME="Text">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <BOILERPLATE_TEXT>
    <p>SPRAIN: KNEE </p>
    <p></p>
```

A sprain is an injury to the ligaments or capsule that holds a joint together. There are no broken bones. Most sprains take three to six weeks to heal. If the ligament is completely torn (severe sprain), it can take months to recover from.

Most knee sprains are treated with a splint, knee immobilizer or elastic wrap for support. Severe sprains may require surgery.

HOME CARE:

1. Stay off the injured leg as much as possible until you can walk on it without pain. If you have a lot of pain with walking, crutches or a walker may be prescribed. (These can be rented or purchased at many pharmacies and surgical or orthopedic supply stores). Follow your doctor's advice regarding when to begin bearing weight on that leg.
2. Keep your leg elevated to reduce pain and swelling. When sleeping, place a pillow under the injured leg so it is level with your waist. This is very important during the first 48 hours.
3. Apply an ice pack (ice cubes in a plastic bag, wrapped in a towel) over the injured area for 20 minutes every 1-2 hours the first day. You can place the ice pack directly over the splint. If a Velcro knee immobilizer was applied, you can open this to apply the ice pack directly to the knee. Continue with ice packs 3-4 times a day for the next two days, then as needed for the relief of pain and

ED-DC-INSTRUCTIONS-for-Sharing

<p>swelling. </p>

<p></p>

(Motrin, Advil) to control </p>

<p>4. You may use acetaminophen (Tylenol) or ibuprofen

[NOTE: If you have chronic </p>

<p>liver or kidney disease or ever had a stomach ulcer or

GI bleeding, talk with </p>

<p>your doctor before using these medicines.]</p>

<p></p>

all times. Bathe with </p>

<p>5. If you were given a splint, keep it completely dry at

plastic bag, rubber-banded </p>

<p>your splint out of the water, protected with a large

can dry it with a hair-</p>

<p>dryer. If you have a Velcro knee immobilizer, you can

remove this to bathe, </p>

<p>unless told otherwise. </p>

<p></p>

weeks. </p>

<p>[NOTE: If X-rays were taken, they will be reviewed by a

radiologist. You will be </p>

<p>notified of any new findings that may affect your

care.]</p>

<p></p>

occur: </p>

<p>GET PROMPT MEDICAL ATTENTION if any of the following

<p></p>

<p>oThe plaster cast or splint becomes wet or soft</p>

<p></p>

than 24 hours</p>

<p>oThe fiberglass cast or splint remains wet for more

<p></p>

<p></p>

<p></p>

<p>oPain or swelling increases</p>

<p></p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="FRACTURE: HAND [closed]">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HIDE_DI ALOG_ITEMS>1</HIDE_DI ALOG_ITEMS>

<INDENT_ITEMS>1</INDENT_ITEMS>

<BOILERPLATE_TEXT>

<p>FRACTURE: HAND [closed] </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<BOILERPLATE_TEXT>

<p>FRACTURE: HAND [closed]</p>

<p></p>

<p>You have a fracture (break) of a bone in your hand.

This may be a small crack or </p>

<p>chip in the bone or, it may be a major break with the

ED-DC-INSTRUCTIONS-for-Sharing

broken parts pushed out of position. A hand fracture is treated with a splint or cast. It usually takes 4-6 weeks to heal. Severe injuries may require surgery.

HOME CARE:

1) Keep your arm elevated to reduce pain and swelling. When sitting or lying down, elevate your arm above the level of your heart. You can do this by placing your arm on a pillow that rests on your chest or on a pillow at your side. This is most important during the first 48 hours after injury.

2) Apply an ice pack (ice cubes in a plastic bag, wrapped in a towel) over the injured area for 20 minutes every 1-2 hours the first day. You can place the ice pack inside the sling and directly over the splint/cast. Continue with ice packs 3-4 times a day for the next two days, then as needed for the relief of pain and swelling.

3) Keep the cast/splint completely dry at all times. Bathe with your cast/splint rubber-banded at the top out of the water, protected with a large plastic bag, it with a hair-dryer. If a fiberglass cast/splint gets wet, you can dry (Motrin, Advil) to control pain, unless another pain medicine was prescribed. [NOTE : If you have chronic liver or kidney disease or ever had a stomach ulcer or GI bleeding, talk with your doctor before using these medicines.]

FOLLOW UP with orthopedics next available appointment, or as advised by our staff, to be sure the bone is healing properly. If you were given a splint, it may be changed to a cast at your follow-up visit.

[NOTE: A radiologist will review any X-rays that were taken. We will notify you of any new findings that may affect your care.]

GET PROMPT MEDICAL ATTENTION if any of the following occur:

- The plaster cast or splint becomes wet or soft
- The fiberglass cast or splint remains wet for more than 24 hours

ED-DC-INSTRUCTIONS-for-Sharing

splint

tingly

Increased tightness or pain under the cast or

Fingers become swollen, cold, blue, numb or

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Fracture: Toe [Closed]">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HIDE_DIALOG_ITEMS>1</HIDE_DIALOG_ITEMS>
<INDENT_ITEMS>1</INDENT_ITEMS>
<BOILERPLATE_TEXT>
<p>Fracture: Toe [Closed] </p>
<p> </p>
</BOILERPLATE_TEXT>
<ITEMS>
<TEMPLATE NAME="text">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<BOILERPLATE_TEXT>
<p>Fracture: Toe [Closed]</p>
<p></p>
<p>You have a fracture of your toe (broken toe). This
causes local pain, swelling
and bruising. This injury takes about four weeks to
heal. Toe injuries are often
("buddy taping"). This protects
the injured toe and holds it in position.</p>
<p></p>
<p></p>
<p></p>
<p>If the TOENAIL has been severely injured, it may fall
off in 1-2 weeks. It takes
up to 12 months for a new toenail to grow back.</p>
<p></p>
<p>Home Care: </p>
<p>1) You may be given a cast shoe to wear to prevent
movement in your toe. If not,
you can use a sandal or any shoe that does not put
pressure on the injured toe
until the swelling and pain go away. If using a sandal,
be careful not to strike
your foot against anything, since another injury could
make the fracture worse. </p>
<p>If you were given crutches, do not put full weight on
the injured foot until you
can do so without pain.</p>
<p></p>
<p>2) Keep your foot elevated to reduce pain and swelling.
When sleeping, place a
pillow under the injured leg. When sitting, support the
injured leg so it is
level with your waist. This is very important during
the first 48 hours.</p>
<p></p>
<p>3) Apply an ice pack (ice cubes in a plastic bag,
wrapped in a towel) over the

```

ED-DC-INSTRUCTIONS-for-Sharing

injured area for 20 minutes every 1-2 hours the first day. Continue with ice packs 3-4 times a day for the next two days, then as needed for the relief of pain and swelling.

4) If buddy tape was applied and it becomes wet or dirty, change it. You may replace it with paper, plastic or cloth tape. Cloth tape and paper tapes must be kept dry.

5) You may use acetaminophen (Tylenol) or ibuprofen (Motrin, Advil) to control pain, unless another pain medicine was prescribed. [NOTE : If you have chronic liver or kidney disease or ever had a stomach ulcer or GI bleeding, talk with your doctor before using these medicines.]

6) You may return to sports or physical education activities after 4 weeks or when you can run without pain.

Follow Up With Your Doctor In One Week, Or As Advised By Our Staff, To Be Sure The Bone Is Healing Properly.

[NOTE: Any X-rays taken will be reviewed by a radiologist. You will be notified of any new findings that may affect your care.]

Get Prompt Medical Attention If Any Of The Following Occur:

- oIncreasing pain or swelling
- oToe becomes cold, blue, numb or tingly
- oSigns of infection: fever, redness, warmth, swelling or drainage from the wound
- oFever of 100.4°F (38°C) or higher, or as directed by your healthcare provider

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Fracture: Foot">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
<I NDE NT_I TEMS>1</I NDE NT_I TEMS>
<BOILERPLATE_TEXT>
<p>Fracture: Foot </p>
<p> </p>
</BOILERPLATE_TEXT>
<I TEMS>
<TEMPLATE NAME="text">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<BOILERPLATE_TEXT>
<p>Fracture: Foot</p>

```

ED-DC-INSTRUCTIONS-for-Sharing

foot. This will cause pain, swelling and sometimes bruising. It will take about 4-6 weeks to heal. A foot fracture may be treated with a special shoe, splint, cast or boot.

Home Care:

" You may be given a splint, cast, shoe or boot to prevent movement at the injury. Unless you were told otherwise, use crutches or a walker and do not bear weight on the injured foot until cleared by your doctor to do so. (Crutches and walkers can be rented at many pharmacies and surgical/orthopedic supply stores).

Do not put weight on a splint; it will break.

" Keep your leg elevated to reduce pain and swelling. When sleeping, place a pillow under the injured leg. When sitting, support the injured leg so it is level with your waist. This is very important during the first 48 hours.

" Apply an ice pack (ice cubes in a plastic bag, wrapped in a towel) over the injured area for 20 minutes every 1-2 hours the first day. You can place the ice pack directly over the splint/cast. Unless told otherwise, you can open the boot or shoe to apply ice. Continue with ice packs 3-4 times a day for the next two days, then as needed for the relief of pain and swelling.

" Keep the splint/cast/boot/shoe dry. When bathing, protect it with a large plastic bag, rubber-banded at the top end. If a fiberglass splint/cast or boot gets wet, you can dry it with a hair-dryer. Unless told otherwise, you can remove a boot or shoe to bathe.

" You may use acetaminophen (Tylenol) or ibuprofen (Motrin, Advil) to control pain, unless another pain medicine was prescribed. [NOTE: If you have chronic liver or kidney disease or ever had a stomach ulcer or GI bleeding, talk with your doctor before using these medicines.]

Follow Up

with your doctor within one week, or as advised by our staff, to be sure the bone is healing properly. If you were given a splint, it may be changed to a cast or boot at your follow-up visit. [NOTE: A radiologist will review any X-rays that were taken. We will notify you of any new findings that may affect your care.]

Get Prompt Medical Attention

if any of the following occur:

" The plaster cast or splint becomes wet or soft

" The fiberglass cast or splint remains wet for more than 24 hours

" Increased tightness or pain under the cast or splint

" Toes become swollen, cold, blue, numb or tingly

ED-DC-INSTRUCTIONS-for-Sharing

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="Fracture: Forearm (Radius/Ulna) ">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>

<IDENT_ITEMS>1</IDENT_ITEMS>

<BOILERPLATE_TEXT>

<p>Fracture: Forearm (Radius/Ulna) </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<BOILERPLATE_TEXT>

<p>Fracture: Forearm (Radius/Ulna) </p>

<p></p>

<p>You have a break (fracture) of both bones in the

forearm (radius and ulna). The </p>

<p>bones are out of place and must be "set" (reduced) to

make them straight again. </p>

<p>This fracture usually takes 4-6 weeks to heal. Initial

treatment is with a splint </p>

<p>or cast. Severe injuries may require surgery to

repair. </p>

<p></p>

<p></p>

<p></p>

<p>Home Care: </p>

<p>1. </p>

<p>Keep your arm elevated to reduce pain and swelling.

When sitting or lying down </p>

<p>elevate your arm above the level of your heart. You can

do this by placing your </p>

<p>arm on a pillow that rests on your chest or on a pillow

at your side. This is </p>

<p>most important during the first 48 hours after

injury. </p>

<p></p>

<p>2. </p>

in a towel) over the </p>

<p>injured area for 20 minutes every 1-2 hours the first

day. You can place the ice </p>

<p>pack inside the sling and directly over the

splint/cast. Continue with ice packs </p>

<p>3-4 times a day for the next two days, then as needed

for the relief of pain and </p>

<p>swelling. </p>

<p></p>

<p>3. </p>

with your cast/splint out </p>

<p>Keep the cast/splint completely dry at all times. Bathe

rubber-banded at the top end. </p>

<p>of the water, protected with a large plastic bag,

<p>If a fiberglass splint/cast gets wet, you can dry it

with a hair-dryer. </p>

<p></p>

ED-DC-INSTRUCTIONS-for-Sharing

4.

You may use acetaminophen (Tylenol) or ibuprofen (Motrin, Advil) to control pain, unless another pain medicine was prescribed. [NOTE: If you have chronic liver or kidney disease or ever had a stomach ulcer or GI bleeding, talk with your doctor before using these medicines.]

Follow Up

with your doctor in one week, or as advised by our staff, to be sure the bone is healing properly. If a splint was applied, it will be changed to a cast during your follow-up visit.

There is a chance that the fractures will move out of place again during the first week before the ends begin to seal together. Therefore, it is important that you follow-up as directed for another X-ray.

[NOTE: If x-rays were taken, they will be reviewed by a radiologist. You will be notified if there are any new findings that may affect your care.]

Get Prompt Medical Attention

if any of the following occur:

- The plaster cast or splint becomes wet or soft
- The fiberglass cast or splint remains wet for more than 24 hours
- Increased tightness or pain under the cast or splint
- Fingers become swollen, cold, blue, numb or tingly

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="SPRAIN: ELBOW ">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
<I NDENT_I TEMS>1</I NDENT_I TEMS>
<BOILERPLATE_TEXT>
<p>SPRAIN: ELBOW </p>
<p> </p>
</BOILERPLATE_TEXT>
<ITEMS>
<TEMPLATE NAME="text">
<TYPE>G</TYPE>
<STATUS>A</STATUS>

```

ED-DC-INSTRUCTIONS-for-Sharing

<DI ALOG>1</DI ALOG>

<BOILERPLATE_TEXT>

<p>SPRAIN: ELBOW </p>

<p></p>

<p> </p>

<p></p>

joint together. This may take </p>

it is. Moderate to severe </p>

sprains can be treated without </p>

<p>any special support. </p>

<p></p>

<p>HOME CARE: </p>

<p></p>

When sitting or lying down </p>

do this by placing your </p>

at your side. This is </p>

injury. </p>

<p></p>

wrapped in a towel) over the </p>

day. You should continue </p>

Continue the use of ice </p>

<p>packs for relief of pain and swelling as needed. </p>

<p></p>

Leave it on as advised, or </p>

Bathe with your splint out </p>

rubber-banded at the top end. </p>

hair-dryer. Once the </p>

range of motion several </p>

<p>times a day will prevent stiffness. </p>

<p></p>

of motion exercises after </p>

prevent stiffness in the </p>

better. </p>

<p></p>

(Motrin, Advil) to control </p>

<p>pain, unless another pain medicine was prescribed.

[NOTE: If you have chronic </p>

GI bleeding, talk with </p>

<p>your doctor before using these medicines.]</p>

<p></p>

starting to improve in the </p>

<p>next five days. </p>

ED-DC-INSTRUCTIONS-for-Sharing

<p></p>
<p>[NOTE: If X-rays were taken, they will be reviewed by a radiologist. You will be notified of any new findings that may affect your care.]</p>

<p></p>
<p>GET PROMPT MEDICAL ATTENTION if any of the following occur: </p>

<p></p>
<p>oThe plaster splint becomes wet or soft</p>
<p></p>
<p>oThe fiberglass splint remains wet for more than 24 hours</p>

<p></p>
<p>olIncreased tightness or pain in the elbow</p>
<p></p>
<p>oFingers become swollen, cold, blue, numb or tingly</p>

```
</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Costochondritis">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>
  <I NDENT_ITEMS>1</I NDENT_ITEMS>
  <BOILERPLATE_TEXT>
    <p>Costochondritis </p>
  </BOILERPLATE_TEXT>
</ITEMS>
```

<TEMPLATE NAME="text">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<BOILERPLATE_TEXT>
<p>Chest Wall Pain: "Costochondritis"</p>
<p></p>
<p></p>
<p></p>

<p>The chest pain that you have had today is caused by "Costochondritis." This condition is due to an inflammation of the cartilage joining the ribs to the breastbone. It is not caused by heart or lung problems. Although the exact cause for costochondritis is not known, it often occurs during times of emotional stress. It can be painful, but it is not dangerous. It usually disappears within one to two weeks, but may recur. Rarely, a more serious condition may cause symptoms similar to costochondritis; therefore, watch for the warning signs </p>

<p></p>
<p>listed below.</p>
<p></p>
<p>Home Care:</p>
<p></p>
<p>o</p>
<p>If you feel that emotional stress is a cause of your condition, try to identify sources of that stress. It may not be obvious! Learn

ED-DC-INSTRUCTIONS-for-Sharing

ways to deal with the stress

in your life such as regular exercise, muscle relaxation, meditation, or simply taking time out for yourself. For more information about this, consult your doctor or go to a local bookstore and review books and tapes available on the subject of "stress reduction."

You may use acetaminophen (Tylenol) or ibuprofen (Motrin, Advil) to control pain, unless another pain medicine was prescribed. [NOTE: If you have liver disease or ever had a stomach ulcer, talk with your doctor before using these medicines.]

The use of heat (hot wet compress or heating pad) with or without local analgesic creams (Deep Heat Rub, Ben Gay) will be helpful to reduce pain.

Follow Up

start to improve within the next two days.

Get Prompt Medical Attention

if any of the following occur:

- A change in the type of pain: if it feels different, becomes more severe, lasts longer, or spreads into your shoulder, arm, neck, jaw or back
- Shortness of breath or increased pain with breathing
- Weakness, dizziness, or fainting
- Cough with dark colored sputum (phlegm) or blood
- Abdominal pain
- Dark red or black stools
- Fever of 100.4°F (38°C) or higher, or as directed by your healthcare provider

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>

ED-DC-INSTRUCTIONS-for-Sharing

```

<TEMPLATE NAME="Rib: Contusion Vs Minor Fracture">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HIDE_DI ALOG_ITEMS>1</HIDE_DI ALOG_ITEMS>
  <I NDE NT_I TEMS>1</I NDE NT_I TEMS>
  <BOI LERPLATE_ TEXT>
    <p>Rib: Contusion Vs Minor Fracture </p>
    <p> </p>
  </BOI LERPLATE_ TEXT>
  <I TEMS>
    <TEMPLATE NAME="tetx">
      <TYPE>G</TYPE>
      <STATUS>A</STATUS>
      <DI ALOG>1</DI ALOG>
      <BOI LERPLATE_ TEXT>
        <p>Rib: Contusion Vs Minor Fracture</p>
        <p> </p>
        <p></p>
        <p>A rib contusion is a bruise to one or more rib bones.
It may cause pain, </p>
        <p>tenderness, swelling, and a purplish discoloration.
There may be a sharp pain </p>
        <p>with each breath. A rib contusion takes from a few days
to a few weeks to heal. A </p>
        <p>rib fracture (bone break) may cause the same symptoms
as a rib contusion. The </p>
        <p>small crack may not be seen on a regular chest
x-ray. </p>
        <p></p>
        <p>Treatment for both conditions is the same and is
described below. </p>
        <p></p>
        <p>Home Care: </p>
        <p>Medications: You may be given medication for pain. Take
this and all medication </p>
        <p>as directed. </p>
        <p></p>
        <p>General Care </p>
        <p></p>
        <p>Do not do any heavy lifting or strenuous exertion, or
any activity that causes </p>
        <p>pain. </p>
        <p>Use a cold pack (such as ice cubes in a plastic bag or
a bag of frozen peas) </p>
        <p>wrapped in a thin towel. Apply to the injured area for
20 minutes every 1 to 2 </p>
        <p>hours the first day. Continue applying 3 to 4 times a
day for the next 2 days, </p>
        <p>then as needed for the relief of pain and swelling. </p>
        <p>The first 3 to 4 weeks of healing will be the most
painful. If your pain is not </p>
        <p>controlled by the treatment given, contact your doctor.
Sometimes a stronger pain </p>
        <p>medication may be needed. A nerve block (numbing the
nerve between the ribs) can be </p>
        <p>performed in case of severe pain. </p>
        <p>Follow Up</p>
        <p>with your doctor as directed. </p>
        <p></p>
        <p>Get Prompt Medical Attention</p>
        <p>if any of the following occur: </p>
        <p></p>

```

ED-DC-INSTRUCTIONS-for-Sharing

- <p>oFever over 100.4° F (38°C)</p>
- <p>oShortness of breath</p>
- <p>oDizziness, weakness, or fainting</p>
- <p>oNew or worsening pain</p>
- <p>oAbdominal (stomach) pain</p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="CONTUSION: LOWER EXTREMITY ">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HIDE_DI ALOG_ITEMS>1</HIDE_DI ALOG_ITEMS>

<INDENT_ITEMS>1</INDENT_ITEMS>

<BOILERPLATE_TEXT>

<p>CONTUSION: LOWER EXTREMITY </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="tetx">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<BOILERPLATE_TEXT>

<p>CONTUSION: LOWER EXTREMITY </p>

<p></p>

<p>You have a CONTUSION of your LOWER extremity (leg, knee, ankle, foot, or toes). </p>

<p>This causes local pain, swelling and sometimes

bruising. There are no broken </p>

<p>bones. This injury may take from a few days to a few

weeks to heal. </p>

<p></p>

<p>HOME CARE: </p>

<p></p>

<p>1) Keep your leg elevated to reduce pain and swelling.

When sleeping, place a </p>

<p>pillow under the injured leg. When sitting, support the

injured leg so it is </p>

<p>level with your waist. This is very important during

the first 48 hours. </p>

<p></p>

<p>2) If CRUTCHES have been advised, do not bear full

weight on the injured leg </p>

<p>until you can do so without pain. You may return to

sports when you are able to </p>

<p>hop and run on the injured leg without pain. </p>

<p></p>

<p>3) Apply an ice pack (ice cubes in a plastic bag,

wrapped in a towel) over the </p>

<p>injured area for 20 minutes every 1-2 hours the first

day for pain relief. </p>

<p>Continue this 3-4 times a day until the pain and

swelling goes away. </p>

<p></p>

<p>4) You may use acetaminophen (Tylenol) or ibuprofen

(Motrin, Advil) to control </p>

<p>pain, unless another pain medicine was prescribed. [

NOTE : If you have chronic </p>

<p>liver or kidney disease or ever had a stomach ulcer or

GI bleeding, talk with </p>

<p>your doctor before using these medicines.]</p>

ED-DC-INSTRUCTIONS-for-Sharing

<p></p>
<p>FOLLOW UP with your doctor or this facility if you are
not starting to improve </p>
<p>within the next THREE days.</p>
<p></p>
<p>[NOTE: If X-rays were taken, they will be reviewed by a
radiologist. You will be </p>
care.]</p>
<p></p>
<p>GET PROMPT MEDICAL ATTENTION if any of the following
occur: </p>

- <p></p>
- <p>-- Pain or swelling increases</p>
- <p></p>
- <p>-- Toes become cold, blue, numb or tingly</p>
- <p></p>
- <p>-- Redness, warmth or drainage from the skin</p>
- <p></p>
- <p>-- or anything else that concerns you</p>

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>

<TEMPLATE NAME="CONTUSION: HAND ">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HIDE_DI ALOG_ITEMS>1</HIDE_DI ALOG_ITEMS>
<IDENT_ITEMS>1</IDENT_ITEMS>
<BOILERPLATE_TEXT>
<p>CONTUSION: HAND </p>
<p> </p>
</BOILERPLATE_TEXT>
<ITEMS>

<TEMPLATE NAME="tetx">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<BOILERPLATE_TEXT>
<p>CONTUSION: HAND </p>
<p></p>
<p>You have a CONTUSION of your hand. This causes local
pain, swelling and sometimes </p>
from a few days to a few </p>
<p>bruising. There are no broken bones. This injury takes
</p>
<p>weeks to heal.</p>
<p></p>
<p>HOME CARE: </p>
<p></p>
<p>1) Keep your arm elevated to reduce pain and swelling.
This is very important </p>

<p>during the first 48 hours.</p>
<p></p>
<p>2) Apply an ice pack (ice cubes in a plastic bag,
wrapped in a towel) over the </p>
day. You should continue </p>
Continue the use of ice </p>
<p>packs for relief of pain and swelling as needed.</p>
<p></p>
<p>3) You may use acetaminophen (Tylenol) or ibuprofen

ED-DC-INSTRUCTIONS-for-Sharing

(Motrin, Advil) to control

</p><p>pain, unless another pain medicine was prescribed. [

NOTE : If you have chronic

</p><p>liver or kidney disease or ever had a stomach ulcer or

GI bleeding, talk with

</p><p>your doctor before using these medicines.]</p><p></p>

not starting to improve

</p><p>FOLLOW UP with your doctor or this facility if you are

not starting to improve

</p><p>within the next THREE days.</p><p></p>

radiologist. You will be

</p><p>[NOTE: If X-rays were taken, they will be reviewed by a

care.]</p>

<p>notified of any new findings that may affect your

occur:</p>

<p></p><p>GET PROMPT MEDICAL ATTENTION if any of the following

occur:</p>

<p></p><p>GET PROMPT MEDICAL ATTENTION if any of the following

tingly</p>

<p></p><p>-- Pain or swelling increases</p><p></p>

<p></p><p>-- Redness, warmth or drainage</p><p></p>

<p></p><p>-- Hand or fingers becomes cold, blue, numb or

tingly</p>

```
</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="CONTUSION, SOFT TISSUE ">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>
<I N DENT_ITEMS>1</I N DENT_ITEMS>
<BOILERPLATE_TEXT>
<p>CONTUSION, SOFT TISSUE </p>
<p> </p>
</BOILERPLATE_TEXT>
<ITEMS>
```

and some bleeding under the

</p><p>You have a CONTUSION, which is a bruise with swelling

few days to a few weeks to

</p><p>skin. There are no broken bones. This injury takes a

few days to a few weeks to

</p><p>heal.</p><p></p>

HOME CARE:

</p><p></p><p>1) Keep the injured part elevated to reduce pain and

swelling. This is especially

</p><p>important during the first 48 hours.</p><p></p>

wrapped in a towel) and apply

</p><p>2) Make an ice pack (ice cubes in a plastic bag,

this 3-4 times a day until

</p><p>for 20 minutes every 1-2 hours the first day. Continue

this 3-4 times a day until

</p><p>

ED-DC-INSTRUCTIONS-for-Sharing

<p>the pain and swelling goes away.</p>

<p></p>

(Motrin, Advil) to control

<p>3) You may use acetaminophen (Tylenol) or ibuprofen

<p></p>

NOTE : If you have chronic

<p>pain, unless another pain medicine was prescribed. [

<p></p>

GI bleeding, talk with

<p>liver or kidney disease or ever had a stomach ulcer or

<p></p>

<p>your doctor before using these medicines.]</p>

<p></p>

not improving within the

<p>FOLLOW UP with your doctor or this facility if you are

<p></p>

<p>next THREE days.</p>

<p></p>

radiologist. You will be

<p>[NOTE: If X-rays were taken, they will be reviewed by a

<p></p>

care.]</p>

<p>notified of any new findings that may affect your

<p></p>

<p></p>

occur:</p>

<p>GET PROMPT MEDICAL ATTENTION if any of the following

<p></p>

<p></p>

<p>-- Pain or swelling increases</p>

<p></p>

tingly</p>

<p>-- Injured arm or leg becomes cold, blue, numb or

<p></p>

<p></p>

<p>-- Redness, warmth or drainage from the skin</p>

<p></p>

<p>-- Or anything else that concerns you</p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="Shoulder Blade or Collarbone Fracture">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HIDE_DI ALOG_ITEMS>1</HIDE_DI ALOG_ITEMS>

<INDENT_ITEMS>1</INDENT_ITEMS>

<BOILERPLATE_TEXT>

<p>Shoulder Blade or Collarbone Fracture </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<BOILERPLATE_TEXT>

<p>Shoulder Blade or Collarbone Fracture</p>

<p></p>

<p></p>

<p>You have one long collarbone (clavicle) on top of each

shoulder. The collarbone

<p>is attached to your shoulder blade (scapula). These

bones hold your arms in place

<p></p>

<p>and help them move. Collarbone breaks (fractures) are

very common, and are often

<p></p>

<p>due to a blow or fall. Shoulder blade fractures are

much less common. Without

<p></p>

<p>treatment, either injury can lead to chronic shoulder

problems.</p>

<p></p>

<p></p>

<p></p>

ED-DC-INSTRUCTIONS-for-Sharing

<p></p>

<p></p>

<p></p>

<p>Risk Factors</p>

<p></p>

<p>The collarbones don't harden fully until about age 20.

As a result, children and

</p>

<p>teenagers can easily fracture these bones. A baby's

collarbone may fracture

</p>

<p>during birth. Shoulder blades rarely break. When they

do, it's often the result

</p>

<p>of violent trauma, such as a car crash.</p>

<p></p>

<p>When to Go to the Emergency Room (ER)</p>

<p></p>

<p>Get help right away if you suspect a fractured

collarbone or shoulder blade. The

</p>

<p>symptoms of a fractured collarbone or shoulder blade

include:

<p></p>

<p>Extreme pain when you move your arm</p>

<p></p>

<p></p>

<p>A shoulder that sags down and forward</p>

<p></p>

<p></p>

<p>A bump over the fracture site</p>

<p></p>

<p></p>

<p>A grinding feeling and extreme pain when you try to

lift your arm

</p>

<p></p>

<p>Bone protruding from skin, or "tenting" of skin at the

fracture site

</p>

<p></p>

<p>What to Expect in the ER</p>

<p></p>

<p>You will be examined.</p>

<p></p>

<p></p>

<p>X-rays will be taken of your chest and shoulder.</p>

<p></p>

<p></p>

<p>You may be given medication to lessen your pain.</p>

<p></p>

<p></p>

<p>A computed tomography (CT) scan may be done. This test

provides detailed images

</p>

<p>of your bones.</p>

<p></p>

<p></p>

<p>Treatment</p>

<p></p>

<p>Both types of fractures are often treated with an arm

sling. This holds the bone

</p>

<p>in place and keeps it from moving during healing. You

also may be instructed to

</p>

<p>do special exercises to help improve strength and range

of motion in your

</p>

<p>shoulder. Occasionally, surgery is recommended to

realign the fracture or hold it

</p>

ED-DC-INSTRUCTIONS-for-Sharing

<p>in place so that it can heal properly.</p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="Neck Sprain or Strain">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI A LOG>1</DI A LOG>

<HI DE_DI A LOG_I TEMS>1</HI DE_DI A LOG_I TEMS>

<I N DENT_I TEMS>1</I N DENT_I TEMS>

<BOILERPLATE_TEXT>

<p>Neck Sprain or Strain </p>

<p> </p>

</BOILERPLATE_TEXT>

<I TEMS>

<TEMPLATE NAME="text">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI A LOG>1</DI A LOG>

<BOILERPLATE_TEXT>

<p>Neck Sprain or Strain</p>

<p></p>

<p>A sudden force that causes turning or bending of the

neck can cause sprain or </p>

<p>strain. An example would be the force from a car

accident. This can stretch or </p>

<p>tear muscles called a strain. It can also stretch or

tear ligaments called a </p>

<p>sprain. Either of these can cause neck pain. Sometimes

neck pain occurs after a </p>

<p>simple awkward movement. In either case, muscle spasm

is commonly present and </p>

<p>contributes to the pain.</p>

<p></p>

<p></p>

a car accident or fall), </p>

<p>X-rays are usually not ordered for the initial

evaluation of neck pain. If pain </p>

<p>continues and dose not respond to medical treatment,

X-rays and other tests may </p>

<p>be performed at a later time.</p>

<p></p>

<p>Home care</p>

days after the injury. Rest </p>

<p>until symptoms begin to improve.</p>

<p> </p>

towel that supports the </p>

<p>head and keeps the spine in a neutral position. The

position of the head should </p>

<p>not be tilted forward or backward.</p>

<p> </p>

minutes every 3 to 6 </p>

<p>hours. You should do this for the first 24 to 48 hours.

You can make an ice pack </p>

<p>by filling a plastic bag that seals at the top with ice

cubes and then wrapping </p>

<p>it with a thin towel. After 48 hours, apply heat (warm

shower or warm bath) for </p>

ED-DC-INSTRUCTIONS-for-Sharing

and heat. </p>

<p> </p>
<p>o You may use over-the-counter pain medicine to control pain, unless another pain </p>

<p>medicine was prescribed. If you have chronic liver or kidney disease or ever had </p>
<p>a stomach ulcer or GI bleeding, talk with your healthcare provider before </p>

using </p>
<p>these medicines. </p>
<p> </p>
<p>o If a soft cervical collar was prescribed, it should be worn only for periods of </p>

<p>increased pain. It should not be worn for more than 3 hours a day, or for a </p>
<p>period longer than 1 to 2 weeks. </p>

<p> </p>
<p></p>
<p>Follow-up care</p>
<p></p>
<p>Follow up with your healthcare provider as directed.

Physical therapy may be </p>
<p>needed. </p>
<p></p>

<p>Sometimes fractures don't show up on the first X-ray. Bruises and sprains can </p>
<p>sometimes hurt as much as a fracture. These injuries can take time to heal </p>

<p>completely. If your symptoms don't improve or they get worse, talk with your </p>
<p>healthcare provider. You may need a repeat X-ray or other tests. If X-rays were </p>

<p>taken, you will be told of any new findings that may affect your care. </p>
<p></p>
<p>Call 911</p>
<p></p>

<p>Call 911 if you have: </p>
<p>o Neck swelling, difficulty or painful swallowing</p>
<p> </p>

<p>o Difficulty breathing</p>
<p> </p>
<p>o Chest pain</p>
<p> </p>
<p></p>

<p>When to seek medical advice</p>
<p></p>
<p>Call your healthcare provider right away if any of

these occur: </p>
<p>o Pain becomes worse or spreads into your arms</p>
<p> </p>
<p>o Weakness or numbness in one or both arms</p>
<p> </p>

```
</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="CARPAL TUNNEL SYNDROME ">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>
<I NDENT_ITEMS>1</I NDENT_ITEMS>
```

ED-DC-INSTRUCTIONS-for-Sharing

<BOILERPLATE_TEXT>

<p>Carpal tunnel syndrome </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI A LOG>1</DI A LOG>

<BOILERPLATE_TEXT>

<p>CARPAL TUNNEL SYNDROME </p>

<p></p>

<p> </p>

<p></p>

wrist and arm. It is caused </p>

<p>by pressure on the median nerve.</p>

<p></p>

and movement to the hand. </p>

<p>It passes through a tunnel in the wrist ("carpal

tunnel"). This tunnel is made up </p>

<p>of bones and ligaments. Narrowing of this tunnel or

swelling of tissues inside </p>

<p>the tunnel puts pressure on the median nerve. This

causes numbness, pins and </p>

<p>needles or electric shooting pains in the hand and

forearm. Often the pain is </p>

<p>worse at night and may awaken you from sleep.</p>

<p></p>

with use of birth control </p>

<p>pills. It is more common in workers who must bend their

wrists frequently, and </p>

<p>those who work with power tools that cause strong

vibrations.</p>

<p></p>

<p>HOME CARE: </p>

<p></p>

wrist back and forth. </p>

<p>This puts pressure on the median nerve. Avoid the use

of power tools with strong </p>

<p>vibrations.</p>

<p></p>

you sleep. You may also wear </p>

<p>it during the day for comfort.</p>

<p></p>

stiffness.</p>

<p></p>

symptoms. If you type most of </p>

<p>the day, changing the position of the keyboard or

adding a wrist support may </p>

<p>help. Your wrist should be in a neutral position and

not bent back when typing.</p>

<p></p>

Naprosyn) to treat pain </p>

<p>and inflammation, unless another medicine was

prescribed. If you can't take these </p>

ED-DC-INSTRUCTIONS-for-Sharing

pain, but does not treat
 kidney disease or ever had
 before using these
 relief and does not treat
 of a steroid drug into the
 to open the carpal tunnel
 does not begin to improve
 radiologist. You will be
 care.]
 occur:

<p>medicines, acetaminophen (Tylenol) may help with the
 <p>inflammation. [NOTE: If you have chronic liver or
 <p>stomach ulcer or GI bleeding, talk with your doctor
 <p>medicines.]</p>
 <p></p>
 <p>6. Narcotic pain medicine will only give temporary
 <p>the
 <p>problem. If pain continues, you may need an injection
 <p>wrist.</p>
 <p></p>
 <p>7. If the above measures fail, you may require surgery
 <p>and release the pressure on the trapped nerve.</p>
 <p></p>
 <p>FOLLOW UP with your doctor or this facility if the pain
 <p>within the next week.</p>
 <p></p>
 <p>[NOTE: If X-rays were taken, they will be reviewed by a
 <p>notified of any new findings that may affect your
 <p></p>
 <p>GET PROMPT MEDICAL ATTENTION if any of the following
 <p></p>
 <p>Pain not improving with the above treatment</p>
 <p></p>
 <p>Fingers or hand becomes cold, blue, numb or tingly</p>
 <p></p>
 <p>The entire arm becomes swollen or weak</p>

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Bursitis">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HIDE_DI ALOG_ITEMS>1</HIDE_DI ALOG_ITEMS>
<IDENT_ITEMS>1</IDENT_ITEMS>
<BOILERPLATE_TEXT>
<p>Bursitis </p>
<p> </p>
</BOILERPLATE_TEXT>
</ITEMS>

```

"bursa". These are small, flat
 muscles and tendons over
 the joints.

ED-DC-INSTRUCTIONS-for-Sharing

overuse of the joint, or
and tenderness over a joint

<p>Bursitis is an inflammation of the bursa due to injury, infection of the bursa itself. Symptoms include pain that is made worse with movement.</p><p></p>

and by resting the joint.
directly into the bursa.

<p>Bursitis is treated with an anti-inflammatory medicine</p><p>More severe cases require injection of medicine</p><p></p><p>Home Care:</p>

in a towel) over the
day. Continue this 3-4

<p>1.</p><p>Apply an ice pack (ice cubes in a plastic bag, wrapped in a towel) over the injured area for 20 minutes every 1-2 hours the first day. Continue this 3-4 times a day until the pain and swelling improves.</p><p></p><p>2.</p><p>Rest the painful joint and protect it from movement.</p>

This will allow the

<p>inflammation to heal faster.</p><p></p><p>3.</p>

(Aleve, Naprosyn) to treat
prescribed. If you can't take
the pain, but does not
kidney disease or ever
doctor before using these

<p>You may take ibuprofen (Motrin, Advil) or naproxen pain and inflammation, unless another medicine was prescribed. If you can't take these medicines, acetaminophen (Tylenol) may help with the pain, but does not treat inflammation. [NOTE: If you have chronic liver or kidney disease or ever had a stomach ulcer or GI bleeding, talk with your doctor before using these medicines.]</p><p></p><p>4.</p>

joint. Do not overuse the
again.

<p>As your symptoms improve, begin gradual motion at the joint. Do not overuse the joint, which may cause the symptoms to flare up</p><p></p><p></p><p>Follow Up With Your Doctor If Not Improving After Three</p>

Days Of Treatment.

<p></p><p>Get Prompt Medical Attention If Any Of The Following</p>

Occur:

<p>0</p><p>Redness over the painful area</p><p></p><p>0</p><p>Increasing pain or swelling at the joint</p><p></p><p>0</p><p>Fever of 100.4°F (38°C) or higher, or as directed by</p>

your healthcare provider

<p></p></BOILERPLATE_TEXT></TEMPLATE></ITEMS></TEMPLATE>

```
ED-DC-INSTRUCTIONS-for-Sharing
<TEMPLATE NAME="BACK PAIN [acute or chronic]">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HIDE_DI ALOG_ITEMS>1</HIDE_DI ALOG_ITEMS>
<I N DENT_I T E M S>1</I N DENT_I T E M S>
<BO I L E R P L A T E _ T E X T>
  <p>BACK PAIN [acute or chronic] </p>
  <p> </p>
</BO I L E R P L A T E _ T E X T>
<I T E M S>
```

or ligaments of the spine may bulge and also appear after a

accident), after a simple awkward positioning. In either case, muscle spasm is often present and adds to the pain. Acute back pain usually gets better in one to two weeks. Back pain related to stenosis (narrowing of the disk disease, arthritis in the spinal joints or spinal canal) can become chronic and last for months or

years. Unless you had a physical injury (for example, a car accident or fall) X-rays are usually not ordered for the initial evaluation of back pain. If pain continues and does not respond to medical treatment, x-rays and other tests may be performed at a later time.

HOME CARE: 1. You may need to stay in bed the first few days. But, as soon as possible, begin sitting or walking to avoid problems with prolonged bed rest (muscle weakness, worsening back stiffness and pain, blood clots in the legs).

2. When in bed, try to find a position of comfort. A firm mattress is best. Try lying flat on your back with pillows under your knees. You can also try lying on your side with your knees bent up towards your chest and a pillow between your knees.

ED-DC-INSTRUCTIONS-for-Sharing

lower back than standing

<p></p>

<p>3. Avoid prolonged sitting. This puts more stress on the

<p>or walking. </p>

<p></p>

PACK to the painful area

<p>4. During the first two days after injury, apply an ICE

swelling and pain. HEAT (hot

<p>shower, hot bath or heating pad) works well for muscle

spasm. You can start with

<p></p>

feel best alternating ice

<p>ice, then switch to heat after two days. Some patients

<p>and heat treatments. Use the one method that feels the

best to you. </p>

<p></p>

(Motrin, Advil) to control

<p>5. You may use acetaminophen (Tylenol) or ibuprofen

<p></p>

<p>pain, unless another pain medicine was prescribed.

[NOTE: If you have chronic

<p></p>

<p>liver or kidney disease or ever had a stomach ulcer or

GI bleeding, talk with

<p></p>

<p>your doctor before using these medicines.]</p>

<p></p>

anything over 15 pounds until

<p>6. Be aware of safe lifting methods and do not lift

<p>all the pain is gone. </p>

<p></p>

symptoms do not start to

<p>FOLLOW UP with your doctor or this facility if your

<p></p>

needed. </p>

<p>improve after one week. Physical therapy may be

<p></p>

radiologist. You will be

<p></p>

<p>[NOTE: If X-rays were taken, they will be reviewed by a

<p></p>

<p>notified of any new findings that may affect your

care.]</p>

<p></p>

occur: </p>

<p></p>

<p>GET PROMPT MEDICAL ATTENTION if any of the following

<p></p>

<p></p>

<p>Pain becomes worse or spreads to your legs</p>

<p></p>

<p>Weakness or numbness in one or both legs</p>

<p></p>

<p>Loss of bowel or bladder control</p>

<p></p>

<p>Numbness in the groin or genital area</p>

<p></p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="SPRAIN: ANKLE">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HI DE_DI ALOG_ITEM>1</HI DE_DI ALOG_ITEM>

<INDENT_ITEM>1</INDENT_ITEM>

<BOILERPLATE_TEXT>

<p>SPRAIN: ANKLE </p>

<p></p>

</BOILERPLATE_TEXT>

<ITEMS>

ED-DC-INSTRUCTIONS-for-Sharing

<TEMPLATE NAME="text">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<BOILERPLATE_TEXT>
<p>SPRAIN: ANKLE</p>
<p></p>
<p></p>
<p>A sprain is an injury to the ligaments or capsule that holds a joint together. </p>
<p>There are no broken bones. Most sprains take from four to six weeks to heal. If </p>
<p>the ligament is completely torn (severe sprain), it can take several months to </p>
<p>recover. </p>
<p></p>
<p>Mild to Moderate sprains may be treated with an elastic wrap or an in-shoe splint </p>
<p>to provide support and prevent re-injury. A mild sprain may not require any </p>
<p>additional support. A severe sprain may require surgery to repair. </p>
<p></p>
<p>HOME CARE: </p>
<p></p>
<p>1. Stay off the injured leg as much as possible until you can walk on it without </p>
<p>pain. If you have a lot of pain with walking, crutches or a walker may be </p>
<p>prescribed. (These can be rented or purchased at many pharmacies and surgical or </p>
<p>orthopedic supply stores). Follow your doctor's advice regarding when to begin </p>
<p>bearing weight on that leg. </p>
<p></p>
<p>2. Keep your leg elevated to reduce pain and swelling. When sleeping, place a </p>
<p>pillow under the injured leg. When sitting, support the injured leg so it is </p>
<p>level with your waist. This is very important during the first 48 hours. </p>
<p></p>
<p>3. Apply an ice pack (ice cubes in a plastic bag, wrapped in a towel) over the </p>
<p>injured area for 20 minutes every 1-2 hours the first day. You can place the ice </p>
<p>pack directly over the splint/cast. If you were given a boot, open it to apply </p>
<p>the ice pack. Continue with ice packs 3-4 times a day for the next two days, then </p>
<p>as needed for the relief of pain and swelling. </p>
<p></p>
<p>4. You may use acetaminophen (Tylenol) or ibuprofen (Motrin, Advil) to control </p>
<p>pain, unless another pain medicine was prescribed. [NOTE: If you have chronic </p>
<p>liver or kidney disease or ever had a stomach ulcer or GI bleeding, talk with </p>
<p>your doctor before using these medicines.] </p>
<p></p>
<p>5. You may return to sports after healing, when you can run without pain. </p>
<p></p>

ED-DC-INSTRUCTIONS-for-Sharing

6. A sprained ankle is at risk for re-injury during the first six weeks. During that time, protect your ankle with an in-shoe splint that prevents tilting of your ankle from side to side. This is very important if you do active work or play sports during that time.

FOLLOW UP with your doctor, or as advised, if you are not starting to improve within the next five days.

[NOTE: If X-rays were taken, they will be reviewed by a radiologist. You will be notified of any new findings that may affect your care.]

GET PROMPT MEDICAL ATTENTION if any of the following occur:

- The plaster cast or splint gets wet or soft
- the fiberglass cast or splint gets wet and does not dry for 24 hours

- Pain or swelling increases, or redness appears
- Toes become cold, blue, numb or tingling
- Re-injure your ankle
- Or anything else that concerns you

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="FRACTURE ANKLE">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
  <I NDENT_I TEMS>1</I NDENT_I TEMS>
  <BOILERPLATE_TEXT>
    <p>FRACTURE ANKLE </p>
  </BOILERPLATE_TEXT>
</ITEMS>

```

```

<TEMPLATE NAME="text">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <BOILERPLATE_TEXT>
    <p>FRACTURE ANKLE</p>
    <p></p>
    <p></p>
    <p>You have a fracture (broken bone)in your ankle
  </BOILERPLATE_TEXT>
</TEMPLATE>

```

HOME CARE: You will be given a splint, cast or special boot to prevent movement at the

ED-DC-INSTRUCTIONS-for-Sharing

break. Follow your
on a cast or boot.

site of injury. Do not put weight on a splint; it will
doctor's advice regarding when to begin bearing weight

When sleeping, place a
injured leg so it is
the first 48 hours.

2. Keep your leg elevated when sitting or lying down.
pillow under the injured leg. When sitting, support the
level with your waist. This is very important during

When bathing, protect the
the top end. If a
a hair-dryer.

3. Keep the cast/splint completely dry at all times.
cast/splint with a large plastic bag, rubber-banded at
fiberglass cast or splint gets wet, you can dry it with

wrapped in a towel) on the
2 hours during the first
splint/cast. Continue this

4. Place an ice pack (ice cubes in a plastic bag,
splint/cast over the injured area for 20 minutes every
day. You can place the ice pack directly over the
3-4
times a day for the next two days.

(Motrin, Advil) to control
[NOTE: If you have chronic
GI bleeding, talk with

5. You may use acetaminophen (Tylenol) or ibuprofen
pain, unless another pain medicine was prescribed.
liver or kidney disease or ever had a stomach ulcer or
your doctor before using these medicines.]

by our staff, to be sure
splint, it may be changed

FOLLOW UP with your doctor in one week, or as advised
the bone is healing properly. If you were given a
to a
cast after the swelling goes down.

taken. We will notify you
occur:

[NOTE: A radiologist will review any X-rays that were
of any new findings that may affect your care.]
GET PROMPT MEDICAL ATTENTION if any of the following

than 24 hours
splint

- oThe plaster cast or splint becomes wet or soft
- oThe fiberglass cast or splint remains wet for more
- oIncreased tightness or pain under the cast or

- oToes become swollen, cold, blue, numb or tingly
- oAnkle sprain

ED-DC-INSTRUCTIONS-for-Sharing

<p></p>

<p></p>

become concerned about </p>

<p>your condition and are unable to arrange any other

follow-up, you may return to </p>

<p>the Emergency Department</p>

<p></p>

doctor</p>

<p>Follow up: Within 2 days at express care or your family

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="abdominal wall strain">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI A LOG>1</DI A LOG>

<HI DE_DI A LOG_I T E M S>1</HI DE_DI A LOG_I T E M S>

<I N D E N T_I T E M S>1</I N D E N T_I T E M S>

<BOILERPLATE_TEXT>

<p>Muscle Strain in the Abdomen </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI A LOG>1</DI A LOG>

<BOILERPLATE_TEXT>

muscle fibers. It is also </p>

thick wall of muscle in the </p>

bending forward. Too much </p>

movements can sometimes cause </p>

is worse when you move. The </p>

bruised. </p>

<p></p>

<p>Home care</p>

minutes every 3 to 6 </p>

You can make an ice pack </p>

cubes and then wrapping </p>

skin with the ice treatments. </p>

the use of ice packs for </p>

apply heat (warm shower or </p>

alternate ice and heat. </p>

<p> </p>

pain, unless another pain </p>

disease, a stomach ulcer or </p>

ED-DC-INSTRUCTIONS-for-Sharing

using these medicines. </p><p>GI bleeding, talk with your healthcare provider before

<p> </p>

<p></p>

<p>Follow-up care</p>

<p></p>

provider 3-4 days. </p>

<p>Follow up with Star clinic or your primary care

<p></p>

<p>Call 911</p>

<p></p>

<p>Call 911 if you have: </p>

<p>o Weakness, lightheaded, or faint</p>

<p> </p>

<p>o Chest pain</p>

<p> </p>

<p></p>

<p>When to seek medical advice</p>

<p></p>

these occur: </p>

<p>Call your healthcare provider right away if any of

just below the waistline</p>

<p>o Pain gets worse or moves to the right lower abdomen,

<p> </p>

hours</p>

<p>o Fever of 100.4°F (38°C) or above lasting for 24 to 48

<p> </p>

<p>o Vomiting</p>

<p> </p>

toward the groin</p>

<p>o Severe abdominal pain that spreads to the back or

<p> </p>

<p>o Blood in the urine</p>

<p> </p>

<p>o Unexpected vaginal bleeding in women </p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="Shoulder Blade or Collarbone Fracture">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HIDE_DI ALOG_ITEMS>1</HIDE_DI ALOG_ITEMS>

<INDENT_ITEMS>1</INDENT_ITEMS>

<BOILERPLATE_TEXT>

<p>Shoulder Blade or Collarbone Fracture </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

shoulder. The collarbone </p>

<p>You have one long collarbone (clavicle) on top of each

bones hold your arms in place </p>

<p>is attached to your shoulder blade (scapula). These

very common, and are often </p>

<p>and help them move. Collarbone breaks (fractures) are

much less common. Without </p>

<p>due to a blow or fall. Shoulder blade fractures are

<p>treatment, either injury can lead to chronic shoulder

ED-DC-INSTRUCTIONS-for-Sharing

problems. </p>

<p>Risk Factors</p>

As a result, children and

<p>The collarbones don't harden fully until about age 20.</p>

collarbone may fracture

<p>teenagers can easily fracture these bones. A baby's

do, it's often the result

<p>during birth. Shoulder blades rarely break. When they

collarbone or shoulder blade.

<p>of violent trauma, such as a car crash.</p>

<p>When to Go to the Emergency Room (ER)</p>

<p>Get help right away if you suspect a fractured

include:

<p>symptoms of a fractured collarbone or shoulder blade

<p>oExtreme pain when you move your arm</p>

<p>oA shoulder that sags down and forward</p>

<p>oA bump over the fracture site</p>

<p>oA grinding feeling and extreme pain when you try to

lift your arm</p>

<p>oBone protruding from skin, or "tenting" of skin at the

fracture site</p>

<p>What to Expect in the ER</p>

<p>oYou will be examined. </p>

<p>oX-rays will be taken of your chest and shoulder. </p>

<p>oYou may be given medication to lessen your pain. </p>

<p>oA computed tomography (CT) scan may be done. This test

provides detailed images

<p>of your bones. </p>

<p>Treatment</p>

<p>Both types of fractures are often treated with an arm

sling. This holds the bone

<p>in place and keeps it from moving during healing. You

also may be instructed to

<p>do special exercises to help improve strength and range

of motion in your

<p>shoulder. Occasionally, surgery is recommended to

realign the fracture or hold it

<p>in place so that it can heal properly. </p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="Contusion, soft tissue">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>

<I NDENT_I TEMS>1</I NDENT_I TEMS>

<BOILERPLATE_TEXT>

<p>Contusion, soft tissue </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

and some bleeding under the

<p>You have a CONTUSION, which is a bruise with swelling

few days to a few weeks to

<p>skin. There are no broken bones. This injury takes a

<p>heal. </p>

<p>HOME CARE: </p>

ED-DC-INSTRUCTIONS-for-Sharing

swelling. This is especially

1) Keep the injured part elevated to reduce pain and wrapped in a towel) and apply this 3-4 times a day until (Motrin, Advil) to control

2) important during the first 48 hours.

3) You may use acetaminophen (Tylenol) or ibuprofen (Motrin, Advil) to control pain, unless another pain medicine was prescribed.

[NOTE : If you have chronic GI bleeding, talk with your doctor before using these medicines.]

FOLLOW UP with your doctor or this facility if you are not improving within the next THREE days.

[NOTE: If X-rays were taken, they will be reviewed by a radiologist. You will be notified of any new findings that may affect your care.]

GET PROMPT MEDICAL ATTENTION if any of the following occur:

- Pain or swelling increases
- Injured arm or leg becomes cold, blue, numb or tingly
- Redness, warmth or drainage from the skin
- Or anything else that concerns you

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Back Pain">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI A LOG>1</DI A LOG>
<HI DE_DI A LOG_I TEMS>1</HI DE_DI A LOG_I TEMS>
<I NDENT_I TEMS>1</I NDENT_I TEMS>
<BOILERPLATE_TEXT>

```

Back pain

Back pain is usually caused by an injury to the muscles or ligaments of the spine. Sometimes the disks that separate each bone in the spine may bulge and cause pain by pressing on a nearby nerve. Back pain may also appear after a sudden twisting/bending force (such as in a car accident), after a simple awkward movement, or lifting something heavy with poor body positioning. In either case, muscle spasm is often present and adds to the pain.

Acute back pain usually gets better in one to two weeks. Back pain related to disk disease, arthritis in the spinal joints or spinal stenosis (narrowing of the

ED-DC-INSTRUCTIONS-for-Sharing

years. </p>
 <p>spinal canal) can become chronic and last for months or
 </p>
 <p>Unless you had a physical injury (for example, a car
 accident or fall) X-rays are </p>
 <p>usually not ordered for the initial evaluation of back
 pain. If pain continues </p>
 <p>and does not respond to medical treatment, x-rays and
 other tests may be </p>
 <p>performed at a later time.</p>
 <p>HOME CARE: </p>
 <p>1. You may need to stay in bed the first few days. But,
 as soon as possible, begin </p>
 <p>sitting or walking to avoid problems with prolonged bed
 rest (muscle weakness, </p>
 <p>legs). </p>
 <p>2. When in bed, try to find a position of comfort. A
 firm mattress is best. Try </p>
 <p>lying flat on your back with pillows under your knees.
 You can also try lying on </p>
 <p>your side with your knees bent up towards your chest
 and a pillow between your </p>
 <p>knees. </p>
 <p>3. Avoid prolonged sitting. This puts more stress on the
 lower back than standing </p>
 <p>or walking. </p>
 <p>4. During the first two days after injury, apply an ICE
 PACK to the painful area </p>
 <p>for 20 minutes every 2-4 hours. This will reduce
 swelling and pain. HEAT (hot </p>
 <p>shower, hot bath or heating pad) works well for muscle
 spasm. You can start with </p>
 <p>ice, then switch to heat after two days. Some patients
 feel best alternating ice </p>
 <p>and heat treatments. Use the one method that feels the
 best to you. </p>
 <p>5. You may use acetaminophen (Tylenol) or ibuprofen
 (Motrin, Advil) to control </p>
 <p>pain, unless another pain medicine was prescribed.
 [NOTE: If you have chronic </p>
 <p>liver or kidney disease or ever had a stomach ulcer or
 GI bleeding, talk with </p>
 <p>your doctor before using these medicines.]</p>
 <p>6. Be aware of safe lifting methods and do not lift
 anything over 15 pounds until </p>
 <p>all the pain is gone.</p>
 <p>FOLLOW UP with your doctor or this facility if your
 symptoms do not start to </p>
 <p>improve after one week. Physical therapy may be
 needed. </p>
 <p>[NOTE: If X-rays were taken, they will be reviewed by a
 radiologist. You will be </p>
 <p>notified of any new findings that may affect your
 care.]</p>
 <p>GET PROMPT MEDICAL ATTENTION if any of the following
 occur: </p>

- <p>oPain becomes worse or spreads to your legs</p>
- <p>oWeakness or numbness in one or both legs</p>
- <p>oLoss of bowel or bladder control</p>
- <p>oNumbness in the groin or genital area</p>

</BOILERPLATE_TEXT>
 </TEMPLATE>
 </ITEMS>

ED-DC-INSTRUCTIONS-for-Sharing

```
</TEMPLATE>  
<TEMPLATE NAME="Ankle Sprain Care">  
<TYPE>G</TYPE>  
<STATUS>A</STATUS>  
<DI ALOG>1</DI ALOG>  
<HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>  
<I NDE NT_I TEMS>1</I NDE NT_I TEMS>  
<BOI LERPLATE_TEXT>  
<p>ANKLE SPRAIN</p>  
<p> </p>  
</BOI LERPLATE_TEXT>  
<I TEMS>
```

```
<TEMPLATE NAME="text">  
<TYPE>T</TYPE>  
<STATUS>A</STATUS>  
<BOI LERPLATE_TEXT>  
<p>SPRAIN: </p>  
<p></p>  
<p>A sprain is an injury to the ligaments or capsule that  
holds a joint together. </p>  
<p>There are no broken bones. Most sprains take from four  
to six weeks to heal. If </p>  
<p>the ligament is completely torn (severe sprain), it can  
take several months to </p>  
<p>recover. Mild to Moderate sprains may be treated with  
an elastic wrap or an in- </p>  
<p>shoe splint to provide support and prevent re-injury. A  
mild sprain may not </p>  
<p>require any additional support. A severe sprain may  
require surgery to repair. </p>  
<p></p>  
<p>HOME CARE: </p>  
<p></p>  
<p>1. Stay off the injured leg as much as possible until  
you can walk on it without </p>  
<p>pain. If you have a lot of pain with walking, crutches  
or a walker may be </p>  
<p>prescribed. (These can be rented or purchased at many  
pharmacies and surgical or </p>  
<p>orthopedic supply stores). Follow your doctor's advice  
regarding when to begin </p>  
<p>bearing weight on that leg. </p>  
<p></p>  
<p>2. Keep your leg elevated to reduce pain and swelling.  
When sleeping, place a </p>  
<p>pillow under the injured leg. When sitting, support the  
injured leg so it is </p>  
<p>level with your waist. This is very important during  
the first 48 hours. </p>  
<p></p>  
<p>3. Apply an ice pack (ice cubes in a plastic bag,  
wrapped in a towel) over the </p>  
<p>injured area for 20 minutes every 1-2 hours the first  
day. You can place the ice </p>  
<p>pack directly over the splint/cast. If you were given a  
boot, open it to apply </p>  
<p>the ice pack. Continue with ice packs 3-4 times a day  
for the next two days, </p>  
<p>then as needed for the relief of pain and swelling. </p>  
<p></p>  
<p>4. You may use acetaminophen (Tylenol) or ibuprofen  
(Motrin, Advil) to control </p>  
<p>pain, unless another pain medicine was prescribed.
```


ED-DC-INSTRUCTIONS-for-Sharing

[NOTE: If you have chronic liver or kidney disease or ever had a stomach ulcer or GI bleeding, talk with your doctor before using these medicines.]

5. You may return to sports after healing, when you can run without pain.

6. A sprained ankle is at risk for re-injury during the first six weeks. During that time, protect your ankle with an in-shoe splint that prevents tilting of your ankle from side to side. This is very important if you do active work or play sports during that time.

FOLLOW UP with your doctor, or as advised, if you are not starting to improve within the next five days.

[NOTE: If X-rays were taken, they will be reviewed by a radiologist. You will be notified of any new findings that may affect your care.]

GET PROMPT MEDICAL ATTENTION if any of the following occur:

- The plaster cast or splint gets wet or soft
- the fiberglass cast or splint gets wet and does not dry for 24 hours
- Pain or swelling increases, or redness appears
- Toes become cold, blue, numb or tingly
- Re-injure your ankle
- Or anything else that concerns you

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="SPRAIN: A-C JOINT ">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI A LOG>1</DI A LOG>
<HI DE_DI A LOG_I TEMS>1</HI DE_DI A LOG_I TEMS>
<I N DENT_I TEMS>1</I N DENT_I TEMS>
<BOILERPLATE_TEXT>
<p>SPRAIN: A-C JOINT </p>
<p> </p>
<p> </p>
<p> </p>
</BOILERPLATE_TEXT>
<I TEMS>
<TEMPLATE NAME="text">
<TYPE>T</TYPE>
<STATUS>A</STATUS>
<BOILERPLATE_TEXT>

```

The A-C JOINT holds the collar bone (clavicle) to the shoulder. A sprain of this joint is a tearing of the ligaments that hold the bones together. The tear may be partial or complete. An A-C sprain will take about 3-6 weeks to heal, depending

ED-DC-INSTRUCTIONS-for-Sharing

<p>on how severe it is.</p>

<p></p>

separation") will allow the

<p>collar bone to rise up, causing a noticeable bump on

the shoulder top. Since the

<p>ligament heals in this position, the bump is permanent.

It is possible to have

<p>surgery to correct the appearance, although normal

shoulder function will return

<p>even without surgery.</p>

<p></p>

"shoulder immobilizer". Once

<p>healed, you can expect full recovery of shoulder

function.</p>

<p></p>

<p>HOME CARE:</p>

<p></p>

If the sling becomes

<p>1. Use the sling when awake until your next appointment.

ground, and the shoulder

<p>loose, adjust it so that your forearm is level with the

and remove it at night to

<p>feels well supported. You may remove the sling to bathe

<p>sleep.</p>

<p></p>

wrapped in a towel) over the

<p>2. Apply an ice pack (ice cubes in a plastic bag,

day for pain relief.</p>

<p>injured area for 20 minutes every 1-2 hours the first

swelling goes away.</p>

<p>Continue this 3-4 times a day until the pain and

<p></p>

(Motrin, Advil) to control

<p>3. You may use acetaminophen (Tylenol) or ibuprofen

<p></p>

NOTE : If you have chronic

<p>pain, unless another pain medicine was prescribed. [

<p></p>

GI bleeding, talk with

<p>liver or kidney disease or ever had a stomach ulcer or

<p>your doctor before using these medicines.]</p>

<p></p>

too long. Range of motion

<p>4. Shoulder joints become stiff if left in a sling for

ten days after injury.</p>

<p>exercises should usually be started within the first

how soon to start. The

<p>Consult your doctor on what type of exercises to do and

<p>sling may be removed to shower or bathe.</p>

<p></p>

not begin to improve

<p>FOLLOW UP with your doctor or as directed if pain does

<p>within the next THREE days.</p>

<p></p>

radiologist. You will be

<p>[NOTE: If X-rays were taken, they will be reviewed by a

<p>notified of any new findings that may affect your

care.]</p>

<p></p>

occur:</p>

<p>GET PROMPT MEDICAL ATTENTION if any of the following

<p></p>

<p>Pain or swelling or bruising increases</p>

ED-DC-INSTRUCTIONS-for-Sharing

<p></p>

<p>ofingers become cold, blue, numb or tingly</p>

<p></p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="Strep throat">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>

<I NDE NT_I TEMS>1</I NDE NT_I TEMS>

<BOILERPLATE_TEXT>

<p>Strep throat </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

<p>Your illness has the signs of a strep throat infection.

Strep throat is a </p>

<p>contagious illness. It is spread by coughing, kissing or by

touching others after </p>

<p>touching your mouth or nose. Symptoms include throat pain

worse with swallowing, </p>

<p>aching all over, headache and fever. You will be treated

with an antibiotic, </p>

<p>which should make you start to feel better within 1-2

days. </p>

<p></p>

<p>HOME CARE: </p>

<p></p>

<p>1. Rest at home and drink plenty of fluids to avoid

dehydration. </p>

<p></p>

<p>2. No school or work for the first two days on antibiotics.

You will not be </p>

<p>contagious after this time, and if you are feeling better,

you can return to </p>

<p>school or work. </p>

<p></p>

<p>3. Take your antibiotics for a full 10 days, even if you

feel better after the </p>

<p>first few days of treatment. This is very important to

prevent complications from </p>

<p>the strep infection (such as heart or kidney disease). </p>

<p></p>

<p>4. Children: Use acetaminophen (Tylenol) for fever,

fussiness or discomfort. In </p>

<p>infants over six months of age, you may use ibuprofen

(Children's Motrin) instead </p>

<p>of Tylenol. NOTE: If your child has chronic liver or kidney

disease or ever had </p>

<p>a stomach ulcer or GI bleeding, talk with your doctor

before using these </p>

<p>medicines. (Aspirin should never be used in anyone under 18

years of age who is </p>

<p>ill with a fever. It may cause severe liver damage.)</p>

ED-DC-INSTRUCTIONS-for-Sharing

Adults: You may use acetaminophen (Tylenol) or ibuprofen (Motrin, Advil) to control pain or fever, unless another medicine was prescribed for this. NOTE: If you have chronic liver or kidney disease or ever had a stomach ulcer or GI bleeding, talk with your doctor before using these medicines.

5. Throat lozenges or sprays (Chloraseptic and others) will reduce pain. Gargling with warm salt water will also reduce throat pain. Dissolve 1/2 teaspoon of salt in 1 glass of warm water. This is especially useful just before meals.

FOLLOW UP with your doctor or express care within the next 2 days.

GET PROMPT MEDICAL ATTENTION if any of the following occur:

- Fever over 100.5°F (38.0°C) oral, or over 101.5°F (38.6°C) rectal for more than three days
- New or worsening ear pain, sinus pain or headache
- Painful lumps in the back of your neck
- Unable to swallow liquids or open your mouth wide due to throat pain

```

<p></p>
<p>- Trouble breathing or noisy breathing</p>
<p></p>
<p>- Muffled voice</p>
<p></p>
<p>- New rash</p>
</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="LARYNGITIS">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
<I NDENT_I TEMS>1</I NDENT_I TEMS>
<BOILERPLATE_TEXT>
<p>LARYNGITIS </p>
<p> </p>
</BOILERPLATE_TEXT>
</ITEMS>

```

Laryngitis is a swelling of the tissues around the vocal cords. As a result, your voice may be hoarse or perhaps you can only speak in a whisper. This may be caused by a viral illness, such as a head or chest cold. It may also be due to

ED-DC-INSTRUCTIONS-for-Sharing

This condition will overuse and strain of the voice (yelling or screaming).
 possible. steamy shower is helpful.
 Advil) to control pain, unless another medicine was prescribed. NOTE: If you have chronic liver or kidney disease or ever had a stomach ulcer or GI bleeding, talk with your doctor before using these medicines. (Aspirin should never be used in anyone under 18 years of age who is ill with a fever. It may cause severe liver damage.)
 improved after one week.
 occur: GET PROMPT MEDICAL ATTENTION if any of the following
 Severe pain with swallowing
 Neck swelling
 Noisy breathing or trouble breathing
 Fever of 100.4°F (38°C) or higher, or as directed by your healthcare provider

```

    </BOILERPLATE_TEXT>
  </TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="BRONCHITIS">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>
  <I NDENT_ITEMS>1</I NDENT_ITEMS>
  <BOILERPLATE_TEXT>
    <p>BRONCHITIS </p>
    <p> </p>
  </BOILERPLATE_TEXT>
</ITEMS>
  <TEMPLATE NAME="Text">
    <TYPE>G</TYPE>
    <STATUS>A</STATUS>
    <DI ALOG>1</DI ALOG>
    <BOILERPLATE_TEXT>
      <p>BRONCHITIS is an infection of the air passages ("bronchial
  tubes"). It often
  
```

ED-DC-INSTRUCTIONS-for-Sharing

occurs during the common cold. Symptoms include cough with mucus (phlegm) and low-grade fever. Bronchitis usually lasts 7-14 days. Mild cases can be treated with simple home remedies. More severe infection is treated with an antibiotic.

HOME CARE:

1. If symptoms are severe, rest at home for the first 2-3 days. When you resume activity, don't let yourself get too tired.

2. Do not smoke. Avoid being exposed to the smoke of others.

3. You may use acetaminophen (Tylenol) or ibuprofen (Motrin, Advil) to control fever or pain, unless another medicine was prescribed for this. [NOTE: If you have chronic liver or kidney disease or ever had a stomach ulcer or GI bleeding, talk with your doctor before using these medicines.]

4. Your appetite may be poor, so a light diet is fine. Avoid dehydration by drinking 6-8 glasses of fluids per day (water, soft drinks, juices, tea, soup, etc.). Extra fluids will help loosen secretions in the lungs.

5. Over-the-counter cough medicines that contain "dextromethorphan" (such as Robitussin DM) and decongestants (Actifed or Sudafed) may help relieve cough and congestion. [NOTE: Do not use decongestants if you have high blood pressure.]

6. Finish all antibiotic medicine, even if you are feeling better after only a few days.

[NOTE: If you are age 65 or older, or if you have chronic asthma or COPD, we recommend a PNEUMOCOCCAL VACCINATION every five years and a yearly INFLUENZA VACCINATION (FLU-SHOT) every autumn. Ask your doctor about this. If you had an X-ray, a radiologist will review it. You will be notified of any new findings that may affect your care.]

GET PROMPT MEDICAL ATTENTION if any of the following occur:

- Fever over 100.4°F (38.0°C) for more than three days
- Trouble breathing, wheezing or pain with breathing
- Coughing up blood or increased amounts of colored sputum

ED-DC-INSTRUCTIONS-for-Sharing

<p></p>
<p>- Weakness, drowsiness, headache, facial pain, ear pain or a stiff neck</p>

<p></p>
<p>- Or if anything else concerns you. </p>
</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>

</TEMPLATE>
<TEMPLATE NAME="Asthma">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HIDE_DIALOG_ITEMS>1</HIDE_DIALOG_ITEMS>
<INDENT_ITEMS>1</INDENT_ITEMS>
<BOILERPLATE_TEXT>
<p>Asthma </p>
<p> </p>
</BOILERPLATE_TEXT>
<ITEMS>

<TEMPLATE NAME="text">
<TYPE>T</TYPE>
<STATUS>A</STATUS>
<BOILERPLATE_TEXT>
<p>Asthma is a disease where the small air passages within the lung go into spasm </p>
<p>and restrict the flow of air. Inflammation and swelling of the airways cause </p>
<p>further restriction. During an acute asthma attack, these factors cause </p>
<p>difficulty breathing, wheezing, cough and chest tightness. </p>

<p></p>
<p> </p>
<p></p>
<p>An asthma attack can be triggered by many things. Common triggers include the </p>
<p>common cold, bronchitis, pneumonia, emotional upset and heavy exercise. In about </p>
<p>half of adults with asthma, allergies to smoke, pollutants in the air, dust, </p>
<p>mold, pollen and animal dander can cause an asthma attack. Skipping doses of </p>
<p>daily asthma medicine can also bring on an asthma attack. </p>

<p></p>
<p>Asthma can be controlled with proper medicines and decreased exposure to known </p>
<p>allergens. </p>
<p></p>
<p>HOME CARE: </p>
<p></p>
<p>- Drink lots of water or other fluids (at least 10 glasses a day) during an </p>
<p>attack. This will loosen lung secretions and make it easier to breathe. If you </p>
<p>have heart or kidney disease, check with your doctor before you drink extra </p>
<p>amounts of fluids. </p>

<p></p>
<p>- Take prescribed medicine exactly at the times advised. If you have a hand-held </p>
<p>inhaler or aerosol breathing medicine, do not use it more

ED-DC-INSTRUCTIONS-for-Sharing

than once every four </p>
<p>hours, unless told to do so. If prescribed an antibiotic or
prednisone, take all </p>
<p>of the medicine even if you are feeling better after a few
days. </p>
<p></p>
<p>- Do not smoke. Avoid being exposed to the smoke of
others. </p>
<p></p>
<p>- Some persons with asthma are allergic to aspirin and
non-steroidal medicines </p>
<p>like ibuprofen (Motrin, Advil) and naproxen (Aleve,
Naprosyn). Use these with </p>
<p>caution. Acetaminophen (Tylenol) is safe to use. </p>
<p></p>
<p></p>
<p>NOTE: If you are age 65 or older, or if you have chronic
asthma or COPD, we </p>
<p>recommend a PNEUMOCOCCAL VACCINATION every five years and a
yearly INFLUENZA </p>
<p>VACCINATION (FLU SHOT) every autumn. Ask your doctor about
this. If you had an X- </p>
<p>ray or EKG (cardiogram), it will be reviewed by a
specialist. You will be </p>
<p>notified of any new findings that may affect your care. </p>
<p></p>
<p>GET PROMPT MEDICAL ATTENTION if any of the following
occur: </p>
<p></p>
<p>- Increased wheezing or shortness of breath </p>
<p></p>
<p>- Need to use your inhalers more often than usual without
relief </p>
<p></p>
<p>- Fever of 100.4°F (38°C) or higher, or as directed by your
healthcare provider </p>
<p></p>
<p>- Coughing up lots of dark-colored or bloody sputum
(mucus) </p>
<p></p>
<p>- Chest pain </p>
<p></p>
<p>- You do not start to improve within 24 hours </p>

```
</BOILERPLATE_TEXT>  
</TEMPLATE>  
</ITEMS>  
</TEMPLATE>  
<TEMPLATE NAME="CROUP, Viral (Child)">  
<TYPE>G</TYPE>  
<STATUS>A</STATUS>  
<DI ALOG>1</DI ALOG>  
<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>  
<I NDENT_ITEMS>1</I NDENT_ITEMS>  
<BOILERPLATE_TEXT>  
<p>CROUP, Viral (Child) </p>  
<p> </p>  
</BOILERPLATE_TEXT>  
<ITEMS>  
<TEMPLATE NAME="text">  
<TYPE>T</TYPE>  
<STATUS>A</STATUS>  
<BOILERPLATE_TEXT>  
<p>Sometimes the voice box (larynx) and windpipe (trachea)
```


ED-DC-INSTRUCTIONS-for-Sharing

become irritated by a virus. The organs swell up, and it is difficult to talk and breathe. This condition is called viral croup. It often occurs in children under 6 years of age. The respiratory distress croup causes is very scary. However, most children fully recover from croup in 5 or 6 days.

Some children have a mild fever for a day or two or a cold before any other symptoms occur. Symptoms of croup occur more often at night. Difficulty breathing, especially taking in a breath, occurs suddenly. The child may sit upright and lean forward trying to breathe. The child may be restless and agitated. Other symptoms include a voice that is hoarse and hard to hear and a barking cough. Children with croup may have a difficult time swallowing. They may drool and have trouble eating. Some children develop sore throats and ear infections. In the course of 5 or 6 days, croup symptoms will come and go.

Most croup can be safely treated at home. Medications may be prescribed. A warm, steamy bathroom often eases symptoms. A cool humidifier or vaporizer in the bedroom also eases breathing during the night.

HOME CARE:

Medications: The doctor may prescribe a medication to reduce swelling and assist breathing. Follow the doctor's instructions for giving this medication to your child.

To Assist Breathing:

1. Provide warm mist by turning on the bathroom shower to the hottest setting. Have your child sit in the warm, steamy bathroom for 15 to 20 minutes. Repeat this as needed.
2. Wrap the child well and take him or her outside into cool, moist night air. Alternating the cool air with the warm steam may ease symptoms.
3. Use a cool humidifier or vaporizer in the child's bedroom. Moist air is easier to breathe.

General Care:

1. Sleep in the same room with your child, if possible, to provide comfort and observe his or her breathing. Check your child's chest expansion and ability to

ED-DC-INSTRUCTIONS-for-Sharing

<p>breathe. </p>
 <p></p>
 <p>2. Avoid putting a finger down the child's throat or trying
 to make the child </p>
 quickly sit the child </p>
 <p>vomit. If the child does vomit, hold the head down, then
 <p>back up. </p>
 <p></p>
 <p>3. Avoid giving your child cough drops or cough syrup. They
 will not help the </p>
 secretions. </p>
 <p></p>
 <p>4. Encourage your child to drink plenty of clear fluids,
 such as water or diluted </p>
 apple juice. Warm liquids may be soothing to the child. </p>
 <p></p>
 <p>FOLLOW UP as advised by the doctor or our staff. </p>
 <p></p>
 <p>SPECIAL NOTES TO PARENTS: Viral croup is contagious for the
 first 3 days of </p>
 water before and after </p>
 <p>caring for your child to prevent the spread of infection.
 Also limit your child's </p>
 <p>exposure to other people. </p>
 <p></p>
 <p>GET PROMPT MEDICAL ATTENTION if any of the following
 occur: </p>
 <p></p>
 <p>Fever greater than 100.4°F (38°C) </p>
 <p></p>
 <p>Continuing symptoms, without relief from interventions or
 medication </p>
 <p></p>
 <p>Difficulty breathing, even at rest; poor chest expansion;
 whistling sounds </p>
 <p></p>
 <p>Bluish discoloration around mouth and fingernails </p>
 <p></p>
 <p>Severe drooling; poor eating </p>
 <p></p>
 <p>Difficulty talking </p>

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Pneumonia (Child)">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>
  <I N DENT_ITEMS>1</I N DENT_ITEMS>
  <BOILERPLATE_TEXT>
    <p>Pneumonia (Child) </p>
    <p> </p>
  </BOILERPLATE_TEXT>
</ITEMS>
<TEMPLATE NAME="text">
  <TYPE>T</TYPE>
  <STATUS>A</STATUS>
  <BOILERPLATE_TEXT>
    <p>Pneumonia (Child) </p>
  </BOILERPLATE_TEXT>
</TEMPLATE>

```

ED-DC-INSTRUCTIONS-for-Sharing

<p></p>
<p>Pneumonia is an infection deep within the lung tissue caused by a bacteria or a </p>
<p>virus. This may cause cough, fever, vomiting, rapid breathing, fussy behavior and </p>
<p>poor appetite. Bacterial pneumonia will start to improve within 2 days on </p>
<p>antibiotics and will go away in 2 weeks. Viral pneumonia won't respond to </p>
<p>antibiotics and may last up to 4 weeks.</p>
<p></p>
<p></p>
<p></p>
<p>Home Care: </p>
<p>1. </p>
<p>FLUIDS: Fever increases water loss from the body. For infants under 1 year old, </p>
<p>continue regular feedings (formula or breast). Between feedings give oral </p>
<p>Rehydralyte, which are </p>
<p>available from grocery and drug stores without a prescription). For children over </p>
<p>1 year old, give plenty of fluids like water, juice, Jell-O water, 7-Up, ginger </p>
<p>ale, lemonade, Kool-Aid or popsicles.</p>
<p></p>
<p>2. </p>
<p>FEEDING: If your child doesn't want to eat solid foods, it's okay for a few days, </p>
<p>as long as he or she drinks lots of fluid.</p>
<p></p>
<p>3. </p>
<p>ACTIVITY: Keep children with fever at home resting or playing quietly. Encourage </p>
<p>frequent naps. Your child may return to day care or school when the fever is gone </p>
<p>and the child is eating well and feeling better.</p>
<p></p>
<p>4. </p>
<p>SLEEP: Periods of sleeplessness and irritability are common. A congested child </p>
<p>will sleep best with the head and upper body propped up on pillows or with the </p>
<p>head of the bed frame raised on a 6-inch block. An infant may sleep in a car seat </p>
<p>placed in the crib or in a baby swing.</p>
<p></p>
<p>5. </p>
<p>COUGH: Coughing is a normal part of this illness. A cool mist humidifier at the </p>
<p>bedside may be helpful. Over-the-counter cough and cold medicines have not been </p>
<p>proven to be any more helpful than a placebo (sweet syrup with no medicine in </p>
<p>it). However, they can produce serious side effects, especially in infants </p>
<p>under </p>
<p>2 years of age. Therefore, do not give over-the-counter cough and cold medicines </p>
<p>to children under 6 years unless your doctor has specifically advised you to do </p>
<p>so. Also, don't expose your child to cigarette smoke. It can make the cough </p>

ED-DC-INSTRUCTIONS-for-Sharing

worse.

6.

NASAL CONGESTION: Suction the nose of infants with a rubber bulb syringe. You may put 2-3 drops of saltwater (saline) nose drops in each nostril before suctioning to help remove secretions. Saline nose drops are available without a prescription. You can make it by adding 1/4 teaspoon table salt in 1 cup of water.

7.

MEDICINE: Use acetaminophen (Tylenol) for fever, fussiness or discomfort, unless another medication was prescribed. In infants over 6 months of age, you may use ibuprofen (Children's Motrin) instead of Tylenol. [NOTE: If your child has chronic liver or kidney disease or has ever had a stomach ulcer or GI bleeding, talk with your doctor before using these medicines. (Aspirin should never be used in anyone under 18 years of age who is ill with a fever. It may cause severe liver damage.) If an antibiotic was prescribed, give your child the correct dosage for as many days as the prescription says, even if your child feels better. Do not give your child more or less of the antibiotic than was prescribed.]

Follow Up

as directed by our staff or in the next 2 days if not improving.

[NOTE: If your child had an x-ray, a radiologist will review it. You will be notified of any new findings that may affect your child's care.]

Get Prompt Medical Attention

if any of the following occur:

o

Fever of 100.4°F (38°C) oral or 101.4°F (38.5°C) rectal or higher, not better with fever medication

o

o

Fast breathing (birth to 6 wks: over 60 breaths/min; 6 wk-2 yr: over 45 breaths/min; 3-6 yr: over 35 breaths/min; 7-10 yrs: over 30 breaths/min; more than 10 yrs old: over 25 breaths/min)

o

o

Wheezing or difficulty breathing

o

o

ED-DC-INSTRUCTIONS-for-Sharing

repeated diarrhea or
 vomiting
 new rash
 diapers for 8 hours in
 infants, reduced urine output in older children

```
</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="PNEUMONIA (Adult)">
```

small air sacs (alveoli).
 It may be due to a virus or bacteria and is usually treated
 with an antibiotic.
 Severe cases require treatment in the hospital. Milder
 cases can be treated at home. Symptoms usually start to improve during the first 2
 days of treatment.

```
<ITEMS>
<TEMPLATE NAME="text">
<TYPE>T</TYPE>
<STATUS>A</STATUS>
<BOILERPLATE_TEXT>
```

Pneumonia is an infection deep within the lung, in the
 HOME CARE:
 Rest at home for the first 2-3 days or until you feel
 stronger. When resuming activity, don't let yourself become overly tired.
 Avoid exposure to cigarette smoke (yours or others).
 You may use acetaminophen (Tylenol) or ibuprofen (Motrin,

Advil) to control fever or pain, unless another medicine was prescribed.
 [NOTE: If you have chronic liver or kidney disease or ever had a stomach ulcer or GI
 bleeding, talk with your doctor before using these medicines.] (Aspirin should
 never be used in anyone under 18 years of age who is ill with a fever. It
 may cause severe liver damage.)
 Your appetite may be poor so a light diet is fine.

ED-DC-INSTRUCTIONS-for-Sharing

<p></p>
<p>- Keep well hydrated by drinking 6-8 glasses of fluids per day (water, sport </p>
<p>drinks such as Gatorade, sodas without caffeine, juices, tea, soup, etc.). This </p>
<p>will help loosen secretions in the lung, making it easier for you to cough up the </p>
<p>phlegm (sputum). If you also have heart or kidney disease, check with your doctor </p>
<p>before you drink extra amounts of fluids.</p>
<p></p>
<p>- Finish all antibiotic medicine prescribed, even if you are feeling better after </p>
<p>a few days.</p>
<p></p>
<p></p>
<p>[NOTE: If you are age 65 or older, or if you have chronic lung disease (asthma, </p>
<p>emphysema or COPD), we recommend the pneumococcal vaccination and a yearly </p>
<p>influenza vaccination (flu-shot) every autumn. Ask your doctor about this.]</p>
<p></p>
<p>[NOTE: If you had an X-ray or EKG (cardiogram), it will be reviewed by a </p>
<p>specialist. You will be notified of any new findings that may affect your care.]</p>
<p></p>
<p>GET PROMPT MEDICAL ATTENTION if any of the following occur: </p>
<p></p>
<p>- Not getting better within the first 48 hours of treatment</p>
<p></p>
<p>- Increasing shortness of breath or rapid breathing (over 25 breaths/minute)</p>
<p></p>
<p>- Coughing up blood or increasing chest pain with breathing</p>
<p></p>
<p>- Fever of 100.4°F (38°C) oral or higher, not better with fever medication</p>
<p></p>
<p>- Increasing weakness, dizziness or fainting</p>
<p></p>
<p>- Increasing thirst or dry mouth</p>
<p></p>
<p>- Sinus pain, headache or a stiff neck</p>
<p></p>
<p>- Chest pain not caused by coughing</p>
</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="VIRAL SYNDROME [Adult]">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>
<I NDE NT_ITEMS>1</I NDE NT_ITEMS>
<BOILERPLATE_TEXT>
<p>VIRAL SYNDROME [Adult] </p>
<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

<p>A viral illness may cause a number of symptoms. The symptoms depend on the part of the body that the virus affects. If it settles in the nose/throat/lungs, it may cause cough, sore throat, congestion and sometimes headache. If it settles in the stomach and intestinal tract, it may cause vomiting and diarrhea. Sometimes, it causes vague symptoms like "aching all over," feeling tired, loss of appetite, or fever.</p><p>A viral illness usually lasts from 1-2 weeks and sometimes longer. In some cases, a more serious infection can look like a viral syndrome in the first few days of the illness. Repeat exams and further tests are needed to know the difference.</p><p>Therefore, it is important to watch for the warning signs listed below.</p>

<p></p>

<p>HOME CARE: </p>

<p></p>

<p>- If symptoms are severe, rest at home for the first 2-3

days.</p>

<p></p>

<p>- Stay away from cigarette smoke (yours or other

people's').</p>

<p></p>

<p>- You may use Tylenol (acetaminophen) or ibuprofen (Motrin,

Advil) for fever,</p>

<p>muscle aching and headache, unless another medicine was

prescribed for this. [

<p>

<p>NOTE : If you have chronic liver or kidney disease or ever

had a stomach ulcer or

<p>

<p>GI bleeding, talk with your doctor before using these

medicines.] (Aspirin should

<p>

<p>never be used in anyone under 18 years of age who is ill

with a fever. It may

<p>

<p>cause severe liver damage.)</p>

<p></p>

<p>- Your appetite may be poor, so a light diet is fine. Avoid

dehydration by

<p>

<p>drinking 8-12 eight-ounce glasses of fluids per day. This

may include water,

<p>

<p>orange juice and lemonade, apple, grape and cranberry

juice, clear fruit drinks,

<p>

<p>electrolyte replacement and sports drinks, decaffeinated

teas and coffee.</p>

<p></p>

<p>- Over-the-counter remedies will not shorten the length of

the illness but may be

<p>

<p>helpful for the following symptoms: cough (Robitussin DM);

sore throat

<p>

<p>(Chloraseptic lozenges or spray); nasal and sinus

congestion (Actifed or

<p>

<p>Sudafed). [NOTE: Do not use decongestants if you have high

ED-DC-INSTRUCTIONS-for-Sharing

blood pressure.]. </p>

<p></p>

<p></p>

<p>GET PROMPT MEDICAL ATTENTION if any of the following

occur: </p>

<p></p>

<p>- Cough with lots of colored sputum (mucus) or blood in

your sputum</p>

<p></p>

<p>- Chest pain, shortness of breath, wheezing or difficulty

breathing</p>

<p></p>

<p>- Severe headache; face, neck or ear pain</p>

<p></p>

<p>- Severe constant right-sided lower abdominal pain</p>

<p></p>

<p>- Continued vomiting (can't keep liquids down)</p>

<p></p>

or black color) or </p>

<p>- Frequent diarrhea (more than 5 times a day); blood (red

<p>mucus in diarrhea</p>

<p></p>

<p>- Feeling weak, dizzy, or like you are going to faint</p>

<p></p>

<p>- Extreme thirst</p>

<p></p>

fever medication</p>

<p>- Fever of 100.4°F (38°C) oral or higher, not better with

<p></p>

<p>- Convulsion</p>

<p></p>

<p></p>

<p>- Or anything else that concerns you</p>

<p></p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="VIRAL SYNDROME [Child]">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HIDE_DI ALOG_ITEMS>1</HIDE_DI ALOG_ITEMS>

<IDENT_ITEMS>1</IDENT_ITEMS>

<BOILERPLATE_TEXT>

<p>VIRAL SYNDROME [Child] </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

<p>A virus is the most common cause of illness among children.

This may cause a </p>

<p>number of different symptoms, depending on what part of the

body is affected. If </p>

<p>the virus settles in the nose/throat/lungs it causes cough,

congestion and </p>

<p>sometimes headache. If it settles in the stomach and

intestinal tract, it causes </p>

<p>vomiting and diarrhea. Sometimes, it causes vague symptoms

of "feeling bad all </p>

<p>over" with fussiness, poor appetite, poor sleeping and lots

ED-DC-INSTRUCTIONS-for-Sharing

of crying. A light rash may also appear for the first few days, then fade away.

Home measures are all not helpful.

Like a viral syndrome it is important to watch for the warning signs listed below.

HOME CARE:

1) FLUIDS: Fever increases water loss from the body. For infants under 1 year old, continue regular feedings (formula or breast). Between feedings give Oral Rehydralyte, which are available from grocery and drug stores without a prescription). For children over 1 year old, give plenty of fluids like water, juice, Jell-O water, 7-Up, ginger-ale, lemonade, Kool-Aid or popsicles.

2) FEEDING: If your child doesn't want to eat solid foods, it's okay for a few days, as long as he or she drinks lots of fluid.

3) ACTIVITY: Keep children with fever at home resting or playing quietly. Encourage frequent naps. Your child may return to day care or school when the fever is gone and he or she is eating well and feeling better.

4) SLEEP: Periods of sleeplessness and irritability are common. A congested child will sleep best with the head and upper body propped up on pillows or with the head of the bed frame raised on a 6 inch block. An infant may sleep in a car-seat placed in the crib or in a baby swing.

5) COUGH: Coughing is a normal part of this illness. A cool mist humidifier at the bedside may be helpful. Over-the-counter cough and cold medicine has not been proven to be any more helpful than a placebo (sweet syrup with no medicine in it). However, they can produce serious side effects, especially in infants under 2 years of age. Therefore, do not give over-the-counter cough and cold medicines to children under 6 years unless your doctor has specifically advised you to do so. Also, don't expose your child to cigarette smoke. It can make the cough worse.

ED-DC-INSTRUCTIONS-for-Sharing

rubber bulb syringe. You may put 2-3 drops of saltwater (saline) nose drops in each nostril before suctioning to help remove secretions. Saline nose drops are available without a prescription. You can make it by adding 1/4 teaspoon table salt in 1 cup of water.

6) NASAL CONGESTION: Suction the nose of infants with a rubber bulb syringe. You may put 2-3 drops of saltwater (saline) nose drops in each nostril before suctioning to help remove secretions. Saline nose drops are available without a prescription. You can make it by adding 1/4 teaspoon table salt in 1 cup of water.

7) FEVER: You may use acetaminophen (Tylenol) or ibuprofen (Motrin, Advil) to control pain and fever, unless another medicine was prescribed for this. NOTE: If your child has chronic liver or kidney disease or ever had a stomach ulcer or GI bleeding, talk with your doctor before using these medicines. (Aspirin should never be used in anyone under 18 years of age who is ill with a fever. It may cause severe liver damage.)

8) PREVENTING SPREAD: Washing your hands after touching your sick child will help prevent the spread of this viral illness to yourself and to other children.

FOLLOW UP as directed by our staff.

GET PROMPT MEDICAL ATTENTION if any of the following occur:

- oFever of 100.4°F (38°C) oral or 101.4°F (38.5°C) rectal or higher, not better with fever medication
- oFast breathing (birth to 6 wks: over 60 breaths/min; 6 wk - 2 yr: over 45 breaths/min; 3-6 yr: over 35 breaths/min; 7-10 yrs: over 30 breaths/min; more than 10 yrs old: over 25 breaths/min)
- oWheezing or difficulty breathing
- oEarache, sinus pain, stiff or painful neck, headache
- oIncreasing abdominal pain or pain that is not getting better after 8 hours
- oRepeated diarrhea or vomiting
- oUnusual fussiness, drowsiness or confusion, weakness or dizzy
- oAppearance of a new rash
- oNo tears when crying, "sunken" eyes or dry mouth; No wet diapers for 8 hours in infants, reduced urine output in older children
- oBurning when urinating
- oConvulsion (seizure)

```
</BOILERPLATE_TEXT>  
</TEMPLATE>  
</ITEMS>  
</TEMPLATE>  
<TEMPLATE NAME="INFLUENZA (Child)">  
<TYPE>G</TYPE>  
<STATUS>A</STATUS>  
<DI A LOG>1</DI A LOG>  
<HI DE_DI A LOG_I TEMS>1</HI DE_DI A LOG_I TEMS>  
<I N DENT_I TEMS>1</I N DENT_I TEMS>  
<BOILERPLATE_TEXT>
```

```
<p>INFLUENZA (Child) </p>  
<p> </p>  
</BOILERPLATE_TEXT>  
<ITEMS>  
<TEMPLATE NAME="text">  
<TYPE>T</TYPE>  
<STATUS>A</STATUS>  
<BOILERPLATE_TEXT>  
<p>Influenza, also called the flu, is a viral illness that  
affects the air passages </p>  
<p>of the lungs. It differs from the common cold. It is highly  
contagious. It may be </p>  
<p>spread through the air by coughing and sneezing or by  
direct contact (touching </p>  
<p>the sick person and then touching your own eyes, nose or  
mouth). The illness </p>  
<p>starts one to three days after exposure and lasts for one  
to two weeks. </p>  
<p>Symptoms include extreme tiredness, fevers, muscle aching,  
headache, and a dry, </p>  
<p>hacky cough. Antibiotics are usually not needed unless a  
complication appears </p>  
<p>(such as ear infection or pneumonia). </p>  
<p>HOME CARE: </p>  
<p>oFLUIDS: Fever increases water loss from the body. For  
infants under 1 year old, </p>  
<p>continue regular feedings (formula or breast). Between  
feedings give Oral </p>  
<p>Rehydration Solution (such as Pedialyte, Infalyte,  
Rehydralyte, which you can get </p>  
<p>from grocery and drugstores without a prescription). For  
children over 1 year </p>  
<p>old, give plenty of fluids like water, juice, Jell-O water,  
7-Up, ginger ale, </p>  
<p>lemonade, Kool-Aid, or popicles. </p>  
<p>oFEEDING: If your child doesn't want to eat solid foods,  
it's okay for a few </p>  
<p>days, as long as he or she drinks lots of fluid. </p>  
<p>oACTIVITY: Keep children with fever at home resting or  
playing quietly. Encourage </p>  
<p>frequent naps. Your child may return to daycare or school  
when the fever is gone </p>  
<p>for at least 24 hours and the child is eating well and  
feeling better. </p>  
<p>oSLEEP: Periods of sleeplessness and irritability are  
common. A congested child </p>  
<p>will sleep best with the head and upper body propped up on  
pillows or with the </p>  
<p>head of the bed frame raised on a 6-inch block. An infant  
may sleep in a car seat </p>  
<p>placed on the bed. </p>  
<p>oCOUGH: Coughing is a normal part of this illness. A cool
```

ED-DC-INSTRUCTIONS-for-Sharing

mist humidifier at the bedside may be helpful. Over-the-counter cough and cold medicines have not been proven to be any more helpful than a placebo (sweet syrup with no medicine in it). However, they can produce serious side effects, especially in infants under 2 years of age. Therefore, do not give over-the-counter cough and cold medicines to children under 6 years unless your doctor has specifically advised you to do so. Also, don't expose your child to cigarette smoke. It can make the cough worse.

NASAL CONGESTION: Suction the nose of infants with a rubber bulb syringe. You may put 2-3 drops of saltwater (saline) nose drops in each nostril before suctioning to help remove secretions. Saline nose drops are available without a prescription. You can make it by adding 1/4 teaspoon table salt in 1 cup of water.

FEVER: Use acetaminophen (Tylenol) to control pain, unless another medication was prescribed. In infants over 6 months of age, you may use ibuprofen (Children's Motrin) instead of Tylenol. [NOTE: If your child has chronic liver or kidney disease or ever had a stomach ulcer or GI bleeding, talk with your doctor before using these medicines.] (Aspirin should never be used in anyone under 18 years of age who is ill with a fever. It may cause severe liver damage.)

FOLLOW UP as directed by our staff.

GET PROMPT MEDICAL ATTENTION if any of the following occur:

- oFever of 100.4°F (38°C) oral or 101.4°F (38.5°C) rectal or higher, not better with fever medication
- oFast breathing (6 wk-2 yr: over 45 breaths/min; 3-6 yr: over 35 breaths/min; 7-10 yrs: over 30 breaths/min; more than 10 yrs old: over 25 breaths/min)
- oEarache, sinus pain, stiff or painful neck, headache, repeated diarrhea or vomiting
- oUnusual fussiness, drowsiness or confusion
- oNo tears when crying; "sunken" eyes or dry mouth; no wet diapers for 8 hours in infants, reduced urine output in older children
- oAppearance of a rash

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="INFLUENZA (Adult)">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI A LOG>1</DI A LOG>
<HI DE_DI A LOG_I TEMS>1</HI DE_DI A LOG_I TEMS>
<I N DENT_I TEMS>1</I N DENT_I TEMS>

```

ED-DC-INSTRUCTIONS-for-Sharing

<BOILERPLATE_TEXT>

<p>INFLUENZA (Adult) </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="Text">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

<p>Influenza, also called the flu, is a viral illness that affects the air passages </p>
<p>of the lungs. It differs from the common cold. It is highly contagious. It may be </p>
<p>spread through the air by coughing and sneezing or by direct contact (touching </p>
<p>the sick person and then touching your own eyes, nose or mouth). </p>
<p>Illness starts 1-3 days after exposure and lasts for 1-2 weeks. Antibiotics are </p>
<p>usually not needed unless a complication appears (ear or sinus infection or </p>
<p>pneumonia). </p>
<p>Symptoms may be mild or severe and can include extreme tiredness (wanting to stay </p>
<p>in bed all day), chills, fevers, muscle aching, soreness </p>
<p>headache, and a dry, hacking cough. </p>
<p>HOME CARE: </p>
<p>Avoid exposure to cigarette smoke (yours or others'). </p>
<p>Tylenol or ibuprofen (Advil) will help fever, muscle aching, and headache. To </p>
<p>avoid risk of liver injury, aspirin should not be used in children and teenagers </p>
<p>under 18 with this illness. </p>
<p>Nausea and loss of appetite are common. A light diet is recommended. Avoid </p>
<p>dehydration by drinking 6-8 glasses of fluids per day (water, sport drinks like </p>
<p>Gatorade, soft drinks without caffeine, juices, tea, soup, etc.). Extra fluids </p>
<p>will also help loosen secretions in the nose and lungs. </p>
<p>Over-the-counter cold medicines will not shorten the duration of the illness but </p>
<p>may be helpful for the following symptoms: cough (Robitussin DM); sore </p>
<p>throat </p>
<p>(Chloraseptic lozenges or spray); nasal and sinus congestion (Actifed or </p>
<p>Sudafed). [NOTE: Do not use decongestants if you have high blood pressure.] </p>
<p>Stay home until your fever has been gone for at least 24 hours (without the use </p>
<p>of fever-reducing medications such as ibuprofen). </p>
<p>FOLLOW UP with your doctor or as directed by our staff if you are not improving </p>
<p>over the next week. </p>
<p>NOTE: If you are age 65 or older, or if you have chronic asthma or COPD, we </p>
<p>recommend a pneumococcal vaccination every five years. All adults should receive </p>
<p>a yearly influenza vaccination every autumn. Ask your doctor about this. </p>
<p>GET PROMPT MEDICAL ATTENTION if any of the following occur: </p>

ED-DC-INSTRUCTIONS-for-Sharing

sputum

breathing

fever medication

<p>oCough with lots of colored sputum (mucus) or blood in your

<p>oChest pain, shortness of breath, wheezing, or difficulty

<p>oSevere headache, face, neck or ear pain

<p>oNew rash

<p>oFever of 100.4°F (38°C) oral or higher, not better with

<p>oConfusion, behavior change or seizure

<p>oSevere weakness or dizziness

```
</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Otitis Externa">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DIALOG>1</DIALOG>
  <HIDE_DIALOG_ITEMS>1</HIDE_DIALOG_ITEMS>
  <INDENT_ITEMS>1</INDENT_ITEMS>
  <BOILERPLATE_TEXT>
    <p>Otitis Externa </p>
  </BOILERPLATE_TEXT>
</ITEMS>
```

<TEMPLATE NAME="text">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

<p>EXTERNAL EAR INFECTION Adult</p>

<p>This is an infection in the ear canal due to an overgrowth

of bacteria or fungus.

<p>This often occurs a few days after water gets trapped in

the ear canal (swimming

<p>or bathing). It may also occur after cleaning too deeply in

the ear canal with a

<p>cotton swab or other object. Sometimes hair care products

get into the ear canal

<p>and cause this problem.

<p>There may be itching, redness, drainage, or swelling of the

ear canal and

<p>temporary loss of hearing.

<p>HOME CARE:

<p>Do not try to clean the ear canal. That could push pus and

bacteria deeper into

<p>the canal.

<p>Use the drops prescribed to reduce swelling and fight the

infection. If an EAR

<p>WICK was placed in the ear canal, apply drops right onto

the end of the wick. The

<p>wick will draw the medicine into the ear canal even if it

is swollen closed.

<p>Do not allow water to get into your ear when bathing. No

swimming during this

<p>time.

<p>A cotton ball may be loosely placed in the outer ear to

absorb any drainage.

<p>You may use acetaminophen (Tylenol) or ibuprofen (Motrin,

Advil) to control

<p>pain, unless another medicine was prescribed. NOTE: If you

have chronic liver or

<p>kidney disease or ever had a stomach ulcer or GI bleeding,

talk with your doctor

ED-DC-INSTRUCTIONS-for-Sharing

before using these medicines. </p>
 PREVENTING FUTURE INFECTIONS: </p>
 You can usually avoid this problem by using an eardrop that removes the water from your ear canal when you feel there is water trapped there. You can get these drops over the counter (Swim Ear, Aqua Ear and other brands). FOLLOW UP with your doctor or this facility in one week or as instructed by our staff. GET PROMPT MEDICAL ATTENTION if any of the following occur:
 Ear pain becomes worse or does not begin to improve after 3 days of treatment
 Redness or swelling of the outer ear occurs or gets worse
 Headache, painful or stiff neck,
 Feeling drowsy or confused
 Fever of 100.4°F (38°C) or higher, or as directed by your healthcare provider

```

    <p>Seizure</p>
  </BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="EUSTACHIAN TUBE OBSTRUCTION ">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>
  <I NDE NT_ITEMS>1</I NDE NT_ITEMS>
  <BOILERPLATE_TEXT>

```

EUSTACHIAN TUBE OBSTRUCTION

The eustachian tube sits behind the eardrum. It connects the middle ear to the back of the throat. The tube is usually closed. But it opens during yawning or swallowing. This helps equalize pressure in the middle ear. The tube also drains mucus produced in the middle ear. A blocked tube is called a eustachian tube obstruction. When a eustachian tube is obstructed, it causes pressure, pain, and hearing loss. Sounds may be muffled, and the ear may feel full. The child may hear humming or ringing. An obstruction can sometimes lead to an ear infection. Often, tube obstruction resolves on its own without treatment. Nasal decongestants, nasal sprays, or allergy treatments may be given to help reduce swelling within the tube. An ear infection may be treated with antibiotics. Obstructed eustachian tubes are usually a short-term problem.

HOME CARE:
 Medication: The doctor may prescribe medications to reduce

ED-DC-INSTRUCTIONS-for-Sharing

fluid and inflammation
 for giving these
 ear plugs when taking
 child to swallow or yawn
 eustachian tube. This
 swallow to reduce pressure
 occur:

- <p>or treat an ear infection. Follow the doctor's instructions
- <p>medications to your child.</p>
- <p>Prevention: </p>
- <p>1. Keep your child's ear canal dry. Have your child wear
- <p>bath or playing in a pool.</p>
- <p>2. If your child is prone to blocked tubes, teach your
- <p>to open the tubes and equalize pressure.</p>
- <p>3. Flying in an airplane causes pressure to build up in the
- <p>can be painful for children. Have your child yawn or
- <p>especially during take-off and landing.</p>
- <p>GET PROMPT MEDICAL ATTENTION if any of the following

- <p>- Fever greater than 100.4°F (38°C)</p>
- <p>- Hearing loss or trouble hearing</p>
- <p>- Symptoms that last longer than a few weeks</p>
- <p>- Signs of infection such as increased redness or swelling,
- worsening pain, or
- <p>foul-smelling drainage from the ear</p>
- <p>- Or anything else that concerns you</p>

```
</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="ACUTE OTITIS MEDIA WITH INFECTION [Child]">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
<I N DENT_I TEMS>1</I N DENT_I TEMS>
<BOILERPLATE_TEXT>
```

<p>ACUTE OTITIS MEDIA WITH INFECTION [Child] </p>

<p> </p>

<BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

<p>The middle ear is the space behind the eardrum. The

eustachian tubes connect the

and equalize pressure in

children, so they are

fluid and pressure

the fluid, an ear

more commonly known

may also have reduced

preceded by a respiratory

<p>ears to the nasal passage. They help drain normal fluids

<p>the ear. These tubes are shorter and more horizontal in

<p>more likely to become blocked. As a result of a blockage,

<p>build up in the middle ear. If bacteria or fungi grow in

<p>infection results. This is called acute otitis media. It is

<p>as an earache.</p>

<p>The main symptom of an ear infection is ear pain. The child

<p>ability to hear in that ear. The ear infection may be

<p>infection.</p>

<p>After an ear infection is treated and has cleared, the

ED-DC-INSTRUCTIONS-for-Sharing

middle ear may still contain fluid buildup. This fluid may take weeks or months to go away. During that time, your child may have temporary reduced hearing. But all other symptoms of the earache should be gone.

HOME CARE:

Medications: The doctor will likely prescribe medications for pain. The doctor may also prescribe medications for infection (antibiotics or antifungals). Because ear infections can clear up on their own, the doctor may suggest a waiting period of a few days before giving the child medications for infection. Medications may be in liquid form to give orally or as eardrops. Closely follow the doctor's instructions for using medications.

To Apply Eardrops:

1. If the eardrop medication is refrigerated, put the bottle in warm water before using. Cold drops in the ear are uncomfortable.
2. Have your child lie down on a flat surface. Gently hold the child's head to one side.
3. Remove any drainage from the ear with a clean tissue or cotton swab. Clean only the outer ear. Do not insert the cotton swab into the ear canal.
4. Straighten the ear canal by pulling the earlobe up and back.
5. Keep the dropper ½ inch above the ear canal to avoid contamination. Apply the drops against the side of the ear canal.
6. Have your child stay lying down for 2 to 3 minutes. This gives time for the medication to enter the ear canal. If your child does not have pain, gently massage the outer ear near the opening.
7. Wipe excess medication away from the outer ear with a clean cotton ball.

General Care:

1. To reduce pain, have your child rest in an upright position. Hot or cold compresses held against the ear may help relieve pain.
2. Keep the ear dry. Have your child wear a shower cap when bathing.
3. Avoid smoking near your child. Smoking has been shown to increase the incidence of ear infections in children.

FOLLOW UP as advised by the doctor or our staff.

SPECIAL NOTES TO PARENTS: If your child continues to get earaches, the doctor may talk to you about inserting small tubes in the child's eardrum to help prevent fluid buildup. This is a simple and effective surgical procedure.

GET PROMPT MEDICAL ATTENTION if any of the following occur:

- oFever greater than 100.4°F (38°C) oral
- oNew symptoms, especially swelling around the ear or
- oSevere pain

ED-DC-INSTRUCTIONS-for-Sharing

<p>oinfection that seems to get worse, not better</p>
</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="DOG BITE ">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
<I NDE NT_I TEMS>1</I NDE NT_I TEMS>
<BOILERPLATE_TEXT>
<p>DOG BITE </p>
<p></p>
</BOILERPLATE_TEXT>
<I TEMS>
<TEMPLATE NAME="text">
<TYPE>T</TYPE>
<STATUS>A</STATUS>
<BOILERPLATE_TEXT>
<p>If a dog has bitten you and the wound is deep enough to
break the skin, an </p>
<p>infection may occur. Therefore, you should watch for the
warning signs listed </p>
<p>below. The doctor may not close the wound completely. This
is to allow fluid to </p>
<p>drain in the event of an infection.</p>
<p>HOME CARE </p>
<p>oWatch the wound for signs of infection listed below.</p>
<p>oin certain types of bites, antibiotics may be prescribed.
Begin taking these as </p>
<p>soon as possible, as directed until they are all gone.</p>
<p>Rabies Preventi on</p>
<p>If you live in an area where rabies occurs in wild animals,
the rabies virus can </p>
<p>be passed to cats and dogs. An infected animal can pass the
rabies virus to you </p>
<p>during a bite.</p>
<p>of a healthy-looking pet dog has bitten you, it should be
kept in a secure area </p>
<p>for the next 10 days to watch for signs of illness. If the
pet owner won't </p>
<p>cooperate with you, contact the county animal control
department (or local law </p>
<p>enforcement). If the animal becomes ill or dies within 10
days, contact your </p>
<p>animal control department at once. The animal must be
tested for rabies. If the </p>
<p>animal stays healthy for the next 10 days, then there is no
danger of rabies in </p>
<p>the dog or you.</p>
<p>oPets fully vaccinated against rabies (2 shots) are at very
low risk for the </p>
<p>infection. However, because human rabies is almost always
fatal, any biting dog </p>
<p>should be kept in confinement for 10 days as an extra
precaution.</p>
<p>of a stray dog bit you, contact the animal control
department. They can provide </p>
<p>information on capture, quarantine, and animal rabies
testing.</p>
<p>of you are unable to locate the animal that bit you in the
next 2 days, and if </p>

ED-DC-INSTRUCTIONS-for-Sharing

rabies vaccine </p>
 <p>rabies exists in your region, you must be evaluated for the
 <p>series. Contact your doctor or return here promptly.</p>
 <p>oAll animal bites should be reported to the county animal
 control department. If </p>
 <p>you were not given a form to fill out, you can report it
 yourself by calling.</p>
 <p>FOLLOW UP with your doctor as advised. Most skin wounds
 heal within 10 days.</p>
 <p>However, an infection may occur even with proper treatment.
 Check your wound </p>
 <p>every 6 hours for 2 days, then at least once a day for the
 next two days for the </p>
 <p>signs of infection listed below.</p>
 <p>GET PROMPT MEDICAL ATTENTION if any of the following
 occur: </p>
 <p>oSigns of infection: </p>
 <p>Spreading redness</p>
 <p>Increased pain or swelling</p>
 <p>Fever of 100.4°F (38°C) or higher, or as directed by your
 healthcare provider</p>
 <p>Colored fluid or pus draining from the wound</p>
 <p>oHeadache, confusion, strange behavior, or a seizure (signs
 of a rabies </p>

```

    <p>infection)</p>
  </BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Diarrhea">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>
  <INDENT_ITEMS>1</INDENT_ITEMS>
  <BOILERPLATE_TEXT>
    <p>Diarrhea </p>
    <p> </p>
  </BOILERPLATE_TEXT>
  <ITEMS>

```

```

    <TEMPLATE NAME="text">
      <TYPE>T</TYPE>
      <STATUS>A</STATUS>
      <BOILERPLATE_TEXT>
        <p>Diarrhea has several possible causes. Common "stomach flu"
        is caused by a virus. </p>
        <p>Food poisoning, bacteria or parasites are other causes for
        diarrhea. Only </p>
        <p>diarrhea caused by bacteria or parasites requires treatment
        with an antibiotic. </p>
        <p>Diarrhea from a virus or food poisoning improves with
        simple home treatment.</p>
        <p>HOME CARE: </p>
        <p>- If symptoms are severe, rest at home for the next 24
        hours or until you are </p>
        <p>feeling better.</p>
        <p>- You may use acetaminophen (Tylenol) or ibuprofen (Motrin,
        Advil) to control </p>
        <p>fever, unless another medicine was prescribed. [NOTE: If
        you have chronic liver </p>
        <p>or kidney disease or ever had a stomach ulcer or GI
        bleeding, talk with your </p>
        <p>doctor before using these medicines.] (Aspirin should never

```

ED-DC-INSTRUCTIONS-for-Sharing

be used in anyone </p>
 <p>under 18 years of age who is ill with a fever. It may cause severe liver damage.)</p>
 <p>- Avoid tobacco, caffeine and alcohol, which may worsen your symptoms.</p>
 <p>- If anti-diarrhea medicine was prescribed, take this only as directed. Sometimes </p>
 <p>anti-diarrhea medicine can make your condition worse if the cause is an </p>
 <p>infectious diarrhea. Therefore, anti-diarrhea medicine should not be taken for </p>
 <p>this condition unless advised by your doctor.</p>
 <p>DURING THE FIRST 12-24 HOURS follow the diet below:</p>
 <p>- BEVERAGES: Sport drinks like Gatorade, soft drinks without caffeine; ginger </p>
 <p>ale, mineral water (plain or flavored), decaffeinated tea and coffee.</p>
 <p>- SOUPS: Clear broth, consommé and bouillon</p>
 <p>- DESSERTS: Plain gelatin (Jell-O), popsicles and fruit juice bars.</p>
 <p>DURING THE NEXT 24 HOURS you may add the following to the above:</p>
 <p>- Hot cereal, plain toast, bread, rolls, and crackers</p>
 <p>- Plain noodles, rice, mashed potatoes, chicken noodle or rice soup</p>
 <p>- Unsweetened canned fruit (avoid pineapple), bananas</p>
 <p>- Limit fat intake to less than 15 grams per day by avoiding margarine, butter, </p>
 <p>oils, mayonnaise, sauces, gravies, fried foods, peanut butter, meat, poultry and </p>
 <p>fish.</p>
 <p>- Limit fiber; avoid raw or cooked vegetables, fresh fruits (except bananas) and </p>
 <p>bran cereals.</p>
 <p>- Limit caffeine and chocolate. No spices or seasonings except salt.</p>
 <p>DURING THE NEXT 24 HOURS </p>
 <p>Gradually resume a normal diet, as you feel better and your symptoms lessen.</p>

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Atopic dermatitis ">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
<I NDE NT_I TEMS>1</I NDE NT_I TEMS>
<BOILERPLATE_TEXT>
  <p>Atopic dermatitis </p>
  <p> </p>
</BOILERPLATE_TEXT>
<I TEMS>

```

goes. It is not </p>
 <p>contagious. It is most common in persons with asthma, hay fever, hives, or dry </p>
 <p>sensitive skin. The rash may be triggered by extreme heat

ED-DC-INSTRUCTIONS-for-Sharing

or heavy sweating. Skin
 irritants may cause the rash to flare up, including wool or
 silk clothing,
 grease, oils, some medicines, and harsh soaps and
 detergents. And emotional
 stress may also be
 trigger. Scratching may break the skin and lead to
 infection. Treatment is aimed
 at relieving the itching and local inflammation.

HOME CARE:

- oKeep the areas of rash clean by bathing regularly (at least every other day).
- oUse lukewarm water to bathe. Avoid hot water, which can dry out the skin.
- oAvoid soaps with detergents. Use mild, moisturizing soaps such as Dove or
- oCetaphil.
- oApply a moisturizing cream or ointment to damp skin right after bathing.
- oAvoid things that irritate your skin. Wear absorbent, soft fabrics next to the
- oSkin rather than rough or scratchy materials.
- oUse mild laundry soap free of scents and perfumes. Rinse all the soap out of the
- oClothes before drying.
- oTreat any skin infection as directed.
- oOral Benadryl (diphenhydramine) is an antihistamine available at drug and
- oGrocery stores. Unless a prescription antihistamine was given, Benadryl may be
- oUsed to reduce itching if large areas of the skin are involved. Use lower doses
- oDuring the daytime and higher doses at bedtime since the drug may make you
- oSleepy. (NOTE: Do not use Benadryl if you have glaucoma or if you are a man with
- oTrouble urinating due to an enlarged prostate.) Claritin (loratadine) is an
- oAntihistamine that causes less drowsiness and is an alternative for daytime use.

FOLLOW UP: Make an appointment with your doctor in the next week if there is no

improvement with the above measures.

GET PROMPT MEDICAL ATTENTION if any of the following occur:

- oIncreasing area of redness or pain in the skin
- oYellow crusts or wet drainage from the rash
- oFever of 100.4°F (38°C) or higher, or as directed by your

healthcare provider

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="DERMATITIS (Non-specific)">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
<I NDENT_I TEMS>1</I NDENT_I TEMS>
<BOILERPLATE_TEXT>
<p>DERMATITIS (Non-specific) </p>
<p> </p>

```

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

<p>Dermatitis is an inflammation of the skin. The exact cause of your rash is not

<p>certain. However, this rash does not appear to be an infection or contagious

<p>illness. Taking care of the rash at home should help relieve your symptoms.</p>

<p>HOME CARE: </p>

<p>- Keep the areas of rash clean by washing it daily. This also helps to keep the

<p>skin moist.</p>

<p>- Use a neutral pH soap such as Dove or Lever 2000.</p>

<p>- Apply a moisturizing lotion after bathing to prevent dry

skin.</p>

<p>- Avoid skin irritants (wool or silk clothing, grease,

oils, some medicines, next to the skin </p>

<p>harsh soaps, and detergents). Wear absorbent, soft fabrics

<p>rather than rough or scratchy materials.</p>

Hydrocortisone cream <p>- Unless another medicine was prescribed, you may use

inflammation.</p><p>(which you can get without a prescription) to reduce the

<p>GET PROMPT MEDICAL ATTENTION if any of the following

occur:</p>

<p>- Increasing area of redness or pain in the skin</p>

<p>- Yellow crusts or drainage from the rash</p>

<p>- Joint pain</p>

<p>- New rash that appears in other areas of the body</p>

<p>- Fever of 100.4°F (38°C) or higher, or as directed by

your healthcare provider</p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="Dehydration">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HI DE_DI ALOG_ITEM>1</HI DE_DI ALOG_ITEM>

<I N DENT_ITEM>1</I N DENT_ITEM>

<BOILERPLATE_TEXT>

<p>Dehydration </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

<p>Dehydration occurs when the body loses too much fluid. This may be the result of

<p>vomiting a lot or from diarrhea, profuse sweating or a high fever. It may also

<p>occur if you don't drink enough fluid when you're sick.

Misuse of diuretics </p>

<p>(water pills) can also be a cause.</p>

<p>Symptoms include thirst and feeling dizzy, weak, fatigued,

ED-DC-INSTRUCTIONS-for-Sharing

or very drowsy. The diet described below is usually enough to treat most cases. Sometimes medicine is also needed.

HOME CARE:

- Adults should drink at least 12 eight-ounce glasses of fluid per day to correct dehydration. The fluid may include water, orange juice and lemonade, apple, grape and cranberry juice, clear fruit drinks, electrolyte replacement and sports drinks, and teas and coffee without caffeine.

- If you have fever, muscle aching or headache from a viral syndrome, you may use Tylenol (acetaminophen) or ibuprofen (Motrin, Advil), unless another medicine was prescribed for this. [NOTE : If you have chronic liver or kidney disease or ever had a stomach ulcer or GI bleeding, talk with your doctor before using these medicines.] (If under 18 years old, do not use aspirin for fever. There is a chance of severe liver injury.)

FOLLOW UP with your doctor or this facility if you do not improve over the next 24-48 hours.

GET PROMPT MEDICAL ATTENTION if any of the following occur:

- Continued vomiting (can't keep liquids down)
- Frequent diarrhea (more than 5 times a day); blood (red or black color) or mucus in diarrhea
- Blood in vomit or stool
- Swollen abdomen or increasing abdominal pain
- Weakness, dizziness or fainting
- Unusually drowsy or confused
- Reduced urine output or extreme thirst
- Fever of 100.4°F (38°C) oral or higher, not better with fever medication
- Or anything else that concerns you

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Benign Positional Vertigo">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HIDE_DIALOG_ITEMS>1</HIDE_DIALOG_ITEMS>
<INDENT_ITEMS>1</INDENT_ITEMS>
<BOILERPLATE_TEXT>
<p>Benign Positional Vertigo </p>
<p></p>
</BOILERPLATE_TEXT>
</ITEMS>
<TEMPLATE NAME="text">
<TYPE>T</TYPE>
<STATUS>A</STATUS>
<BOILERPLATE_TEXT>

```

The inner ear is located behind the middle ear. It is a part of the balance center of the body. It contains small calcium particles within fluid filled

ED-DC-INSTRUCTIONS-for-Sharing

<HIDE_DIALOG_ITEMS>1</HIDE_DIALOG_ITEMS>

<INDENT_ITEMS>1</INDENT_ITEMS>

<BOILERPLATE_TEXT>

<p>COPD Flare </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

<p>COPD FLARE </p>

Obstructive Pulmonary </p>
smoking tobacco. Many </p>
causes include the </p>
your regular breathing </p>
pollutants. </p>

<p>Both emphysema and chronic bronchitis are forms of Chronic

<p>Disease (COPD). It is most often caused by many years of

<p>things can make your lung disease suddenly get worse. These

<p>common cold, pneumonia, acute bronchitis, missing doses of

<p>medicines, or exposure to smoke, dust, or other air

<p></p>

to relax the airways </p>
your doctor thinks there </p>
inflammation in a </p>

<p>A COPD flare may last 7-14 days. Medicine may be prescribed

<p>and prevent wheezing. Antibiotics will be prescribed if

<p>is a bacterial infection. Prednisone is helpful to decrease

<p>severe attack. </p>

<p></p>

<p>HOME CARE: </p>

day) during an </p>
to breathe. If you </p>
you drink extra </p>

<p>Drink lots of water or other fluids (at least 10 glasses a

<p>attack. This will loosen lung secretions and make it easier

<p>have heart or kidney disease, check with your doctor before

<p>amounts of fluids. </p>

you have a hand-held </p>
than once every four </p>
prednisone, take all </p>
days. </p>

<p>Take prescribed medicine exactly at the times advised. If

<p>inhaler or aerosol breathing medicine, do not use it more

<p>hours, unless told to do so. If prescribed an antibiotic or

<p>of the medicine even if you are feeling better after a few

<p>Do not smoke. Avoid being exposed to the smoke of

If you need to use it </p>
worse. Contact your </p>
asthma or COPD, we</p>

<p>If you were given an inhaler, use it exactly as directed.

<p>more often than prescribed, your condition may be getting

<p>doctor or this facility. </p>

<p>FOLLOW UP with your doctor, or as advised by our staff. </p>

<p>NOTE: If you are age 65 or older, or if you have chronic

an INFLUENZA </p>
this. </p>

<p>recommend a PNEUMOCOCCAL VACCINATION every five years and

<p>VACCINATION (FLU-SHOT) every autumn. Ask your doctor about

<p>[NOTE: If you had an X-ray or EKG (cardiogram), it will be

reviewed by a </p>

ED-DC-INSTRUCTIONS-for-Sharing

may affect your care.]

specialist. You will be notified of any new findings that occur:

- oIncreased wheezing or shortness of breath
- oNeed to use your inhalers more often than usual without relief
- oFever of 100.4°F (38°C) or higher, or as directed by your healthcare provider
- oCoughing up lots of dark-colored or bloody sputum (mucus)
- oChest pain with each breath

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Croup">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>
<I N DENT_ITEMS>1</I N DENT_ITEMS>
<BOILERPLATE_TEXT>
<p>Croup </p>
<p> </p>
</BOILERPLATE_TEXT>
<ITEMS>
<TEMPLATE NAME="text">
<TYPE>T</TYPE>
<STATUS>A</STATUS>
<BOILERPLATE_TEXT>

```

become irritated by a virus. The organs swell up, and it is difficult to talk and breathe. This condition is called viral croup. It often occurs in children under 6 years of age. The respiratory distress croup causes is very scary. However, most children fully recover from croup in 5 or 6 days. Some children have a mild fever for a day or two or a cold before any other symptoms occur. Symptoms of croup occur more often at night. Difficulty breathing, especially taking in a breath, occurs suddenly. The child may sit upright and lean forward trying to breathe. The child may be restless and agitated. Other symptoms include a voice that is hoarse and hard to hear and a barking cough. Children with croup may have a difficult time swallowing. They may drool and have trouble eating. Some children develop sore throats and ear infections. In the course of 5 or 6 days, croup symptoms will come and go. Most croup can be safely treated at home. Medications may be prescribed. A warm, steamy bathroom often eases symptoms. A cool humidifier or vaporizer in the bedroom also eases breathing during the night.

HOME CARE: The doctor may prescribe a medication to

ED-DC-INSTRUCTIONS-for-Sharing

reduce swelling and assist breathing. Follow the doctor's instructions for giving this medication to your child.

To Assist Breathing:

1. Provide warm mist by turning on the bathroom shower to the hottest setting. Have your child sit in the warm, steamy bathroom for 15 to 20 minutes. Repeat this as needed.
2. Wrap the child well and take him or her outside into cool, moist night air. Alternating the cool air with the warm steam may ease symptoms.
3. Use a cool humidifier or vaporizer in the child's bedroom. Moist air is easier to breathe.

General Care:

1. Sleep in the same room with your child, if possible, to provide comfort and expansion and ability to breathe.
2. Avoid putting a finger down the child's throat or trying to make the child vomit. If the child does vomit, hold the head down, then quickly sit the child back up.
3. Avoid giving your child cough drops or cough syrup. They will not help the secretions. They may also make it harder to cough up any such as water or diluted apple juice. Warm liquids may be soothing to the child.

FOLLOW UP as advised by the doctor or our staff.

SPECIAL NOTES TO PARENTS: Viral croup is contagious for the first 3 days of symptoms. Carefully wash your hands with soap and warm water before and after caring for your child to prevent the spread of infection. Also limit your child's exposure to other people.

GET PROMPT MEDICAL ATTENTION if any of the following occur:

- oFever greater than 100.4°F (38°C)
- oContinuing symptoms, without relief from interventions or medication
- oDifficulty breathing, even at rest; poor chest expansion; whistling sounds
- oBluish discoloration around mouth and fingernails
- oSevere drooling; poor eating
- oDifficulty talking

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Cornial Abrasion">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>
<I N DENT_ITEMS>1</I N DENT_ITEMS>

```

ED-DC-INSTRUCTIONS-for-Sharing

<BOILERPLATE_TEXT>

<p>Corneal Abrasion </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

<p>The cornea is the clear part in the front of the eye. This sensitive area is very </p>

<p>painful when injured. There may be tearing and your vision may be blurry until </p>

<p>healing occurs. You may be sensitive to light. This part of the body heals </p>

<p>quickly. You can expect the pain to go away within 24-48 hours. If the abrasion </p>

<p>is large or deep, your doctor may apply an eye patch, although this is not always </p>

<p>done. An antibiotic ointment or eye drops may also be used to prevent infection. </p>

<p>Numbing drops may be used to relieve the pain temporarily so that your eyes can </p>

<p>be examined. However, these drops cannot be prescribed for home use because that </p>

<p>would slow down the healing process. Also, if you can't feel your eye, there is a </p>

<p>chance of accidentally injuring your eye further without knowing it. </p>

<p>HOME CARE: </p>

<p>1. A cold pack (ice in a plastic bag, wrapped in a towel) may be applied over the </p>

<p>eye (or eyepatch) for 20 minutes at a time, to reduce pain. </p>

<p>2. You may use acetaminophen (Tylenol) or ibuprofen (Motrin, Advil) to control </p>

<p>pain, unless another pain medicine was prescribed. [NOTE: If you have chronic </p>

<p>liver or kidney disease or ever had a stomach ulcer or GI bleeding, talk with </p>

<p>your doctor before using these medicines.] </p>

<p>3. Rest your eyes and do not read until symptoms are gone. </p>

<p>4. If you use contact lenses, do not wear them until all symptoms are gone. </p>

<p>5. If your vision is affected by the corneal abrasion or if an eyepatch was </p>

<p>applied, DO NOT DRIVE a motor vehicle or operate machinery until all symptoms are </p>

<p>gone. Otherwise, you would have trouble judging distances with only one eye. </p>

<p>6. If your eyes are sensitive to light, try wearing sunglasses, or stay indoors, </p>

<p>until symptoms go away. </p>

<p>FOLLOW UP as advised by our staff. Serious abrasions may be referred to an eye </p>

<p>specialist (ophthalmologist). </p>

<p>- If no patch was used but the pain continues for more than 48 hours, you should </p>

<p>have another exam. Return to this facility or contact the referral doctor to </p>

<p>arrange this. </p>

<p>- If your eye was patched and if you were asked to remove

ED-DC-INSTRUCTIONS-for-Sharing

the patch yourself, see </p>
 still present after the </p>
 for patch removal and </p>
 remains in place </p>
 occur: </p>
 24 hours</p>
 eyelids</p>

<p>your doctor or return to this facility if your pain is
 <p>patch is removed. If you were given a return appointment
 <p>re-exam, do not miss this. It could be harmful if the patch
 <p>longer than advised.</p>
 <p>GET PROMPT MEDICAL ATTENTION if any of the following
 <p>- Increasing eye pain or pain that does not improve after
 <p>- Discharge from the eye</p>
 <p>- Increasing redness of the eye or swelling of the
 <p>- Your vision gets worse</p>
 <p>- Or if anything else concerns you</p>
 </BOILERPLATE_TEXT>
 </TEMPLATE>
 </ITEMS>

</TEMPLATE>
 <TEMPLATE NAME="Bacterial Conjunctivitis">
 <TYPE>G</TYPE>
 <STATUS>A</STATUS>
 <DI ALOG>1</DI ALOG>
 <HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
 <I N DENT_I TEMS>1</I N DENT_I TEMS>
 <BOILERPLATE_TEXT>

<p>Bacterial Conjunctivitis </p>
 <p> </p>
 </BOILERPLATE_TEXT>
 <ITEMS>
 <TEMPLATE NAME="text">
 <TYPE>T</TYPE>
 <STATUS>A</STATUS>
 <BOILERPLATE_TEXT>
 <p>You have a bacterial infection in the membranes covering
 the eye. The most common </p>
 eyelids, redness, </p>
 scratchy feeling in the </p>
 treatment.</p>
 <p>HOME CARE: </p>
 the infection.</p>
 affected eye 3-4 times a </p>
 eyelids in the morning.</p>
 also use saline </p>
 inside the eye. Do </p>
 eye. This is to prevent </p>
 people. Do not share your </p>

<p>symptoms include a thick discharge from the eye, swollen
 <p>eyelids sticking together upon awakening, and a gritty or
 <p>eye. The infection takes about 7-10 days to resolve with
 <p>1. Use prescribed eyedrops or ointment as directed to treat
 <p>2. Apply a warm pack (towel soaked in warm water) to the
 <p>day. Do this just before applying medicine to the eye.</p>
 <p>3. Use a warm, wet cloth to wipe away crusting of the
 <p>This is caused by mucus drainage during the night. You may
 <p>irrigating solution or artificial tears to rinse away mucus
 <p>not put a patch over the eye.</p>
 <p>4. Wash your hands before and after touching the infected
 <p>spreading the infection to the other eye, and to other
 <p>towels or washcloths with others.</p>
 <p>5. You may use acetaminophen (Tylenol) or ibuprofen

(Motrin, Advil) to control pain, unless another medicine was prescribed. [NOTE: If you have chronic liver or kidney disease or ever had a stomach ulcer or GI bleeding, talk with your doctor before using these medicines.]

6. Do not wear contact lenses until your eyes have healed and all symptoms are gone.

Chronic Pain

Pain of recent onset ("acute pain") serves an important function. It lets you know something is wrong that needs your attention. When the body heals, acute pain goes away.

When pain lasts longer than six months, it is called "chronic pain." It may be present even after the body has healed. Chronic pain has both a physical and a psychological component. It may cause low self-esteem, depression and irritability. And, it can interfere with daily activities.

TREATMENT:

Chronic pain is treated with a combination of medicines, therapy and lifestyle changes. Medicines may include pain relievers and antidepressants. It is best not to rely on regular use of narcotics for chronic pain. This leads to physical addiction. If narcotics are used at all, they are best limited to acute, breakthrough pain. Medicines used for seizures also help in certain types of chronic pain.

Physical therapy can offer stretching and strengthening activities as well as low-impact exercise. This can reduce certain types of chronic pain.

Occupational therapy teaches you how to do routine tasks of daily living in ways that minimize your discomfort.

Psychological therapy can help you deal with the stress in your life so you feel more at ease.

ED-DC-INSTRUCTIONS-for-Sharing

Other modalities such as meditation, yoga, biofeedback, massage and acupuncture

can also help manage chronic pain.

Lifestyle habits can affect chronic pain. The following should be part of any

chronic pain treatment plan.

- Eat healthy

- Develop an exercise routine

- Get enough sleep at night

- Stop smoking and limit alcohol use

- Start a weight loss program if you are overweight

Many patients can be free from chronic pain. But at the very least, you should

expect your pain to become less severe, occur less often and interfere less with

your daily life.

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="Heart Failure">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DIALOG>1</DIALOG>

<HIDE_DIALOG_ITEMS>1</HIDE_DIALOG_ITEMS>

<INDENT_ITEMS>1</INDENT_ITEMS>

<BOILERPLATE_TEXT>

<p>Heart Failure </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="Text">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

You have been diagnosed with heart failure. The term "heart failure" sounds scary

because it suggests the heart is no longer working. But, it actually means the

heart isn't doing its job as well as it should. Heart failure happens when your

heart muscle can't keep up with your body's need for blood flow. Symptoms of

heart failure can be controlled by changes in your lifestyle and by following

your doctor's advice.

Home care

Activity

Ask your health care provider about an exercise program.

You can benefit from

simple activities such as walking or gardening. Exercising

most days of the week

can make you feel better. Don't be discouraged if your

progress is slow at first.

Rest as needed and stop activity if you develop symptoms

such as chest pain,

lightheadedness, or significant shortness of breath.

Diet

Follow a heart healthy diet and work hard to decrease sodium (salt) in your diet.

Try to limit total salt/sodium intake to 2400 mg a day.

Depending on your

situation, your health care provider may tell you to reduce

ED-DC-INSTRUCTIONS-for-Sharing

your sodium intake </p>
make it harder for </p>
the following: </p>
heart failure worse. </p>
than 66 ounces (2 </p>
heart. Alcohol should be </p>
servings a day for </p>
chances of having a </p>
smoking is the number one </p>
stop-smoking program to </p>
medications or </p>
names and purpose of each </p>
current dosages with </p>
your medication, take </p>
your next dose. In that </p>
Don't take a double </p>
your heart failure is </p>
the same kind of </p>
morning after you empty your </p>
provider will show you </p>
you when you should </p>
weight. </p>
if your weight </p>
week, or whatever </p>
that you are retaining </p>
type and severity of </p>

<p>even more. Salt causes your body to retain water, which can
<p>your heart to pump. You can start limiting salt by doing
<p>oLimit canned, dried, packaged, and fast foods.</p>
<p>oDon't add salt to your food at the table.</p>
<p>oSeason foods with herbs instead of salt when you cook.</p>
<p>Reduce your fluid intake. Drinking too much fluid can make
<p>It is commonly advised to limit total fluid intake to less
<p>liters) per day.</p>
<p>Limit alcohol. Too much alcohol can be harmful to the
<p>limited to no more than one serving a day for women and two
<p>men.</p>
<p>Tobacco</p>
<p>If you smoke, you'll need to quit. Smoking increases your
<p>heart attack, which makes heart failure worse. Quitting
<p>thing you can do to improve your health. Enroll in a
<p>improve your chances of success. Talk to your doctor about
<p>nicotine replacement therapy to help you quit smoking.</p>
<p>Medication</p>
<p>Take your medications exactly as prescribed. Learn the
<p>of your medications. Keep an accurate medication list and
<p>you at all times. Don't skip doses. If you miss a dose of
<p>it as soon as you remember -- unless it's almost time for
<p>case, just wait and take your next dose at the normal time.
<p>dose. If you are unsure, call your doctor's office.</p>
<p>Weight monitoring</p>
<p>Weigh yourself every day. A sudden weight gain can indicate
<p>worsening. Weigh yourself at the same time of day and in
<p>clothes. Ideally, weigh yourself first thing in the
<p>bladder, but before you eat breakfast. Your health care
<p>how to track your weight. He or she will also discuss with
<p>call if you have a sudden, unexpected increase in your
<p>In general, your health care provider may ask you to report
<p>increases by more than 2 pounds in 1 day or 5 pounds in 1
<p>weight gain you were told by your doctor. This is a sign
<p>more fluid than you should be.</p>
<p>Follow-up care</p>
<p>Make a follow up appointment as directed. Depending on the

ED-DC-INSTRUCTIONS-for-Sharing

as 7 days from </p>
 tests that are needed </p>
 following medical </p>
 the following: </p>
 you develop signs of </p>
 following signs of worsening </p>
 pounds in 1 week, or </p>
 doctor)</p>
 needing more pillows to </p>
 breath even while </p>
 nitroglycerin</p>
 side of your face, </p>
 changes</p>

```

    </BOILERPLATE_TEXT>
  </TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Chest Pain, Uncertain Cause">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>
  <I NDENT_I TEMS>1</I NDENT_I TEMS>
  <BOILERPLATE_TEXT>

```

ED-DC-INSTRUCTIONS-for-Sharing

<p>Chest Pain, Uncertain Cause </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

<p>Based on your exam today, the exact cause of your chest pain is not certain. Your condition does not seem serious at this time, and your pain does not appear to be coming from your heart. However, sometimes the signs of a serious problem take more time to appear. Therefore, watch for the warning signs listed below.</p>

<p>HOME CARE: </p>

<p>- Rest today and avoid strenuous activity.</p>

<p>- Take any prescribed medicine as directed.</p>

<p>FOLLOW UP with your doctor or this facility as instructed or if you do not start to feel better within 24 hours.</p>

<p>[NOTE: If an X-ray or EKG (cardiogram) was made, it will be

reviewed by another specialist. You will be notified of any new findings that

may affect your care.]</p>

<p>GET PROMPT MEDICAL ATTENTION if any of the following

occur: </p>

<p>- A change in the type of pain: if it feels different, becomes more severe, lasts

<p>longer, or begins to spread into your shoulder, arm, neck,

jaw or back</p>

<p>- Shortness of breath or increased pain with breathing</p>

<p>- Weakness, dizziness, or fainting</p>

<p>- Cough with dark colored sputum (phlegm) or blood</p>

<p>- Fever of 100.4°F (38°C) or higher, or as directed by your healthcare provider</p>

<p>- Swelling, pain or redness in one leg</p>

<p>- Or anything else that concerns you</p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="Bursitis">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>

<I N DENT_ITEMS>1</I N DENT_ITEMS>

<BOILERPLATE_TEXT>

<p>Bursitis </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

<p>The larger joints of the body are surrounded by "bursa". These are small, flat

<p>fluid-filled sacs which help the gliding motion of the muscles and tendons over

<p>the joints.</p>

ED-DC-INSTRUCTIONS-for-Sharing

overuse of the joint, or
tenderness over a joint
by resting the joint.
into the bursa.

Bursitis is an inflammation of the bursa due to injury, or
infection of the bursa itself. Symptoms include pain and
that is made worse with movement.
Bursitis is treated with an anti-inflammatory medicine and
More severe cases require injection of medicine directly
Home Care:
1. Apply an ice pack (ice cubes in a plastic bag, wrapped
in a towel) over the
injured area for 20 minutes every 1-2 hours the first day.
Continue this 3-4
times a day until the pain and swelling improves.
2. Rest the painful joint and protect it from movement.
This will allow the
inflammation to heal faster.
3. You may take ibuprofen (Motrin, Advil) or naproxen
(Aleve, Naprosyn) to treat
pain and inflammation, unless another medicine was
prescribed. If you can't take
these medicines, acetaminophen (Tylenol) may help with the
pain, but does not
treat inflammation. [NOTE: If you have chronic liver or
kidney disease or ever
had a stomach ulcer or GI bleeding, talk with your doctor
before using these
medicines.]
4. As your symptoms improve, begin gradual motion at the
joint. Do not overuse
again.

Follow Up With Your Doctor If Not Improving After Three
Days Of Treatment.
Get Prompt Medical Attention If Any Of The Following Occur:
Redness over the painful area
Increasing pain or swelling at the joint
Fever of 100.4°F (38°C) or higher, or as directed by your
healthcare provider

CARPAL TUNNEL SYNDROME
Carpal tunnel syndrome is a painful condition of the wrist
and arm. It is caused
by pressure on the median nerve.
The median nerve is one of the nerves that give feeling and
movement to the hand.
It passes through a tunnel in the wrist ("carpal tunnel").
This tunnel is made up
of bones and ligaments. Narrowing of this tunnel or
swelling of tissues inside
the tunnel puts pressure on the median nerve. This causes
numbness, pins and
needles or electric shooting pains in the hand and forearm.
Often the pain is
worse at night and may awaken you from sleep.
Carpal tunnel syndrome may occur during pregnancy and with
use of birth control
pills. It is more common in workers who must bend their
wrists frequently, and
those who work with power tools that cause strong
vibrations.

HOME CARE:

ED-DC-INSTRUCTIONS-for-Sharing

wrist back and forth.
 power tools with strong vibrations.
 sleep. You may also
 stiffness.
 symptoms. If you type most of the day, changing the position of the keyboard or adding a wrist support may help. Your wrist should be in a neutral position and not bent back when typing.
 Naprosyn) to treat pain and inflammation, unless another medicine was prescribed. If you can't take these medicines, acetaminophen (Tylenol) may help with the pain, but does not treat inflammation. [NOTE: If you have chronic liver or kidney disease or ever had a stomach ulcer or GI bleeding, talk with your doctor before using these medicines.]
 and does not treat the steroid drug into the wrist.
 open the carpal tunnel and release the pressure on the trapped nerve.
 occur:
 Pain not improving with the above treatment
 Fingers or hand becomes cold, blue, numb or tingly
 The entire arm becomes swollen or weak

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Burn 2ed Degree">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>
<I NDE NT_I TEMS>1</I NDE NT_I TEMS>
<BOILERPLATE_TEXT>
<p>Burn 2ed Degree </p>
<p> </p>
</BOILERPLATE_TEXT>
<ITEMS>

```

```

<TEMPLATE NAME="test">
<TYPE>T</TYPE>
<STATUS>A</STATUS>
<BOILERPLATE_TEXT>
<p>A burn occurs when skin is exposed to excessive heat, sun, or harsh chemicals. A second degree burn is deeper than a first degree burn. It usually causes a

```

ED-DC-INSTRUCTIONS-for-Sharing

gradually go away on its own. </p>
<p>Or it may break open. The goal of treatment is to relieve pain and prevent </p>
<p>infection while the burn heals. </p>
<p>Home Care</p>
<p>Medications: Use pain medication as directed. If no pain medication is </p>
<p>prescribed, you may use acetaminophen (such as Tylenol) or ibuprofen (such as </p>
<p>Motrin or Advil) to control pain. NOTE: If you have chronic liver or kidney </p>
<p>disease or ever had a stomach ulcer or GI bleeding, do not use these medications </p>
<p>without talking to your doctor.</p>
<p>General Care </p>
<p>On the first day, you may apply a cool compress (small towel soaked in cool </p>
<p>water) to relieve pain.</p>
<p>If you were sent home with the blister intact, do not break the blister. The </p>
<p>risk of infection is greater if the blister breaks. If the blister does break:</p>
<p>If the size of the blister is less than 3 inches, you can use a small clean </p>
<p>scissors to cut off the loose skin. It will not have any feeling, so this won't </p>
<p>hurt. The scissors should be first washed in soap and water and wiped with </p>
<p>alcohol, then rinsed in water. After removing the broken blister, follow the </p>
<p>instructions below.</p>
<p>If the blister is larger than 3 inches, seek medical attention to have the </p>
<p>blister removed and the wound cleaned.</p>
<p>If a bandage was applied, change it once a day, unless told otherwise. If the </p>
<p>bandage becomes wet or soiled, change it as soon as possible. To change a </p>
<p>bandage: </p>
<p>Wash your hands.</p>
<p>Remove the old bandage. If the bandage sticks, soak it off under warm running </p>
<p>water.</p>
<p>Once the bandage is off, gently wash the burn area with mild soap and warm water </p>
<p>to remove any cream, ointment, ooze, or scab. You may do this in a sink, under a </p>
<p>tub faucet, or in the shower. Rinse off the soap and gently pat dry with a clean </p>
<p>towel.</p>
<p>Check for signs of infection listed below.</p>
<p>Reapply any prescribed antibiotic cream or ointment.</p>
<p>Cover the burn with a non-stick gauze. Then wrap it with the bandage material.</p>
<p>Occasionally, an infection may occur despite proper treatment. Check the burn </p>
<p>daily for the signs of infection listed below.</p>
<p>Follow Up with your doctor or as advised by our staff.</p>
<p>Get Prompt Medical Attention If Any Of The Following Occur:</p>
<p>Signs of infection:</p>

ED-DC-INSTRUCTIONS-for-Sharing

<p>Fever over 100.4°F (38°C) </p>

<p>Increasing pain</p>

<p>Increasing redness or swelling, or pus coming from the

burn</p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="Bronchitis">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HIDE_DI ALOG_ITEMS>1</HIDE_DI ALOG_ITEMS>

<INDENT_ITEMS>1</INDENT_ITEMS>

<BOILERPLATE_TEXT>

<p>Bronchitis </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="Text">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

<p>BRONCHITIS is an infection of the air passages ("bronchial tubes"). It often </p>

<p>occurs during the common cold. Symptoms include cough with mucus (phlegm) and </p>

<p>low-grade fever. Bronchitis usually lasts 7-14 days. Mild cases can be treated </p>

<p>with simple home remedies. More severe infection is treated with an antibiotic. </p>

<p>HOME CARE: </p>

<p>1. If symptoms are severe, rest at home for the first 2-3 days. When you resume </p>

<p>activity, don't let yourself get too tired. </p>

<p>2. Do not smoke. Avoid being exposed to the smoke of others. </p>

<p>3. You may use acetaminophen (Tylenol) or ibuprofen (Motrin, Advil) to control </p>

<p>fever or pain, unless another medicine was prescribed for this. [NOTE: If you </p>

<p>have chronic liver or kidney disease or ever had a stomach ulcer or GI bleeding, </p>

<p>talk with your doctor before using these medicines.]</p>

<p>4. Your appetite may be poor, so a light diet is fine. Avoid dehydration by </p>

<p>drinking 6-8 glasses of fluids per day (water, soft, drinks, juices, tea, soup, </p>

<p>etc.). Extra fluids will help loosen secretions in the lungs. </p>

<p>5. Over-the-counter cough medicines that contain "dextromethorphan" (such as </p>

<p>Robitussin DM) and decongestants (Actifed or Sudafed) may help relieve cough and </p>

<p>congestion. [NOTE: Do not use decongestants if you have high blood pressure.]</p>

<p>6. Finish all antibiotic medicine, even if you are feeling better after only a </p>

<p>few days. </p>

<p>[NOTE: If you are age 65 or older, or if you have chronic asthma or COPD, we </p>

<p>recommend a PNEUMOCOCCAL VACCINATION every five years and a yearly </p>

ED-DC-INSTRUCTIONS-for-Sharing

doctor about this. If you </p>
 <p>INFLUENZAVACCINATION (FLU-SHOT) every autumn. Ask your </p>
 notified of any new </p>
 findings that may affect your care.]</p>
 GET PROMPT MEDICAL ATTENTION if any of the following </p>
 occur: </p>
 <p>- Fever over 100.4°F (38.0°C) for more than three days</p>
 <p>- Trouble breathing, wheezing or pain with breathing</p>
 <p>- Coughing up blood or increased amounts of colored </p>
 sputum</p>
 <p>- Weakness, drowsiness, headache, facial pain, ear pain or </p>
 a stiff neck</p>
 <p>- Or if anything else concerns you.</p>

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="High blood pressure">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>
<I N DENT_ITEMS>1</I N DENT_ITEMS>
<BOILERPLATE_TEXT>
<p>High blood pressure </p>
<p> </p>
</BOILERPLATE_TEXT>
<ITEMS>

```

<TEMPLATE NAME="text">
 <TYPE>T</TYPE>
 <STATUS>A</STATUS>
 <BOILERPLATE_TEXT>
 <p>You have been diagnosed with hypertension. Also called high </p>
 blood pressure, this </p>
 <p>means the force of blood against your artery walls is too </p>
 strong. It also means </p>
 <p>your heart is working hard to move blood. High blood </p>
 pressure produces no </p>
 <p>symptoms, but over time it can damage your heart, blood </p>
 vessels, eyes, kidneys, </p>
 <p>and other organs. With help from your doctor, you can </p>
 manage your blood pressure </p>
 <p>and protect your health.</p>
 <p>Taking Medications</p>
 <p>Learn to take your own blood pressure. </p>
 Keep a record of your </p>
 <p>results. Ask your doctor which readings mean that you need </p>
 medical attention.</p>
 <p>Take your blood pressure medication exactly as directed. </p>
 Don't skip doses. </p>
 <p>Missing doses can cause your blood pressure to get out of </p>
 control.</p>
 <p>Avoid medications that contain heart stimulants, including </p>
 over-the-counter </p>
 <p>drugs. Check for warnings about hypertension on the </p>
 label.</p>
 <p>Check with your doctor before taking a decongestant. Some </p>
 decongestants can </p>
 <p>worsen hypertension.</p>
 <p>Lifestyle Changes</p>
 <p>Maintain a healthy weight. Get help to lose any extra </p>
 pounds.</p>
 <p>Cut back on salt.</p>

ED-DC-INSTRUCTI ONS-for-Shari ng

<p>Li mit canned, dried, packaged, and fast foods.</p>
 <p>Don't add salt to your food at the table.</p>
 <p>Season foods with herbs instead of salt when you cook.</p>
 <p>oBegin an exercise program. Ask your doctor how to get
 started. You can benefit </p>
 <p>from simple activities like walking or gardening.</p>
 <p>oBreak the smoking habit. Enroll in a stop-smoking program
 to improve your </p>
 <p>chances of success. Ask your healthcare provider about
 programs and medications </p>
 <p>to help you stop smoking.</p>
 <p>oLi mit drinks that contain caffeine (coffee, black or green
 tea, cola) to 2 per </p>
 <p>day.</p>
 <p>oNever take stimulants such as amphetamines or cocaine;
 these drugs can be deadly </p>
 <p>for someone with hypertension.</p>
 <p>oControl your stress. Learn stress-management
 techni ques.</p>
 <p>oLi mit alcohol to no more than 2 drinks a day.</p>
 <p>Fol low-Up</p>
 <p>Make a follow-up appointment as directed by our staff.</p>
 <p>When to Call Your Doctor</p>
 <p>Call your doctor immediately if you have any of the
 fol lowi ng:</p>
 <p>Chest pain or shortness of breath (call 911)</p>
 <p>Moderate to severe headache</p>
 <p>Weakness in the muscles of your face, arms, or legs</p>
 <p>Trouble speaki ng</p>
 <p>Extreme drowsi ness</p>
 <p>Confusi on</p>
 <p>Fai nti ng or di zzi ness</p>
 <p>Pul sati ng or rushi ng sound in your ears</p>
 <p>Unexpl ai ned nosebleed</p>
 <p>Weakness, tingli ng, or numbness of your face, arms, or
 legs</p>

```

    <p>Change in visi on</p>
  </BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Bell 's Pal sy">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
  <I NDENT_I TEMS>1</I NDENT_I TEMS>
  <BOILERPLATE_TEXT>
    <p>Bell 's Pal sy </p>
    <p> </p>
  </BOILERPLATE_TEXT>
</ITEMS>

```

```

  <TEMPLATE NAME="text">
    <TYPE>T</TYPE>
    <STATUS>A</STATUS>
    <BOILERPLATE_TEXT>
      <p>Bell 's pal sy is a problem involvi ng the nerve that controls
the muscles on one </p>
      <p>side of the face. The cause is unknown, but may be related
to i nfl ammati on of the </p>
      <p>nerve. Most persons with thi s problem recover completel y
wi thi n 3-6 months.</p>
      <p>Symptoms on the i nvolved side of the face may i nclude:

```


ED-DC-INSTRUCTIONS-for-Sharing

inability to close the
mouth shape, drooling,
sound.

Since you cannot blink
particles, wind, etc.
there is danger that the
out and form an ulcer.

bedtime to prevent
your drug store.
protect from flying debris.
(available at your
the lid. This will
or treat specific
take them exactly as
specialist within the
next
occur:

unexplained symptoms

upper eyelid, excess tearing, facial drooping with uneven
facial numbness or pain, changes in taste, sensitivity to
The most serious problem is possible injury to the eye.
normally, you must protect your eye from flying dust
Also,
since tears cannot lubricate the eye without blinking,
cornea (clear part in front of the colored iris) will dry
This could permanently affect vision.
HOME CARE:
1. Use Artificial Tears frequently during the day and at
drying. These drops are available without prescription at
2. Wear protective glasses especially when outside to
3. Tape the eyelid closed at bedtime with a paper tape
pharmacy). This has a very mild adhesive to avoid injury to
protect your eye from injury while you sleep.
4. Sometimes medicines are prescribed to reduce inflammation
viral infections of the nerve. If medicines are prescribed,
di rected.
FOLLOW UP with your doctor or with an Ear/Nose/Throat
next
two weeks.
GET PROMPT MEDICAL ATTENTION if any of the following

- oRedness of the eye or pus draining from the eye
- oChange in vision or pain in the eye
- oAppearance of headache, neck pain, fever or other
- oDifficulty with speech or walking
- oHigh Blood Pressure (Hypertension)

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Asthma">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_ITEM>1</HI DE_DI ALOG_ITEM>
<I N DENT_ITEM>1</I N DENT_ITEM>
<BOILERPLATE_TEXT>
<p>Asthma </p>
<p> </p>
</BOILERPLATE_TEXT>
<ITEMS>
<TEMPLATE NAME="text">
<TYPE>T</TYPE>
<STATUS>A</STATUS>
<BOILERPLATE_TEXT>
<p>FOLLOW-UP CARE WITH PHYSICIAN - As noted above, if you
become concerned about </p>

ED-DC-INSTRUCTIONS-for-Sharing

follow-up, you may return to <p>your condition and are unable to arrange any other
<p>the Emergency Department</p>
<p>Follow up: Within 2 days at express care or your family
doctor</p>
lung go into spasm <p>Asthma is a disease where the small air passages within the
the airways cause <p>and restrict the flow of air. Inflammation and swelling of
factors cause <p>further restriction. During an acute asthma attack, these
tightness. <p>difficulty breathing, wheezing, cough and chest
<p></p>
triggers include the <p>An asthma attack can be triggered by many things. Common
heavy exercise. In about <p>common cold, bronchitis, pneumonia, emotional upset and
in the air, dust, <p>half of adults with asthma, allergies to smoke, pollutants
Skipping doses of <p>mold, pollen and animal dander can cause an asthma attack.
attack. <p>daily asthma medicine can also bring on an asthma
decreased exposure to <p>Asthma can be controlled with proper medicines and
known <p>
<p>allergens. </p>
<p>HOME CARE: </p>
<p>- Drink lots of water or other fluids (at least 10 glasses
a day) during an <p>attack. This will loosen lung secretions and make it easier
to breathe. If you <p>
you drink extra <p>have heart or kidney disease, check with your doctor before
<p>amounts of fluids. </p>
<p>- Take prescribed medicine exactly at the times advised. If
you have a hand-held <p>inhaler or aerosol breathing medicine, do not use it more
than once every four <p>
prednisone, take all <p>hours, unless told to do so. If prescribed an antibiotic or
days. <p>of the medicine even if you are feeling better after a few
others. <p>- Do not smoke. Avoid being exposed to the smoke of
non-steroidal medicines <p>- Some persons with asthma are allergic to aspirin and
Naprosyn). Use these with <p>like ibuprofen (Motrin, Advil) and naproxen (Aleve,
asthma or COPD, we <p>caution. Acetaminophen (Tylenol) is safe to use</p>
yearly INFLUENZA <p>[NOTE: If you are age 65 or older, or if you have chronic
this. If you had an X- <p>recommend a PNEUMOCOCCAL VACCINATION every five years and a
specialist. You will be <p>VACCINATION (FLU SHOT) every autumn. Ask your doctor about
care.]</p>
occur: <p>ray or EKG (cardiogram), it will be reviewed by a
<p>notified of any new findings that may affect your
<p>GET PROMPT MEDICAL ATTENTION if any of the following
<p>- Increased wheezing or shortness of breath</p>

ED-DC-INSTRUCTIONS-for-Sharing

relief

heal thcare provi der

(mucus)

<p>- Need to use your inhalers more often than usual without

<p>- Fever of 100.4°F (38°C) or higher, or as directed by your

<p>- Coughing up lots of dark-colored or bloody sputum

<p>- Chest pain

<p>- You do not start to improve within 24 hours

<p>- Or anything else that concerns you

```

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Nasal Allergy">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
<I NDE NT_I TEMS>1</I NDE NT_I TEMS>
<BOILERPLATE_TEXT>
<p>Nasal Allergy </p>
<p> </p>
</BOILERPLATE_TEXT>
<ITEMS>

```

exposure to pollen,

hair and feathers),

pollen causes a nasal

eyelids, sinuses or

"histamine". Histamine

also cause violent

throat and mouth.

<p>Nasal Allergy, also called "Allergic Rhinitis" occurs after

<p>molds, mildew, animal "dander" (scales from animal skin,

<p>dust, smoke and fumes. (These are called "allergens"). When

<p>allergy it is commonly called "Hay Fever".

<p>When these particles contact the lining of the nose, eyes,

<p>throat, they cause the cells to release a chemical called

<p>may cause a watery discharge from the eyes or nose. It may

<p>sneezing, nasal congestion, itching of the eyes, nose,

PREVENTION:

Nasal allergy cannot be cured but symptoms can be reduced.

Avoid or reduce

measures:

- <p>POLLEN</p>
- <p>Stay indoors on hot windy days during pollen season</p>
- <p>Keep windows and doors closed</p>
- <p>Use an air conditioner with an electrostatic filter</p>
- <p>DUST, MOLD & MI LDEW</p>
- <p>Follow these measures, especially in the bedroom:</p>
- <p>When cleaning use vacuum cleaners, oiled mops and damp
- cloths; don't stir up
- damp mop and vacuum
- carpets.
- Once a week clean the walls, woodwork and floors with a
- Once a year clean the bed frame and springs (do this
- outside).
- Cover the box springs with plastic. Do not use mattress

ED-DC-INSTRUCTIONS-for-Sharing

pads. </p>

<p>oRemove stuffed chairs and rugs from the bedroom.</p>
<p>oDiscard old moldy books, furniture and bedding.</p>
<p>oUse synthetic fabrics for furniture, curtains and bedding.

Avoid quilts, </p>

<p>comforters, and stuffed toys.</p>
<p>ANIMAL DANDER</p>
<p>oRemove all indoor pets (except fish and reptiles).</p>
<p>oAvoid all contact with furry animals.</p>
<p>oAvoid down-stuffed pillows and coats.</p>
<p>oSome persons are also sensitive to wool and should avoid

it.</p>

<p>OTHER IRRITANTS</p>
<p>oDo not smoke and avoid the smoke of others.</p>
<p>oSome persons are sensitive to cosmetic powder, baby powder

and powdered laundry </p>

<p>detergents. Therefore, these powders should be avoided.</p>
<p>HOME CARE: </p>

Afrin), reduce tissue </p>

<p>oDECONGESTANT pills and sprays (Sudafed, NeoSynephrine, and

decongestant sprays may make </p>

<p>swelling and watery discharge. Overuse of nasal

recommended.</p>

<p>symptoms worse. Do not use these more often than

allergic response.</p>

<p>oANTI HISTAMINES block the release of histamine during the

symptoms develop. Unless a </p>

<p>Anti histamines are more effective when taken BEFORE

CLARITIN (loratadine). </p>

<p>prescription anti histamine was prescribed, you may take

not cause </p>

<p>(Claritin is an over-the-counter anti histamine that does

oral steroids </p>

<p>oSTEROID nasal sprays (Beconase, Vancenase, Nasalide) or

symptoms. These help to </p>

<p>(Prednisone) may also be prescribed for more severe

response.</p>

<p>reduce the local inflammation which adds to the allergic

symptoms worse. It is </p>

<p>if you have ASTHMA, pollen season may make your asthma

during this time to </p>

<p>important that you use your asthma medicines as directed

worsening of their </p>

<p>prevent or treat attacks. Some persons with asthma have a

this, stop the </p>

<p>asthma symptoms when taking anti histamines. If you notice

your symptoms are not </p>

<p>anti histamines and notify your doctor.</p>

<p>FOLLOW UP with your doctor or as directed by our staff if

occur: </p>

<p>improving with the treatment advised.</p>

<p>GET PROMPT MEDICAL ATTENTION if any of the following

healthcare provider</p>

<p>oFacial or sinus pain or colored drainage from the nose</p>

<p>oSevere headache or ear pain</p>

have asthma, return if </p>

<p>oFever of 100.4°F (38°C) or higher, or as directed by your

<p>oWheezing or trouble breathing (If you already know you

your medicine)</p>

<p>your asthma symptoms do not respond to the usual doses of

<p>oCough with lots of colored sputum (mucus)</p>

</BOILERPLATE_TEXT>
</TEMPLATE>

ED-DC-INSTRUCTIONS-for-Sharing

```
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="ALLERGIC REACTION">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HIDE_DI ALOG_ITEMS>1</HIDE_DI ALOG_ITEMS>
  <INDENT_ITEMS>1</INDENT_ITEMS>
  <BOILERPLATE_TEXT>
```

```
  <p>Allergic Reaction </p>
  <p> </p>
</BOILERPLATE_TEXT>
```

itchy rash, dizziness, fainting, trouble breathing or swallowing, and swelling of the face or other parts of the body. </p>

```
  <ITEMS>
  <TEMPLATE NAME="Text">
    <TYPE>T</TYPE>
    <STATUS>A</STATUS>
    <BOILERPLATE_TEXT>
```

<p>This can be caused by exposure to something in your surroundings that you have become sensitive to. This could be due to medicine or food. This could also be due to something you put on your skin </p>

<p>or in your hair or something in the air. Often it is not possible to find out exactly what has caused your reaction. </p>

<p>The goal of today's treatment is to relieve symptoms. The rash will usually fade over several days, but can sometimes last up to two weeks. </p>

```
    <p>HOME CARE: </p>
    <p>1) If you know what you are allergic to, avoid it because
future reactions could be worse than this one. 2) Avoid tight clothing and anything
that heats up your skin (hot showers/baths, direct </p>
    <p>sunlight) since heat will make itching worse. </p>
    <p>3) An ice pack will relieve local areas of intense itching
and redness. Lanacaine cream or Solarcaine spray (or other product containing
"benzocaine", available without a prescription) will reduce </p>
    <p>the itching. </p>
    <p>4) Oral Benadryl (diphenhydramine) is an antihistamine
available at drug and grocery stores. Unless a prescription antihistamine was given,
Benadryl may be used to reduce itching if large areas of </p>
    <p>the skin are involved. Use lower doses during the daytime
and higher doses at bedtime since the drug may make you sleepy. [NOTE: Do not use
Benadryl if you have glaucoma or if you are a man with </p>
    <p>trouble urinating due to an enlarged prostate.] Claritin
(Loratadine) is an antihistamine that causes less drowsiness and is a good
alternative for daytime use. </p>
```

```
    <p>FOLLOW UP with your doctor or this facility within two days
if your symptoms do not continue to improve. If you had a severe reaction today, or
if you have had several mild-moderate allergic </p>
    <p>reactions in the past, ask your doctor about allergy
testing to find out what you are allergic to. If your reaction included dizziness,
fainting or trouble breathing or swallowing, ask your doctor </p>
    <p>about carrying an Allergy Kit (injectable epinephrine) for
home use. </p>
```

```
  <p></p>
  </BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Abdominal pain male">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
```

ED-DC-INSTRUCTIONS-for-Sharing

<HIDE_DIALOG_ITEMS>1</HIDE_DIALOG_ITEMS>

<INDENT_ITEMS>1</INDENT_ITEMS>

<BOILERPLATE_TEXT>

<p>Abdominal pain male </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

<p>ABDOMINAL PAIN, UNCERTAIN CAUSE [Male]</p>

<p>Based on your visit today, the exact cause of your

abdominal (stomach) pain is </p>

<p>not certain. Your condition does not seem serious now;

however, the signs of a </p>

<p>serious problem may take more time to appear. Therefore, it

is important for you </p>

<p>to watch for any new symptoms or worsening of your

condition. </p>

<p>HOME CARE: </p>

<p>Rest until your next exam. No strenuous activities. </p>

<p>Eat a diet low in fiber (called a low-residue diet). Foods

allowed include </p>

<p>refined breads, white rice, fruit and vegetable juices

without pulp, tender </p>

<p>meats. These foods will pass more easily through the

intestine. </p>

<p>Avoid whole-grain foods, whole fruits and vegetables,

meats, seeds and nuts, </p>

<p>fried or fatty foods, dairy, alcohol and spicy foods until

your symptoms go away. </p>

<p>FOLLOW UP with your doctor or this facility as instructed,

or if your pain does </p>

<p>not begin to improve in the next 24 hours. </p>

<p>GET PROMPT MEDICAL ATTENTION if any of the following

occur: </p>

<p>Pain gets worse or moves to the right lower abdomen</p>

<p>New or worsening vomiting or diarrhea</p>

<p>Swelling of the abdomen</p>

<p>Unable to pass stool for more than three days</p>

<p>Fever of 100.4°F (38°C) or higher, or as directed by your

healthcare provider</p>

<p>Blood in vomit or bowel movements (dark red or black

color)</p>

<p>Jaundice (yellow color of eyes and skin)</p>

<p>Weakness, dizziness or fainting</p>

<p>Chest, arm, back, neck or jaw pain</p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

<TEMPLATE NAME="Abscess">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DI ALOG>1</DI ALOG>

<HIDE_DIALOG_ITEMS>1</HIDE_DIALOG_ITEMS>

<INDENT_ITEMS>1</INDENT_ITEMS>

<BOILERPLATE_TEXT>

<p>ABSCESS </p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

ED-DC-INSTRUCTIONS-for-Sharing

<TEMPLATE NAME="text">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

get trapped </p>

<p>under the skin and begin to grow. Pus forms inside the abscess as the body </p>

<p>responds to the bacteria. An abscess can occur with an insect bite, ingrown </p>

wound. </p><p>hair, blocked oil gland, pimple, cyst, or puncture

<p></p>

symptoms. Sometimes, </p><p>In the early stages, redness and tenderness are the only

abscess does not </p><p>this stage can be treated with antibiotics alone. If the

with a small cut, </p><p>respond to antibiotic treatment, it will need to be drained

<p>under local anesthesia. </p>

<p></p>

<p>HOME CARE: </p>

<p></p>

towel soaked in hot </p><p>o Soak the wound in hot water or apply hot packs (small

to four times a day. </p><p>water) to the area for 20 minutes at a time. Do this three

<p></p>

Polysporin onto the </p><p>o Apply antibiotic cream or ointment such as Bacitracin or

"Neosporin Plus" </p><p>skin 3-4 times a day, unless something else was prescribed.

<p>includes an antibiotic plus a local pain reliever. </p>

<p></p>

<p>o Take all of the antibiotics until they are gone. </p>

<p></p>

Advil) to control </p><p>o You may use acetaminophen (Tylenol) or ibuprofen (Motrin,

If you have chronic </p><p>pain, unless another pain medicine was prescribed. [NOTE :

bleeding, talk with </p><p>liver or kidney disease or ever had a stomach ulcer or GI

<p>your doctor before using these any of these.] </p>

<p></p>

day for the signs of </p><p>FOLLOW UP as advised by our staff. Look at your wound each

<p>worsening infection listed below. </p>

<p></p>

occur: </p><p>GET PROMPT MEDICAL ATTENTION if any of the following

<p></p>

abscess</p><p>o An increase in redness or swelling</p><p>o Red streaks in the skin leading away from the

<p></p>

your healthcare provider</p><p>o An increase in local pain or swelling</p><p>o Fever of 100.4°F (38°C) or higher, or as directed by

<p></p>

<p>o Pus or fluid coming from the abscess</p><p></p>

</BOILERPLATE_TEXT>

</TEMPLATE>

</ITEMS>

</TEMPLATE>

ED-DC-INSTRUCTIONS-for-Sharing

<TEMPLATE NAME="Allergic Reaction">

<TYPE>G</TYPE>

<STATUS>A</STATUS>

<DIALOG>1</DIALOG>

<HIDE_DIALOG_ITEMS>1</HIDE_DIALOG_ITEMS>

<INDENT_ITEMS>1</INDENT_ITEMS>

<BOILERPLATE_TEXT>

<p>ALLERGIC REACTION, GENERALIZED</p>

<p> </p>

</BOILERPLATE_TEXT>

<ITEMS>

<TEMPLATE NAME="text">

<TYPE>T</TYPE>

<STATUS>A</STATUS>

<BOILERPLATE_TEXT>

itchy rash, dizziness, </p>
<p>fainting, trouble breathing or swallowing, and swelling of
the face or other </p>
<p>parts of the body.</p>
<p></p>
<p>This can be caused by exposure to something in your
surroundings that you have </p>
<p>become sensitive to. This could be due to medicine or food.
This could also be </p>
<p>due to something you put on your skin or in your hair or
something in the air. </p>
<p>Often it is not possible to find out exactly what has
caused your reaction.</p>
<p>The goal of today's treatment is to relieve symptoms. The
rash will usually fade </p>
<p>over several days, but can sometimes last up to two
weeks.</p>

<p></p>

<p>HOME CARE: </p>

<p></p>

future reactions could </p>
<p>be worse than this one. 2) Avoid tight clothing and anything
that heats up your </p>
<p>skin (hot showers/baths, direct sunlight) since heat will
make itching worse.</p>

<p></p>

and redness. Lanacaine </p>

<p>cream or Solarcaine spray (or other product containing

"benzocaine", available </p>

<p>without a prescription) will reduce the itching.</p>

<p></p>

available at drug and </p>

<p>grocery stores. Unless a prescription antihistamine was

given, Benadryl may be </p>

<p>used to reduce itching if large areas of the skin are

involved. Use lower doses </p>

<p>during the daytime and higher doses at bedtime since the

drug may make you </p>

<p>sleepy. [NOTE: Do not use Benadryl if you have glaucoma or

if you are a man with </p>

<p>trouble urinating due to an enlarged prostate.] Claritin

(loratidine) is an </p>

<p>antihistamine that causes less drowsiness and is a good

alternative for daytime </p>

ED-DC-INSTRUCTIONS-for-Sharing

use. </p>
 <p></p>
 <p>FOLLOW UP with your doctor or this facility within two days
 if your symptoms do </p>
 <p>not continue to improve. If you had a severe reaction
 today, or if you have had </p>
 <p>several mild-moderate allergic reactions in the past, ask
 your doctor about </p>
 <p>allergy testing to find out what you are allergic to. If
 your reaction included </p>
 <p>dizziness, fainting or trouble breathing or swallowing, ask
 your doctor about </p>
 <p>carrying an Allergy Kit (injectable epinephrine) for home
 use. </p>

```

    </BOILERPLATE_TEXT>
  </TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="chest pain">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HIDE_DI ALOG_ITEMS>1</HIDE_DI ALOG_ITEMS>
  <INDENT_ITEMS>1</INDENT_ITEMS>
  <BOILERPLATE_TEXT>
    <p>CHEST PAIN</p>
    <p> </p>
  </BOILERPLATE_TEXT>
</ITEMS>
  <TEMPLATE NAME="text">
    <TYPE>T</TYPE>
    <STATUS>A</STATUS>
    <BOILERPLATE_TEXT>
      <p>aaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa</p>
      <p></p>
      <p></p>
      <p>ffffff</p>
    </BOILERPLATE_TEXT>
  </TEMPLATE>
</ITEMS>
</TEMPLATE>
</ITEMS>

```

```

<TEMPLATE NAME="Krames Info provided">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HIDE_DI ALOG_ITEMS>1</HIDE_DI ALOG_ITEMS>
  <INDENT_ITEMS>1</INDENT_ITEMS>
  <BOILERPLATE_TEXT>
    <p>KRAMES DISCHARGE INSTRUCTIONS: </p>
    <p> </p>
  </BOILERPLATE_TEXT>
</ITEMS>

```

Instructions">
 <TYPE>T</TYPE>
 <STATUS>A</STATUS>
 <BOILERPLATE_TEXT>
 <p>KRAMES ON DEMAND: A printed copy of diagnosis specific
 discharge instructions </p>
 <p>generated using Krames on Demand Exit-Writer were provided to
 the patient/care </p>
 <p>giver on discharge from the Emergency Department. </p>

ED-DC-INSTRUCTIONS-for-Sharing

<p></p>
<p>{FLD: ED DISCHARGE EXIT-WRITER LINK} This link will open the
local site account </p>
<p>with Krames on Demand or other educational software that your
site uses. </p>

<p></p>
<p>{FLD: ED DISCHARGE IMPORT FROM EXIT-WRITER}</p>
</BOILERPLATE_TEXT>
</TEMPLATE>
<TEMPLATE NAME="Krames Content">
<TYPE>T</TYPE>
<STATUS>A</STATUS>
<BOILERPLATE_TEXT>

<p>_____</p>
<p>The following is the text of the Instructional Material </p>
<p>provided to the patient from Krames Exit Writer. </p>
that</p>
<p>The patient copy may also include graphics and diagrams
<p>cannot be saved in this note </p>

<p>_____</p>
<p></p>
<p></p>
<p>PASTE KRAMES CONTENT HERE AFTER THE TEMPLATEW IS CLOSED</p>
<p></p>
<p></p>

<p>_____</p>
</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Follow Up in clinic">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>
<I N DENT_ITEMS>1</I N DENT_ITEMS>
<BOILERPLATE_TEXT>
<p>FOLLOW UP CARE</p>
<p></p>
<p>Please schedule a follow up appointment with your </p>
<p>Provider / Clinic as noted </p>
<p></p>
<p>{FLD: ED IN} {FLD: ED 0-10} {FLD: ED F/U TIME/PRN/REFER}</p>
<p>{FLD: PIMC BLANK LINE INCLUDE IN NOTE}</p>
</BOILERPLATE_TEXT>
<ITEMS>
<TEMPLATE NAME="PCMC">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<ONE_ITEM_ONLY>1</ONE_ITEM_ONLY>
<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>
<I N DENT_ITEMS>1</I N DENT_ITEMS>
<BOILERPLATE_TEXT>
<p>PRIMARY CARE MEDICINE CLINIC</p>
<p> </p>
</BOILERPLATE_TEXT>
</ITEMS>

ED-DC-INSTRUCTIONS-for-Sharing

```
<TEMPLATE NAME="Dr Li ">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
  <I NDENT_I TEMS>1</I NDENT_I TEMS>
  <BOI LERPLATE_TEXT>
    <p>Dr Li </p>
  </BOI LERPLATE_TEXT>
  <I TEMS>
    <TEMPLATE NAME="Staff">
      <TYPE>T</TYPE>
      <STATUS>A</STATUS>
      <BOI LERPLATE_TEXT>
        <p>Candace Lee RN 602-768-8167</p>
        <p>MSA: Becky Richards 602-768-0469</p>
        <p>Maxine Jones, NA 602-721-8186</p>
      </BOI LERPLATE_TEXT>
    </TEMPLATE>
  </I TEMS>
</TEMPLATE>
<TEMPLATE NAME="Dr. Kal angi ">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
  <I NDENT_I TEMS>1</I NDENT_I TEMS>
  <BOI LERPLATE_TEXT>
    <p>Dr. Kal angi </p>
  </BOI LERPLATE_TEXT>
  <I TEMS>
    <TEMPLATE NAME="Staff">
      <TYPE>T</TYPE>
      <STATUS>A</STATUS>
      <BOI LERPLATE_TEXT>
        <p>Candace Lee RN 602-768-8167</p>
        <p>MSA: Becky Richards 602-768-0469</p>
        <p>Lynette Begay, CMA 602-740-1509</p>
      </BOI LERPLATE_TEXT>
    </TEMPLATE>
  </I TEMS>
</TEMPLATE>
<TEMPLATE NAME="Dr Tsi ngi ne">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
  <I NDENT_I TEMS>1</I NDENT_I TEMS>
  <BOI LERPLATE_TEXT>
    <p>Dr Tsi ngi ne </p>
  </BOI LERPLATE_TEXT>
  <I TEMS>
    <TEMPLATE NAME="Staff">
      <TYPE>T</TYPE>
      <STATUS>A</STATUS>
      <BOI LERPLATE_TEXT>
        <p>Elizabeth Hill, RN 602-768-8565</p>
        <p>MSA: Vanessa Tessay 602-768-7982</p>
        <p>Erick Jul I, CMA 602-799-6647</p>
      </BOI LERPLATE_TEXT>
    </TEMPLATE>
  </I TEMS>
</TEMPLATE>
```

ED-DC-INSTRUCTIONS-for-Sharing

```
<TEMPLATE NAME="Dr. Noback">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI A LOG>1</DI A LOG>
  <HI DE_DI A LOG_I TEMS>1</HI DE_DI A LOG_I TEMS>
  <I NDENT_I TEMS>1</I NDENT_I TEMS>
  <BOI LERPLATE_TEXT>
    <p>Dr. Noback </p>
  </BOI LERPLATE_TEXT>
  <I TEMS>
    <TEMPLATE NAME="Staff">
      <TYPE>T</TYPE>
      <STATUS>A</STATUS>
      <BOI LERPLATE_TEXT>
        <p>Elizabeth Hill, RN 602-768-8565</p>
        <p>MSA: Vanessa Tessay 602-768-7982</p>
        <p>Melissa Semallie, NA 602-768-7981</p>
      </BOI LERPLATE_TEXT>
    </TEMPLATE>
  </I TEMS>
</TEMPLATE>
<TEMPLATE NAME="Dr Hudson">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI A LOG>1</DI A LOG>
  <HI DE_DI A LOG_I TEMS>1</HI DE_DI A LOG_I TEMS>
  <I NDENT_I TEMS>1</I NDENT_I TEMS>
  <BOI LERPLATE_TEXT>
    <p>Dr Hudson</p>
  </BOI LERPLATE_TEXT>
  <I TEMS>
    <TEMPLATE NAME="Staff">
      <TYPE>T</TYPE>
      <STATUS>A</STATUS>
      <BOI LERPLATE_TEXT>
        <p>Donice Hoopaugh, RN 602-768-0207</p>
        <p>MSA: Becky Richards 602-768-0469</p>
        <p>Michelle Moreno, NA 602-600-2684</p>
      </BOI LERPLATE_TEXT>
    </TEMPLATE>
  </I TEMS>
</TEMPLATE>
<TEMPLATE NAME="Dr Poirier">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI A LOG>1</DI A LOG>
  <HI DE_DI A LOG_I TEMS>1</HI DE_DI A LOG_I TEMS>
  <I NDENT_I TEMS>1</I NDENT_I TEMS>
  <BOI LERPLATE_TEXT>
    <p>Dr Poirier </p>
  </BOI LERPLATE_TEXT>
  <I TEMS>
    <TEMPLATE NAME="Staff">
      <TYPE>T</TYPE>
      <STATUS>A</STATUS>
      <BOI LERPLATE_TEXT>
        <p>Donice Hoopaugh, RN 602-768-0207</p>
        <p>MSA: Becky Richards 602-768-0469</p>
      </BOI LERPLATE_TEXT>
    </TEMPLATE>
  </I TEMS>
</TEMPLATE>
<TEMPLATE NAME="Dr. Goswami ">
```

ED-DC-INSTRUCTIONS-for-Sharing

```
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
<I N DENT_I TEMS>1</I N DENT_I TEMS>
<BOI LERPLATE_TEXT>
  <p>Dr. Goswami </p>
</BOI LERPLATE_TEXT>
<I TEMS>
  <TEMPLATE NAME="Staff">
    <TYPE>T</TYPE>
    <STATUS>A</STATUS>
    <BOI LERPLATE_TEXT>
      <p>Paul a Thompson RN 602-527-6447</p>
      <p>MSA: Jami e Carvi so 602-526-1124</p>
      <p>Lana Stephenson, CMA 602-768-7170</p>
    </BOI LERPLATE_TEXT>
  </TEMPLATE>
</I TEMS>
</TEMPLATE>
<TEMPLATE NAME="Dr Bennett">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
  <I N DENT_I TEMS>1</I N DENT_I TEMS>
  <BOI LERPLATE_TEXT>
    <p>Dr Bennett </p>
  </BOI LERPLATE_TEXT>
  <I TEMS>
    <TEMPLATE NAME="Staff">
      <TYPE>T</TYPE>
      <STATUS>A</STATUS>
      <BOI LERPLATE_TEXT>
        <p>Paul a Thompson RN 602-527-6447</p>
        <p>MSA: Jami e Carvi so 602. 526. 1124</p>
        <p>Kristi Nees, LPN 602-881-5998</p>
      </BOI LERPLATE_TEXT>
    </TEMPLATE>
  </I TEMS>
</TEMPLATE>
<TEMPLATE NAME="Dr C Phan">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
  <I N DENT_I TEMS>1</I N DENT_I TEMS>
  <BOI LERPLATE_TEXT>
    <p>Dr C Phan </p>
  </BOI LERPLATE_TEXT>
  <I TEMS>
    <TEMPLATE NAME="Staff">
      <TYPE>T</TYPE>
      <STATUS>A</STATUS>
      <BOI LERPLATE_TEXT>
        <p>El izabeth Hi ll, RN (602) 768-8565</p>
        <p>MSA: Rachel Lopez (602) 329. 9627</p>
      </BOI LERPLATE_TEXT>
    </TEMPLATE>
  </I TEMS>
</TEMPLATE>
<TEMPLATE NAME="Dr Mi l l er">
  <TYPE>G</TYPE>
```

ED-DC-INSTRUCTIONS-for-Sharing

```
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
<I NDENT_I TEMS>1</I NDENT_I TEMS>
<BOI LERPLATE_TEXT>
  <p>Dr Miller </p>
</BOI LERPLATE_TEXT>
<I TEMS>
  <TEMPLATE NAME="Staff">
    <TYPE>T</TYPE>
    <STATUS>A</STATUS>
    <BOI LERPLATE_TEXT>
      <p>Elizabeth Hill, RN (602) 768-8565</p>
      <p>MSA: Rachel Lopez (602) 329.9627</p>
      <p>Jennifer Attson, CMA (602) 316-5843</p>
    </BOI LERPLATE_TEXT>
  </TEMPLATE>
</I TEMS>
</TEMPLATE>
<TEMPLATE NAME="S. Jim PA-C">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
  <I NDENT_I TEMS>1</I NDENT_I TEMS>
  <BOI LERPLATE_TEXT>
    <p>S. Jim PA-C </p>
  </BOI LERPLATE_TEXT>
  <I TEMS>
    <TEMPLATE NAME="Staff">
      <TYPE>T</TYPE>
      <STATUS>A</STATUS>
      <BOI LERPLATE_TEXT>
        <p>Paula Thompson RN 602-527-6447</p>
        <p>MSA: Jamie Carviso 602.526.1124</p>
        <p>Melonie DeMars, LPN 602) 768-3776</p>
      </BOI LERPLATE_TEXT>
    </TEMPLATE>
  </I TEMS>
</TEMPLATE>
<TEMPLATE NAME="Dr Delgado">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
  <I NDENT_I TEMS>1</I NDENT_I TEMS>
  <BOI LERPLATE_TEXT>
    <p>Dr Delgado</p>
  </BOI LERPLATE_TEXT>
  <I TEMS>
    <TEMPLATE NAME="Staff">
      <TYPE>T</TYPE>
      <STATUS>A</STATUS>
      <BOI LERPLATE_TEXT>
        <p>Paula Thompson RN 602-527-6447</p>
        <p>MSA: Jamie Carviso 602.526.1124</p>
        <p>Catriana Mitchell-Smith, LPN 602) 390-7122</p>
      </BOI LERPLATE_TEXT>
    </TEMPLATE>
  </I TEMS>
</TEMPLATE>
<TEMPLATE NAME="Dr Ly">
  <TYPE>G</TYPE>
```

ED-DC-INSTRUCTIONS-for-Sharing

```
<STATUS>A</STATUS>
<DI A LOG>1</DI A LOG>
<HI DE_DI A LOG_I TEMS>1</HI DE_DI A LOG_I TEMS>
<I N DENT_I TEMS>1</I N DENT_I TEMS>
<BOI LERPLATE_TEXT>
  <p>Dr Ly </p>
</BOI LERPLATE_TEXT>
<I TEMS>
  <TEMPLATE NAME="Staff">
    <TYPE>T</TYPE>
    <STATUS>A</STATUS>
    <BOI LERPLATE_TEXT>
      <p> RN: Doni ce Hoopaugh(602) 768-0207</p>
      <p>MSA: Gl adys John x2324</p>
      <p>LPN: Lori Smi th(602) 768-5352</p>
    </BOI LERPLATE_TEXT>
  </TEMPLATE>
</I TEMS>
</TEMPLATE>
<TEMPLATE NAME="Dr Marti n Pfi tzner">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI A LOG>1</DI A LOG>
  <HI DE_DI A LOG_I TEMS>1</HI DE_DI A LOG_I TEMS>
  <I N DENT_I TEMS>1</I N DENT_I TEMS>
  <BOI LERPLATE_TEXT>
    <p>Dr Marti n Pzti ner</p>
  </BOI LERPLATE_TEXT>
  <I TEMS>
    <TEMPLATE NAME="staff">
      <TYPE>T</TYPE>
      <STATUS>A</STATUS>
      <BOI LERPLATE_TEXT>
        <p> RN: Doni ce Hoopaugh(602) 768-0207</p>
        <p>MSA: Gl adys John x2324</p>
        <p>CNA: Nedra Burbank 602) 768-5398</p>
      </BOI LERPLATE_TEXT>
    </TEMPLATE>
  </I TEMS>
</TEMPLATE>
<TEMPLATE NAME="Li sa McCl el I an">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI A LOG>1</DI A LOG>
  <HI DE_DI A LOG_I TEMS>1</HI DE_DI A LOG_I TEMS>
  <I N DENT_I TEMS>1</I N DENT_I TEMS>
  <BOI LERPLATE_TEXT>
    <p>Dr Li sa McCl el I an </p>
  </BOI LERPLATE_TEXT>
  <I TEMS>
    <TEMPLATE NAME="staff">
      <TYPE>T</TYPE>
      <STATUS>A</STATUS>
      <BOI LERPLATE_TEXT>
        <p> RN: Larry Demers 602-768-1671 (nurse)</p>
        <p> MSA: Cynthi a Nash, 602-768-5606 (appoi ntments)</p>
        <p> CMA: Casey Keller 602-527-9653 (medi cal assi stant)</p>
      </BOI LERPLATE_TEXT>
    </TEMPLATE>
  </I TEMS>
</TEMPLATE>
<TEMPLATE NAME="J Benett">
```

ED-DC-INSTRUCTIONS-for-Sharing

```
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
<I N DENT_I TEMS>1</I N DENT_I TEMS>
<BOI LERPLATE_TEXT>
  <p>Janet Benett NP </p>
</BOI LERPLATE_TEXT>
<I TEMS>
  <TEMPLATE NAME="staff">
    <TYPE>T</TYPE>
    <STATUS>A</STATUS>
    <BOI LERPLATE_TEXT>
      <p> RN: Larry Demers 602-768-1671 (Nurse)</p>
      <p> MSA: Cynthi a Nash, 602-768-5606 (Appoi ntments)</p>
      <p> CMA: Saraphi ne James 602-697-9481 (Medi cal Assi tant)</p>
      <p> </p>
    </BOI LERPLATE_TEXT>
  </TEMPLATE>
</I TEMS>
</TEMPLATE>
<TEMPLATE NAME="Davi d Mayer">
  <TYPE>G</TYPE>
  <STATUS>A</STATUS>
  <DI ALOG>1</DI ALOG>
  <HI DE_DI ALOG_I TEMS>1</HI DE_DI ALOG_I TEMS>
  <I N DENT_I TEMS>1</I N DENT_I TEMS>
  <BOI LERPLATE_TEXT>
    <p>Dr Davi d Mayer</p>
    <p> </p>
  </BOI LERPLATE_TEXT>
  <I TEMS>
    <TEMPLATE NAME="Staff">
      <TYPE>T</TYPE>
      <STATUS>A</STATUS>
      <BOI LERPLATE_TEXT>
        <p> RN: Larry Demers 602-768-1671 (Nurse)</p>
        <p> MSA: Cynthi a Nash, 602-768-5606 (Appoi ntments)</p>
        <p> </p>
      </BOI LERPLATE_TEXT>
    </TEMPLATE>
  </I TEMS>
</TEMPLATE>
</I TEMS>
</TEMPLATE>
<TEMPLATE NAME="Fol l ow-up I n">
  <TYPE>T</TYPE>
  <STATUS>A</STATUS>
  <BOI LERPLATE_TEXT>
    <p>SPECIALI ST FOLLOW UP: </p>
    <p></p>
    <p>Schedul e a fol low up appoi ntment wi th {FLD: ED F/U FOR DC NOTE}
{FLD: ED I N} {FLD: ED 0-10} </p>
    <p>{FLD: ED F/U TIME/PRN/REFER}</p>
  </BOI LERPLATE_TEXT>
</TEMPLATE>
<TEMPLATE NAME="Add' I I nfo ">
  <TYPE>T</TYPE>
  <STATUS>A</STATUS>
  <BOI LERPLATE_TEXT>
    <p>ADDI TONAL I NSTRUCTI ONS: </p>
    <p></p>
    <p>{FLD: ENT WORD PROCESSI NG 50/2}</p>
```



```

        <p>
    </BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="MEDICATION/PRESCRIPTIONS ">
    <TYPE>G</TYPE>
    <STATUS>A</STATUS>
    <DI ALOG>1</DI ALOG>
    <HIDE_DI ALOG_ITEMS>1</HIDE_DI ALOG_ITEMS>
    <IDENT_ITEMS>1</IDENT_ITEMS>
    <BOILERPLATE_TEXT>
        <p>MEDICATION/PRESCRIPTIONS </p>
        <p> </p>
    </BOILERPLATE_TEXT>
    <ITEMS>
        <TEMPLATE NAME="General ">
            <TYPE>T</TYPE>
            <STATUS>A</STATUS>
            <BOILERPLATE_TEXT>
                <p>NOTE: Medications provided by the Emergency Department are not
refillable by </p>
                <p>telephone or mail. Please get prescription filled and take as
directed. </p>
            </BOILERPLATE_TEXT>
        </TEMPLATE>
        <TEMPLATE NAME="Antibiotics & BC">
            <TYPE>T</TYPE>
            <STATUS>A</STATUS>
            <BOILERPLATE_TEXT>
                <p>Antibiotics may reduce the effectiveness of birth control pills, so
use other </p>
                <p>means of contraception while taking the antibiotics prescribed
today. </p>
            </BOILERPLATE_TEXT>
        </TEMPLATE>
        <TEMPLATE NAME="Acetaminophen instructions">
            <TYPE>T</TYPE>
            <STATUS>A</STATUS>
            <BOILERPLATE_TEXT>
                <p>Acetaminophen (Tylenol) {FLD: ED TYLENOL DOSE} every {FLD: ED DOSE
INTERVAL} </p>
                <p>as needed for fever or pain. Do not take more than {FLD: ED MAX DOSE
#} doses </p>
                <p>in 24 hours. Fever care instructions given. </p>
            </BOILERPLATE_TEXT>
        </TEMPLATE>
        <TEMPLATE NAME="Ibuprofen Instructions">
            <TYPE>T</TYPE>
            <STATUS>A</STATUS>
            <BOILERPLATE_TEXT>
                <p>Ibuprofen (Motrin/Advil/Nuprin) </p>
                <p>Take {FLD: ED MOTRIN DOSE}mg every {FLD: ED DOSE INTERVAL} as
needed for pain or fever. </p>
                <p>Take with food. </p>
            </BOILERPLATE_TEXT>
        </TEMPLATE>
        <TEMPLATE NAME="May cause Drowsiness">
            <TYPE>T</TYPE>
            <STATUS>A</STATUS>
            <BOILERPLATE_TEXT>
                <p>You have received a prescription/medication in the Emergency
Department that may </p>

```

ED-DC-INSTRUCTIONS-for-Sharing

<p>cause drowsiness and therefore you should not drive, operate
mechanical equipment </p>
<p>or drink alcohol for 6 - 8 hours after this medication is
taken. </p>

</BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="Mode of Departure">
<TYPE>T</TYPE>
<STATUS>A</STATUS>

<BOILERPLATE_TEXT>
<p>MODE OF DEPARTURE: </p>
<p></p>
<p>Patient left the Emergency Department by {FLD: ED DISCHARGE MODE}</p>
<p>Patient left the Emergency Department with {FLD: ED DISCHARGE
ESCORT}</p>

<p> </p>
</BOILERPLATE_TEXT>
</TEMPLATE>
<TEMPLATE NAME="Additional Comments">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>
<I NDENT_ITEMS>1</I NDENT_ITEMS>

<BOILERPLATE_TEXT>
<p>ADDITIONAL INSTRUCTIONS: </p>
</BOILERPLATE_TEXT>
<ITEMS>
<TEMPLATE NAME="blank box">
<TYPE>T</TYPE>
<STATUS>A</STATUS>
<BOILERPLATE_TEXT>
<p>{FLD: ED WORD PROCESS IND 4/4 LINES 15 TXT 72}</p>
</BOILERPLATE_TEXT>
</TEMPLATE>

</ITEMS>
</TEMPLATE>
<TEMPLATE NAME="WORK RELEASE">
<TYPE>G</TYPE>
<STATUS>A</STATUS>
<DI ALOG>1</DI ALOG>
<ONE_ITEM_ONLY>1</ONE_ITEM_ONLY>
<HI DE_DI ALOG_ITEMS>1</HI DE_DI ALOG_ITEMS>
<I NDENT_ITEMS>1</I NDENT_ITEMS>
<BOILERPLATE_TEXT>

<p>WORK RELEASE</p>
<p> </p>

<p>-----</p>

<p></p>
<p>To Whom It May Concern: </p>
<p></p>
<p>|PATIENT NAME| was seen at the Phoenix Indian Medical Center </p>
<p>Emergency Department on |TODAY'S DATE|. |PATIENT FIRST NAME| </p>
<p>was seen by a emergency room medical provider who recommends </p>
<p>the following: </p>

<p> </p>
</BOILERPLATE_TEXT>
<ITEMS>
<TEMPLATE NAME="rtn with limits">
<TYPE>T</TYPE>

ED-DC-INSTRUCTIONS-for-Sharing

```
<STATUS>A</STATUS>
<BOILERPLATE_TEXT>
  <p> Patient may return to work/school with the following
  I m i t a t i o n s / m o d i f i c a t i o n s : </p>
  <p>{FLD: ED WORD PROCESS IND 4/4 TXT 60}</p>
</BOILERPLATE_TEXT>
</TEMPLATE>
<TEMPLATE NAME="I leave PIMC">
  <TYPE>T</TYPE>
  <STATUS>A</STATUS>
  <BOILERPLATE_TEXT>
    <p> As PIMC employee, we recommend the patient be off work {FLD: GEN
  N U M B E R 1 - 5 } </p>
    <p>days. This requires your supervisor approval. </p>
  </BOILERPLATE_TEXT>
</TEMPLATE>
<TEMPLATE NAME="Rec Time off Job /School">
  <TYPE>T</TYPE>
  <STATUS>A</STATUS>
  <BOILERPLATE_TEXT>
    <p> The medical provider recommends patient be off work/school </p>
    <p>for {FLD: GEN NUMBER 1-31} days. </p>
    <p>{FLD: ED WORD PROCESS IND 4/4 TXT 60}</p>
    <p>YOU MUST TALK TO YOUR EMPLOYER OR SCHOOL </p>
    <p>BEFORE YOU TAKE TIME OFF FROM WORK OR SCHOOL. </p>
  </BOILERPLATE_TEXT>
</TEMPLATE>
<TEMPLATE NAME="no I m i t a t i o n s">
  <TYPE>T</TYPE>
  <STATUS>A</STATUS>
  <BOILERPLATE_TEXT>
    <p> Patient may return to work/school today without any
  I m i t a t i o n s . </p>
  </BOILERPLATE_TEXT>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
</ITEMS>
</TEMPLATE>
<TEMPLATE_FIELDS>
  <FIELD NAME="ED PROVIDERS">
    <TYPE>C</TYPE>
    <INACTIVE>0</INACTIVE>
    <LENGTH>23</LENGTH>
    <DEFAULT_INDEX>0</DEFAULT_INDEX>
    <REQUIRED>0</REQUIRED>
    <SEPARATE_LINES>1</SEPARATE_LINES>
    <MAX_LENGTH>40</MAX_LENGTH>
    <INDENT>0</INDENT>
    <PAD>0</PAD>
    <MIN_VALUE>0</MIN_VALUE>
    <MAX_VALUE>0</MAX_VALUE>
    <INCREMENT>0</INCREMENT>
    <DESCRIPTION>
      <p>Used in</p>
      <p>EMER DISCHARGE INSTRUCTIONS</p>
      <p>Updated June 20 2016</p>
    </DESCRIPTION>
  </ITEMS>
  <p>FRANK AMMESMAKI, MD</p>
  <p>DENNIS BRENNAN MD</p>
  <p>DAWN BROKAW, MD</p>
  <p>MICHAEL BUENAFE, MD</p>
```

ED-DC-INSTRUCTIONS-for-Sharing

<p>PETER FREELAND, MD </p>
 <p>MARIA GONZALES, MD</p>
 <p>MICHAEL JACKSON, MD</p>
 <p>DALE MCGEE, MD</p>
 <p>MARIUSZ ROGALSKI, MD</p>
 <p>GREGORY RALSTON, MD</p>
 <p>WESLEY SMITH, MD</p>
 <p>JOHN WAYTUK, MD</p>
 <p>Daniel Armstrong, PA-C</p>
 <p>Gary Cole, PA-C</p>
 <p>John Cruz, PA-C</p>
 <p>Diane Thompson, PA-C</p>
 <p>David Dixon, PA-C</p>
 <p>April Dumont PA-C</p>
 <p>Roger Hassinger, MD</p>
 <p>Jodi Khouri, PA-C</p>
 <p>George Majus, PA-C</p>
 <p>Jim Portt, PA-C</p>
 <p>Roger Quinte, PA-C</p>
 <p>Glady's Rolan PA-C</p>
 <p>Theresa Rodzevick FNP-BC</p>
 <p>Joseph Wister, PA-C</p>
 <p>Terah Young, PA-C</p>

</ITEMS>

</FIELD>

<FIELD NAME="WORD 2 LINES">
 <TYPE>W</TYPE>
 <INACTIVE>0</INACTIVE>
 <LENGTH>70</LENGTH>
 <DEFAULT_INDEX>0</DEFAULT_INDEX>
 <REQUIRED>0</REQUIRED>
 <SEPARATE_LINES>0</SEPARATE_LINES>
 <MAX_LENGTH>2</MAX_LENGTH>
 <INDENT>0</INDENT>
 <PAD>0</PAD>
 <MIN_VALUE>0</MIN_VALUE>
 <MAX_VALUE>0</MAX_VALUE>
 <INCREMENT>0</INCREMENT>

</FIELD>

<FIELD NAME="ED DISCHARGE EXIT-WRITER LINK">

<TYPE>H</TYPE>
 <INACTIVE>0</INACTIVE>
 <LENGTH>0</LENGTH>
 <DEFAULT_TEXT>Click to open Krames Exit-Writer Discharge
 Instructions</DEFAULT_TEXT>

<DEFAULT_INDEX>0</DEFAULT_INDEX>
 <REQUIRED>0</REQUIRED>
 <SEPARATE_LINES>1</SEPARATE_LINES>
 <MAX_LENGTH>0</MAX_LENGTH>
 <INDENT>0</INDENT>
 <PAD>0</PAD>
 <MIN_VALUE>0</MIN_VALUE>
 <MAX_VALUE>0</MAX_VALUE>
 <INCREMENT>0</INCREMENT>

<URL>https://www.kramesondemand.com/Browse.aspx?accountname=pi mc&username=pi mc&password=pi mc</URL>

<DESCRIPTION>
 <p>EMER DC Note</p>
 <p>EC DC Note</p>
 </DESCRIPTION>

</FIELD>

<FIELD NAME="ED DISCHARGE IMPORT FROM EXIT-WRITER">

ED-DC-INSTRUCTIONS-for-Sharing

```

<TYPE>T</TYPE>
<INACTIVE>0</INACTIVE>
<LENGTH>1</LENGTH>
<DEFAULT_TEXT>Click to open Krames Exit-Writer Discharge
Instructions</DEFAULT_TEXT>
<DEFAULT_INDEX>0</DEFAULT_INDEX>
<REQUIRED>0</REQUIRED>
<SEPARATE_LINES>1</SEPARATE_LINES>
<MAX_LENGTH>1</MAX_LENGTH>
<INDENT>0</INDENT>
<PAD>0</PAD>
<MIN_VALUE>0</MIN_VALUE>
<MAX_VALUE>0</MAX_VALUE>
<INCREMENT>0</INCREMENT>
<URL>https://www.kramesondemand.com/Browse.aspx?Collected=1683</URL>
<DESCRIPTION>
  <p>EMER Discharge Instructions</p>
  <p>Express Care Discharge Instructions </p>
</DESCRIPTION>
<ITEMS>
  <p>Importing Krames Exit-Writer discharge instructions into EHR</p>
  <p></p>
  <p>1. Click on the link to open the Krames Patient Education application</p>
  <p>2. For Discharge Instructions click on Exit-Writer on the left side of
the page</p>
  <p>3. Select the desired instruction sheet</p>
  <p>4. Enter the Patient's name and personalized discharge instructions</p>
  <p>5. Click "GO" to print a copy for the instructions for the patient </p>
  <p> or if giving the patient several sheets save to the "Education Cart"
</p>
  <p> to print as a group when your EHR note is complete. </p>
  <p>6. Highlight and copy the content of the instruction sheet you want to
include in EHR</p>
  <p>7. Close this template</p>
  <p>8. Paste the discharge information you want to document in EHR into your
note. </p>
  <p>9. Repeat steps 2-3 for each instruction sheet selected. </p>
</ITEMS>
</FIELD>
<FIELD_NAME="ED IN">
  <TYPE>C</TYPE>
  <INACTIVE>0</INACTIVE>
  <LENGTH>7</LENGTH>
  <DEFAULT_INDEX>8</DEFAULT_INDEX>
  <REQUIRED>0</REQUIRED>
  <SEPARATE_LINES>0</SEPARATE_LINES>
  <MAX_LENGTH>7</MAX_LENGTH>
  <INDENT>0</INDENT>
  <PAD>0</PAD>
  <MIN_VALUE>0</MIN_VALUE>
  <MAX_VALUE>0</MAX_VALUE>
  <INCREMENT>0</INCREMENT>
  <DESCRIPTION>
    <p>Used in multiple ED templates</p>
    <p>General Patient Encounter</p>
  </DESCRIPTION>
  <ITEMS>
    <p>in</p>
    <p>with</p>
    <p>before </p>
    <p>after</p>
    <p>ASAP</p>
    <p>today</p>
  </ITEMS>

```

```

    <p>PRN</p>
    <p> </p>
  </ITEMS>
</FIELD>
<FIELD NAME="ED 0-10">
  <TYPE>C</TYPE>
  <INACTIVE>0</INACTIVE>
  <LENGTH>5</LENGTH>
  <DEFAULT_INDEX>12</DEFAULT_INDEX>
  <REQUIRED>0</REQUIRED>
  <SEPARATE_LINES>1</SEPARATE_LINES>
  <MAX_LENGTH>5</MAX_LENGTH>
  <INDENT>0</INDENT>
  <PAD>0</PAD>
  <MIN_VALUE>0</MIN_VALUE>
  <MAX_VALUE>0</MAX_VALUE>
  <INCREMENT>0</INCREMENT>
  <DESCRIPTION>
    <p>Used in</p>
    <p>ED Comprehensive</p>
    <p>ED Procedures</p>
  </DESCRIPTION>
  <ITEMS>
    <p>0</p>
    <p>1</p>
    <p>2</p>
    <p>3</p>
    <p>4</p>
    <p>5</p>
    <p>6</p>
    <p>7</p>
    <p>8</p>
    <p>9</p>
    <p>10</p>
    <p> </p>
  </ITEMS>
</FIELD>
<FIELD NAME="ED F/U TIME/PRN/REFER">
  <TYPE>C</TYPE>
  <INACTIVE>0</INACTIVE>
  <LENGTH>5</LENGTH>
  <DEFAULT_INDEX>4</DEFAULT_INDEX>
  <REQUIRED>0</REQUIRED>
  <SEPARATE_LINES>0</SEPARATE_LINES>
  <MAX_LENGTH>10</MAX_LENGTH>
  <INDENT>0</INDENT>
  <PAD>0</PAD>
  <MIN_VALUE>0</MIN_VALUE>
  <MAX_VALUE>0</MAX_VALUE>
  <INCREMENT>0</INCREMENT>
  <ITEMS>
    <p>days</p>
    <p>weeks</p>
    <p>PRN</p>
    <p> </p>
  </ITEMS>
</FIELD>
<FIELD NAME="PIMC BLANK LINE INCLUDE IN NOTE">
  <TYPE>T</TYPE>
  <INACTIVE>0</INACTIVE>
  <LENGTH>0</LENGTH>
  <DEFAULT_INDEX>0</DEFAULT_INDEX>
  <REQUIRED>0</REQUIRED>

```

ED-DC-INSTRUCTIONS-for-Sharing

```
<SEPARATE_LINES>0</SEPARATE_LINES>
<MAX_LENGTH>0</MAX_LENGTH>
<INDENT>0</INDENT>
<PAD>0</PAD>
<MIN_VALUE>0</MIN_VALUE>
<MAX_VALUE>0</MAX_VALUE>
<INCREMENT>0</INCREMENT>
<DESCRIPTION>
  <p> </p>
</DESCRIPTION>
<ITEMS>
  <p> </p>
</ITEMS>
</FIELD>
<FIELD_NAME="ED F/U FOR DC NOTE">
  <TYPE>C</TYPE>
  <INACTIVE>0</INACTIVE>
  <LENGTH>70</LENGTH>
  <DEFAULT_INDEX>0</DEFAULT_INDEX>
  <REQUIRED>0</REQUIRED>
  <SEPARATE_LINES>0</SEPARATE_LINES>
  <MAX_LENGTH>88</MAX_LENGTH>
  <INDENT>0</INDENT>
  <PAD>0</PAD>
  <MIN_VALUE>0</MIN_VALUE>
  <MAX_VALUE>0</MAX_VALUE>
  <INCREMENT>0</INCREMENT>
  <DESCRIPTION>
    <p>Used in multiple ED templates</p>
    <p>ED Comprehensive</p>
    <p>Updated January 13 2017</p>
  </DESCRIPTION>
  <ITEMS>
    <p>your Primary Care Provider, who is not at PIMC</p>
    <p>Same Day Primary Care Clinic (call for appt at 8 AM) 602-263-1501</p>
    <p>Pediatric Clinic 602-263-1507</p>
    <p>Women's Clinic 602-263-1557</p>
    <p>Dental Clinic 602-263-1592</p>
    <p>Dermatology Clinic 602-263-1654</p>
    <p>ENT Clinic 602-263-1514</p>
    <p>Eye Clinic 602-263-1504</p>
    <p>Ortho Clinic 602-263-1654</p>
    <p>Podiatry Clinic 602-263-1509</p>
    <p>Physical Therapy 602-263-1561</p>
    <p>Behavioral Health 602-263-1518</p>
    <p>Social Services 602-263-1518</p>
    <p>STAR Clinic Open every day and evening. Walk-in only </p>
    <p>Surgical Clinic 602-263-1684 </p>
    <p>outside specialist as directed by contract health (referral
submi tted)</p>
    <p>outside provider as directed by your insurance provider</p>
    <p>Ultra Sound 602-263-1580</p>
  </ITEMS>
</FIELD>
<FIELD_NAME="ENT WORD PROCESSING 50/2">
  <TYPE>W</TYPE>
  <INACTIVE>0</INACTIVE>
  <LENGTH>50</LENGTH>
  <DEFAULT_INDEX>0</DEFAULT_INDEX>
  <REQUIRED>0</REQUIRED>
  <SEPARATE_LINES>0</SEPARATE_LINES>
  <MAX_LENGTH>2</MAX_LENGTH>
  <INDENT>0</INDENT>
```

</p>

ED-DC-INSTRUCTIONS-for-Sharing

```

<PAD>0</PAD>
<MIN_VALUE>0</MIN_VALUE>
<MAX_VALUE>0</MAX_VALUE>
<INCREMENT>0</INCREMENT>
</FIELD>
<FIELD NAME="ED TYLENOL DOSE">
  <TYPE>C</TYPE>
  <INACTIVE>0</INACTIVE>
  <LENGTH>24</LENGTH>
  <DEFAULT_INDEX>0</DEFAULT_INDEX>
  <REQUIRED>0</REQUIRED>
  <SEPARATE_LINES>0</SEPARATE_LINES>
  <MAX_LENGTH>25</MAX_LENGTH>
  <INDENT>0</INDENT>
  <PAD>0</PAD>
  <MIN_VALUE>0</MIN_VALUE>
  <MAX_VALUE>0</MAX_VALUE>
  <INCREMENT>0</INCREMENT>
  <DESCRIPTION>
    <p>EMER Discharge Instructions</p>
  </DESCRIPTION>
  <ITEMS>
    <p>325 mg</p>
    <p>500 mg</p>
    <p>650 mg (2x 325 mg tabs)</p>
    <p>1000 mg (2x 500 mg tabs)</p>
  </ITEMS>
</FIELD>
<FIELD NAME="ED DOSE INTERVAL">
  <TYPE>C</TYPE>
  <INACTIVE>0</INACTIVE>
  <LENGTH>15</LENGTH>
  <DEFAULT_INDEX>0</DEFAULT_INDEX>
  <REQUIRED>0</REQUIRED>
  <SEPARATE_LINES>0</SEPARATE_LINES>
  <MAX_LENGTH>15</MAX_LENGTH>
  <INDENT>0</INDENT>
  <PAD>0</PAD>
  <MIN_VALUE>0</MIN_VALUE>
  <MAX_VALUE>0</MAX_VALUE>
  <INCREMENT>0</INCREMENT>
  <DESCRIPTION>
    <p>EMER DISCHARGE INSTRUCTIONS</p>
  </DESCRIPTION>
  <ITEMS>
    <p>2 hours</p>
    <p>4 hours</p>
    <p>6 hours</p>
    <p>8 hours</p>
    <p>12 hours</p>
    <p>4 to 6 hours</p>
    <p>6 to 8 hours</p>
    <p>8 to 12 hours</p>
  </ITEMS>
</FIELD>
<FIELD NAME="ED MAX DOSE #">
  <TYPE>C</TYPE>
  <INACTIVE>0</INACTIVE>
  <LENGTH>1</LENGTH>
  <DEFAULT_INDEX>0</DEFAULT_INDEX>
  <REQUIRED>0</REQUIRED>
  <SEPARATE_LINES>0</SEPARATE_LINES>
  <MAX_LENGTH>1</MAX_LENGTH>

```


ED-DC-INSTRUCTIONS-for-Sharing

```

<INDENT>0</INDENT>
<PAD>0</PAD>
<MIN_VALUE>0</MIN_VALUE>
<MAX_VALUE>0</MAX_VALUE>
<INCREMENT>0</INCREMENT>
<DESCRIPTION>
  <p>EMER DISCHARGE INSTRUCTIONS</p>
</DESCRIPTION>
<ITEMS>
  <p>3</p>
  <p>4</p>
  <p>5</p>
  <p>6</p>
</ITEMS>
</FIELD>
<FIELD_NAME="ED MOTRIN DOSE">
  <TYPE>C</TYPE>
  <INACTIVE>0</INACTIVE>
  <LENGTH>3</LENGTH>
  <DEFAULT_INDEX>0</DEFAULT_INDEX>
  <REQUIRED>0</REQUIRED>
  <SEPARATE_LINES>0</SEPARATE_LINES>
  <MAX_LENGTH>3</MAX_LENGTH>
  <INDENT>0</INDENT>
  <PAD>0</PAD>
  <MIN_VALUE>0</MIN_VALUE>
  <MAX_VALUE>0</MAX_VALUE>
  <INCREMENT>0</INCREMENT>
  <DESCRIPTION>
    <p>EMER DDI SCHARGE INSTRUCTIONS</p>
  </DESCRIPTION>
  <ITEMS>
    <p>200</p>
    <p>400</p>
    <p>600</p>
    <p>800</p>
  </ITEMS>
</FIELD>
<FIELD_NAME="ED DISCHARGE MODE">
  <TYPE>C</TYPE>
  <INACTIVE>0</INACTIVE>
  <LENGTH>32</LENGTH>
  <DEFAULT_INDEX>1</DEFAULT_INDEX>
  <REQUIRED>0</REQUIRED>
  <SEPARATE_LINES>1</SEPARATE_LINES>
  <MAX_LENGTH>32</MAX_LENGTH>
  <INDENT>0</INDENT>
  <PAD>0</PAD>
  <MIN_VALUE>0</MIN_VALUE>
  <MAX_VALUE>0</MAX_VALUE>
  <INCREMENT>0</INCREMENT>
  <DESCRIPTION>
    <p>EMER DISCHARGE INSTRUCTIONS</p>
  </DESCRIPTION>
  <ITEMS>
    <p>walking</p>
    <p>ambulatory with crutches</p>
    <p>ambulatory with cane/walker</p>
    <p>hospital wheel chair</p>
    <p>wheel chair provided by transport</p>
    <p>own wheel chair</p>
    <p>stretcher</p>
  </ITEMS>

```

ED-DC-INSTRUCTIONS-for-Sharing

```

</FIELD>
<FIELD NAME="ED DISCHARGE ESCORT">
  <TYPE>C</TYPE>
  <INACTIVE>0</INACTIVE>
  <LENGTH>23</LENGTH>
  <DEFAULT_INDEX>1</DEFAULT_INDEX>
  <REQUIRED>0</REQUIRED>
  <SEPARATE_LINES>0</SEPARATE_LINES>
  <MAX_LENGTH>25</MAX_LENGTH>
  <INDENT>0</INDENT>
  <PAD>0</PAD>
  <MIN_VALUE>0</MIN_VALUE>
  <MAX_VALUE>0</MAX_VALUE>
  <INCREMENT>0</INCREMENT>
  <DESCRIPTION>
    <p>EMER DISCHARGE INSTRUCTIONS</p>
  </DESCRIPTION>
  <ITEMS>
    <p>by self</p>
    <p>parent/guardian</p>
    <p>family</p>
    <p>male companion</p>
    <p>female companion</p>
    <p>transport personnel</p>
    <p>law enforcement officer</p>
  </ITEMS>
</FIELD>
<FIELD NAME="ED WORD PROCESS IND 4/4 LINES 15 TXT 72">
  <TYPE>W</TYPE>
  <INACTIVE>0</INACTIVE>
  <LENGTH>71</LENGTH>
  <DEFAULT_INDEX>0</DEFAULT_INDEX>
  <REQUIRED>0</REQUIRED>
  <SEPARATE_LINES>1</SEPARATE_LINES>
  <MAX_LENGTH>15</MAX_LENGTH>
  <INDENT>4</INDENT>
  <PAD>4</PAD>
  <MIN_VALUE>0</MIN_VALUE>
  <MAX_VALUE>0</MAX_VALUE>
  <INCREMENT>0</INCREMENT>
  <DESCRIPTION>
    <p>Used in</p>
    <p>Multiple ED templates</p>
  </DESCRIPTION>
</FIELD>
<FIELD NAME="ED WORD PROCESS IND 4/4 TXT 60">
  <TYPE>W</TYPE>
  <INACTIVE>0</INACTIVE>
  <LENGTH>65</LENGTH>
  <DEFAULT_INDEX>0</DEFAULT_INDEX>
  <REQUIRED>0</REQUIRED>
  <SEPARATE_LINES>1</SEPARATE_LINES>
  <MAX_LENGTH>2</MAX_LENGTH>
  <INDENT>4</INDENT>
  <PAD>4</PAD>
  <MIN_VALUE>0</MIN_VALUE>
  <MAX_VALUE>0</MAX_VALUE>
  <INCREMENT>0</INCREMENT>
  <DESCRIPTION>
    <p>Used in</p>
    <p>Multiple ED templates</p>
  </DESCRIPTION>
</FIELD>

```

```

<FIELD NAME="GEN NUMBER 1-5">
  <TYPE>N</TYPE>
  <INACTIVE>0</INACTIVE>
  <LENGTH>0</LENGTH>
  <DEFAULT_TEXT>1</DEFAULT_TEXT>
  <DEFAULT_INDEX>0</DEFAULT_INDEX>
  <REQUIRED>0</REQUIRED>
  <SEPARATE_LINES>0</SEPARATE_LINES>
  <MAX_LENGTH>0</MAX_LENGTH>
  <INDENT>0</INDENT>
  <PAD>0</PAD>
  <MIN_VALUE>1</MIN_VALUE>
  <MAX_VALUE>5</MAX_VALUE>
  <INCREMENT>1</INCREMENT>
</FIELD>
<FIELD NAME="GEN NUMBER 1-31">
  <TYPE>C</TYPE>
  <INACTIVE>0</INACTIVE>
  <LENGTH>2</LENGTH>
  <DEFAULT_INDEX>0</DEFAULT_INDEX>
  <REQUIRED>0</REQUIRED>
  <SEPARATE_LINES>0</SEPARATE_LINES>
  <MAX_LENGTH>0</MAX_LENGTH>
  <INDENT>0</INDENT>
  <PAD>0</PAD>
  <MIN_VALUE>0</MIN_VALUE>
  <MAX_VALUE>0</MAX_VALUE>
  <INCREMENT>0</INCREMENT>
  <ITEMS>
    <p>1</p>
    <p>2</p>
    <p>3</p>
    <p>4</p>
    <p>5</p>
    <p>6</p>
    <p>7</p>
    <p>8</p>
    <p>9</p>
    <p>10</p>
    <p>11</p>
    <p>12</p>
    <p>13</p>
    <p>14</p>
    <p>15</p>
    <p>16</p>
    <p>17</p>
    <p>18</p>
    <p>19</p>
    <p>20</p>
    <p>21</p>
    <p>22</p>
    <p>23</p>
    <p>24</p>
    <p>25</p>
    <p>26</p>
    <p>27</p>
    <p>28</p>
    <p>29</p>
    <p>30</p>
    <p>31</p>
  </ITEMS>
</FIELD>
</TEMPLATE_FIELDS>

```

</CPRS_TEMPLATE>

ED-DC-INSTRUCTIONS-for-Sharing