------Patient Discharge Copy------Patient Discharge





An Affiliate of Betty Ford Foundation

39000 Bob Hope Drive, PO Box 1560 Rancho Mirage, CA 92270

Main Hospital 1-855-645-3388

Emergency Dept 1-866-230-8275

EXITCARE® PATIENT INFORMATION 1st Floor - ED DISCHARGE INSTRUCTION SUMMARY

PATIENT INFORMATION

Patient ID:	Patient Medical Record Number:	
Patient Name: SCHUYLER FRANCIS WILLIAMS III	Patient Address: 8004 SHADY GLEN AVE, LAS VEGAS, NV 89131	
Responsible Adult: SELF	Patient Email:	
Patient Weight: 229	Patient Height: 6'1"	
Patient DOB:	Patient Sex: MALE	
Patient Phone:		

VISIT INFORMATION

Visit Start Date: Discharge Date/Time:	12/01/19 3:23 PM 05/01/20 4:56 PM	Department:	1st Floor - ED
Primary Caregiver:	Jacob P. Medley, MD	Diag:	Nondisclosed
Other Providers:	N/A	Primary Follow-Up:	Please see info below

DISCHARGE INSTRUCTIONS (SHEETS PROVIDED:

- Hypoglycemia (Low Blood Sugar) in People Without Diabetes
- Vomiting Brief

PATIENT INSTRUCTIONS:

- Who to contact if a problem develops soon after arriving home.
- Follow-up appointments.
- Return to daily counseling sessions for any new or worsening symptoms, or feeling you are not continuing to improve.

FOLLOWUP APPOINTMENTS/INSTRUCTIONS:

Primary Follow-up Information:

- Go to Primary care for a glucose tolerance test
- This patient was reviewed by me and should return to me for further consultation no later than _______.

35743233

Medler MD

MEDICAL PRACTITIONER

© 2020 EultKare, LLC

04:56:04 PM