



Main Number
610. [REDACTED]
Emergency Department
610. [REDACTED]
Ambulatory Care Center
610.4 [REDACTED]

EXITCARE® PATIENT INFORMATION

Patient Name: Vijay Adaikkappan

Attending Caregiver [REDACTED] MD, Emergency Dept Physician

Hemoptysis

Hemoptysis means coughing up blood from your airways or lungs. The most common cause of hemoptysis is the least serious. It is usually a ruptured small blood vessel caused by coughing or an infection. In some cases, the cause of hemoptysis is not known. Hemoptysis may also be a sign of a more serious problem, such as cancer, pneumonia, a blood clot, or other types of lung disease. You should always contact a caregiver if you develop hemoptysis. This is important, as even mild cases of hemoptysis may lead to serious breathing problems. Major bleeding from the airway is considered a medical emergency, and needs to be evaluated and managed promptly to avoid complications, disability, or death.

Your caregiver may perform tests to find out if the bleeding is coming from your lungs. Some of these tests may include:

- A chest X-ray.
- A computerized X-ray scan (*CT scan* or *CAT scan*).
- Bronchoscopy. This test uses a flexible tube (*a bronchoscope*) to see inside the lungs.

TREATMENT

- Treatment for hemoptysis depends on the cause. It also depends on the quantity of blood. Infrequent, mild hemoptysis usually does not require specific, immediate treatment.
- If the cause of hemoptysis is unknown, treatment may involve monitoring for at least 2 or 3 years. If you have a normal chest X-ray and bronchoscopy, the hemoptysis usually clears within 6 months.

SEEK MEDICAL CARE IF:

- For follow-up care as directed.
- If your symptoms are not improving or are getting worse.
- If you have any other questions or concerns.

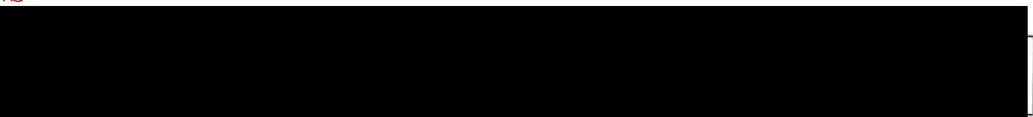
SEEK IMMEDIATE MEDICAL CARE IF:

- You begin to cough up large amounts of blood.
- You develop problems with your breathing.
- You begin vomiting blood or see blood in your stool.
- You develop chest pain.
- You feel faint or pass out.
- You develop a fever over 102° F (38.9° C), or as your caregiver suggests.

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FOLLOW-UP INSTRUCTIONS

next available appointment:
3 West Chester PA 19380-



YOUR LIFE IS WORTH PENN MEDICINE ChesterCountyHospital.org

Main Number
610.431.5000

EXITCARE® PATIENT INFORMATION

Patient Name: Vijay Adaikkappan

Attending Caregiver: [REDACTED] PA-C, Physician Assistant / [REDACTED] MD, Emergency
Room Physician

Laryngitis

Your exam shows you have laryngitis. This condition is due to inflammation around the vocal cords and causes hoarseness and cough. Laryngitis can often be related to a virus infection, excessive smoking, excessive talking or yelling, breathing toxic fumes, allergies, or reflux of acid from your stomach.

Treatment is mainly voice rest. Talk as little as possible (this includes whispering). Use written notes to communicate until your voice is back to normal. Avoid smoking cigarettes, drink plenty of clear liquids, and rest frequently until all your symptoms have improved. You should be checked by your doctor if your hoarseness and cough are not improved after 5 days. Please see your doctor or go to the emergency right away if you have:

- Trouble breathing or blood in your sputum.
- Difficulty swallowing, persistent fever or increasing pain.

ADDITIONAL NOTES AND INSTRUCTIONS

call and see ENT or family doctor for continued symptoms
suck on lozenges or ginger-

continue all prescribed medications

A throat culture was sent during your visit today, the results will be available in 2 days. You may call the Charge Nurse for the results at 610-431-5150.

Document Released: 12/18/2006 Document Revised: 3/14/2011 Document Reviewed: 6/4/2008

THE CHESTER COUNTY HOSPITAL *and Health System* ChesterCountyHospital.org

Pt Name: Adaikkappan, Vijay M
 Pt ID: 2012009233
 DOB: 03/09/1983
 Adm DTime: 05/12/2014 18:50
 Nurs Sta: ED
 Dx:
 Allrg: No Known Allergies, No Known Drug Allergies, No Known Food Allergies

MRN: 846512
 Acct No: 400000408948
 Age/Sex: 31Y/M
 Atn Dr:
 Rm & Bed: ED 07

Order Name:
 Result Name: CHEST 2 VIEWS
 Observation Dtime: 05/12/2014 19:46
 Result Status: Final Result

FINAL REPORT

DIAGNOSTIC RADIOLOGY

CHEST 2 VIEWS 05/12/2014

COMMENTS: Clinical History: Hemoptysis.

Findings:

PA and lateral views of the chest demonstrate clear lungs. There is no pleural effusion or pneumothorax. The heart, mediastinum and hila demonstrate no definite abnormalities. The bony thorax is grossly intact.

IMPRESSION: No active disease.

CCH tracking code 2

CPT CODE: 71020

Dictated By:

at: May 12 2014

Transcribed By: PSC D: May 12 2014 8:02P T: May 12 2014 8:02P

DIAGNOSTIC RADIOLOGY 1034

Comments

Result Comments:

Requisition Comments:

Ordering Dr:

Order Date/Time:

Ord#/Occurrence#: /