



Main Line Health®  
Well ahead.™

## AFTER VISIT SUMMARY

Joseph Cotter MRN: 000010204430

6/4/2024 Main Line Health Urgent Care in Broomall 484-565-1293

### Instructions

I removed a small piece of wood from the foot. There is some local infection in the area. I am placing you on 2 antibiotics the Keflex and the Bactrim. If for some reason you are only able to get one of them I think the Bactrim is the most important. We are sending a wound culture to make sure that you are on the appropriate antibiotic. I also prescribed a topical antibiotic ointment to use. I recommend you do warm soaks of your foot with Epsom salts 3-4 times a day. Keep the wound clean and covered. Make sure you are looking at the wound at least every day. If you are noticing any increased redness pain or swelling please seek prompt reevaluation. Also seek reevaluation if you are developing any fevers. If fevers develop the best place to go to the emergency room. Ideally you should have the foot reevaluated by health professional in 48 to 72 hours.

Your blood pressure is significantly elevated here today. I recommend that you see your primary care doctor and discuss treatment options. If you are developing chest pain, headache, shortness of breath, difficulty urinating please go immediately to the emergency room. Having untreated blood pressure like this is putting you at high risk for the development of stroke, heart attack, kidney disease/failure.

### Today's Visit

Your care team consisted of: Mary-Stewart Willsie

#### Diagnosis

Abscess

#### Done Today

Administer TDAP

#### Immunizations Given

Tdap



Blood Pressure

218/118



Temperature (Oral)

98.6 °F



Pulse

100



Respiration

18



Oxygen Saturation

96%



### Your medications have changed



START taking:

cephalexin (KEFLEX)

mupirocin (BACTROBAN)

sulfamethoxazole-trimethoprim (BACTRIM DS)

Review your updated medication list below.



### Pick up these medications at Giant Pharmacy #6505 - West Chester, PA - 1375 E Boot Rd

cephalexin • mupirocin • sulfamethoxazole-trimethoprim

Address: 1375 E Boot Rd, West Chester PA 19380-5988

Phone: 610-241-1061

Main Line Health

MyChart

View your After Visit Summary and more online at <https://my.mainlinehealth.org/mychart/>.

## What's Next

You currently have no upcoming appointments scheduled.

## Additional Information

### Elevated Blood Pressure:

**You had at least one elevated blood pressure while in the ED. It is very important that you follow up with your Primary Care Provider (PCP) for a re-check of your blood pressure.**

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If you do not continue to improve, or if your condition worsens, please call your Primary Care Provider (PCP) or go to the Emergency Department. You may also return to our MLH Urgent Care for a new evaluation.

Please notify your PCP that you were treated by MLH Urgent Care and make an appointment for further evaluation and treatment as necessary.

Main Line Health Urgent Care strongly recommends that you visit a PCP regularly. Your PCP can help you implement the recommendations we gave you today, as well as make sure you are up to date with wellness exams, immunizations and preventive screenings. Your PCP can also help when you are feeling sick, potentially avoiding the need for urgent care or emergency department visits. If you do not have a PCP, please call **1-866-CALL-MLH (1-866-225-5654)** for help with finding one. If you need urgent care in the future, Main Line Health Urgent Care is here to serve you.

You may have received a list of your medicines in a medication reconciliation form. Take that list with these instructions (and any lab, EKG, or X-ray results that you may have received) with you when you see your doctor for follow up care.

Delayed Reports: Some studies or reports take time to be finalized.

Please be aware that you may be sent by mail, either certified, regular or both, more information related to today's visit.

**Cultures (and some blood tests):** You will be notified of the final culture report (or blood test) only if further treatment is recommended by the ED Physician. Final results are available usually within 2-3 days. Have your doctor call for the results.

# Your Medication List

## TAKE these medications



START

**cephalexin** 500 mg capsule  
Commonly known as: KEFLEX

Take 1 capsule (500 mg total) by mouth 4 (four) times a day for 7 days.



START

**mupirocin** 2 % ointment  
Commonly known as: BACTROBAN

Apply to area tid for 7 days



START

**sulfamethoxazole-trimethoprim** 800-160 mg per tablet  
Commonly known as: BACTRIM DS

Take 1 tablet by mouth 2 (two) times a day for 7 days. smx-tmp DS (BACTRIM) 800-160 mg tabs (1tab q12 D10)

## ASK your doctor about these medications



ASK

**insulin NPH and regular human pen**  
Commonly known as: HumuLIN, NovoLIN 70/30

Main Line Health Care Everywhere CEID = MLH-WM9P-54PQ-58QT

## Recognize a Nurse or Hospital Employee

### The DAISY Award



HONORING NURSES INTERNATIONALLY  
IN MEMORY OF J. PATRICK BARNES

Do you want to recognize a Nurse for outstanding service?  
NOMINATE YOUR NURSE!

The DAISY Award for extraordinary nurses is granted to nurses who demonstrate extraordinary compassion and nursing care.

Scan this QR Code

### The BEE (Being Exceptional Everyday) Award



Do you want to recognize a MLH Staff Member for outstanding service? Nominate them TODAY!

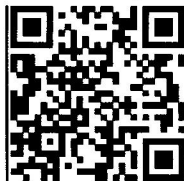
The BEE AWARD is for extraordinary MLH Staff members who demonstrate EXCEPTIONAL care and patient / peer support EVERYDAY! \*For nurse nominations, please see the Daisy Award!

Scan this QR Code

Recognize a Nurse or Hospital Employee (continued)



**Or visit:** <https://forms.office.com/r/abt0fSiUJ8>



**Or visit:** <https://forms.office.com/r/rEHVn08LnM>



**Main Line Health®**

Well ahead.®

6/4/24

Guarantor:  
Joseph Cotter #557636  
Receipt:  
#2558378

Patient:  
Joseph Cotter



Hospital Visit at Main Line Health Urgent Care in Broomall

Pre-Payment Uc

\$150.00

**Total Paid**  
**\$150.00**



Payment Methods

MasterCard x7782

Authorization number: 00531P

\$150.00

Signature: \_\_\_\_\_

I agree to pay the above total amount(s) according to the card issuer(s) agreement.

PATIENT COPY