

Follow-up Instructions

Keep this page and take it with you to your next appointment. Follow *only* the instructions checked below.

☐ Call your doctor or the Emergency Department if you develop any unusual signs or symptoms within the next 24 hours, especially:

- abdominal pain, diarrhea, vomiting
- severe weakness
- rapid heart rate
- shortness of breath, coughing, or wheezing
- increased pain or discharge from injured eyes

☐ No follow-up appointment is necessary unless you develop any of the symptoms listed above.

☐ Call for an appointment with Dr. _____ in the practice of _____.

When you call for your appointment, please say that you were treated in the Emergency Department at _____ Hospital by _____ and were advised to be seen again in _____ days.

☐ Return to the Emergency Department/_____ Clinic on (date) _____ at _____ AM/PM for a follow-up examination.

☐ Do not perform vigorous physical activities for 1 to 2 days.

☐ You may resume everyday activities including driving and operating machinery.

☐ Do not return to work for _____ days.

☐ You may return to work on a limited basis. See instructions below.

☐ Avoid exposure to cigarette smoke for 72 hours; smoke may worsen the condition of your lungs.

☐ Avoid drinking alcoholic beverages for at least 24 hours; alcohol may worsen injury to your stomach or have other effects.

☐ Avoid taking the following medications: _____

☐ You may continue taking the following medication(s) that your doctor(s) prescribed for you:

☐ Other instructions: _____

- Provide the Emergency Department with the name and the number of your primary care physician so that the ED can send him or her a record of your emergency department visit.

- You or your physician can get more information on the chemical by contacting: _____ or _____, or by checking out the following Internet Web sites: _____.

Signature of patient _____ Date _____

Signature of physician _____ Date _____