

AUM STUDENT HEALTH CENTER INSTRUCTION SHEET

PHONE 334-244-3281

Name: Toby Kilcreas Date: 6/11/18

The practitioner I saw today was:

- ☐ Carol Stewart, CRNP
☒ Melodye M. Harvey, CRNP

My Problem:

- ☒ Upper Respiratory Infection
☐ Influenza A/B
☐ Sinusitis
☐ Rhinitis Allergic/Viral
☐ Pharyngitis Bronchitis

What medications do I need to take?

For Pain or Fever:

- ☐ Acetaminophen (Tylenol) regular strength
☐ Extra Strength Acetaminophen - 2 tablets
☐ Ibuprofen/Advil/Motrin (same active ingredient) as needed

For Congestion or Cough:

- ☒ Mucinex DM twice daily, Mucinex
☐ Nasal saline rinses; thin mucus, decrease drainage
☐ Elevate head off of bed 15-20 degree
☐ Claritin, Zyrtec, or Xyzal

For Sore Throat:

- ☒ Warm salt water (1/2 tsp to 1 cup) gargle every 2-3 hours; thin mucus and soothes
☒ Lozenges or sprays

Other:

- ☒ Get more than usual amount of rest. Limit extra activities until you are well.
☒ Drink plenty of fluids (2-3 liters a day). Water is best, some juices, Gatorade is ok.
☐ Humidify air: vaporizer, humidifier. Keep filters clean.
☐ May take 10-14 days to get better. If you have a fever over 101 degrees Fahrenheit for more than 3-7 days, call the clinic. If you are not getting better or are getting worse, call the clinic.
☐ If you are having trouble breathing call 911 or go to the ER.

Other Notes: _____

Certificate For Return to Work/School

Name: Toby Kilcreas
 Was seen on 6/11/18 at 9:30 am/pm
 and is able to return to work/school on: 6/13/18
 Nature of illness or injury: confidential

☐ Restrictions: _____ ☐ Restricted Physical Exertion: _____

☐ Light Work: _____ ☐ Avoid _____ for _____ number of days

☐ Limited Physical Exertion: _____ ☐ Other: _____

CRNP/ RN: M Harvey Date: 6/11/18
 Phone (334) 244-3281 Fax (334) 244-3243