

**Patient: Sherman W Fuerniss**

Appointment: 08/31/2018 at 9:10am with Mary K Schaefer, PA-C for Ear Pain at AVERA SB RHC - PARKSTON, 401 W GLYNN DRIVE, PARKSTON, SD 57366

**Your Care Team**

Avera St Benedict Clinic, Primary Care Provider  
 AVERA ST BENEDICT CLINIC  
 401 W GLYNN DR  
 PARKSTON, SD 57366  
 (605)928-7961

**Thank You for Choosing Avera!**

*Below is a summary of the care you received during today's visit and instructions to follow at home.*

**Your Measurements and Vital Signs**

<i>Date</i>	<i>Temp</i>	<i>Blood Pressure</i>	<i>Pulse</i>
08/31/18	96.9 F	135/88	63

**Your Allergies**

No Known Allergies

**Medication Instructions**

***Below is an overview of your current and discontinued medications. Instructions on new prescriptions, refilled prescriptions and changed medications are outlined below. Please contact your nurse or provider for specific questions on taking your medications.***

Keep all medications out of the reach of children. Medications can be abused. Keep your medication in a safe place to protect it from theft. Sharing, selling or giving away your medication to anyone else is dangerous and against the law.

Safely disposing of expired or unused medication is important in helping to protect your family and home and decrease the opportunity for your family, their friends or others to abuse your medication. Dispose of expired or unused medications through a safe drug disposal program. Ask your pharmacy for details in your community. If none is available to you, dispose of by mixing with waste such as coffee grounds or kitty litter and place in household trash. Unless otherwise directed by the medication's packaging, do not flush down the drain or toilet.

**Your Medications**

<b>Start Taking</b>	<i>Follow your Provider instructions for med changes.</i>
	<b>Aspirin EC 81 Mg Tablet.dr (Aspirin)</b> Take 1 tab oral daily; Quantity of 30; Refills: 3

**Your Other Medications**

<b>Stop Taking</b>	<b>Aspir 81 81 Mg Tablet.dr (Aspirin)</b> Reason: Prescription changed
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**You Were Seen for the Following Reasons**

No reasons recorded.

**Procedures or Tests Performed During Your Visit**

Please contact your nurse or provider with any questions regarding tests or procedures performed during your visit.

**Upcoming Tests or Procedures**

Please contact your nurse or provider for instructions on future tests or procedures.

**Injections Administered During Your Visit**

Please contact your nurse or provider with any questions regarding injections administered during your visit.

**We Have Made the Following Referrals**

Please contact your nurse or provider with any questions regarding referrals made during your visit.

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**Your Immunization History**

<i>Immunization Series</i>	<i>#</i>	<i>Date Given</i>	<i>Status</i>	<i>Next Due</i>
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

<i>Immunizations</i>	<i>Last Done</i>	<i>Next Due</i>
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]

**Education Materials Provided During Your Visit**

No education materials provided.

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**Upcoming Appointments**

***Below are dates and times of any future appointments within the next 30 days. Many clinics ask you to arrive 15-30 minutes prior to your scheduled visit to complete any paperwork or prepare for a procedure. Additionally, please bring all of your prescription bottles to any appointments.***

**Your Upcoming Appointments within the Next 30 Days**

No appointments scheduled within the next 30 days.

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**Get AveraChart Smart**

**AveraChart** is a user-friendly patient portal that can be used to communicate with your care team and review your medical record - online!