GP follow-up note

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Patient ID	P003	**Document ID**	P003-D05
Date	2026-09-01	**Type**	GP follow-up note
Author	Gp	**Recipient**	-

Patient: Robert Hayes

Date: 1 September 2026

Clinician: Dr Emma Walsh

Encounter: Post-ED follow-up

Reason for contact

Review of COPD recovery following Emergency Department attendance on 26 August 2026.

History

Mr Hayes attended Logan Hospital Emergency Department on 26 August 2026 with a moderate COPD exacerbation not responding sufficiently to initial community treatment. He had been commenced on prednisolone 40 mg once daily and doxycycline 100 mg twice daily on 25 August 2026 for a mild exacerbation, and deteriorated overnight prior to ED attendance. He was treated with inhaled bronchodilators in the ED with improvement and discharged home the same day.

Chest X-ray performed in the ED showed no focal consolidation (final). Viral respiratory panel was negative (final). He was discharged without radiographic pneumonia.

He was reviewed by the practice nurse on 30 August 2026 for inhaler technique, where incorrect inspiratory technique was identified and improved after coaching.

Current review

Reports breathlessness is near his baseline. Sputum has reduced. No fever.

Assessment

COPD exacerbation resolving. Prednisolone and doxycycline courses completed as planned. No evidence of ongoing infection.

Medication changes

- Prednisolone 40 mg once daily - course completed, ceased.
- Doxycycline 100 mg twice daily - course completed, ceased.

Current medications

- Irbesartan 150 mg once daily
- Salbutamol inhaler as required
- Tiotropium 18 micrograms inhaled once daily

Plan

- Continue maintenance tiotropium and rescue salbutamol.
- Inhaler technique reviewed with practice nurse; continue to reinforce correct technique.
- GP and inhaler-technique review within 7 days completed today.
- Respiratory outpatient review scheduled for 19 September 2026 at Metro South Respiratory Clinic - outstanding.

Safety-netting

Advised to seek emergency care if breathlessness worsens, or if confusion or cyanosis develops.