

3-22-20

Hello Peggy, I hope & pray that you and all your love ones are healthy with good spirit. I'm trying to hang in there but since I wrote HSU here at RGC I'm a little worried.

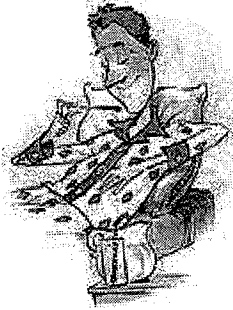
They have no plan for me if Caronavirus reach me or is given to me. I wrote HSU and this is what they sent me. I enclosed what they sent me. I just wanted to let you know what is going on here with me and All the High Risk Inmates.

Take Care

Yours truly,
Steven Farsley

Adult Self-Care for Colds

Colds are caused by viruses. They can't be cured with antibiotics. However, you can relieve symptoms and support your body's efforts to heal itself. No matter which symptoms you have, be sure to drink plenty of fluids (water or clear soup); stop smoking and drinking alcohol; and



A fever is a sign
your body is
fighting infection.

Your nose feels stuffy.
Then, for no apparent
reason, it starts to run.
This is your body's
way of flushing away
invaders.



get plenty of rest.

Understand a fever

- Take your temperature several times a day. If your fever is 100.4°F (38.0°C) for more than a day, call your doctor.
- Relax, lie down. Go to bed if you want. Just get off your feet and rest. Also, drink plenty of fluids to avoid dehydration.
- Take acetaminophen or a nonsteroidal anti-inflammatory agent (NSAID), such as ibuprofen.

Treat a troubled nose kindly

- Breathe steam or heated humidified air to open blocked nasal passages. Stand in a hot shower or use a vaporizer. Be careful not to get burned by the steam.
- Saline nasal sprays and decongestant tablets help open a stuffy nose. Antihistamines can also help, but they can cause side effects such as drowsiness and drying of the eyes, nose, and mouth.

Soothe a sore throat and cough

- Gargle every 2 hours with 1/4 teaspoon of salt dissolved in 1/2 cup of warm water. Suck on throat lozenges and cough drops to moisten your throat.
- Cough medicines are available but it is unclear how effective they actually are.
- Take acetaminophen or an NSAID, such as ibuprofen to ease throat pain

Ease digestive problems

- Put fluid back into your body. Take frequent sips of clear liquids such as water or broth. Do not drink beverages with a lot of sugar in them, such as juices and sodas. These can make diarrhea worse. Older children and adults can drink sports drinks.
- As your appetite returns, you can resume your normal diet. Ask your doctor whether there are any foods you should avoid.

When to seek medical care

When you first notice symptoms, ask your health care provider if antiviral medications are appropriate. Antibiotics should not be taken for colds or flu. Also, call your doctor if you have any of the following symptoms or if you aren't feeling better after 7 days:

- Shortness of breath
- Pain or pressure in the chest or abdomen
- Worsening symptoms, especially after a period of improvement
- Fever of 100.4°F (38.0°C) or higher, or fever that doesn't go down with medication
- Sudden dizziness or confusion
- Severe or continued vomiting
- Signs of dehydration, including extreme thirst, dark urine, infrequent urination, dry mouth
- Spotted, red, or very sore throat

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HEALTH SERVICE REQUEST
AND COPAYMENT DISBURSEMENT AUTHORIZATION

← NOTIFY ANY FACILITY STAFF IF YOUR HEALTH CARE NEED IS AN EMERGENCY →

PRINT LAST NAME <i>Tracy</i>	PRINT FIRST NAME <i>STAN</i>	DOC NUMBER <i>71159</i>
FACILITY NAME <i>1005</i>	HOUSING UNIT <i>11-101</i>	TODAY'S DATE <i>3-21-20</i>

COPAYMENT DISBURSEMENT REQUEST SECTION

AGREEMENT BY PATIENT:

I understand the following:

- The Department of Corrections shall charge a copayment of \$7.50 for a visit (face to face contact) initiated by a patient when a copayment is required.
- I will not be denied care if I am unable to pay the copayment.
- By signing below, I am initiating a request for disbursement of my funds for the copayment at the time of the visit when a copayment is required.
- Failure to sign below will NOT prevent the copayment from being withdrawn from my account following a visit when a copayment is required.

PATIENT SIGNATURE

TO BE COMPLETED BY HSU ONLY

MEDICAL (Nurse, Doctor/NP/PA) DENTAL OPTICAL

Charge Copayment: Yes No

AUTHORIZED STAFF SIGNATURE

DATE OF SERVICE

TO BE COMPLETED BY INMATE PATIENT - HEALTH SERVICE REQUEST SECTION

Be sure to include today's date on top of form. Check the appropriate box below, and explain your request on the lines provided. Place all 4 pages of the completed form in the sick call box. The HSU will send a copy back to you indicating that your request has been received.

- HEALTH SERVICES HEALTH CARE RECORD REVIEW COPIES FROM HEALTH CARE RECORD (List records below)
 PSYCHIATRIST INFORMATION
 OTHER:

Please provide a brief description below of the services you desire so that HSU can respond to your request appropriately.

I would like to know what is your (HSU) game plan for me with this Coronavirus being that I am high risk?

DATE RECEIVED:
TO BE STAMPED BY HSU

FOLD THE BOTTOM OF THE FORM UP TO THE DOTTED LINE SO THAT INFORMATION REMAINS CONFIDENTIAL.

PATIENT: DO NOT WRITE BELOW THIS LINE - TO BE COMPLETED BY HSU ONLY

HSU RESPONSE Check appropriate box below. Add written comments / information as needed.

Nursing Sick Call: Today Date (if not today):

Scheduled to be seen in HSU: ACP RN/LPN Special Needs Evaluation Optical Other:

Refer HSR to: ACP HSU Manager Psychiatrist MPAA Optical Other:

Refer for copies only Refer for Health Care Record review appointment.

Educational material attached (Specify): *Self care cold + flu* Other:

COMMENTS / INFORMATION

Practice good hand hygiene, don't touch your face if possible. If you experience any symptoms let us know

PRINT STAFF NAME

S. Miller RN

DATE OF HSU RESPONSE

3-21-2020

DISTRIBUTION: Original - Internal Paper Record; PR Patient Request Folder; Official Record - Business Office File; Copies (2) - Inmate Patient