

Patient Information Report

Patient: WEBBER, MARILYN P	Insured ID: H08069210	Primary Payor: HUMANA MCR ADV PDGM
MR No: 04200053148301	Insured ID:	Secondary Payor: SELF PAY
Legacy MR No:		

ICD-10 Diagnosed Procedures						
Order	Code	Description	Onset / Exac.	O/E Date	Type	Sym. Ctrl. Rtg.
1	L89.154	PRESSURE ULCER OF SACRAL REGION, STAGE 4	E	06/05/2025	D	2 - Symptoms controlled with difficulty, affecting daily functioning; patient needs ongoing monitoring.
2	E11.9	TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS	O	06/05/2025	D	1 - Symptoms well controlled with current therapy.
3	G35	MULTIPLE SCLEROSIS	O	06/05/2025	D	1 - Symptoms well controlled with current therapy.
4	I11.0	HYPERTENSIVE HEART DISEASE WITH HEART FAILURE	O	06/05/2025	D	1 - Symptoms well controlled with current therapy.
5	I50.9	HEART FAILURE, UNSPECIFIED	O	06/05/2025	D	1 - Symptoms well controlled with current therapy.
6	Z43.5	ENCOUNTER FOR ATTENTION TO CYSTOSTOMY	O	06/05/2025	D	
7	Z46.6	ENCOUNTER FOR FITTING AND ADJUSTMENT OF URINARY DEVICE	O	06/05/2025	D	
8	Z79.4	LONG TERM (CURRENT) USE OF INSULIN	O	06/05/2025	D	
9	E03.9	HYPOTHYROIDISM, UNSPECIFIED	O	06/05/2025	D	
10	E78.5	HYPERLIPIDEMIA, UNSPECIFIED	O	06/05/2025	D	
11	N31.9	NEUROMUSCULAR DYSFUNCTION OF BLADDER, UNSPECIFIED	O	06/06/2025	D	
12	K21.9	GASTRO-ESOPHAGEAL REFLUX DISEASE WITHOUT ESOPHAGITIS	O	06/05/2025	D	
13	B37.9	CANDIDIASIS, UNSPECIFIED	O	06/06/2025	D	
14	F41.9	ANXIETY DISORDER, UNSPECIFIED	O	06/05/2025	D	
15	F32.A	DEPRESSION, UNSPECIFIED	O	06/05/2025	D	
16	Z55.6	Problems related to health literacy	O	06/05/2025	D	
17	Z91.81	HISTORY OF FALLING	O	06/05/2025	D	
18	Z79.82	LONG TERM (CURRENT) USE OF ASPIRIN	O	06/05/2025	D	

Allergies	
Description	Date Entered
CIPROFLOXACIN	4/10/2025 9:28:54 AM
HYDROCODONE-ACETAMINOPHEN	4/10/2025 9:29:07 AM

* denotes Non-Visit QI Reporting Collection