

**Salome Rodriguez: Patient Information**  
Patient Record Number:3867

**Texas Physician House Calls (H)**  
2925 Skyway Circle North, Irving, TX, USA, 75038-3510  
www.texas-housecalls.com, Phone:(972) 675-7313, Fax:(972) 675-7310,  
Email:hhsupport@texas-housecalls.com

**Name:** Salome Rodriguez  
**External ID:** 3867  
**DOB:** 1934-10-23  
**Sex:** Male  
**S.S.:** 449-81-4589  
**Patient Drive Folder:** <https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B0AwTMa8jPNAZHI5WW4zMgk5eEk>

**Address:** 2231 Sheridan Street  
**City:** Dallas  
**State:** Texas  
**Postal Code:** 75235  
**Country:** USA  
**Home Phone:** 214-267-0271  
**Street Address:** 2231 Sheridan Street  
**Apt/Suite/Other:** House

## Past Medical History:

**Last Recorded On:** 12-24-2016.  
**Additional Medical History:** Cerebrovascular accident, obesity, and umbilical hernia..

## Family History:

**Last Recorded On:** 12-24-2016.  
**Father:** Unknown..  
**Mother:** Unknown..  
**Siblings:** Unknown..  
**Offspring:** Patient has 8 children..

## Social History:

**Last Recorded On:** 12-24-2016.  
**Tobacco:** Never smoker No smoking **Status:** Never  
**Alcohol:** No alcohol **Status:** Never  
**Recreational Drugs:** No drugs **Status:** Never  
**Nutrition History:** Diabetic diet..  
**Developmental History:** Educational level is some high school..  
**Other History:** Questionable Pneumovax Physical on 7/2015.

## Tests and Exams:

**Last Recorded On:** 12-24-2016.  
**Sigmoid/Colonoscopy** N/A&nbsp;&nbsp; done  
**Prostate Exam** N/A&nbsp;&nbsp; done

## Insurance:

**Medicare B Texas (SMTX0)**

**Priority :** Primary  
**Start Date :** 1999-10-01  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Medicare B Texas (SMTX0)  
**Priority :** Secondary  
**Start Date :** 2014-01-01  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Medicaid Texas (SKTX0)

**Copay :**  
**Insured ID Number :** 449814589A  
**Group Number :**  
**Employer Name :** Salome Rodriguez  
**Copay :**  
**Insured ID Number :** 523122480  
**Group Number :**  
**Employer Name :** Salome Rodriguez

**Immunizations:**

**Salome Rodriguez: Chief Complaint**  
Patient Record Number:3867

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**Seen by** Derrick Love-Jones  
**Seen on** 16-November-2016

**Chief Complaint Status:**finalized

Followup home visit for management of diabetes mellitus type 2, congestive heart failure, hypertension, chronic obstructive pulmonary disease, benign prostatic hyperplasia, hyperlipidemia, cerebrovascular accident effects, and coronary artery disease. Patient complains of pain in access arm and shortness of breathe.

**History of Present illness:**

**HPI Status:**Finalized

An 82-year-old Hispanic male in NAD with multiple chronic conditions of the following: diabetes mellitus type 2, congestive heart failure, hypertension, chronic obstructive pulmonary disease, benign prostatic hyperplasia, hyperlipidemia, cerebrovascular accident effects, and coronary artery disease. Patient states that he has had shortness of breathe for the last 2 days. Patient also states that since starting hemodialysis treatments his access arm has been hurting. Patient rates pain 6/10. Patient denies any CP, HA or N/V.

**Social History:** Social history has been reviewed with the patient and updated.

**Vitals:**

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-11-16	151	54	187.00	62.00	97.60	16.00	~	34.2	0.00

## Review of Systems:

**Constitutional:**

[illegible]

### Physical Exam:

**SEAL:**

Accepted for publication 10 October 2013; accepted for publication 10 October 2013; accepted for publication 10 October 2013.

**EYE:**

Swallowing: Normal. Gums: Intra-Oral Discharge: Absent. Oral Lesions: Gums: pink, Bilateral Nasal Turbinates-Within Normal Limits.

**ENT:**

Nasal Mucosa Pink, Septum Midline-Within Normal Limits .

**NECK:**

Supple,Thyromegaly, Carotid of the Nasal Septum, JVD, lymphadenopathy-Within Normal Limits .

**CV:**

RRR-Within Normal Limits.

**RESP:**

Lungs CTAB-Within Normal Limits .

**Gl:**

Bowel Sounds present in all four quadrants-Within Normal Limits .

**EXTREMITIES:**

Deformities- Abnormal Limits. Edema and ankles..

**MUSC:**

ROM-Within Normal Limits .

**NEURO:**

CN2-12 Intact-Within Normal Limits .

**PSYCH:**

Normal Affect, Judgement and Mood, Alert and Oriented X3-Within Normal Limits .

Patient Appears To Be In Good Mood-Within Normal Limits .

**Medication:**

Description	Status	Start Date	End Date
Calcium Acetate (Phos Binder) ,667 MG TABS, TAKE 3 TABLETS WITH EACH MEAL, Quantity: 270, Refill Quantity: 6 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-05-09	
ProAir HFA ,108 (90 Base) MCG/ACT AERS, INHALE 1 TO 2 PUFFS EVERY 4 TO 6 HOURS AS NEEDED, Quantity: 1, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-07	
Calcium Acetate (Phos Binder) ,667 MG TABS, TAKE 3 TABLETS WITH EACH MEAL, Quantity: 270, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-01-20	

**Plan Note:****Plan Note Status:**Finalized

Continue the same treatment plan as previous. Reviewed and continue same medications, no new medications noted this visit. Medication if yours education is given to the patient and the patient educated on the benefits of no salt, low-fat, low cholesterol diet with current medical conditions. Patient was instructed to go to ER for symptoms of chest pain, shortness of breath come excessive headache, blurred vision or systolic blood pressure greater than 200. No labs needed this visit. Patient verbalized understanding of the above plan and was given the office number for any questions or concerns. Prognosis is fair and patient is stable.

1. Congestive heart failure with systolic complications, continue current plan.
2. Chronic obstructive pulmonary disease, continue current plan.
3. Diabetes mellitus type 2 with neuropathy, continue current plan.
4. End-stage renal disease, continue current plan.
5. Benign prostatic hyperplasia, continue current plan.
6. Chronic pain syndrome, continue current pain medication.
7. Coronary artery disease, continue current plan.
8. Gastroesophageal reflux disease, continue current plan.
9. Hyperlipidemia, continue current plan.
10. Cerebrovascular effects, continue to monitor.

No medication refills needed this visit.

**Medical Problem:**

Description	Status	Start Date	End Date
Hypertrophy (benign) of prostate without urinary obstruction and other lower urinary tract symptom (LUTS) ( ICD10:N40.0 Enlarged prostate without lower urinary tract symptoms) Unknown or N/A	Active	2015-10-01	
Chronic airway obstruction, not elsewhere classified ( ICD10:J44.9 Chronic obstructive pulmonary disease, unspecified) Unknown or N/A	Active	2015-10-01	
Diabetes mellitus without mention of complication, type II or unspecified type, not stated as uncontrolled ( ICD10:E11.9 Type 2 diabetes mellitus without complications) Unknown or N/A	Active	2015-10-01	

Unspecified essential hypertension ( ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01
Coronary atherosclerosis of native coronary artery ( ICD10:I25.10 Atherosclerotic heart disease of native coronary artery without angina pectoris) Unknown or N/A	Active	2015-10-01
Congestive heart failure, unspecified ( ICD10:I50.9 Heart failure, unspecified) Unknown or N/A	Active	2015-10-01
Gastroesophageal reflux disease ( ICD10:K21.9 Gastro-esophageal reflux disease without esophagitis) Unknown or N/A	Active	2015-10-01
Hyperlipidemia ( ICD10:E78.4 Other hyperlipidemia) ( ICD10:E78.5 Hyperlipidemia, unspecified) Unknown or N/A	Active	2015-10-01
CVA effects ( ICD10:I67.89 Other cerebrovascular disease) Unknown or N/A	Active	2015-10-01
Coronary artery disease ( ICD10:I25.10 Atherosclerotic heart disease of native coronary artery without angina pectoris) Unknown or N/A	Active	2015-10-01

## Allergies:

Description	Status	Start Date	End Date
No known drug allergies Unknown or N/A	Active		

## Surgeries:

Description	Status	Start Date	End Date
Colonoscopy in 2012 Unknown or N/A	Active		
Left arm shunt Unknown or N/A	Active		

## Face to Face HH Plan:

**Patient Home Bound or Can't Drive:** YES

**Is Home Health Care Needed:** YES

**Does Patient have reliable other Primary Care Physician:** NO

**Is House Visit Needed:** YES

**Next Visit Duration (in days):** 31

**Current home health agency:** Bonyl Home healthcare

**Primary Justification Medical Conditions:** COPD,diabetes,Heart\_Failure,HTN,hyperlipidemia,Hyperplasia,Kidney\_Disease

**Additional Medical Conditions:** GERD, CVA effects, and CAD.

**Nursing Required:** YES

**Physical Therapy:** NO

**Occupational Therapy Required:** NO

**Speech-language Pathology Required:** NO

**Requested Care/Treatments Required:**

**Clinical Findings To Justify Home Health:** SN needed due to uncontrollable CHF and inability to self medicate correctly.

**Certification Statement:** Patient is home bound due to uncontrolled CHF and COPD. Attempts to leave home exacerbate patients condition with extreme SOB and uncontrollable coughing.

**Signed by (NP):** 16

**Signed On (NP):** 2016-11-16 02:41

**Signed By (Physician):** 18

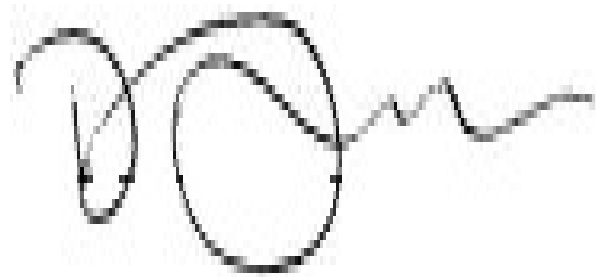
**Signed on (Physician):** 2016-11-23 02:42

**Form\_status:** finalized

## Procedure Order:

Patient ID	3867	Order ID	1178
Patient Name	Rodríguez, Salome	Ordered By	Love-Jones, Derrick
Order Date	2016-12-25	Print Date	2016-12-25
Order Status	complete	Encounter Date	2016-12-25
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2016-12-25		Final ✓		0097	Pulse Oximetry	No	98%	97% to 100%		

A handwritten signature in black ink, appearing to read 'Derrick Love-Jones', with a stylized, flowing script.

Electronically Signed by **Derrick Love-Jones** on **2016-11-23**.

Printed on 25-Dec-2016 16:40:56 pm.