#### Shirley Harrell: Patient Information

Patient Record Number:6144

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

Name: Shirley Harrell External ID: 6144 DOB: 1964-04-24 Sex: Female

Address: 3264 Persimmon Rd,Bldg#8

City: Dallas State: Texas Postal Code: 75241 Country: USA

Home Phone: 214-760-0995 Work Phone: 214-477-4353 Mobile Phone: 214-372-1106 Street Address: 3264 Persimmon Rd

Apt/Suite/Other: 1123

# **Past Medical History:**

Last Recorded On: 12-15-2016.

Risk Factors: Chronic Pain, Dyspnea, Heart Burn, Reflux, GERD, Neuropathy, Pneumonia.

# **Family History:**

Last Recorded On: 12-15-2016.

Father: Father has hypertension and diabetes. .

Mother: Diabetes..

# **Social History:**

Last Recorded On: 12-15-2016. Tobacco: No smoking. Status: Never

Alcohol: No alcohol. Status: Never

Recreational Drugs: No drug abuse. Status: Never

Nutrition History: Regular... Developmental History: Well..

Work Status: Disabled. Pets: None..

# Insurance:

# Molina Healthcare of Texas (Z1161)

**Priority:** Primary Start Date: 2016-02-01

Relationship to Insured: Self

Type: N/A

Payer: Molina Healthcare of Texas (Z1161)

Copay:

Insured ID Number: 503079780

**Group Number:** 

Employer Name: Shirley Harrell

| Immunizations: |  |  |
|----------------|--|--|
|                |  |  |
|                |  |  |
|                |  |  |
|                |  |  |

Shirley Harrell: Chief Complaint Patient Record Number:6144 Texas Physician House Calls (H)

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Seen by Sumana Ketha MD Seen on 23-November-2016

#### Chief Complaint Status: finalized

Follow-up home visit to prevent further decline of the following chronic medical conditions of diabetes 2, hypertension, anxiety, chronic pain, asthma, neuropathy, gastroesophageal reflux disease, heart disease, and vitamin D deficit. Patient complains of coughing x 2 weeks.

# **History of Present illness:**

#### **HPI Status:**Finalized

Patient is a 52-year-old AA female in NAD who presents with multiple chronic conditions of the following: hypertension, diabetes 2, chronic pain, anxiety, neuropathy, asthma, gastroesophageal reflux disease, and vitamin D deficit. Patient also on 2.5 liters of O2 via nasal cannula. Patient states she had double walking pneumonia in 2012 and has never recovered physically. Patient also states she had a non-productive cough on/off for 2-3 weeks. Patient denies any other issues upon examination. Patient denies any chest pain, headache, nausea/vomiting recently. Patient denies any hypoglycemic episodes and a food check revealed no major issues.

#### Vitals:

| Service Date | BPS | BPD | Wt     | Ht    | Temperature | RR    | Note | BMI  | Head circ |
|--------------|-----|-----|--------|-------|-------------|-------|------|------|-----------|
| 2016-11-23   | 157 | 91  | 510.00 | 66.00 | 97.40       | 18.00 | ~    | 82.3 | 0.00      |

# **Review of Systems:**

#### Constitutional:

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# **Physical Exam:**

#### SEEDO:

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#### EXECUMITIES:

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#### ENTEC:

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# NECK:

StatpilityTA/proorregall/ciroltard/lindstatible-obtateattSeptum, JVD, lymphadenopathy-Within Normal Limits.

#### CV:

RRR-Within Normal Limits .

Murmur, Rubs, Gallops-Within Normal Limits .

### **Medication:**

| Description | Status | Start Date | End Date |
|-------------|--------|------------|----------|
|             |        |            |          |

Spiriva HandiHaler ,18 MCG CAPS, INHALE CONTENTS OF 1 CAPSULE ONCE DAILY, Quantity: 30, Refill Quantity: 2 Unknown or N/A Active 2016-11-28 by Jones, Derrick - MJ3217331 Texas Physician House Calls Gabapentin, 300 MG CAPS, TAKE 1 CAPSULE TWICE DAILY, Quantity: 60, Refill Quantity: 0 Active 2016-10-31 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls Nifedical XL ,60 MG TB24, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 0 Unknown or N/A Active 2016-10-31 by Jones, Derrick - MJ3217331 Texas Physician House Calls Advocate Insulin Pen Needles ,29G X 12.7MM MISC, USE AS DIRECTED, Quantity: 200, Refill Quantity: 3 Active 2016-10-19 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls Omeprazole, 40 MG CPDR, TAKE 1 CAPSULE DAILY, Quantity: 30, Refill Quantity: 2 Active 2016-10-19 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls MetFORMIN HCI ,500 MG TABS, TAKE 1 TABLET TWICE DAILY WITH MEALS, Quantity: 60, Refill Quantity: 0 Active 2016-09-15 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls ProAir HFA ,108 (90 Base) MCG/ACT AERS, INHALE 1 TO 2 PUFFS EVERY 4 TO 6 HOURS AS NEEDED, Quantity: 8.5, Refill Quantity: 0 Unknown or N/A Active 2016-09-08 by Jones, Derrick - MJ3217331 Texas Physician House Calls Patanol, 0.1 % SOLN, USE 1 DROP IN EACH EYE TWICE DAILY AS DIRECTED h4/16, Quantity: 1, Refill Quantity: 3 Active 2016-09-08 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls ProAir HFA ,108 (90 Base) MCG/ACT AERS, INHALE 1 TO 2 PUFFS EVERY 4 TO 6 HOURS AS NEEDED, Quantity: 8.5, Refill Quantity: 0 Unknown or N/A Active 2016-07-27 by Jones, Derrick - MJ3217331 Texas Physician House Calls Blood Glucose Monitor System ,w/Device KIT, USE AS DIRECTED, Quantity: 1, Refill Quantity: 0 Unknown or N/A Active 2016-06-29 by ketha, Dr sumana - BK6230281 Texas Physician House Calls

#### Plan Note:

#### Plan Note Status: Finalized

Continue same treatment plan as previous. Reviewed and continue same medications, no new medications noted this visit. Medication adherence education was given to the patient and the patient educated on the benefits of low 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, excessive headache, blurry vision or systolic blood pressure greater than 200. Patient encouraged to exercise daily as tolerated and not sit in her wheelchair all day. No labs needed this visit. Reviewed current labs with patient. The patient verbalize understanding of the above plan and was given the office number for any questions or concerns. Prognosis is fair and patient is stable. Reviewed old records of the patient. Follow up appointment in 4-6 weeks.

HTN w/vascular continue current plan
GERD continue current plan
Anxiety continue current plan
Neuropathy continue current plan
COPD/Asthma continue current plan
DM2 w/neuropathy continue current plan
Chronic Pain Syndrome continue current pain medication
Heart Dz continue current plan

Vit D Deficiency continue current plan PVD continue current plan Morbid Obesity continue current plan

Medication refills as follows: Pro-Air INH Pantonol Opth Xanax 0.5 mg b.i.d. Norco 10/325 mg t.i.d. Omeprazole 40 mg q.h.s. 1/2 cc 29 g needles.

# **Medical Problem:**

| Description  | Status | Start Date | End Date  |
|--|--------|------------|-----------|
| Chronic sinusitis, unspecified   | Otatus | Otari Date | Life Date |
| ( ICD10:J32.9 Chronic sinusitis, unspecified) Unknown or N/A   | Active | 2016-10-18 |           |
|  |        |            |           |
| Type 2 diabetes mellitus with hyperglycemia ( ICD10:E11.65 Type 2 diabetes mellitus with hyperglycemia) Unknown or N/A | Active | 2016-09-08 |           |
| Chronic systolic (congestive) heart failure  |        |            |           |
| ( ICD10:I50.22 Chronic systolic (congestive) heart failure) Unknown or N/A   | Active | 2016-09-06 |           |
| Primary generalized (osteo)arthritis   |        |            |           |
| ( ICD10:M15.0 Primary generalized (osteo)arthritis)  | Active | 2016-08-02 |           |
| Unknown or N/A   |        |            |           |
| Polyosteoarthritis, unspecified  |        |            |           |
| ( ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A  | Active | 2016-08-02 |           |
| Other chronic pain   |        |            |           |
| ( ICD10:G89.29 Other chronic pain) Unknown or N/A  | Active | 2016-08-02 |           |
| Chronic venous hypertension (idiopathic) without complications of unspecified lower extremity                          |        |            |           |
| ( ICD10:l87.309 Chronic venous hypertension (idiopathic) without complications of unspecified lower extremity)         | Active | 2016-08-02 |           |
| Unknown or N/A   |        |            |           |
| Chronic pain syndrome  |        |            |           |
| (ICD10:G89.4 Chronic pain syndrome)  | Active | 2016-08-02 |           |
| Unknown or N/A   |        |            |           |
| Mononeuropathy, unspecified  | Active | 2016-05-25 |           |
| ( ICD10:G58.9 Mononeuropathy, unspecified) Unknown or N/A  | Active | 2010-03-23 |           |
|  |        |            |           |
| Unspecified asthma with (acute) exacerbation (ICD10:J45.901 Unspecified asthma with (acute) exacerbation)              | Active | 2016-05-11 |           |
| Unknown or N/A   |        |            |           |
| Hypertensive heart disease with heart failure  |        |            |           |
| ( ICD10:I11.0 Hypertensive heart disease with heart failure)   | Active | 2016-05-11 |           |
| Unknown or N/A   |        |            |           |
| Chronic obstructive pulmonary disease, unspecified   |        |            |           |
| ( ICD10:J44.9 Chronic obstructive pulmonary disease, unspecified)  | Active | 2016-05-11 |           |
| Unknown or N/A   |        |            |           |
| Shortness of breath  |        |            |           |
| (ICD10:R06.02 Shortness of breath)   | Active | 2016-05-11 |           |
| Unknown or N/A   |        |            |           |
| Acute on chronic combined systolic (congestive) and diastolic  |        |            |           |
| (congestive) heart failure (ICD10:150.43 Acute on chronic combined systolic (congestive) and diastolic (congestive)    | Active | 2016-05-11 |           |
| heart failure)   |        |            |           |
| Unknown or N/A   |        |            |           |
| Type 2 diabetes mellitus without complications   |        |            |           |
| (ICD10:E11.9 Type 2 diabetes mellitus without complications)   | Active | 2016-04-11 |           |
| Unknown or N/A   |        |            |           |
| Anxiety disorder, unspecified  | Activo | 2016 04 11 |           |
| ( ICD10:F41.9 Anxiety disorder, unspecified) Unknown or N/A  | Active | 2016-04-11 |           |
| OTIVIOWITOLIN/A  |        |            |           |

| Unspecified asthma, uncomplicated (ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A                                      | Active | 2016-04-11 |
|---|--------|------------|
| Morbid (severe) obesity due to excess calories (ICD10:E66.01 Morbid (severe) obesity due to excess calories) Unknown or N/A             | Active | 2016-04-11 |
| Other disorders of peripheral nervous system (ICD10:G64 Other disorders of peripheral nervous system) Unknown or N/A                    | Active | 2016-04-11 |
| Benign essential hypertension<br>(ICD10:I10 Essential (primary) hypertension)<br>Unknown or N/A   | Active | 2016-04-11 |
| Gastro-esophageal reflux disease without esophagitis ( ICD10:K21.9 Gastro-esophageal reflux disease without esophagitis) Unknown or N/A | Active | 2016-04-11 |

# **Allergies:**

| Description              | Status  | Start Date | End Date |  |
|--------------------------|---------|------------|----------|--|
| No known drug allergies. | Active  |            |          |  |
| Unknown or N/A           | 7101170 |            |          |  |

#### **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: NO Next Visit Duration (in days): 31

Current home health agency: Calvary Healthcare Inc

Primary Justification Medical Conditions: Asthma, COPD, Depression, diabetes, HTN, Heart\_Disease, Mobility\_Impairments

Nursing Required: YES Physical Therapy: NO

Occupational Therapy Required: NO Speech-language Pathology Required: NO

Clinical Findings To Justify Home Health: Skilled nursing needed due to asthma and mobility impairment.

Certification Statement: Patient is home bound due to asthma and mobility impairment. Patient experience shortness of breath

with ambulation and is weak with poor balance which places patient at risk for fall.

Signed by (NP): 16

**Signed On (NP):** 2016-11-23 04:03 **Signed By (Physician):** 18

Signed on (Physician): 2016-11-30 04:03

Form\_status: finalized

#### DME:

| Description   | Status | Start Date | End Date |
|---|--------|------------|----------|
| Full face mask, Sleep Tubing, Ileadgeaer, Sleep Full Face Cushion |        |            |          |
| ( ICD10:G47.33 Obstructive sleep apnea (adult) (pediatric))       | Active | 2016-10-07 |          |
| Unknown or N/A  |        |            |          |

# **Procedure Order:**

| Patient ID   | 6144             | Order ID       | 1247                |
|--------------|------------------|----------------|---------------------|
| Patient Name | Harrell, Shirley | Ordered By     | Love-Jones, Derrick |
| Order Date   | 2016-12-16       | Print Date     | 2016-12-16          |
| Order Status | complete         | Encounter Date | 2016-12-16          |
| Lab          | .HH Agency       | Specimen Type> |                     |

| Ordered Procedure   | Report   |          |        | Results |      |      |     |       |       |       |      |
|---------------------|----------|----------|--------|---------|------|------|-----|-------|-------|-------|------|
|                     | Reported | Specimen | Status | Note    | Code | Name | Abn | Value | Range | Units | Note |
| 026: Pulse Oximetry |          |          |        |         |      |      |     |       |       |       |      |

Printed on 16-Dec-2016 21:24:44 pm.