

Lanell Hunger: Patient Information
Patient Record Number:2534

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

Name: Lanell Hunger
External ID: 2534
DOB: 1945-01-04
Sex: Female
S.S.: 449-90-9823
Marital Status: Widowed
User Defined: 214-722-5729
Patient Drive Folder: <https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B0Q2MIHiECb5ZEhmaFRCQ1BHVmc>

Address: 3494 Kingbridge St
City: Dallas
State: Texas
Postal Code: 75212
Country: USA
Emergency Phone: 972-237-1943
Work Phone: 972-237-1905
Mobile Phone: 496-206-0640
Street Address: 3494 Kingbridge St
Apt/Suite/Other: 212

Past Medical History:

Last Recorded On: 10-06-2016.
Risk Factors: Incontinence,Urinary Tract Infections.
Additional Medical History: diarrhea.

Primary Family Med Conditions:

Last Recorded On: 10-06-2016.
Chronic Conditions: Diabetes,Hypertension.

Social History:

Last Recorded On: 10-06-2016.
Tobacco: Current every day smoker 1/2 PPD smoking **Status:** Current
Alcohol: **Status:** Never
Recreational Drugs: **Status:** Never
Nutrition History: ADA 1800 cal..
Developmental History: Good..

Tests and Exams:

Last Recorded On: 10-06-2016.
Vitamin D (6 mo if on pills) Abnormal Done on 08/20/2014, at MetroStat, Ordered by Dr. Sumana Ketha
HbA, C Hemoglobin (if DM every 3 mo) Abnormal Done on 08/20/2014, at MetroStat, Ordered by Dr. Sumana Ketha
TSH Thyroid-Stimulating Hormone (every year) Normal Done on 08/20/2014, at MetroStat, Ordered by Dr. Sumana Ketha
CBC Complete Blood Count (3 months) Abnormal Done on 08/20/2014, at MetroStat, Ordered by Dr. Sumana Ketha

CMP Comprehensive Metabolic Panel (3 months) Abnormal Done on 08/20/2014, at MetroStat,
Ordered by Dr. Sumana Ketha
UA - Urinalysis - (Yearly - HH primary responsibility) Abnormal Done on 09/11/2014, at LabCorp,
Ordered by Dr. Sumana Ketha
Urine Culture (prn) Abnormal Done on 09/11/2014, at LabCorp, Ordered by Dr. Sumana Ketha
Mammogram (>40yrs, Yearly) N/A 2014
PAP Smear N/A 2014
Ultrasound Normal On 03/27/2015, bilateral lower extremity venous Doppler ultrasound was normal.

Insurance:

Medicare B Texas (SMTX0)

Priority : Primary
Start Date : 1994-04-01
Relationship to Insured : Self
Type : N/A
Payer : Medicare B Texas (SMTX0)
Priority : Secondary
Start Date : 2010-01-01
Relationship to Insured : Self
Type : N/A
Payer : Molina Healthcare of Texas (Z1161)
Priority : Secondary
Start Date : 2014-11-01
Relationship to Insured : Self
Type : N/A
Payer : Molina Healthcare of Texas (Z1161)

Copay :
Insured ID Number : 449909823A
Group Number :
Employer Name : Lanell Hunger
Copay :
Insured ID Number : 500323836
Group Number :
Employer Name : Lanell Hunger
Copay :
Insured ID Number : 500323836
Group Number :
Employer Name : Lanell Hunger

Immunizations:

CPO:

Provider Id:Perkins Darolyn



Electronically Signed by **Darolyn Perkins** on **2016-05-06 at 10:20**.

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