Herman Dawson: Patient Information

Patient Record Number:5875

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: Herman Q Dawson External ID: 5875 DOB: 1956-10-27

Sex: Male

User Defined: 214-643-2911 genericval1: 2146038727 genericname2: 214-603-3727 genericval2: 214-531-5132

Address: 1100 River Bend Dr

City: Lancaster State: Texas Postal Code: 75146 Country: USA

Guardian's Name: 972-296-0345 **Emergency Phone:** 214-718-0328 Home Phone: 972-217-0222 Work Phone: 972-572-8509 Mobile Phone: 214-643-2911 Street Address: 1100 River Bend Dr

Apt/Suite/Other: APT#10

Past Medical History:

Last Recorded On: 11-23-2016.

Risk Factors: Chronic Pain, Degenerative Joint Disease, GERD, Neuropathy.

Additional Medical History: Obesity..

Family History:

Last Recorded On: 11-23-2016.

Father: Hypertension and myocardial infarction..

Mother: Alzheimer's dementia..

Primary Family Med Conditions:

Last Recorded On: 11-23-2016.

Chronic Conditions: Acute Myocardial Infarction, Hypertension.

Social History:

Last Recorded On: 11-23-2016.

Tobacco: Current every day smoker Smokes 1/3 ppd Status: Current

Alcohol: No alcohol. Status: Never

Recreational Drugs: No drug abuse. Status: Never

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

Tests and Exams:

Last Recorded On: 11-23-2016.

Insurance:

Medicare B Texas (SMTX0)

Priority: Primary Start Date: 2001-10-01 Relationship to Insured : Self

Type: N/A

Payer: Medicare B Texas (SMTX0)

Priority: Secondary
Start Date: 2015-04-23 Relationship to Insured : Self

Type: N/A

Payer: Molina Healthcare of Texas (Z1161)

Copay : Insured ID Number : 433988360A Group Number :

Employer Name : Herman Dawson

Copay: Insured ID Number: 500000024302

Group Number:

Employer Name : Herman Dawson

Immunizations:

Herman Dawson: Chief Complaint

Patient Record Number:5875

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Seen by Derrick Love-Jones Seen on 21-September-2016

Chief Complaint Status: finalized

Follow up home visit for management of hyperlipidemia, anxiety, hypertension, paraplegia, neuropathy, and chronic pain. Patient needs refills on medications. Patient complains of pain lower back.

History of Present illness:

HPI Status:Finalized

A 60-year-old AA male in NAD with multiple chronic conditions of hyperlipidemia, anxiety, hypertension, paraplegia, neuropathy, and chronic pain. Patient denies any CP, HA, or N/V recently. Patient continues to have pain in back and rates his current pain at 7/10, which is relieved with current pain medication. Patient denies any other issues at hand examination. Patient denies any chest pain, headache, nausea/vomiting recently.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	ВМІ	Head circ
2016-09-21	137	88	248.00	69.00	98.20	16.00	~	0.0	0.00

Review of Systems:

Constitutional:

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No Biritan ess

No Blimb@ptRhpgb#@@Motion YES

Mita Chiante Mars Start Is in e

No Hajouanyseness

No Hae Of Dentures

No Coryza

No Obstruction

Physical Exam:

- (C)

EXTERITIES:

SECONDARY (SECONDARY SECONDARY SECO

CV:

REVERSION NOTION IN THE PROPERTY OF THE PROPER

RESP:

Lungs CTAB-Within Normal Limits .

Lungs Clear, Rales, Rhonchi, Wheezes-Within Normal Limits .

Medication:

Description	Status Start Date	End Date

TraZODana HCI 100 MC TARS 1 TARS DO OHS Quantity 20 Refill		
TraZODone HCI ,100 MG TABS, 1 TABS PO QHS, Quantity: 30, Refill Quantity: 0		
Unknown or N/A	Active	2016-09-25
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
Xanax ,0.5 MG TABS, Take One Tablet By Mouth Twice Daily, Quantity: 60, Refill Quantity: 0		
Unknown or N/A	Active	2016-07-22
by ketha, Dr sumana - BK6230281		
Texas Physician House Calls		
Amoxicillin ,500 MG CAPS, TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY UNTIL GONE, Quantity: 90, Refill Quantity: 1		
Unknown or N/A	Active	2016-07-07
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Butalbital-APAP-Caffeine ,50-325-40 MG TABS, TAKE 1 TABLET BY MOUTH EVERY 6 HOURS AS NEEDED, Quantity: 120, Refill Quantity: 0		
Unknown or N/A	Active	2016-06-21
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Esomeprazole Magnesium ,20 MG CPDR, TAKE 1 CAPSULE DAILY, Quantity: 30, Refill Quantity: 3	Author	2044.00.47
Unknown or N/A by ketha, Dr sumana - BK6230281	Active	2016-06-17
DFW Primary Care PLLC		
Lisinopril-Hydrochlorothiazide ,20-25 MG TABS, once a day, Quantity:		
30, Refill Quantity: 3	Antimo	2046-06-47
Unknown or N/A by ketha, Dr sumana - BK6230281	Active	2016-06-17
DFW Primary Care PLLC		
Lisinopril-Hydrochlorothiazide ,20-25 MG TABS, once a day, Quantity:		
30, Refill Quantity: 0		
Unknown or N/A	Active	2016-03-23
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
Hydrocodone-Acetaminophen ,10-325 MG TABS, TAKE 1 TABLET 4 TIMES DAILY AS NEEDED FOR PAIN, Quantity: 120, Refill Quantity: 0		
Unknown or N/A	Active	2016-03-21
by ketha, Dr sumana - BK6230281 Texas Physician House Calls		
Amoxicillin ,500 MG CAPS, Take 1 tab po TID until finished, Quantity: 90, Refill Quantity: 0		
Unknown or N/A	Active	2016-03-17
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Ferrous Sulfate ,325 (65 Fe) MG TABS, TAKE 1 TABLET DAILY AS DIRECTED, Quantity: 90, Refill Quantity: 0		
Unknown or N/A	Active	2016-03-17
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Montelukast Sodium ,10 MG TABS, TAKE 1 TABLET AT BEDTIME, Quantity: 30, Refill Quantity: 0		
Unknown or N/A	Active	2016-03-17
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Amoxicillin ,500 MG CAPS, Take 1 tab po TID until finished, Quantity: 90, Refill Quantity: 0 Unknown or N/A	Active	2016-02-19
by Jones, Derrick - MJ3217331	, 10070	2010 02 10
Texas Physician House Calls		
Gabapentin ,400 MG CAPS, TAKE 1 CAPSULE 3 TIMES DAILY AFTER MEALS, Quantity: 90, Refill Quantity: 0		
Unknown or N/A	Active	2016-02-19
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
Lisinopril-Hydrochlorothiazide ,20-25 MG TABS, once a day, Quantity: 30, Refill Quantity: 0		
Unknown or N/A	Active	2016-02-19
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		

I		
Montelukast Sodium ,10 MG TABS, TAKE 1 TABLET AT BEDTIME, Quantity: 30, Refill Quantity: 0		
Unknown or N/A	Active	2016-02-19
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Esomeprazole Magnesium ,20 MG CPDR, TAKE 1 CAPSULE DAILY, Quantity: 30, Refill Quantity: 2		
Unknown or N/A	Active	2016-02-19
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
Amoxicillin ,500 MG CAPS, Take 1 tab po TID until finished, Quantity:		
21, Refill Quantity: 0 Unknown or N/A	Active	2015-05-21
by ketha, Dr sumana - BK6230281		
Sumana Ketha MDPA		
Claritin-D 24 Hour ,10-240 MG TB24, TAKE 1 TABLET DAILY AS DIRECTED, Quantity: 30, Refill Quantity: 0		
Unknown or N/A	Active	2015-05-21
by ketha, Dr sumana - BK6230281		
Sumana Ketha MDPA		
NexIUM ,40 MG CPDR, TAKE 1 CAPSULE DAILY, Quantity: 30, Refill Quantity: 3		
Unknown or N/A	Active	2015-05-21
by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA		
Xanax ,1 MG TABS, TAKE 1 TABLET BY MOUTH TWICE A DAY,		
Quantity: 60, Refill Quantity: 0		
Unknown or N/A	Active	2015-05-21
by ketha, Dr sumana - BK6230281		
Sumana Ketha MDPA		
Norco ,10-325 MG TABS, Take 1 tab TID, Quantity: 90, Refill Quantity: 0		
Unknown or N/A	Active	2015-05-01
by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA		
Colace ,100 MG CAPS, TAKE 1 CAPSULE TWICE DAILY, Quantity: 60, Refill Quantity: 3		
Unknown or N/A	Active	2015-04-29
by ketha, Dr sumana - BK6230281		
Sumana Ketha MDPA		
Escitalopram Oxalate ,20 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 0		
Unknown or N/A	Active	2015-04-29
by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA		
Gabapentin ,300 MG CAPS, TAKE 1 CAPSULE TWICE DAILY,		
Quantity: 60, Refill Quantity: 3 Unknown or N/A	Active	2015-04-29
by ketha, Dr sumana - BK6230281		
Sumana Ketha MDPA		
Klor-Con 10 ,10 MEQ TBCR, TAKE 1 TABLET DAILY WITH FOOD, Quantity: 30, Refill Quantity: 2		
Unknown or N/A	Active	2015-04-29
by ketha, Dr sumana - BK6230281		
Sumana Ketha MDPA		
Lisinopril ,10 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 3		
Unknown or N/A	Active	2015-04-29
by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA		
Metoprolol Tartrate ,50 MG TABS, TAKE 1 TABLET TWICE DAILY FOR		
BLOOD PRESSURE, Quantity: 60, Refill Quantity: 3 Unknown or N/A	Active	2015-04-29
by ketha, Dr sumana - BK6230281	50.00	
Sumana Ketha MDPA		
Naproxen ,500 MG TABS, TAKE 1 TABLET TWICE DAILY AS		
NEEDED, Quantity: 60, Refill Quantity: 1		
Unknown or N/A	Active	2015-04-29
by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA		
** *		

Nitrostat, 0.4 MG SUBL, PLACE 1 TABLET UNDER THE TONGUE EVERY 5 MINUTES UP TO 3 DOSES AS NEEDED FOR CHEST PAIN, Quantity: 30, Refill Quantity: 0 Active 2015-04-29 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA Tamsulosin HCI, 0.4 MG CAPS, 1 TAB PO QHS, Quantity: 30, Refill Quantity: 3 Active 2015-04-29 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA TraZODone HCI, 100 MG TABS, 2 TABS PO QHS, Quantity: 30, Refill Quantity: 0 Active 2015-04-29 Unknown or N/A by ketha. Dr sumana - BK6230281 Sumana Ketha MDPA Zocor ,40 MG TABS, TAKE 1 TABLET DAILY AT BEDTIME, Quantity: 30, Refill Quantity: 3 Active 2015-04-29 Unknown or N/A by ketha. Dr sumana - BK6230281 Sumana Ketha MDPA

Plan Note:

Plan Note Status: Finalized

Continue same treatment plan as previous. Reviewed and continue with current medication. Medication adherence education was given to the patient. Patient was educated on benefits of low salt, low fat, low cholesterol diet with current medical issues. Patient was instructed to go to the emergency room for symptoms of chest pain, shortness of breath, headache, blurred vision or systolic blood pressure over 200. No labs needed this visit. The patient verbalized understanding of the above plan, and was given the office number to call for any questions or concern. Discussed the treatment plan with the patient. Prognosis is fair and patient is stable. Reviewed old records of the patient. Follow up appointment in 4-6 weeks.

- 1. Lumbago with chronic pain, continue current plan.
- 2. Anxiety, continue current plan.
- 3. Benign prostatic hyperplasia, continue current plan.
- 4. Depression, continue current plan.
- 5. Diabetes mellitus type 2 with neuropathy, continue current plan.
- 6. Hyperlipidemia, continue current plan.
- 7. Hypertension with vascular complications, continue current plan.
- 8. Chronic pain syndrome, continue current pain medication.
- 9. Hemiplegia, continue current plan.
- 10. Atrial fibrillation, continue current plan.
- 11. Coronary artery disease, continue current plan.
- 12. Obesity, continue to educate and monitor.

Medication Refill as following:

Norco 10/325 mg t.i.d. Alprozolam 1 mg b.i.d. Monconest 10 mg q.d. Amoxicillin 500 mg t.i.d. Omega 3 q.d. Lisinopril 20 mg q.d.

Medical Problem:

Description	Status	Start Date	End Date
Chronic pain syndrome			
(ICD10:G89.4 Chronic pain syndrome)	Active	2016-08-19	
Unknown or N/A			
Hemiplegia and hemiparesis following cerebral infarction affecting unspecified side			
(ICD10:169.359 Hemiplegia and hemiparesis following cerebral infarction affecting unspecified side)	Active	2016-06-07	
Unknown or N/A			
Enlarged prostate without lower urinary tract symptoms			
(ICD10:N40.0 Enlarged prostate without lower urinary tract symptoms)	Active	2016-06-07	
Unknown or N/A			

Enlarged prostate with lower urinary tract symptoms (ICD10:N40.1 Enlarged prostate with lower urinary tract symptoms) Unknown or N/A	Active	2016-02-18
Unspecified atrial fibrillation (ICD10:I48.91 Unspecified atrial fibrillation) Unknown or N/A	Active	2016-02-18
Type 2 diabetes mellitus without complications (ICD10:E11.9 Type 2 diabetes mellitus without complications) Unknown or N/A	Active	2016-01-14
Other disorders of peripheral nervous system (ICD10:G64 Other disorders of peripheral nervous system) Unknown or N/A	Active	2016-01-14
Chronic ischemic heart disease, unspecified (ICD10:l25.9 Chronic ischemic heart disease, unspecified) Unknown or N/A	Active	2015-10-01
Benign essential hypertension (ICD10:l10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01
Depressive disorder, not elsewhere classified (ICD10:F32.9 Major depressive disorder, single episode, unspecified) Unknown or N/A	Active	2015-10-01
Obesity, unspecified (ICD10:E66.9 Obesity, unspecified) Unknown or N/A	Active	2015-10-01
Tobacco use disorder (ICD10:F17.200 Nicotine dependence, unspecified, uncomplicated) Unknown or N/A	Active	2015-10-01
Diabetes with neurological manifestations, type II or unspecified type, not stated as uncontrolled (ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2015-10-01
Reflex sympathetic dystrophy, unspecified (ICD10:G90.50 Complex regional pain syndrome I, unspecified) Unknown or N/A	Active	2015-10-01
Tachycardia, unspecified (ICD10:R00.0 Tachycardia, unspecified) Unknown or N/A	Active	2015-10-01
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2015-10-01
Anxiety state, unspecified (ICD10:F41.9 Anxiety disorder, unspecified) Unknown or N/A	Active	2015-10-01
Other and unspecified hyperlipidemia (ICD10:E78.4 Other hyperlipidemia) (ICD10:E78.5 Hyperlipidemia, unspecified) Unknown or N/A	Active	2015-10-01
Lumbago (ICD10:M54.5 Low back pain) Unknown or N/A	Active	2015-10-01
Paraplegia (ICD9:344.1 Paraplegia) Unknown or N/A	Active	

Allergies:

Desc	ription	Status	Start Date	End Date
Morphine		Author		
Unknown or N/A		Active		
Trazodone		Anthun		
Unknown or N/A		Active		

Surgeries:

Description	Status	Start Date	End Date	

Left shoulder surgery Unknown or N/A	Active
Left hip surgery x2 Unknown or N/A	Active
Appendectomy Unknown or N/A	Active

Face to Face HH Plan:

Patient Home Bound or Can't Drive: YES

Is Home Health Care Needed: NO

Does Patient have reliable other Primary Care Physician: NO

Is House Visit Needed: YES Next Visit Duration (in days): 31 Current home health agency:

Primary Justification Medical Conditions:

Additional Medical Conditions:

Nursing Required: NO Physical Therapy: NO

Occupational Therapy Required: NO Speech-language Pathology Required: NO Requested Care/Treatments Required:

Clinical Findings To Justify Home Health: No SN needed in this visit.

Certification Statement: Signed by (NP): 16

Signed On (NP): 2016-09-21 10:40 **Signed By (Physician):** 18

Signed on (Physician): 2016-09-27 10:41

Form_status: finalized

DME:

Description	Status	Start Date	End Date
Toilet Seat, Raised			
Unknown or N/A	Active	2014-06-09	
2014-06-09 by Dr. Sumana Ketha			
Toilet Safety Frame/MIdline	,		
Unknown or N/A	Active	2014-06-09	
2014-06-09 by Dr. Sumana Ketha			
Transfer Bench/Adjustable Back	·		
Unknown or N/A	Active	2014-06-09	
2014-06-09 by Dr. Sumana Ketha			

Procedure Order:

Patient ID	5875	Order ID	1017
Patient Name	Dawson, Herman Q	Ordered By	Love-Jones, Derrick
Order Date	2016-11-24	Print Date	2016-11-24
Order Status	complete	Encounter Date	2016-11-24
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2016-11-24		Final ✓		0097	Pulse Oximetry	No	97%	97% to 100%		



Electronically Signed by **Derrick Love-Jones** on **2016-09-28**.

Printed on 24-Nov-2016 15:38:28 pm.