

Josefina Ruiz: Patient Information
Patient Record Number:6090

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: Josefina Ruiz
External ID: 6090
DOB: 1930-05-02
Sex: Female
S.S.: 464900835
Patient Drive Folder: 0B0x_tbqdBDPhRklwdIMya0xPT3M

Address: 2421 S Carrier Pkwy
City: Grand Prairie
State: Texas
Postal Code: 75051
Country: USA
Emergency Contact: Daughter In Law
Emergency Phone: 682-667-3023
Mobile Phone: 469-233-8533
Street Address: 2421 S Carrier Pkwy
Apt/Suite/Other: 1111

Family History:

Last Recorded On: 02-03-2017.
Father: Unknown..
Mother: Unknown..
Siblings: Unknown..

Social History:

Last Recorded On: 02-03-2017.
Tobacco: No smoking **Status:** Never
Alcohol: No alcohol. **Status:** Never
Recreational Drugs: No drug abuse. **Status:** Never
Nutrition History: Regular..
Developmental History: Well..

Insurance:

Medicare B Texas (SMTX0)

Priority : Primary
Start Date : 1995-05-01
Relationship to Insured : Self
Type : N/A
Payer : Medicare B Texas (SMTX0)
Priority : Secondary
Start Date : 2016-01-01
Relationship to Insured : Self
Type : N/A
Payer : Medicaid Texas (SKTX0)

Copay :
Insured ID Number : 464900835D
Group Number :
Employer Name : Josefina Ruiz
Copay :
Insured ID Number : 504603480
Group Number :
Employer Name : Josefina Ruiz

Immunizations:

Josefina Ruiz: Chief Complaint
Patient Record Number:6090

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Seen by Darolyn Perkins
Seen on 28-December-2016

Chief Complaint Status:finalized

Followup home visit for the management of chronic conditions of chronic kidney disease, diabetes, osteoarthritis, anxiety, hypertension, and chronic pain.

History of Present illness:

HPI Status:Finalized

Patient is an 86-year-old Hispanic female in no acute distress with multiple chronic conditions. Patient denies any new issues upon examination. She does complain of pain in both knees, 6/10 on pain scale. Patient denies any issues with her feet or hypoglycemic episodes. She also denies chest pain, headaches or nausea/vomiting.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-12-28	145	79	156.00	51.00	98.20	18.00	~	42.2	0.00

Review of Systems:

Constitutional:

Weight Loss:

No Weight Loss
No Fatigue
No Fever
No Chills
No Night Sweats
No Anorexia
No Nausea
No Vomiting
No Diarrhea
No Constipation
No Hemorrhoids
No Nosebleed

Physical Exam:

EXAMINATIONS:

HEENT: Eyes-Reddened, No Discharge, No Pain, No Swelling, No Ptosis, No Exophthalmos, No Conjunctivitis, No Corneal Abnormalities, No Retinal Abnormalities, No Optic Nerve Abnormalities, No Ear Abnormalities, No Hearing Abnormalities, No Throat Abnormalities, No Tonsillitis, No Enlarged Tonsils, No Adenopathy-Within Normal Limits .

ENT:

ENT: No Abnormalities, No Discharge, No Pain, No Swelling, No Ptosis, No Exophthalmos, No Conjunctivitis, No Corneal Abnormalities, No Retinal Abnormalities, No Optic Nerve Abnormalities, No Ear Abnormalities, No Hearing Abnormalities, No Throat Abnormalities, No Tonsillitis, No Enlarged Tonsils, No Adenopathy-Within Normal Limits .

ENT: No Abnormalities, No Discharge, No Pain, No Swelling, No Ptosis, No Exophthalmos, No Conjunctivitis, No Corneal Abnormalities, No Retinal Abnormalities, No Optic Nerve Abnormalities, No Ear Abnormalities, No Hearing Abnormalities, No Throat Abnormalities, No Tonsillitis, No Enlarged Tonsils, No Adenopathy-Within Normal Limits .

Medication:

Description	Status	Start Date	End Date
Carvedilol ,3.125 MG TABS, Take one tablet a day, Quantity: 30, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-12-28	
GlipiZIDE ,5 MG TABS, TAKE 1 TABLET TWICE DAILY, WITH MORNING AND EVENING MEAL, Quantity: 60, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-12-28	
Pravastatin Sodium ,20 MG TABS, TAKE 1 TABLET AT BEDTIME, Quantity: 30, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-12-28	

Sodium Bicarbonate ,650 MG TABS, TAKE 1 TABLET BY MOUTH TWICE dAILY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-12-28
Alendronate Sodium ,70 MG TABS, TAKE 1 TABLET ONCE WEEKLY, Quantity: 30, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 DFW Primary Care PLLC	Active	2016-11-17
Pravastatin Sodium ,20 MG TABS, TAKE 1 TABLET AT BEDTIME, Quantity: 30, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 DFW Primary Care PLLC	Active	2016-11-17
Sodium Bicarbonate ,650 MG TABS, TAKE 1 TABLET BY MOUTH TWICE dAILY, Quantity: 30, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-10-06
Sodium Bicarbonate ,650 MG TABS, TAKE 1 TABLET BY MOUTH TWICE dAILY, Quantity: 180, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-06-29
Amlodipine Besy-Benazepril HCl ,10-40 MG CAPS, TAKE 1 CAPSULE DAILY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 DFW Primary Care PLLC	Active	2016-06-06
GlipiZIDE ,5 MG TABS, TAKE 1 TABLET TWICE DAILY, WITH MORNING AND EVENING MEAL, Quantity: 60, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-05-19
TraMADol HCl ,50 MG TABS, TAKE ONE TABLET BY MOUTH TWICE DAILY AS NEEDED FOR PAIN, Quantity: 60, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-04-15
Zolpidem Tartrate ,10 MG TABS, TAKE ONE TABLET BY MOUTH ONCE DAILY AT BEDTIME, Quantity: 30, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-04-15
Amlodipine Besy-Benazepril HCl ,10-40 MG CAPS, TAKE 1 CAPSULE DAILY, Quantity: 30, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-03-21
Carvedilol ,3.125 MG TABS, Take one tablet a day, Quantity: 30, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-03-21
Alendronate Sodium ,70 MG TABS, TAKE 1 TABLET ONCE WEEKLY, Quantity: 30, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Sumana Ketha MDPA	Active	2016-03-04
Pantoprazole Sodium ,40 MG TBEC, TAKE ONE TABLET BY MOUTH ONCE DAILY, Quantity: 90, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Sumana Ketha MDPA	Active	2016-03-04
TraMADol HCl ,50 MG TABS, TAKE 1 TABLET TWICE DAILY AS NEEDED FOR PAIN, Quantity: 60, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-03-04

Zolpidem Tartrate ,10 MG TABS, TAKE 1 TABLET DAILY AT
 BEDTIME, Quantity: 30, Refill Quantity: 0
 Unknown or N/A
 by ketha, Dr sumana - BK6230281
 Texas Physician House Calls

Active

2016-03-04

Plan Note:

Plan Note Status:Finalized

Continue same treatment plan as with 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 little 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. No labs need it this visit. The patient verbalize understanding of the above planet was given the office number for any questions or concerns. Prognosis is fair and patient is stable.

1. Chronic kidney disease, continue current treatment.
 2. Osteoarthritis, continue current plan.
 3. Diabetes mellitus type 2, continue current plan.
 4. Hypertension, continue current plan.
 5. Anxiety continue current plan.
 6. Chronic pain, continue current plan.
- Medication refill is tramadol 50 mg.
 Ambien 5 mg.

Medical Problem:

Description	Status	Start Date	End Date
Traumatic arthropathy, right ankle and foot (ICD10:M12.571 Traumatic arthropathy, right ankle and foot) Unknown or N/A	Active	2016-07-13	
Type 2 diabetes mellitus with diabetic neuropathy, unspecified (ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2016-07-06	
Bilateral primary osteoarthritis of knee (ICD10:M17.0 Bilateral primary osteoarthritis of knee) Unknown or N/A	Active	2016-05-14	
Hypertensive chronic kidney disease with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease (ICD10:I12.9 Hypertensive chronic kidney disease with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease) Unknown or N/A	Active	2016-03-15	
Chronic kidney disease, unspecified (ICD10:N18.9 Chronic kidney disease, unspecified) Unknown or N/A	Active	2016-03-15	
Anxiety disorder, unspecified (ICD10:F41.9 Anxiety disorder, unspecified) Unknown or N/A	Active	2016-03-02	
Insomnia, unspecified (ICD10:G47.00 Insomnia, unspecified) Unknown or N/A	Active	2016-03-02	
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-03-02	
Essential (primary) hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2016-01-28	
Type 2 diabetes mellitus without complications (ICD10:E11.9 Type 2 diabetes mellitus without complications) Unknown or N/A	Active	2016-01-28	
Primary generalized (osteo)arthritis (ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2016-01-28	
Polyosteoarthritis, unspecified (ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2016-01-28	

Chronic kidney disease, stage 3 (moderate) (ICD10:N18.3 Chronic kidney disease, stage 3 (moderate)) Unknown or N/A	Active	2016-01-28
Unilateral primary osteoarthritis, right knee (ICD10:M17.11 Unilateral primary osteoarthritis, right knee) Unknown or N/A	Active	2016-01-15
Other abnormalities of gait and mobility (ICD10:R26.89 Other abnormalities of gait and mobility) Unknown or N/A	Active	2016-01-15
Muscle weakness (generalized) (ICD10:M62.81 Muscle weakness (generalized)) Unknown or N/A	Active	2016-01-15

Allergies:

Description	Status	Start Date	End Date
No known drug allergies. 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: YES

Is House Visit Needed: YES

Next Visit Duration (in days):

Current home health agency: Bonyl Home healthcare

Primary Justification Medical Conditions: Kidney_Disease,HTN,diabetes

Additional Medical Conditions:

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: Skilled nursing needed due to multiple complex diseases and patient lack of knowledge of how to manage the disease process and medications. Skilled nursing needed to assess and observe patient's condition and medication administration.

Certification Statement:

Signed by (NP): 302

Signed On (NP): 2016-12-28 00:40

Signed By (Physician): 18

Signed on (Physician): 2017-01-04 00:40

Form_status: finalized

Printed:



Electronically Signed by **Darolyn Perkins** on **2017-01-04**.

Printed on 04-Feb-2017 22:28:29 pm.