

Gary Rutherford: Patient Information
Patient Record Number:5872

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: Gary Rutherford
External ID: 5872
DOB: 1971-11-16
Sex: Male
Marital Status: Single

Address: 3305 Mojave Dr
City: Dallas
State: Texas
Postal Code: 75241
Country: USA
Emergency Contact: 469-348-1541
Street Address: 3305 Mojave Dr
Apt/Suite/Other: House

Past Medical History:

Last Recorded On: 07-14-2016.
Risk Factors: Chronic Pain,GERD.
Additional Medical History: Chronic migraine.

Family History:

Last Recorded On: 07-14-2016.
Siblings: Patient has one brother..
Offspring: No children.

Social History:

Last Recorded On: 07-14-2016.
Tobacco: Current every day smoker 1/2 pack per day **Status:** Current
Alcohol: social drinker **Status:** Current
Developmental History: Educational level is 12th grade.
Other History: Influenza in 2014.

Tests and Exams:

Last Recorded On: 07-14-2016.

Insurance:

Medicare B Texas (SMTX0)

Priority : Primary
Start Date : 2003-05-01
Relationship to Insured : Self
Type : N/A
Payer : Medicare B Texas (SMTX0)

Copay :
Insured ID Number : 465593916A
Group Number :
Employer Name : Gary Rutherford

Immunizations:

Gary Rutherford: Chief Complaint
Patient Record Number:5872

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Seen by Sumana Ketha MD
Seen on 25-November-2015

Chief Complaint Status:finalized

Follow up home visit for management of anxiety, GERD, chronic pain, schizophrenia, migraine, bell palsy, tobacco use, and tachycardia.

99350

History of Present illness:

HPI Status:Finalized

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2015-11-25	146	101	177.00	70.00	98.20	18.00	~	0.0	0.00

Review of Systems:

Psychiatric:

Psych Diagnosis YES
Psych Medication YES
Depression YES
Anxiety YES

Physical Exam:

GEN:

Normal Skin, Conjunctiva, Sclera, Mucous Membranes, Within Normal Limits .

HEENT:

Normal Ears, Nose, Throat, Within Normal Limits .

NEURO:

Normal Mental Status, Cranial Nerves, Motor, Sensory, Reflexes, Within Normal Limits .

PSYCH:

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

RESP:

Normal Chest, Rales, Rhonchi, Wheezes, Within Normal Limits .

GI:

Normal Organomegaly-Within Normal Limits .

Soft, Non Tender, Non Distended, Masses-Within Normal Limits .

Medication:

Description	Status	Start Date	End Date
Doxycycline Hyclate ,100 MG TABS, TAKE 1 TABLET DAILY UNTIL FINISHED, Quantity: 10, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-05-12	
Hydrocodone-Acetaminophen ,10-325 MG TABS, TAKE 1 TABLET 3 TIMES DAILY AS NEEDED FOR PAIN, Quantity: 90, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-05-12	

Divalproex Sodium ,500 MG TBEC, TAKE 1 TABLET IN THE MORNING AND 2 TABLETS AT BEDTIME, Quantity: 270, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2014-12-18
Gabapentin ,600 MG TABS, TAKE 1 TABLET 3 TIMES DAILY, Quantity: 270, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2014-12-18

Plan Note:

Plan Note Status:Finalized

; Notes: continue with treatment plan and medication adherence. No refills at this time.

Medical Problem:

Description	Status	Start Date	End Date
Anxiety state, unspecified (ICD10:F41.9 Anxiety disorder, unspecified) Unknown or N/A	Active	2015-10-01	
Esophageal reflux (ICD10:K21.9 Gastro-esophageal reflux disease without esophagitis) 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	
Unspecified schizophrenia, unspecified (ICD10:F20.9 Schizophrenia, unspecified) Unknown or N/A	Active	2015-10-01	
Migraine, unspecified, without mention of intractable migraine without mention of status migrainosus (ICD10:G43.909 Migraine, unspecified, not intractable, without status migrainosus) Unknown or N/A	Active	2015-10-01	
Bell's palsy (ICD10:G51.0 Bell's palsy) 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	
Tachycardia, unspecified (ICD10:R00.0 Tachycardia, unspecified) Unknown or N/A	Active	2015-10-01	
Chronic migraine without aura, without mention of intractable migraine without mention of status migrainosus (ICD10:G43.709 Chronic migraine without aura, not intractable, without status migrainosus) Unknown or N/A	Active	2015-10-01	
Osteoarthritis, generalized, site unspecified (ICD10:M15.0 Primary generalized (osteo)arthritis) (ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2015-10-01	
Migraine with aura, without mention of intractable migraine without mention of status migrainosus (ICD10:G43.109 Migraine with aura, not intractable, without status migrainosus) Unknown or N/A	Active	2015-10-01	

Allergies:

Description	Status	Start Date	End Date
trazadone Unknown or N/A	Active		

seroquel
Unknown or N/A

Active

Surgeries:

Description	Status	Start Date	End Date
Appendectomy Unknown or N/A	Active	2015-06-10	
Right elbow surgery. Unknown or N/A	Active	2015-06-10	

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): 31 Days

Primary Justification Medical Conditions: Schizophrenia

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 Schizophrenia and inability to self medicate correctly.

Certification Statement: Patient is homebound due to Schizophrenia. Patient experiences periods of confusion and unable to leave the home alone safely.

Form_status: finalized

Printed: NO

Printed on 09-Sep-2016 20:47:42 pm.