

Billie Piggee: Patient Information
Patient Record Number:5640

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: Billie R Piggee
External ID: 5640
DOB: 1945-09-24
Sex: Female
Marital Status: Widowed
Patient Drive Folder: <https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B0Q2MIHiECb5OGdkWXYtaXEtbjQ>

Address: 2255 North Washington Ave #212
City: Dallas
State: Texas
Postal Code: 75204
Country: USA
Home Phone: 214-264-9146
Mobile Phone: 214-777-3830
Street Address: 2255 North Washington Ave
Apt/Suite/Other: 212

Past Medical History:

Last Recorded On: 08-12-2016.
Risk Factors: Chronic Pain,GERD,Lumbago,Neuropathy.

Family History:

Last Recorded On: 08-12-2016.
Father: Father also died had DM2 and HTN.
Mother: Mother died with DM2, MI, CKD, and CVA..
Siblings: No siblings.
Offspring: Patient has 5 children, 4 boys and 1 girl. All healthy..
Other Family Relative: Grandfather had throat cancer and grandmother had leukemia..

Primary Family Med Conditions:

Last Recorded On: 08-12-2016.
Chronic Conditions: Acute Myocardial Infarction,Chronic Kidney Disease,Diabetes,Hypertension,Stroke / Transient Ischemic Attack.

Social History:

Last Recorded On: 08-12-2016.
Tobacco: Never smoker No smoking **Status:** Never
Alcohol: No alcohol **Status:** Never
Recreational Drugs: No drug abuse **Status:** Never
Nutrition History: Good.
Developmental History: Good.
Other History: Influenza November 2015..

Tests and Exams:

Last Recorded On: 08-12-2016.

Mammogram (>40yrs, Yearly) N/A Done on August 25th.
Sigmoid/Colonoscopy N/A Done.
Prostate Exam N/A Not done.

Insurance:

Medicare B Texas (SMTX0)

Priority : Primary	Copay :
Start Date : 1987-12-01	Insured ID Number : 457761881A
Relationship to Insured : Self	Group Number :
Type : N/A	Employer Name : Billie Piggee
Payer : Medicare B Texas (SMTX0)	

Immunizations:

Billie Piggee: Chief Complaint
Patient Record Number:5640

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Seen by Derrick Love-Jones
Seen on 29-July-2016

Chief Complaint Status:finalized

Followup home visit for management of cataracts, peripheral neuropathy, schizophrenia, asthma, lumbago, bipolar, glaucoma, osteoarthritis, gastroesophageal reflux disease, hypertension, chronic pain, mononeuritis, and hyponatremia. Patient complains of low back pain and increased anxiety level.

History of Present illness:

HPI Status:Finalized

A 70-year-old African American female in NAD with multiple chronic conditions including neuropathy, hypertension, cataract, and osteoarthritis. Patient states she has been having low back pain that is relieved with current pain medication. Patient also complains of increased anxiety due to a recent death in family and her son who was recently incarcerated. Patient denies any CP, HA, or N/V. Reviewed labs. Reviewed medications.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-07-29	176	88	209.00	67.00	97.40	20.00	~	0.0	0.00

Review of Systems:

Constitutional:

Geometric Algebraic Topology:

Do you have any other comments?

Not a member? Click here to join

Neptunus Press

Maximum Range

No Significant Differences Of Urine

Need for Additional Medication YES

No House Content

No Obstruction

No Extraction

Physical Exam:

ENCLOSURE:

[illegible]

EXTREMITIES:

Subsequent to the completion of the 2007-2008 season, the following limits:

CV:

RR-Within Nominal Limits

Murmur, Rubs, Gallops-Within Normal Limits .

Plan Note:

Plan Note Status:Finalized

1. Anxiety, well controlled with medications.
2. Osteoarthritis with chronic pain, stable on medications.
3. Hypertension, educated the patient to have low-salt, low-fat, and low-cholesterol diet.
4. Chronic pain syndrome, on pain medications.
5. Lumbago with chronic pain, continue same current plan.
6. Hyperlipidemia, monitor lipids.
7. Coronary artery disease, stable on medications.
8. Depression, monitor.

9. Gastroesophageal reflux disease, continue medications.
10. Asthma, on nebulizers.
11. Neuropathy, on Gabapentin.
12. Bipolar, continue current plan of treatment.
12. Schizophrenia, monitor.
13. Medication refills as follows; Lisinopril q.d., Norco 10/325 mg t.i.d., Xanax 1 mg b.i.d., Simvastatin 40 mg q.d., Aspirin 81 mg q.d.
14. Medication adherence was given to the patient. Continue treatment as planned.
15. Patient was given card with number to the office for any questions or concerns. Patient was instructed to go to emergency room for any life threatening emergency. Patient verbalized understanding of the above plan.
16. Reviewed old records of the patient.
17. Follow up appointment in 4-6 weeks.

Medical Problem:

Description	Status	Start Date	End Date
Unspecified cataract (ICD9:366.9 Unspecified cataract) Unknown or N/A	Active	2015-11-03	
Hereditary and idiopathic neuropathy, unspecified (ICD10:G60.9 Hereditary and idiopathic neuropathy, unspecified) Unknown or N/A	Active	2015-11-03	
Other schizophrenia (ICD10:F20.89 Other schizophrenia) Unknown or N/A	Active	2015-11-03	
Hypo-osmolality and hyponatremia (ICD10:E87.1 Hypo-osmolality and hyponatremia) Unknown or N/A	Active	2015-11-03	
Chronic pain syndrome (ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2015-11-03	
Other hereditary and idiopathic neuropathies (ICD10:G60.8 Other hereditary and idiopathic neuropathies) Unknown or N/A	Active	2015-11-03	
Gastro-esophageal reflux disease without esophagitis (ICD10:K21.9 Gastro-esophageal reflux disease without esophagitis) Unknown or N/A	Active	2015-11-03	
Unspecified asthma, uncomplicated (ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2015-11-03	
Low back pain (ICD10:M54.5 Low back pain) Unknown or N/A	Active	2015-11-03	
Manic episode without psychotic symptoms, unspecified (ICD10:F30.10 Manic episode without psychotic symptoms, unspecified) Unknown or N/A	Active	2015-11-03	
Unspecified glaucoma (ICD10:H40.9 Unspecified glaucoma) Unknown or N/A	Active	2015-11-03	
Not Specified. (ICD10:M15.0 Primary generalized (osteo)arthritis) (M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2015-11-03	
Unspecified cataract (ICD10:H26.9 Unspecified cataract) Unknown or N/A	Active	2015-11-03	
Essential (primary) hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-11-03	
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2015-11-03	
Mild intermittent asthma, uncomplicated (ICD10:J45.20 Mild intermittent asthma, uncomplicated) Unknown or N/A	Active	2015-11-03	

Mononeuropathy, unspecified (ICD10:G58.9 Mononeuropathy, unspecified) Unknown or N/A	Active	2015-11-03
Unspecified asthma with (acute) exacerbation (ICD10:J45.901 Unspecified asthma with (acute) exacerbation) Unknown or N/A	Active	2015-11-03
Primary generalized (osteo)arthritis (ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2015-11-03
Manic episode, severe, without psychotic symptoms (ICD10:F30.13 Manic episode, severe, without psychotic symptoms) Unknown or N/A	Active	2015-11-03
Hereditary and idiopathic neuropathy, unspecified (ICD10:G60.9 Hereditary and idiopathic neuropathy, unspecified) Unknown or N/A	Active	2015-11-03
Other schizophrenia (ICD10:F20.89 Other schizophrenia) Unknown or N/A	Active	2015-11-03
Hypo-osmolality and hyponatremia (ICD10:E87.1 Hypo-osmolality and hyponatremia) Unknown or N/A	Active	2015-11-03
Chronic pain syndrome (ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2015-11-03
Primary generalized (osteo)arthritis (ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2015-11-03
Manic episode, severe, without psychotic symptoms (ICD10:F30.13 Manic episode, severe, without psychotic symptoms) Unknown or N/A	Active	2015-11-03
Unspecified glaucoma (ICD10:H40.9 Unspecified glaucoma) Unknown or N/A	Active	2015-11-03
Unspecified cataract (ICD9:366.9 Unspecified cataract) Unknown or N/A	Active	2015-11-03
Other hereditary and idiopathic neuropathies (ICD10:G60.8 Other hereditary and idiopathic neuropathies) Unknown or N/A	Active	2015-11-03
Gastro-esophageal reflux disease without esophagitis (ICD10:K21.9 Gastro-esophageal reflux disease without esophagitis) Unknown or N/A	Active	2015-11-03
Unspecified asthma, uncomplicated (ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2015-11-03
Low back pain (ICD10:M54.5 Low back pain) Unknown or N/A	Active	2015-11-03
Manic episode without psychotic symptoms, unspecified (ICD10:F30.10 Manic episode without psychotic symptoms, unspecified) Unknown or N/A	Active	2015-11-03
Not Specified. (ICD10:M15.0 Primary generalized (osteo)arthritis) (M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2015-11-03
Unspecified cataract (ICD10:H26.9 Unspecified cataract) Unknown or N/A	Active	2015-11-03
Essential (primary) hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-11-03
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2015-11-03
Mild intermittent asthma, uncomplicated (ICD10:J45.20 Mild intermittent asthma, uncomplicated) Unknown or N/A	Active	2015-11-03

Mononeuropathy, unspecified (ICD10:G58.9 Mononeuropathy, unspecified) Unknown or N/A	Active	2015-11-03
Unspecified asthma with (acute) exacerbation (ICD10:J45.901 Unspecified asthma with (acute) exacerbation) Unknown or N/A	Active	2015-11-03
Unspecified hereditary and idiopathic peripheral neuropathy (ICD10:G60.9 Hereditary and idiopathic neuropathy, unspecified) Unknown or N/A	Active	2015-10-01
Simple type schizophrenia, unspecified (ICD10:F20.89 Other schizophrenia) Unknown or N/A	Active	2015-10-01
Hyposmolality and/or hyponatremia (ICD10:E87.1 Hypo-osmolality and hyponatremia) Unknown or N/A	Active	2015-10-01
Chronic pain syndrome (ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2015-10-01
Other specified idiopathic peripheral neuropathy (ICD10:G60.8 Other hereditary and idiopathic neuropathies) 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
Asthma (ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2015-10-01
Lumbago (ICD10:M54.5 Low back pain) Unknown or N/A	Active	2015-10-01
Bipolar (ICD10:F30.10 Manic episode without psychotic symptoms, unspecified) Unknown or N/A	Active	2015-10-01
Glaucoma (ICD10:H40.9 Unspecified glaucoma) Unknown or N/A	Active	2015-10-01
Osteoarthritis, unspecified whether generalized or localized, site unspecified (ICD10:M15.0 Primary generalized (osteo)arthritis) (ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2015-10-01
Cataract (ICD10:H26.9 Unspecified cataract) Unknown or N/A	Active	2015-10-01
Unspecified essential hypertension (ICD10:I10 Essential (primary) hypertension) 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
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01
Extrinsic asthma, unspecified (ICD10:J45.20 Mild intermittent asthma, uncomplicated) Unknown or N/A	Active	2015-10-01
Mononeuritis of unspecified site (ICD10:G58.9 Mononeuropathy, unspecified) Unknown or N/A	Active	2015-10-01
Asthma, unspecified type, with (acute) exacerbation (ICD10:J45.901 Unspecified asthma with (acute) exacerbation) Unknown or N/A	Active	2015-10-01
Osteoarthritis, generalized, multiple sites (ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2015-10-01

Bipolar I disorder, single manic episode, severe, without mention of psychotic behavior (ICD10:F30.13 Manic episode, severe, without psychotic symptoms) Unknown or N/A	Active	2015-10-01
Unspecified glaucoma (ICD10:H40.9 Unspecified glaucoma) Unknown or N/A	Active	2015-10-01
Unspecified cataract (ICD9:366.9 Unspecified cataract) Unknown or N/A	Active	

Allergies:

Description	Status	Start Date	End Date
No Known Drug Allergies Unknown or N/A	Active		

Surgeries:

Description	Status	Start Date	End Date
Gallbladder 1988 Unknown or N/A	Active		
Tubal ligation 1969 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: NO

Is House Visit Needed: YES

Next Visit Duration (in days): 31

Current home health agency: Promise Home Health Inc

Primary Justification Medical Conditions: Asthma,bipolar,Cataract,Depression,Glaucoma,HTN,Osteoporosis,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 unable to self medicate.

Certification Statement: Patient is home-bound due to schizophrenia. Patient experiences confusion and is unable to safely leave home alone.

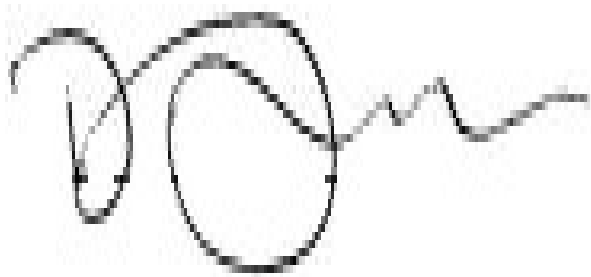
Signed by (NP): 16

Signed On (NP): 2016-07-29 04:25

Signed By (Physician): 18

Signed on (Physician): 2016-08-03 04:26

Form_status: finalized



Electronically Signed by **Derrick Love-Jones** on **2016-08-08**.

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