Jimmy BrownJr: Patient Information

Patient Record Number: 1274

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: Jimmy Lee BrownJr

External ID: 1274 **DOB**: 1970-01-23 Sex: Male S.S.: 452-35-2055 Marital Status: Single

Address: 3727 Malcolm X Blvd

City: Dallas State: Texas Postal Code: 75215 Country: USA

Home Phone: 214-434-8436

Street Address: 3727 Malcolm X Blvd

Apt/Suite/Other: House

### **Past Medical History:**

Last Recorded On: 07-22-2016.

Risk Factors: Chronic Pain, Neuropathy, Seizures, Severe Migraine. Additional Medical History: Allergic Rhinitis Herniated back disc.

### **Family History:**

Last Recorded On: 07-22-2016. Father: Father had hypertension..

Mother: Mother had hypertension, osteoarthritis, and asthma..

Offspring: Patient has 2 children..

### **Primary Family Med Conditions:**

Last Recorded On: 07-22-2016.

Chronic Conditions: Asthma, Hypertension, RA/OA (Rheumatoid Arthritis/ Osteoarthritis).

### **Social History:**

Last Recorded On: 07-22-2016.

**Tobacco:** Current every day smoker Smokes 12 cigarettes a day Status: Current

Alcohol: No alcohol. Status: Never

Recreational Drugs: Marijuana Status: Current

Nutrition History: Regular diet.. Developmental History: Good..

Other History: Influenza November 2015...

### **Tests and Exams:**

Last Recorded On: 07-22-2016.

# Insurance:

# Superior Health Plan Texas (39188)

Priority : Primary Start Date : 2012-08-01 Relationship to Insured : Self

Type: N/A
Payer: Superior Health Plan Texas (39188)

Copay : Insured ID Number : 524869902 Group Number :

Employer Name : Jimmy BrownJr

# **Immunizations:**

Jimmy BrownJr: Chief Complaint

Patient Record Number: 1274

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> Seen by Sumana Ketha MD Seen on 04-August-2016

#### Chief Complaint Status: finalized

Follow up home visit for management of hypertension, chronic pain, epilepsy, anxiety, thoracic lumbar neuropathy, asthma, osteoarthritis, migraine, tobacco use, allergic rhinitis, and abnormality of gait. Patient complains of lower back pain and neck pain.

## **History of Present illness:**

#### **HPI Status:**Finalized

Patient is a 46-year-old AA male in NAD with multiple chronic conditions of hypertension, osteoarthritis, chronic pain, epilepsy, and anxiety. Patient states that he has lower back pain and has been having issues walking. Patient rates pain at 8/10 at this time. Patient denies any other issues or complaints upon examination. Patient denies any CP, HA, or N/V recently. Reviewed labs. Reviewed medications.

### Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-08-04	109	71	145.00	64.00	98.20	20.00	~	0.0	0.00

### **Review of Systems:**

#### Constitutional:

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May **Biffigure State** Statistic

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No Use Of Dentures

### **Physical Exam:**

#### KH-

illyabble Millisch (Otheriteteralidicia (Briga Weittelin) Nabsarh Taurbinn attes - Within Normal Limits .

### MEMITIES:

CV:

in Machine Mainhite Live quadrants-Within Normal Limits .

Murmur, Rubs, Gallops-Within Normal Limits .

#### **Medication:**

Description	Status	Start Date	End Date	
CarBAMazepine ,200 MG TABS, TAKE 1 TABLET BY MOUTH TWICE DAILY, Quantity: 60, Refill Quantity: 3				
Unknown or N/A	Active	2016-07-16		
by Jones, Derrick - MJ3217331				
Texas Physician House Calls				

NexIUM, 40 MG CPDR, TAKE 1 CAPSULE BY MOUTH DAILY, Quantity: 30, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Sumana Ketha MDPA  NexIUM, 40 MG CPDR, TAKE 1 CAPSULE BY MOUTH DAILY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls  Propranolol HCI, 40 MG TABS, TAKE 1 TABLET BY MOUTH TWICE PER DAY, Quantity: 60, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Sumana Ketha MDPA  Propranolol HCI, 40 MG TABS, TAKE 1 TABLET BY MOUTH TWICE PER DAY, Quantity: 60, Refill Quantity: 3  Haltering as N/A  Active 2016-07-16	7-16			
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Sumana Ketha MDPA  NexIUM ,40 MG CPDR, TAKE 1 CAPSULE BY MOUTH DAILY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls  Propranolol HCI ,40 MG TABS, TAKE 1 TABLET BY MOUTH TWICE PER DAY, Quantity: 60, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Sumana Ketha MDPA  Propranolol HCI ,40 MG TABS, TAKE 1 TABLET BY MOUTH TWICE PER DAY, Quantity: 60, Refill Quantity: 3		2016-07-16	Active	
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	7-16	2016-07-16	Active	Unknown or N/A
by Jones, Derrick - MJ3217331 Texas Physician House Calls				
				· · · · · · · · · · · · · · · · · · ·
CarBAMazepine ,200 MG TABS, TAKE 1 TABLET BY MOUTH TWICE DAILY, Quantity: 60, Refill Quantity: 3				· · · · · · · · · · · · · · · · · · ·
Unknown or N/A Active 2016-04-08	4-08	2016-04-08	Active	
by ketha, Dr sumana - BK6230281				
DFW Primary Care PLLC				
NexIUM ,40 MG CPDR, TAKE 1 CAPSULE BY MOUTH DAILY, Quantity: 30, Refill Quantity: 3				
Unknown or N/A Active 2016-04-08	1-08	2016-04-08	Active	
by ketha, Dr sumana - BK6230281				by ketha, Dr sumana - BK6230281
DFW Primary Care PLLC				DFW Primary Care PLLC
Propranolol HCI ,40 MG TABS, TAKE 1 TABLET BY MOUTH TWICE				
PER DAY, Quantity: 60, Refill Quantity: 3 Unknown or N/A Active 2016-04-08	4-08	2016-04-08	Active	
by ketha, Dr sumana - BK6230281				
DFW Primary Care PLLC				DFW Primary Care PLLC
Hydrocodone-Acetaminophen ,10-325 MG TABS, Take 1 Tablet By				
Mouth Every 8 Hours As Needed For Pain, Quantity: 90, Refill Quantity:				
Active 2015-04-28 Unknown or N/A	4-28	2015-04-28	Active	
by ketha, Dr sumana - BK6230281				by ketha, Dr sumana - BK6230281
Sumana Ketha MDPA				Sumana Ketha MDPA
Phenytoin Sodium Extended ,100 MG CAPS, ONE TAB THREE TIMES				
A DAY, Quantity: 90, Refill Quantity: 3 Unknown or N/A Active 2015-04-28	4-28	2015-04-28	Active	•
by ketha, Dr sumana - BK6230281				
Sumana Ketha MDPA				Sumana Ketha MDPA
Triamcinolone Acetonide ,0.1 % CREA, APPLY AND RUB IN A THIN FILM TO AFFECTED AREAS TWICE DAILY(AM AND PM), Quantity:				FILM TO AFFECTED AREAS TWICE DAILY(AM AND PM), Quantity:
240, Refill Quantity: 3  Active 2015-04-28  Unknown or N/A	1-28	2015-04-28	Active	-
by Jones, Derrick - MJ3217331				
Texas Physician House Calls				Texas Physician House Calls
Atrovent HFA ,17 MCG/ACT AERS, INHALE 2 PUFFS TWICE DAILY, Quantity: 166.41, Refill Quantity: 3	2.49	2045 00 40	Activo	Quantity: 166.41, Refill Quantity: 3
Unknown or N/A Active 2015-02-18 by Jones, Derrick - MJ3217331	- 10	2010-02-16	, louve	
Texas Physician House Calls				
CarBAMazepine ,200 MG TABS, TAKE 1 TABLET TWICE DAILY, Quantity: 60, Refill Quantity: 2				
Unknown or N/A Active 2015-02-18	2-18	2015-02-18	Active	
by Jones, Derrick - MJ3217331 Texas Physician House Calls				
Colace ,100 MG CAPS, TAKE ONE CAPSULE TWICE A DAY, Quantity: 60, Refill Quantity: 3				Colace ,100 MG CAPS, TAKE ONE CAPSULE TWICE A DAY,
Unknown or N/A Active 2015-02-18	2-18	2015-02-18	Active	Unknown or N/A
by Jones, Derrick - MJ3217331				
Texas Physician House Calls				
Propranolol HCI ,40 MG TABS, TAKE 1 TAB TWICE PER DAY, Quantity: 60, Refill Quantity: 2				l = '
Unknown or N/A Active 2015-02-18				
	2-18	2015-02-18	Active	Unknown or N/A
DY 401165, Delition - MU32(1733)	2-18	2015-02-18	Active	by Jones, Derrick - MJ3217331

Proventil HFA ,108 (90 Base) MCG/ACT AERS, INHALE 1 TO 2 PUFFS EVERY 4 TO 6 HOURS AS NEEDED, Quantity: 6.7, Refill Quantity: 3 Unknown or N/A Active 2015-02-18 by Jones, Derrick - MJ3217331 Texas Physician House Calls Qnasl, 80 MCG/ACT AERS, INSERT 1 SQUIRT IN ONE NOSTRIL EVERY DAY, ALTERNATING EACH NOSTRIL, Quantity: 8.7, Refill Active 2015-02-18 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls Singulair, 10 MG TABS, TAKE 1 TABLET AT BEDTIME, Quantity: 90, Refill Quantity: 0 Active 2015-02-18 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls Qnasl, 80 MCG/ACT AERS, INSERT 1 SQUIRT IN ONE NOSTRIL EVERY DAY, ALTERNATING EACH NOSTRIL, Quantity: 8.7, Refill Active 2014-11-18 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls

### Plan Note:

#### Plan Note Status: Finalized

Continue same treatment plan as 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 low 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. Patient encouraged to exercise daily as tolerated. Reviewed recent labs with patient. No labs needed this visit. Patient verbalized understanding of the above plan was given the office number for any questions or concerns. Prognosis is fair and patient is stable.

- 1. Lumbosacral neuritis, continue current plan.
- 2. Osteoarthritis with chronic pain, continue current plan.
- 3. Hypertension with vascular complications, continue current plan.
- 4. Epilepsy, continue current plan.
- 5. Allergic rhinitis, continue current plan.
- 6. Asthma, continue current plan.
- 7. Chronic pain syndrome, continue current pain medication.
- 8. Chronic migraines, continue current plan.
- 9. Anxiety, continue current plan.
- 10. Neuropathy, continue current plan.
- 11. Hyperlipidemia, continue current plan.
- 12. Abnormal gait, continue to monitor.

Medication refills as follows:

Norco 10/325 mg t.i.d. and and all blood pressure medications.

### **Medical Problem:**

Description	Status	Start Date	End Date
Benign essential hypertension			
( ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01	
Asthma, unspecified type, unspecified (ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2015-10-01	
Epilepsy, unspecified, without mention of intractable epilepsy (ICD10:G40.909 Epilepsy, unspecified, not intractable, without status epilepticus) 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	

Osteoarthrosis, generalized, site unspecified (ICD10:M15.0 Primary generalized (osteo)arthritis) (ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A  Thoracic or lumbosacral neuritis or radiculitis, unspecified (ICD10:M54.14 Radiculopathy, thoracic region) (ICD10:M54.15 Radiculopathy, thoracolumbar region) (ICD10:M54.16 Radiculopathy, lumbar region) (ICD10:M54.17 Radiculopathy, lumbosacral region)	Active Active	2015-10-01
Unknown or N/A  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
Tobacco use disorder (ICD10:F17.200 Nicotine dependence, unspecified, uncomplicated) Unknown or N/A	Active	2015-10-01
Allergic rhinitis, cause unspecified (ICD10:J30.9 Allergic rhinitis, unspecified) Unknown or N/A	Active	2015-10-01
Other convulsions ( ICD10:R56.9 Unspecified convulsions) Unknown or N/A	Active	2015-10-01
Contact dermatitis and other eczema, unspecified cause (ICD10:L25.9 Unspecified contact dermatitis, unspecified cause) Unknown or N/A	Active	2015-10-01
Abnormality of gait (ICD10:R26.9 Unspecified abnormalities of gait and mobility) Unknown or N/A	Active	2015-10-01
Thoracic or lumbosacral neuritis or radiculitis, unspecified (ICD10:M54.14 Radiculopathy, thoracic region) (ICD10:M54.15 Radiculopathy, thoracolumbar region) (ICD10:M54.16 Radiculopathy, lumbar region) (ICD10:M54.17 Radiculopathy, lumbosacral region) 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
Unspecified hereditary and idiopathic peripheral neuropathy (ICD10:G60.9 Hereditary and idiopathic neuropathy, unspecified) Unknown or N/A	Active	2015-10-01
Spasm of muscle (ICD10:M62.838 Other muscle spasm) 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

# Allergies:

Description	Status	Start Date	End Date	
No known drug allerigies	Active			
Unknown or N/A	Active			

# **Face to Face HH Plan:**

Patient Home Bound or Can't Drive: YES

Is Home Health Care Needed: NO

 $\textbf{Does Patient have reliable other Primary Care Physician:} \ \texttt{YES}$ 

Is House Visit Needed: YES Next Visit Duration (in days): 31 Nursing Required: NO

Physical Therapy: NO Occupational Therapy Required: NO

Speech-language Pathology Required: NO Clinical Findings To Justify Home Health: No skilled nursing needed.

Signed by (NP): 16

Signed On (NP): 2016-08-04 04:46 Signed By (Physician): 18 Signed on (Physician): 2016-08-11 04:46

Form\_status: finalized

# **Procedure Order:**

Patient ID	1274	Order ID	799
Patient Name	BrownJr, Jimmy Lee	Ordered By	Love-Jones, Derrick
Order Date	2016-09-24	Print Date	2016-09-24
Order Status	complete	Encounter Date	2016-09-24
Lab	.HH Agency	Specimen Type>	

ſ	Ordered Procedure	Report				Results						
		Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
ſ	026: Pulse Oximetry											



Electronically Signed by Sumana Ketha, MD on 2016-08-11.

Printed on 24-Sep-2016 11:07:34 am.