

Joe Ball: Patient Information
Patient Record Number:6074

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: Joe Ball
External ID: 6074
DOB: 1957-11-17
Sex: Male
Marital Status: Single
User Defined: 469-219-4754
Patient Drive Folder: patient is coming to wecare

Address: 1526 E Overton Rd
City: Dallas
State: Texas
Postal Code: 75216-5837
Country: USA
Home Phone: 469-219-4754
Mobile Phone: 972-729-0146
Street Address: 1526 E Overton Rd
Apt/Suite/Other: House

Family History:

Last Recorded On: 12-07-2016.
Father: Unknown..
Mother: Unknown..
Siblings: Unknown..

Social History:

Last Recorded On: 12-07-2016.
Tobacco: No smoking **Status:** Never
Alcohol: No alcohol **Status:** Never
Recreational Drugs: No drugs **Status:** Never
Nutrition History: Regular..
Developmental History: Well..
Other History: Influenza November 2015..

Tests and Exams:

Last Recorded On: 12-07-2016.

Insurance:

Superior Health Plan Texas (39188)

Priority : Primary
Start Date : 2013-02-01
Relationship to Insured : Self
Type : N/A
Payer : Superior Health Plan Texas (39188)

Copay :
Insured ID Number : 530488027
Group Number :
Employer Name : Joe Ball

Immunizations:

Joe Ball: Chief Complaint
Patient Record Number:6074

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Seen by Sumana Ketha MD
Seen on 14-October-2016

Chief Complaint Status:finalized

Followup home visit for management to prevent further decline of chronic medical conditions of schizophrenia, lumbago pain, chronic pain, insomnia, anxiety and depression. Patient complains of back pain.

History of Present illness:

HPI Status:Finalized

Patient is a 59-year-old AA male with multiple chronic conditions of chronic pain, anxiety, depression, insomnia and schizophrenia. Patient complains of lower back pain. Patient believes he has a pinched nerve but denies any recent trauma. Patient rates his pain at 6/10. Denies chest pain, headache , or nausea or vomiting.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-10-14	133	85	152.00	75.00	97.80	16.00	~	19.0	0.00

Review of Systems:

Constitutional:

Geometrische Optik:

Neurotransmitters

No ~~_____~~ bath

Not a business

No effect on appetite

Normal Difficult Nature Of Urine

No Digitalisation Range Of Motion

Physical Exam:

REMARKS:

Needleless Oral and Intra-Big Vein Nasal Turbinate-Within Normal Limits .

DEVIATIONS:

SEVEN-POWERS-OF-TWO TEST FOR NORMALITY Within Normal Limits.

CV:

Repeating Nonnormal Limits

Murmur, Rubs, Gallops-Within Normal Limits .

Medication:

Description	Status	Start Date	End Date
Hydrocodone-Acetaminophen ,10-325 MG TABS, Take 1 tablet every 12 hours as needed for pain, Quantity: 60, Refill Quantity: 0			
Unknown or N/A	Active	2016-05-09	
by ketha, Dr sumana - BK6230281			
Texas Physician House Calls			
Acetaminophen-Codeine #3 ,300-30 MG TABS, Take One Tablet By Mouth 3 Times a Day, Quantity: 90, Refill Quantity: 0			
Unknown or N/A	Active	2016-04-05	
by ketha, Dr sumana - BK6230281			
Texas Physician House Calls			

Acetaminophen-Codeine #3 ,300-30 MG TABS, Take One Tablet By Mouth 3 Times a Day, Quantity: 90, Refill Quantity: 0

Unknown or N/A

Active

2016-03-04

by ketha, Dr sumana - BK6230281

Texas Physician House Calls

Plan Note:

Plan Note Status:Finalized

Continue same 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 so, 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. No labs needed this visit. The patient verbalize understanding of the above plan and was given my office number for any questions or concerns. Prognosis is fair and patient is stable. Reviewed old records of the patient. Follow up appointment in 4-6 weeks.

1. Lumbago with sciatica, continue current plan.
2. Insomnia, continue current plan.
3. Anxiety, continue current plan.
4. Depression continue current plan
5. Chronic Pain Syndrome continue current pain medication

Medication refills as follows:

Norco 10/325 mg t.i.d.

Medical Problem:

Description	Status	Start Date	End Date
Lumbago with sciatica, unspecified side (ICD10:M54.40 Lumbago with sciatica, unspecified side) Unknown or N/A	Active	2016-07-15	
Chronic pain syndrome (ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-06-10	
Insomnia, unspecified (ICD10:G47.00 Insomnia, unspecified) Unknown or N/A	Active	2016-03-09	
Cough (ICD10:R05 Cough) Unknown or N/A	Active	2016-02-03	
Insomnia due to medical condition (ICD10:G47.01 Insomnia due to medical condition) Unknown or N/A	Active	2016-02-03	
Low back pain (ICD10:M54.5 Low back pain) Unknown or N/A	Active	2015-12-30	
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2015-12-30	
Anxiety disorder, unspecified (ICD10:F41.9 Anxiety disorder, unspecified) Unknown or N/A	Active	2015-12-30	
Major depressive disorder, single episode, unspecified (ICD10:F32.9 Major depressive disorder, single episode, unspecified) Unknown or N/A	Active	2015-12-30	

Allergies:

Description	Status	Start Date	End Date
No known drug allergies. Unknown or N/A	Active	2015-12-30	

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

Nursing Required: NO

Clinical Findings To Justify Home Health: Patient is homebound due to severe schizophrenia and chronic pain issues.

Certification Statement: No skilled nursing needed at this time but patient is homebound due to severe mental illness and chronic pain issues.

Signed by (NP): 16

Signed On (NP): 2016-10-14 02:53

Signed By (Physician): 18

Signed on (Physician): 2016-10-21 02:53

Form_status: finalized

Procedure Order:

Patient ID	6074	Order ID	1124
Patient Name	Ball, Joe	Ordered By	Ketha, Sumana
Order Date	2016-12-11	Print Date	2016-12-11
Order Status	complete	Encounter Date	2016-12-11
Lab	.HH Agency	Specimen Type>	

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



Electronically Signed by **Sumana Ketha, MD** on **2016-10-21**.

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