

Gary Jenkins: Patient Information
Patient Record Number:6216

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 D Jenkins
External ID: 6216
DOB: 1962-03-16
Sex: Male
S.S.: 435130147

Address: 11330 Amanda Ln
City: Dallas
State: Texas
Postal Code: 75238
Country: USA
Mobile Phone: 214-394-5136
Street Address: 11330 Amanda Ln
Apt/Suite/Other: 717

Past Medical History:

Last Recorded On: 12-17-2016.
Risk Factors: Chronic Pain,Erectile Dysfunction,High Cholestrol.

Family History:

Last Recorded On: 12-17-2016.
Father: Hypertension..
Mother: Hypertension and diabetes. .
Siblings: Unknown..
Offspring: Unknown..

Social History:

Last Recorded On: 12-17-2016.
Tobacco: Never smoker No smoking. **Status:** Never
Coffee:
Alcohol: No alcohol use. **Status:** Never
Recreational Drugs: No drug abuse. **Status:** Never
Counseling:
Exercise Patterns:
Hazardous Activities: None. **Status:** Never
Work Status: Disabled.

Insurance:

Medicare B Texas (SMTX0)

Priority : Primary
Start Date : 2007-03-01
Relationship to Insured : Self
Type : N/A
Payer : Medicare B Texas (SMTX0)
Priority : Secondary
Start Date : 2016-06-01
Relationship to Insured :
Type : N/A
Payer : Molina Healthcare of Texas (Z1161)

Copay :
Insured ID Number : 435130147A
Group Number :
Employer Name : Gary Jenkins
Copay :
Insured ID Number : 513458996
Group Number :
Employer Name :

Immunizations:

Gary Jenkins: Chief Complaint
Patient Record Number:6216

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Seen by Darolyn Perkins
Seen on 10-November-2016

Chief Complaint Status:finalized

Follow up home visit for the prevention and management of multiple chronic conditions of diabetes, hypertension, osteoarthritis, spondylosis, hyperlipidemia and has colostomy.

History of Present illness:

HPI Status:Finalized

Patient is a 54-year-old male in no acute distress with multiple chronic conditions of diabetes, hypertension, osteoarthritis, spondylosis, hyperlipidemia and has colostomy. Patient states he has osteoarthritis in his knees and his pain level is 5/10 now. He denies any chest pain, headaches or nausea/vomiting recently.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-11-10	138	88	359.00	70.00	98.20	18.00	~	51.5	0.00

Review of Systems:

Constitutional:

REDAKSI: NIKEN SETIANGAT:

Neutrophilic Splenomegaly

No ~~RECENT~~ History

No ~~Excluded~~ POs Secured

No Bilingual Competency

Not for Distribution

No Statistical Dependence

No ~~RIGHTS~~ Rights

No Being paid Dependants

No Belligerent Detention

No Reveal, No Banters

No Blood in Urine

No Disputes/Objections

No Elasticity or Change Of Motion

No Change in Bowel

No Digital Difficulties

No Observed Difference

No Blood In Stool

Physical Exam:

SUMMARY:

Paranasal Sinuses: Sphenoid Sinus - Normal in Size. Ethmoid Sinuses - Normal in Size. Maxillary Sinus - Normal in Size. Bilateral Nasal Turbinates - Within Normal Limits.

REMARKS:

[illegible]

CV:

Real World Non-Telluric Limits of Food Moulds: With Normal Limits.

Murmur, Rubs, Gallops-Within Normal Limits .

Medication:

Description	Status	Start Date	End Date
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Meloxicam ,15 MG TABS, TAKE 1 TABLET DAILY IN THE MORNING, Quantity: 90, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-10-24
Alendronate Sodium ,35 MG TABS, TAKE 1 TABLET ONCE WEEKLY, Quantity: 4, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-09-25
NexIUM ,40 MG CPDR, TAKE 1 CAPSULE DAILY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-09-25
Fluticasone Propionate ,50 MCG/ACT SUSP, USE 2 SPRAY(S) IN EACH NOSTRIL EVERY DAY, Quantity: 16, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-09-08
Ketoconazole ,2 % SHAM, APPLY TO SCALP AS DIRECTED, Quantity: 120, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-08-09
ProAir HFA ,108 (90 Base) MCG/ACT AERS, INHALE 2 PUFFS BY MOUTH EVERY DAY, Quantity: 8.5, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-08-09
Simvastatin ,40 MG TABS, TAKE 1 TABLET BY MOUTH AT BEDTIME, Quantity: 30, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-08-09
Cialis ,10 MG TABS, 1 Tab PO QD, Quantity: 30, Refill Quantity: 2 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-06-29

Plan Note:

Plan Note Status:Finalized

Continue same treatment plan. Medication adherence education was given to the patient. No refills. Patient was educated on benefits of low salt, low fat, low cholesterol diet with current medical issues. Patient encouraged continuing weight loss efforts via daily exercise and certain food restrictions. No labs needed at this time. The patient verbalized understanding of the above plan, and was given the office number to call for any questions or concern. Discussed the treatment plan with the patient. Prognosis is fair.

1. Diabetes, continue current medications.
2. Hypertension, continue current medications
3. Osteoarthritis, continue current medications.
4. Hyperlipidemia, continue current medications.
5. Spondylosis, continue current medications.
6. Colostomy, continue current medications

Medical Problem:

Description	Status	Start Date	End Date
Spondylosis without myelopathy or radiculopathy, cervical region (ICD10:M47.812 Spondylosis without myelopathy or radiculopathy, cervical region) Unknown or N/A	Active	2016-11-10	
Colostomy status (ICD10:Z93.3 Colostomy status) Unknown or N/A	Active	2016-11-10	

Encounter for general adult medical examination without abnormal findings (ICD10:Z00.00 Encounter for general adult medical examination without abnormal findings) Unknown or N/A	Active	2016-11-02
Type 2 diabetes mellitus without complications (ICD10:E11.9 Type 2 diabetes mellitus without complications) Unknown or N/A	Active	2016-08-11
Type 2 diabetes mellitus with hyperglycemia (ICD10:E11.65 Type 2 diabetes mellitus with hyperglycemia) Unknown or N/A	Active	2016-06-27
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2016-06-27
Primary generalized (osteo)arthritis (ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2016-06-27
Polyosteoarthritis, unspecified (ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2016-06-27
Other hyperlipidemia (ICD10:E78.4 Other hyperlipidemia) Unknown or N/A	Active	2016-06-27
Hyperlipidemia, unspecified (ICD10:E78.5 Hyperlipidemia, unspecified) Unknown or N/A	Active	2016-06-27

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: NO
Does Patient have reliable other Primary Care Physician: YES
Is House Visit Needed: YES
Next Visit Duration (in days): 31
Current home health agency:
Primary Justification Medical Conditions:
Additional Medical Conditions:
Nursing Required: NO
Physical Therapy: NO
Occupational Therapy Required: NO
Speech-language Pathology Required: NO
Requested Care/Treatments Required:
Clinical Findings To Justify Home Health: No skilled nursing needed
Certification Statement: Patient does not want home health
Signed by (NP): 302
Signed On (NP): 2016-11-10 00:19
Signed By (Physician): 18
Signed on (Physician): 2016-11-17 00:20
Form_status: finalized
Printed:



Electronically Signed by **Darolyn Perkins** on **2016-11-17**.

Printed on 17-Dec-2016 22:10:19 pm.