John Williams: Patient Information

Patient Record Number:6120

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: John Williams External ID: 6120 **DOB**: 1959-06-16 Sex: Male

Marital Status: Married

Address: 12115 Galva Dr

City: Dallas State: Texas Postal Code: 75243 Country: USA

Mobile Phone: 214-854-1546 Street Address: 12115 Galva Dr Apt/Suite/Other: House

Family History:

Last Recorded On: 01-11-2017.

Father: Father died of chronic obstructive pulmonary disease and hypertension. .

Mother: Mother is alive with dementia and Alzheimer's disease. .

Siblings: Two brother are alive with hypertension and one sister died with MVA. .

Social History:

Last Recorded On: 01-11-2017.

Tobacco: Light tobacco smoker Smokes socially. Status: Current

Alcohol: No alcohol use. Status: Never

Recreational Drugs: No drug abuse. Status: Never Developmental History: Education level is GED..

Other History: Influenza in 2015..

Tests and Exams:

Last Recorded On: 01-11-2017.

Sigmoid/Colonoscopy N/A Done in 2011.

Prostate Exam N/A Done in 2011.

Insurance:

Superior Health Plan Texas (39188)

Priority: Primary Start Date: 2016-03-01 Relationship to Insured: Self

Type: N/A

Payer: Superior Health Plan Texas (39188)

Copay:

Insured ID Number: 519459144

Group Number:

Employer Name: John Williams

Immunizations:		

John Williams: Chief Complaint Patient Record Number:6120 Texas Physician House Calls (H) 2925 Skyway Circle North, Irving, TX, USA, 75038-3510

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Seen by Sumana Ketha MD Seen on 29-November-2016

Chief Complaint Status: finalized

Followup home visit to prevent further decline of anxiety, chronic pain, hypertension, gout, neuropathy, anticoagulant use due to blood clots. Patient complains of pain in his lower back and legs.

History of Present illness:

HPI Status:Finalized

Patient is a 57-year-old African-American male in no acute distress with multiple chronic conditions of anxiety, chronic pain, hypertension, gout, neuropathy, anticoagulant use due to blood clots. As a result of gun shot wounds, patient had chronic pain in knees, lower back, arms and hips. Patient continue to complain of pain in his lower back and legs today. Patient rates pain at 7/10.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-11-29	144	82	210.00	68.00	97.60	16.00	~	31.9	0.00

Review of Systems:

Constitutional:

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Physical Exam:

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Medication:

Description	Status	Start Date	End Date	
Warfarin Sodium ,6 MG TABS, TAKE 1 TABLET DAILY AS DIRECTED, Quantity: 90, Refill Quantity: 0				
Unknown or N/A	Active	2016-11-15		
by Jones, Derrick - MJ3217331				
Texas Physician House Calls				

Atenolol-Chlorthalidone ,50-25 MG TABS, TAKE 1 TABLET BY MOUTH DAILY, Quantity: 30, Refill Quantity: 2 Unknown or N/A Active 2016-10-31 by Jones, Derrick - MJ3217331 Texas Physician House Calls Warfarin Sodium ,6 MG TABS, TAKE 1 TABLET DAILY AS DIRECTED, Quantity: 90, Refill Quantity: 1 Active 2016-10-03 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls Warfarin Sodium ,6 MG TABS, TAKE 1 TABLET DAILY AS DIRECTED, Quantity: 30, Refill Quantity: 2 Unknown or N/A Active 2016-04-14 by Jones, Derrick - MJ3217331 Texas Physician House Calls Atenolol-Chlorthalidone ,50-25 MG TABS, TAKE 1 TABLET BY MOUTH DAILY, Quantity: 30, Refill Quantity: 3 Active 2016-04-07 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls Warfarin Sodium ,6 MG TABS, TAKE ONE TABLET BY MOUTH EVERY DAY AS DIRECTED, Quantity: 30, Refill Quantity: 2 Active 2016-03-30 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls Gabapentin, 600 MG TABS, TAKE 1 TABLET 3 TIMES DAILY, Quantity: 90, Refill Quantity: 3 Active 2016-03-25 Unknown or N/A by ketha, Dr sumana - BK6230281 DFW Primary Care PLLC ALPRAZolam ,1 MG TABS, TAKE 1 TABLET 3 TIMES DAILY @ 0800, 1200, 1600, Quantity: 90, Refill Quantity: 0 Unknown or N/A Active 2016-03-10 by Jones, Derrick - MJ3217331 Texas Physician House Calls Atenolol-Chlorthalidone ,50-25 MG TABS, TAKE 1 TABLET BY MOUTH DAILY, Quantity: 30, Refill Quantity: 1 Unknown or N/A Active 2016-03-10 by Jones, Derrick - MJ3217331 Texas Physician House Calls Carisoprodol ,350 MG TABS, TAKE 1 TABLET TWICE DAILY, Quantity: 60, Refill Quantity: 0 Unknown or N/A Active 2016-03-10 by Jones, Derrick - MJ3217331 Texas Physician House Calls Verapamil HCI, 120 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 1 Unknown or N/A Active 2016-03-10 by Jones, Derrick - MJ3217331 Texas Physician House Calls Warfarin Sodium, 6 MG TABS, TAKE 1 TABLET DAILY AS DIRECTED, Quantity: 30, Refill Quantity: 0 2016-03-10 Unknown or N/A Active 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 patient and patient educated on the benefits of low salt, low-fat, low cholesterol diet with current medical condition. Patient was instructed to go to ER for symptoms of chest pain, shortness of breath, excessive headache, blurred vision or systolic blood pressure greater than 200. Patient encouraged exercise daily. No labs needed this visit. The patient verbalized understanding of the plan and was given the 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. Osteoarthritis with chronic pain, continue current plan.
- 2. Neuropathy, continue current plan.
- 3. Hypertension with vascular complications, continue current plan.
- 4. Chronic pain syndrome, continue current pain medications.

- 5. Lumbago with sciatica, continue current plan.6. Gout, continue current plan.
- 7. Anxiety, continue current plan.
- 8. Peripheral vascular disease, continue current plan.
- 9. Anticoagulant use, continue current plan.

Medication refills as follows, Norco 10/325 mg t.i.d. Soma 350 mg t.i.d.

Medical Problem:

Description	Status	Start Date	End Date
Major depressive disorder, single episode, unspecified (ICD10:F32.9 Major depressive disorder, single episode, unspecified) Unknown or N/A	Active	2016-10-27	
Chronic pain syndrome (ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-10-27	
Lumbago with sciatica, unspecified side (ICD10:M54.40 Lumbago with sciatica, unspecified side) Unknown or N/A	Active	2016-09-20	
Chronic venous hypertension (idiopathic) without complications of unspecified lower extremity (ICD10:187.309 Chronic venous hypertension (idiopathic) without complications of unspecified lower extremity) Unknown or N/A	Active	2016-08-17	
Other disorders of peripheral nervous system (ICD10:G64 Other disorders of peripheral nervous system) Unknown or N/A	Active	2016-07-12	
Gout, unspecified (ICD10:M10.9 Gout, unspecified) Unknown or N/A	Active	2016-05-26	
Mononeuropathy, unspecified (ICD10:G58.9 Mononeuropathy, unspecified) Unknown or N/A	Active	2016-05-26	
Primary generalized (osteo)arthritis (ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2016-04-13	
Polyosteoarthritis, unspecified (ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2016-04-13	
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2016-03-09	
Anxiety disorder, unspecified (ICD10:F41.9 Anxiety disorder, unspecified) Unknown or N/A	Active	2016-03-09	
Idiopathic gout, unspecified site (ICD10:M10.00 Idiopathic gout, unspecified site) Unknown or N/A	Active	2016-03-09	
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-03-09	

Allergies:

Description	Status	Start Date	End Date
No known drug allergies.	Active	2016-03-09	
Unknown or N/A	Active	2010-03-09	

Surgeries:

De	scription	Status	Start Date	End Date

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:

Primary Justification Medical Conditions: HTN

Additional Medical Conditions: Gout, anxiety, neuropathy, chronic pain, Anticoagulant use.

Nursing Required: YES Physical Therapy: NO

Occupational Therapy Required: NO Speech-language Pathology Required: NO Requested Care/Treatments Required:

Clinical Findings To Justify Home Health: Skilled nursing needed due to multiple complex disease process and patient lack of knowledge of disease process. Skilled nursing needed to assess and observe patient conditions, medication administration and anticoagulant therapy/ ptt:INR weekly...

Certification Statement: Patient is home bound due to multiple complex chronic disease process. Patient gets fatigue easily, poor balance and increase risk for falls. Also takes anticoagulant therapy and severe anxiety.

Signed by (NP): 16

Signed On (NP): 2016-11-29 04:51 Signed By (Physician): 18

Signed on (Physician): 2016-12-06 04:51

Form_status: finalized

Procedure Order:

Patient ID	6120	Order ID	1375
Patient Name	Williams, John	Ordered By	Love-Jones, Derrick
Order Date	2017-01-12	Print Date	2017-01-12
Order Status	complete	Encounter Date	2017-01-12
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2017-01-12		Final 🗸		0097	Pulse Oximetry	No	99%	97% to 100%		



Electronically Signed by Sumana Ketha, MD on 2016-12-06.

Printed on 12-Jan-2017 21:30:26 pm.