Juanita Dawson: Patient Information

Patient Record Number:6209

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: Juanita Dawson External ID: 6209 **DOB**: 1955-10-28 Sex: Female S.S.: 437960444 Marital Status: Divorced

Patient Drive Folder: 0B0x_tbqdBDPhVVZXc2ZhMy1uNDA

Address: 109 Main Park Ln

City: Duncanville State: Texas Postal Code: 75137 Country: USA

Mobile Phone: 972-217-0222 Street Address: 109 Main Park Ln

Apt/Suite/Other: Colonial Vialige ,Bulding#1,Apt#109,

Family History:

Last Recorded On: 02-11-2017.

Father: Father deceased of unknown disease.. Mother: Mother deceased of unknown disease..

Siblings: Two brother and one sister..

Offspring: No children..

Social History:

Last Recorded On: 02-11-2017.

Tobacco: Never smoker No smoking. Status: Never

Alcohol: No alcohol use. Status: Never

Recreational Drugs: No drug abuse. Status: Never

Nutrition History: Regular.. Developmental History: Well.. Other History: Immunizations, none..

Insurance:

Medicare B Texas (SMTX0)

Priority: Primary **Start Date**: 2015-07-01 Relationship to Insured: Self

Type: N/A

Payer: Medicare B Texas (SMTX0)

Copay:

Insured ID Number: 437960444A

Group Number:

Employer Name: Juanita Dawson

Immunizations:

Juanita Dawson: Chief Complaint Patient Record Number:6209 Texas Physician House Calls (H)

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Seen by Derrick Love-Jones Seen on 11-January-2017

Chief Complaint Status: finalized

Followup home visit to prevent further decline of the following chronic medical conditions of memory issues, gastroesophageal reflux disease, chronic pain syndrome, coronary artery disease, hypertension with vascular complications, urinary incontinence, osteoarthritis with chronic pain, lumbago with sciatica, depression, anxiety, and bipolar. Patient complains of pain in her right hip and increased anxiety.

History of Present illness:

HPI Status:Finalized

A 61-year-old African-American female in no acute distress with multiple chronic conditions of the following memory issues, gastroesophageal reflux disease, chronic pain syndrome, coronary artery disease, hypertension with vascular complications, urinary incontinence, osteoarthritis with chronic pain, lumbago with sciatica, depression, anxiety, and bipolar. Patient has a history of right hip pain which is chronic pain. Patient also states she is having pain in her tailbone that starts in her lower back and increased anxiety. Patient states her pain is relieved with current pain medication. Patient denies any other issues upon examination. Patient denies any chest pain, headache or nausea vomiting recently.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2017-01-11	107	65	155.00	68.00	97.60	16.00	~	23.6	0.00

Review of Systems:

Constitutional:

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No Paragraphics

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No Ballande die ughts

No Cinategiesh Browkeintgeti@f Motion

No Diarrhea

No Constipation

Physical Exam:

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BATOREMITIES:

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CYMPH:

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MUSC:

Statelogdin-Wistation Normal Limits .

ROM-Within Normal Limits .

Medication:

Description	Status Start Date	End Date

Caricopredal 250 MC TARS TAKE 1 TARIET TWICE DAILY Quantity		
Carisoprodol ,350 MG TABS, TAKE 1 TABLET TWICE DAILY, Quantity: 60, Refill Quantity: 1	1	
Unknown or N/A	Active	2017-01-12
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
Ibuprofen ,400 MG TABS, TAKE 1 TABLET BY MOUTH TWICE A DAY, Quantity: 60, Refill Quantity: 1		
Unknown or N/A by Jones, Derrick - MJ3217331	Active	2017-01-12
Texas Physician House Calls		
Metoprolol Succinate ER ,25 MG TB24, TAKE ONE TABLET BY		
MOUTH DAILY, Quantity: 90, Refill Quantity: 0	Author	047.0440
Unknown or N/A by Jones, Derrick - MJ3217331	Active	2017-01-12
Texas Physician House Calls		
Tradjenta ,5 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 2		
Unknown or N/A	Active	2017-01-12
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
Metoprolol Succinate ER ,25 MG TB24, TAKE ONE TABLET BY		
MOUTH DAILY, Quantity: 90, Refill Quantity: 0		
Unknown or N/A	Active	2017-01-11
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
Montelukast Sodium ,10 MG TABS, TAKE ONE TABLET BY MOUTH EVERY NIGHT AT BEDTIME, Quantity: 30, Refill Quantity: 3	Active	2016-12-27
by Jones, Derrick - MJ3217331	710070	2010 12 27
Texas Physician House Calls		
Atorvastatin Calcium ,10 MG TABS, TAKE 1 TABLET DAILY AT BEDTIME, Quantity: 90, Refill Quantity: 1		
Unknown or N/A by Jones, Derrick - MJ3217331	Active	2016-09-15
Texas Physician House Calls		
Montelukast Sodium ,10 MG TABS, TAKE 1 TABLET AT BEDTIME, Quantity: 30, Refill Quantity: 1		
Unknown or N/A by Jones, Derrick - MJ3217331	Active	2016-09-15
Texas Physician House Calls		
ALPRAZolam ,0.5 MG TABS, Take 1 Tablet By Mouth Twice Daily As Needed For Anxiety, Quantity: 60, Refill Quantity: 0	Active	2016-09-14
Unknown or N/A by ketha, Dr sumana - BK6230281	Active	2010-03-14
Texas Physician House Calls		
ALPRAZolam ,1 MG TABS, TAKE ONE TABLET BY MOUTH THREE TIMES A DAY WITH FOOD, Quantity: 90, Refill Quantity: 0		
Unknown or N/A by Jones, Derrick - MJ3217331	Active	2016-07-27
Texas Physician House Calls		
Tradjenta ,5 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 1		
Unknown or N/A	Active	2016-07-27
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
VESIcare ,5 MG TABS, TAKE 1 TABLET BY MOUTH DAILY, Quantity: 30, Refill Quantity: 1		
Unknown or N/A	Active	2016-07-27
by Jones, Derrick - MJ3217331 Taxas Physician House Calls		
Texas Physician House Calls Atorvastatin Calcium ,10 MG TABS, TAKE 1 TABLET DAILY AT BEDTIME, Quantity: 90, Refill Quantity: 1		
Unknown or N/A	Active	2016-07-27
by Jones, Derrick - MJ3217331		
Texas Physician House Calls Montelukast Sodium ,10 MG TABS, TAKE 1 TABLET AT BEDTIME,		
Quantity: 30, Refill Quantity: 1		
Unknown or N/A	Active	2016-07-27
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
TOAGOT HYSIOIGH FIOUSO OGIIS		

Lisinopril ,5 MG TABS, TAKE 1 TABLET DAILY, Quantity: 90, Refill

Quantity: 0

Unknown or N/A by Jones, Derrick - MJ3217331

Texas Physician House Calls

Active 2016-06-24

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 was given to the patient. Educated the patient to have low-salt, low-fat, and low-cholesterol diet and exercise as tolerated. 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. Reviewed old records of the patient. Follow up appointment in 4-6 weeks.

- 1. Anxiety, continue current plan.
- 2. Osteoarthritis with chronic pain, continue current plan.
- 3. Depression, continue current plan.
- 4. Coronary artery disease, continue current plan.
- 5. Chronic pain syndrome, continue current pain medication.
- 6. Bipolar, continue current plan.
- 7. Gastroesophageal reflux disease, continue current plan.
- 8. Memory loss, continue to monitor.
- 9. Urinary incontinence, continue current plan.

Medication refills of the following;

Norco 10/325 mg t.i.d. Metoprolol 25 mg q.d. Lisinopril 5 mg q.d. Alprazolam 1 mg t.i.d. Carisoprodol 350 mg b.i.d. Lipitor 10 mg q.h.s. Singular 10 mg q.d.

Medical Problem:

Description	Status	Start Date	End Date
Lumbago with sciatica, right side (ICD10:M54.41 Lumbago with sciatica, right side) Unknown or N/A	Active	2016-11-30	
Gastro-esophageal reflux disease without esophagitis (ICD10:K21.9 Gastro-esophageal reflux disease without esophagitis) Unknown or N/A	Active	2016-11-30	
Anxiety disorder, unspecified (ICD10:F41.9 Anxiety disorder, unspecified) Unknown or N/A	Active	2016-10-26	
Major depressive disorder, single episode, unspecified (ICD10:F32.9 Major depressive disorder, single episode, unspecified) Unknown or N/A	Active	2016-10-26	
Low back pain (ICD10:M54.5 Low back pain) Unknown or N/A	Active	2016-09-13	
Chronic ischemic heart disease, unspecified (ICD10:I25.9 Chronic ischemic heart disease, unspecified) Unknown or N/A	Active	2016-09-13	
Type 2 diabetes mellitus with diabetic neuropathy, unspecified (ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2016-07-26	
Chronic pain syndrome (ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-07-26	
Primary generalized (osteo)arthritis (ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2016-06-21	

Polyosteoarthritis, unspecified (ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2016-06-21
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-06-21
Chronic venous hypertension (idiopathic) without complications of unspecified lower extremity (ICD10:I87.309 Chronic venous hypertension (idiopathic) without complications of unspecified lower extremity) Unknown or N/A	Active	2016-06-21
Unspecified urinary incontinence (ICD10:R32 Unspecified urinary incontinence) Unknown or N/A	Active	2016-06-21
Bipolar disorder, unspecified (ICD10:F31.9 Bipolar disorder, unspecified) Unknown or N/A	Active	2016-06-21

Allergies:

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

Surgeries:

	Description	Status	Start Date	End Date
Knee surgery in 2016. Unknown or N/A		Active		
Breast Reduction in 2000. Unknown or N/A		Active		
Hysterectomy in 1997 Unknown or N/A		Active		
Hospitalized for chest pain. 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:

Primary Justification Medical Conditions: bipolar, Depression, HTN

Additional Medical Conditions: Memory Issues, Anxiety, CAD, GERD, Lumbago and Urinary Incontinence

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: Patient is homebound due to memory issues chronic depression in the inability to

self medicate correctly.

Certification Statement: Skilled nursing is needed due to memory issues and the inability to self medicate correctly.

Signed by (NP): 16

Signed On (NP): 2017-01-11 03:26 **Signed By (Physician):** 18

Signed on (Physician): 2017-01-18 03:27

Form_status: finalized

Procedure Order:

Patient ID	6209	Order ID	1479
Patient Name	Dawson, Juanita	Ordered By	Love-Jones, Derrick
Order Date	2017-01-11 00:00:00	Print Date	2017-02-12
Order Status	complete	Encounter Date	2017-02-12
Lab	.HH Agency	Specimen Type>	

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



Electronically Signed by **Derrick Love-Jones** on **2017-01-18**.

Printed on 12-Feb-2017 18:59:26 pm.