

Rebertha West: Patient Information
Patient Record Number:1119

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: Rebertha West
External ID: 1119
DOB: 1937-02-15
Sex: Female
S.S.: 450-98-3344
Marital Status: Widowed
Patient Drive Folder: <https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B0Q2MIHiECb5UGxXOGx5THgwbnc>

Address: 7575 Chaucer Place #101
City: Dallas
State: Texas
Postal Code: 75237
Country: USA
Home Phone: 972-296-7175
Street Address: 7575 Chaucer Place
Apt/Suite/Other: 101

Past Medical History:

Last Recorded On: 10-30-2016.
Risk Factors: GERD.

Family History:

Last Recorded On: 10-30-2016.
Father: Father had heart disease..
Mother: Mother had diabetes mellitus type 2, hypertension, and blindness..
Siblings: Sister had cancer. Brother had heart disease..
Offspring: Four children..

Primary Family Med Conditions:

Last Recorded On: 10-30-2016.
Chronic Conditions: Diabetes,Hypertension,Ischemic Heart Disease.
Disability Conditions: Sensory - Blindness and Visual Impairment.

Social History:

Last Recorded On: 10-30-2016.
Tobacco: Never smoker Nonsmoker. **Status:** Never
Alcohol: No alcohol. **Status:** Never
Recreational Drugs: No drug abuse. **Status:** Never
Nutrition History: Regular..
Developmental History: Education level 7th grade..
Work Status: Disabled.
Other History: Patient is a widow. She uses walker.She lives alone and takes help of her children..

Tests and Exams:

Last Recorded On: 10-30-2016.

Vitamin D (6 mo if on pills) Abnormal Done on 08/14/2014 at Evolution Health Laboratory, ordered by Dr. Sumana Ketha.

TSH Thyroid-Stimulating Hormone (every year) Normal Done on 08/14/2014 at Evolution Health Laboratory, ordered by Dr. Sumana Ketha.

CBC Complete Blood Count (3 months) Abnormal

CMP Comprehensive Metabolic Panel (3 months) Abnormal Done on 08/14/2014 at Evolution Health Laboratory, ordered by Dr. Sumana Ketha.

LIPIDS (once year unless chol meds) N/A Done on 08/14/2014 at Evolution Health Laboratory, ordered by Dr. Sumana Ketha.

Mammogram (>40yrs, Yearly) N/A Done in 2015.

Sigmoid/Colonoscopy N/A Done longtime ago.

Insurance:

Medicare B Texas (SMTX0)

Priority : Primary

Start Date : 2002-02-01

Relationship to Insured : Self

Type : N/A

Payer : Medicare B Texas (SMTX0)

Priority : Secondary

Start Date : 2011-02-01

Relationship to Insured : Self

Type : N/A

Payer : Molina Healthcare of Texas (Z1161)

Priority : Secondary

Start Date : 2015-05-14

Relationship to Insured : Self

Type : N/A

Payer : Molina Healthcare of Texas (Z1161)

Copay :

Insured ID Number : 450983344A

Group Number :

Employer Name : Rebertha West

Copay :

Insured ID Number : 515888560

Group Number :

Employer Name : Rebertha West

Copay :

Insured ID Number : 515888560

Group Number :

Employer Name : Rebertha West

Immunizations: