Maurice Smith: Patient Information

Patient Record Number: 1994

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: Maurice Smith External ID: 1994 **DOB**: 1939-08-16 Sex: Male S.S.: 454-60-6271 Marital Status: Single

Patient Drive Folder: https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B0Q2MIHiECb5NmNJcUZ1WHNXUGM

Address: 3550 East Overton Rd #2243, Bldng #4

City: Dallas State: Texas Postal Code: 75216 Country: USA

Emergency Contact: Mary (Call To This # Only For Confirmation)

Emergency Phone: 214-779-1404 Home Phone: 214-337-0984 Mobile Phone: 214-861-8777

Street Address: 3550 East Overton Rd Apt/Suite/Other: Apt #2243, Bldng #4

Past Medical History:

Last Recorded On: 10-01-2016. Risk Factors: Incontinence.

Family History:

Last Recorded On: 10-01-2016.

Father: Unknown.. Mother: Unknown.. Siblings: Unknown... Offspring: Unknown..

Social History:

Last Recorded On: 10-01-2016.

Tobacco: Current every day smoker Smokes daily. Status: Current

Alcohol: No alcohol Status: Never

Recreational Drugs: No drugs Status: Never

Nutrition History: Regular diet..

Tests and Exams:

Last Recorded On: 10-01-2016.

TSH Thyroid-Stimulating Hormone (every year) Abnormal Done on 02/06/2014 by MetroStat Diagnostics ordered by SumanaKetha.

CBC Complete Blood Count (3 months) Abnormal Done on 02/06/2014 by MetroStat Diagnostics ordered by SumanaKetha.

CMP Comprehensive Metabolic Panel (3 months) Abnormal Done on 02/06/2014 by MetroStat Diagnostics ordered by SumanaKetha.

Insurance:

Medicare B Texas (SMTX0)

Priority: Primary Start Date: 2010-01-01 Relationship to Insured: Self

Type: N/A

Payer: Medicare B Texas (SMTX0)

Priority: Primary Start Date: 2015-00-01 Relationship to Insured: Self

Type: N/A

Payer: Superior Health Plan Texas (39188)

Priority: Primary Start Date: 2015-06-01 Relationship to Insured: Self

Type: N/A

Payer: Advantage by Superior HealthPlan (68069)

Priority : Secondary Start Date : 2011-12-02 Relationship to Insured : Self

Type: N/A

Payer: Superior Health Plan Texas (39188)

Priority: Secondary Start Date: 2015-06-01 Relationship to Insured: Self

Type: N/A

Payer: Superior Health Plan Texas (39188)

Copay:

Insured ID Number: 454606271M

Group Number:

Employer Name : Maurice Smith

Copay:

Insured ID Number : 514572873

Group Number :

Employer Name : Maurice Smith

Copay:

Insured ID Number: C0008687801

Group Number :

Employer Name : Maurice Smith

Copay:

Insured ID Number: 514572873

Group Number:

Employer Name : Maurice Smith

Copay:

Insured ID Number: 514572873

Group Number :

Employer Name : Maurice Smith

Immunizations:

Medical Problem:

Description	Status	Start Date	End Date
Unspecified schizophrenia, unspecified (ICD9:295.90 Unspecified schizophrenia, unspecified) Unknown or N/A	Inactive	2015-09-15	2015-09-30
Contact dermatitis and other eczema due to detergents (ICD9:692.0 Contact dermatitis and other eczema due to detergents) Unknown or N/A	Inactive	2015-03-16	2015-09-30
Senile dementia, uncomplicated (ICD9:290.0 Senile dementia, uncomplicated) Unknown or N/A	Inactive	2015-03-16	2015-09-30
Iron deficiency anemia secondary to blood loss (chronic) (ICD9:280.0 Iron deficiency anemia secondary to blood loss (chronic)) Unknown or N/A	Inactive	2015-03-16	2015-09-30
Diabetes mellitus without mention of complication, type I [juvenile type], not stated as uncontrolled (ICD9:250.01 Diabetes mellitus without mention of complication, type I [juvenile type], not stated as uncontrolled) Unknown or N/A	Inactive	2015-03-16	2015-09-30
Lumbago (ICD9:724.2 Lumbago) Unknown or N/A	Inactive	2015-03-16	2015-09-30
Periapical abscess without sinus (ICD9:522.5 Periapical abscess without sinus) Unknown or N/A	Inactive	2015-03-16	2015-09-30
Contact dermatitis and other eczema due to other specified agents (ICD9:692.89 Contact dermatitis and other eczema due to other specified agents) Unknown or N/A	Inactive	2015-03-16	2015-09-30
Iron deficiency anemia, unspecified (ICD9:280.9 Iron deficiency anemia, unspecified) Unknown or N/A	Inactive	2015-03-16	2015-09-30

Insomnia, unspecified (ICD9:780.52 Insomnia, unspecified) Unknown or N/A	Inactive	2015-03-16	2015-09-30
Osteoarthrosis, generalized, site unspecified (ICD9:715.00 Osteoarthrosis, generalized, site unspecified) Unknown or N/A	Inactive	2015-02-11	2015-09-30
Simple type schizophrenia, unspecified (ICD9:295.00 Simple type schizophrenia, unspecified) Unknown or N/A	Inactive	2015-02-11	2015-09-30

DME:

Description	Status	Start Date	End Date
Diabetic Testing Supplies			
(ICD9:250.02 Diabetes mellitus without mention of complication, type II or unspecified type, uncontrolled)	Inactive	2015-07-02	2015-09-30
Unknown or N/A			
2015-07-02 by Dr. Sumana Ketha			
Adult size pull on SM			
(ICD9:401.1 Benign essential hypertension) (ICD9:788.30 Urinary incontinence, unspecified)	Inactive	2013-11-08	2015-09-30
Unknown or N/A			
2013-11-08 by Dr. Sumana Ketha			

Medication:

Description	Status	Start Date	End Date
FLUoxetine HCI ,20 MG CAPS, TAKE 1 CAPSULE BY MOUTH DAILY, Quantity: 30, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-07-07	
FLUoxetine HCI ,20 MG CAPS, TAKE 1 CAPSULE BY MOUTH DAILY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-06-30	
Donepezil HCI ,5 MG TABS, TAKE 1 TABLET BY MOUTH EVERY DAY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-05-18	
Haloperidol ,10 MG TABS, TAKE 1 TABLET BY MOUTH AT BEDTIME, Quantity: 30, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-05-18	
Hydrocodone-Acetaminophen ,10-325 MG TABS, TAKE 1 TABLET EVERY 8 HOURS AS NEEDED FOR PAIN, Quantity: 90, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-05-13	
MetFORMIN HCI ,500 MG TABS, TAKE 1 TABLET BY MOUTH TWICE A DAY, Quantity: 60, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-05-13	
FLUoxetine HCI ,20 MG CAPS, TAKE 1 CAPSULE DAILY, Quantity: 30, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-05-04	

Medical Problem:

Description	Status Start Da	ate End Date	

Allergic rhinitis, cause unspecified (EUDIOLOGIA Sharamadal shrifts EUDIOLOGIA Sharamadal shrifts (EUDIOLOGIA Sharamadal shrifts EUDIOLOGIA Sharamadal shrif	Simple type schizophrenia, chronic	Active	2015-10-01
CLUSTEAN Alarge mines, unspecified Market	(ICD10:F20.89 Other schizophrenia) Unknown or N/A	Active	2010-10-01
Recommendation attributions (Circi Description of No. Potton (Circ		Active	2015-10-01
CICD10AD AGE Processor and strains to support CicD10AD AGE			
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CODITORS 30 Unspecified coveration showt to throwboard disturbance) Active 2816-1941 Continuement on IAA University on IAA Univers			
Unicessor a NA. Displayed with neutrological manifestations, type II or unspecified type, not stated as uncontrolled (CD101614 as 1920 addies mellius with databets neutropathy, unspecified) Linkmonan NIA. Polymeuropathy in disbetter (CD101614 as 1920 addies neutropathy, unspecified) Linkmonan NIA. Assis 2015-10-01 CREAD THAN 1970 and NIA. CREA	· ·		
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Librobann NN NA		Active	2015-10-01
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Osteoarthrosis, unspecified whether generalized or localized, site unspecified (ICD10A1930 Unspecified site) Unknown or NA A Active Unknown or NA Unknown or	1		
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Malignant hypertensive heart disease without heart failure (ICD10111.9 Hypertensive heart disease without heart failure) (ICD10141.9 Hypertensive heart disease without mention of complication, type II or unspecified byte, uncontrolled (ICD10141.9 Essential hypertension) (ICD10141 Essential (primary) hypertension) (ICD10141 Essential (primary) hypertension) (ICD10141.9 Essential (primary) hypertension) (ICD10411.9 Type 2 disobetes mellius with numbroof or NIA Depressive disorder, not elsewhere classified (ICD10411.9 Type 2 disobetes mellius without mention of complication, type II or unspecified (ICD10411.9 Type 2 disobetes mellius without mention of complications) (ICD10411.9 Type 2 disobetes mellius without mention of complications) (ICD10411.9 Type 2 disobetes mellius without mention of complications) (ICD10411.9 Type 2 disobetes mellius without mention of complications) (ICD10411.9 Type 2 disobetes mellius without mention of complications) (ICD10411.9 Type 2 disobetes mellius without mention of complications) (ICD10411.9 Type 2 disobetes mellius without mention of complications) (ICD10411.9 Type 2 disobetes mellius without mention of complications) (ICD10411.9 Type 2 disobetes mellius without mention of complications) (ICD10411.9 Type 2 disobetes mellius without mention of complications) (ICD10411.9 Type 2 disobetes mellius without mention of complications) (ICD10411.9 Type 2 disobetes mellius without mention of complications) (ICD10411.9 Type 2 disobetes mellius without mention of complications) (ICD10411.9 Type 2 disobetes mellius without mention of complications) (ICD10411.9 Type 2 disobetes mellius without mention of complications) (ICD10411.9 Type 2 disobetes mellius without mention of complication			
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(ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A Simple type schizophrenia, unspecified (ICD10:F20.89 Other schizophrenia) Unknown or N/A Contact dermatitis and other eczema due to detergents (ICD10:L25.9 Unspecified contact dermatitis, unspecified cause) Unknown or N/A Senile dementia, uncomplicated (ICD10:F03.90 Unspecified dementia without behavioral disturbance) Unknown or N/A Iron deficiency anemia secondary to blood loss (chronic) (ICD10:D50.9 Iron deficiency anemia, unspecified) Active 2015-10-01 Active 2015-10-01	(ICD10:M15.0 Primary generalized (osteo)arthritis)	Active	2015-10-01
Simple type schizophrenia, unspecified (ICD10:F20.89 Other schizophrenia) Unknown or N/A Contact dermatitis and other eczema due to detergents (ICD10:L25.9 Unspecified contact dermatitis, unspecified cause) Unknown or N/A Senile dementia, uncomplicated (ICD10:F03.90 Unspecified dementia without behavioral disturbance) Unknown or N/A Iron deficiency anemia secondary to blood loss (chronic) (ICD10:D50.9 Iron deficiency anemia, unspecified) Active 2015-10-01 2015-10-01			
(ICD10:F20.89 Other schizophrenia) Unknown or N/A Contact dermatitis and other eczema due to detergents (ICD10:L25.9 Unspecified contact dermatitis, unspecified cause) Unknown or N/A Senile dementia, uncomplicated (ICD10:F03.90 Unspecified dementia without behavioral disturbance) Unknown or N/A Iron deficiency anemia secondary to blood loss (chronic) (ICD10:D50.9 Iron deficiency anemia, unspecified) Active 2015-10-01 2015-10-01			
Contact dermatitis and other eczema due to detergents (ICD10:L25.9 Unspecified contact dermatitis, unspecified cause) Unknown or N/A Senile dementia, uncomplicated (ICD10:F03.90 Unspecified dementia without behavioral disturbance) Unknown or N/A Iron deficiency anemia secondary to blood loss (chronic) (ICD10:D50.9 Iron deficiency anemia, unspecified) Active 2015-10-01	(ICD10:F20.89 Other schizophrenia)	Active	2015-10-01
(ICD10:L25.9 Unspecified contact dermatitis, unspecified cause) Active 2015-10-01 Senile dementia, uncomplicated (ICD10:F03.90 Unspecified dementia without behavioral disturbance) Unknown or N/A Active 2015-10-01 Active 2015-10-01			
Unknown or N/A Senile dementia, uncomplicated (ICD10:F03.90 Unspecified dementia without behavioral disturbance) Unknown or N/A Iron deficiency anemia secondary to blood loss (chronic) (ICD10:D50.9 Iron deficiency anemia, unspecified) Active 2015-10-01		Active	2015-10-01
(ICD10:F03.90 Unspecified dementia without behavioral disturbance) Unknown or N/A Iron deficiency anemia secondary to blood loss (chronic) (ICD10:D50.9 Iron deficiency anemia, unspecified) Active 2015-10-01		. 10.1.0	
Unknown or N/A Iron deficiency anemia secondary to blood loss (chronic) (ICD10:D50.9 Iron deficiency anemia, unspecified) Active 2015-10-01	Senile dementia, uncomplicated		
Iron deficiency anemia secondary to blood loss (chronic) (ICD10:D50.9 Iron deficiency anemia, unspecified) Active 2015-10-01		Active	2015-10-01
(ICD10:D50.9 Iron deficiency anemia, unspecified) Active 2015-10-01			
		Active	2015-10-01

Diabetes mellitus without mention of complication, type I [juvenile type], not stated as uncontrolled (ICD10:E10.9 Type 1 diabetes mellitus without complications) Unknown or N/A	Active	2015-10-01
Lumbago (ICD10:M54.5 Low back pain) Unknown or N/A	Active	2015-10-01
Periapical abscess without sinus (ICD10:K04.7 Periapical abscess without sinus) Unknown or N/A	Active	2015-10-01
Contact dermatitis and other eczema due to other specified agents (ICD10:L25.8 Unspecified contact dermatitis due to other agents) Unknown or N/A	Active	2015-10-01
Iron deficiency anemia, unspecified (ICD10:D50.9 Iron deficiency anemia, unspecified) Unknown or N/A	Active	2015-10-01
Insomnia, unspecified (ICD10:G47.00 Insomnia, unspecified) Unknown or N/A	Active	2015-10-01
Unspecified schizophrenia, unspecified (ICD10:F20.9 Schizophrenia, unspecified) Unknown or N/A	Active	2015-10-01

Allergies:

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

DME:

Description	Status	Start Date	End Date
Adult size pull on SM			
(ICD10:I10 Essential (primary) hypertension)	Active	2015-10-01	
Unknown or N/A	7101170	2010 10 01	
2015-10-01 by Dr. Sumana Ketha			
Adult size pull on SM			
(ICD10:R32 Unspecified urinary incontinence)	Active	2015-10-01	
Unknown or N/A			
2015-10-01 by Dr. Sumana Ketha			
Diabetic Testing Supplies			
(ICD10:E11.65 Type 2 diabetes mellitus with hyperglycemia)	Active	2015-10-01	
Unknown or N/A	Active	2013-10-01	
2015-10-01 by Dr. Sumana Ketha			

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