

**Delores Burns: Patient Information**  
Patient Record Number:6184

**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:** Delores Burns  
**External ID:** 6184  
**DOB:** 1952-07-23  
**Sex:** Female  
**S.S.:** 460-962-040

**Address:** 3130 Kingbridge St  
**City:** Dallas  
**State:** Texas  
**Postal Code:** 75212  
**Country:** USA  
**Mobile Phone:** 214-334-1697  
**Street Address:** 3130 Kingbridge St  
**Apt/Suite/Other:** APT#73

## Past Medical History:

**Last Recorded On:** 10-01-2016.  
**Risk Factors:** Arthritis,High Cholestrol,Lumbago,Neuropathy.

## Family History:

**Last Recorded On:** 10-01-2016.  
**Father:** Father had hypertension..  
**Mother:** Mother had diabetes..

## Social History:

**Last Recorded On:** 10-01-2016.  
**Tobacco:** Current some day smoker Smoker. **Status:** Current  
**Alcohol:** No alcohol. **Status:** Never  
**Recreational Drugs:** No drug abuse. **Status:** Never  
**Exercise Patterns:** Exercise daily. **Status:** Current  
**Work Status:** Disabled.

## Insurance:

### Medicare B Texas (SMTX0)

**Priority :** Primary  
**Start Date :** 2011-04-01  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Medicare B Texas (SMTX0)

**Copay :**  
**Insured ID Number :** 460962040A  
**Group Number :**  
**Employer Name :** Delores Burns

## Immunizations:



**Delores Burns: Chief Complaint**  
Patient Record Number:6184

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**Seen by** Derrick Love-Jones  
**Seen on** 22-June-2016

**Chief Complaint Status:**finalized

Follow up home visit to prevent further decline of the following chronic conditions of diabetes mellitus, hypertension, hyperlipidemia, asthma, arthritis, and chronic pain syndrome and neuropathy. Patient complains of numbness and tingling in feet and lower extremity.

## History of Present illness:

**HPI Status:**Finalized

Patient is a 63-year-old African-American female in NAD chronic conditions of the following chronic pain syndrome, diabetes mellitus 2 with neuropathy, hypertension with vascular complications, hyperlipidemia, anxiety, and neuropathy. Patient has a history of chronic pain in feet, knees and lower extremities. Patient states that pain comes and goes often but that she gets some relief from current pain medication. Patient denies any other issues upon examination. Patient denies any hypoglycemic episodes and a foot check revealed numbness and tingling in both feet. Patient denies any chest pain, headache, or nausea/vomiting recently.

## Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-06-22	141	84	227.00	63.00	97.60	20.00	~	0.0	0.00

## Review of Systems:

**Constitutional:**

**Systemic Lupus Erythematosus:**

No Systemic Lupus Erythematosus

No Systemic Lupus Erythematosus

No Systemic Lupus Erythematosus

No Systemic Lupus Erythematosus

No Systemic Lupus Erythematosus

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## Physical Exam:

**HEENT:**

Head, Eyes, Ears, Nose, Throat - Within Normal Limits .

**EXTREMITIES:**

Upper and Lower Extremities - Within Normal Limits .

**LYMPH:**

Neck, Axilla, Groin - Within Normal Limits .

**CVSC:**

Heart, Lungs - Within Normal Limits .

**RESP:**

Lungs Clear, Rales, Rhonchi, Wheezes - Within Normal Limits .

## Plan Note:

**Plan Note Status:**Finalized

Continue same treatment plan as previous. Review to continue same medications, no new medications noted this visit. Medication adherence education was given to the patient, and the patient educated on the benefits of low salt, low-fat, low cholesterol diet with current medical conditions. Patient was instructed to go to ER for symptoms of chest pain, shortness of

breath, excessive headache, blurry vision or a systolic blood pressure greater than 200. Patient encouraged to exercise daily. No labs needed this visit. The patient verbalize understanding of the above plan and was given the office number for any questions or concerns. Prognosis is fair and patient is stable.

1. Neuropathy, continue current plan.
2. Diabetes mellitus 2 with neuropathy, continue current plan.
3. Hypertension with vascular complications, continue current plan.
4. Chronic pain syndrome, continue current pain medication.
5. Asthma, continue current plan.
6. Hyperlipidemia, continue current plan.
7. Medication adherence was given to the patient. Continue treatment as planned.
8. 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.
9. Reviewed old records of the patient.
10. Follow up appointment in 4-6 weeks.
11. Medication refills as follows: Norco 10/325 mg t.i.d.

## Medical Problem:

Description	Status	Start Date	End Date
Other disorders of peripheral nervous system ( ICD10:G64 Other disorders of peripheral nervous system) Unknown or N/A	Active	2016-06-22	
Type 2 diabetes mellitus with diabetic neuropathy, unspecified ( ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2016-06-22	
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	2016-06-22	
Chronic pain syndrome ( ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-06-22	
Other chronic pain ( ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-05-18	
Type 2 diabetes mellitus without complications ( ICD10:E11.9 Type 2 diabetes mellitus without complications) Unknown or N/A	Active	2016-05-18	
Benign essential hypertension ( ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2016-05-18	
Other hyperlipidemia ( ICD10:E78.4 Other hyperlipidemia) Unknown or N/A	Active	2016-05-18	
Hyperlipidemia, unspecified ( ICD10:E78.5 Hyperlipidemia, unspecified) Unknown or N/A	Active	2016-05-18	
Unspecified asthma, uncomplicated ( ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2016-05-18	
Mononeuropathy, unspecified ( ICD10:G58.9 Mononeuropathy, unspecified) Unknown or N/A	Active	2016-05-18	

## Allergies:

Description	Status	Start Date	End Date
penicillin Unknown or N/A	Active		
Darvon 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):** 45

**Current home health agency:** Too Care home health

**Primary Justification Medical Conditions:** Asthma,diabetes,HTN,hyperlipidemia

**Additional Medical Conditions:** Chronic Pain Syndrome and Neuropathy

**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 chronic pain that is uncontrolled and limited mobility.

**Certification Statement:** Skilled nursing is needed to manage chronic pain and uncontrolled diabetes.

**Signed by (NP):** 16

**Signed On (NP):** 2016-06-22 03:01

**Signed By (Physician):** 18

**Signed on (Physician):** 2016-06-29 03:01

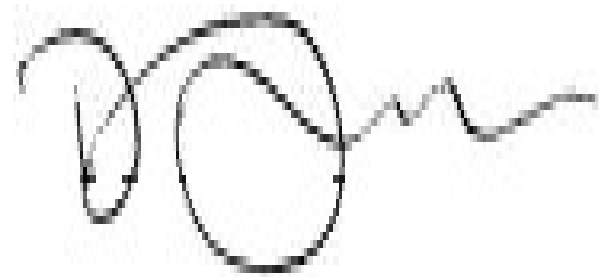
**Form\_status:** finalized

**Printed:** NO

## Procedure Order:

Patient ID	6184	Order ID	652
Patient Name	Burns, Delores	Ordered By	Love-Jones, Derrick
Order Date	2016-10-01	Print Date	2016-10-01
Order Status	complete	Encounter Date	2016-10-01
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2016-10-01		Final ✓		0097	Pulse Oximetry	No	98%	97% to 100%		



Electronically Signed by **Derrick Love-Jones** on **2016-06-30**.

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