Herbert Wilkerson: Patient Information

Patient Record Number:6110

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: Herbert Wilkerson External ID: 6110 **DOB**: 1928-10-30 Sex: Male **S.S.**: 457403259

Address: 8303 Bunche Dr

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

Mobile Phone: 214-274-4941 Street Address: 8303 Bunche Dr Apt/Suite/Other: House

Family History:

Last Recorded On: 10-23-2016.

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

Social History:

Last Recorded On: 10-23-2016.

Tobacco: Never smoker No smoking. Status: Never

Alcohol: No alcohol use. Status: Never

Recreational Drugs: No drug abuse. Status: Never

Nutrition History: ADA and healthy heart diet..

Developmental History: Well..

Insurance:

Medicare B Texas (SMTX0)

Priority: Primary Start Date: 1994-04-01 Relationship to Insured : Self

Type: N/A

Payer: Medicare B Texas (SMTX0)

Copay: Insured ID Number: 457403259A

Group Number:

Employer Name: Herbert Wilkerson

Immunizations:

Herbert Wilkerson: Chief Complaint

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Seen by Derrick Love-Jones Seen on 17-August-2016

Chief Complaint Status: finalized

Follow up home visit for the prevention and control of chronic conditions of hypertension, diabetes 2, cancer of bladder, benign prostatic hyperplasia, hearts disease, glaucoma, urinary incontinence and osteoarthritis. Patient complains of shoulder pain.

History of Present illness:

HPI Status:Finalized

Patient is a 87-year-old male with multiple chronic conditions of hypertension, diabetes 2, cancer of bladder, benign prostatic hyperplasia, glaucoma, osteoarthritis, urinary incontinence, and heart disease. Patient states that his shoulders have been hurting and has chronic pain. Patient denies any recent trauma and rates pain 6/10. Patient decubitus on left foot has healed. He also has mobility impairment which he uses a rolling walker.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	ВМІ	Head circ
2016-08-17	155	66	245.00	74.00	98.20	18.00	~	0.0	0.00

Review of Systems:

Gyesitourinary Male:

Hat William William Health Hea

Carlos De Chest Pain

No Eliptatistipusin remors

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Physical Exam:

GENRO:

StreinustlinkfAcchsahmatintalth/Etilkobradg-dy/etilken OCaliderssid 1963-09/ithinpNormEtildtersidsNasal Turbinates-Within Normal Limits.

ENIT:

RINGENANDIFERICATION NEIGH SCHOOL Mood AVILLINING SOFT AND STATE OF THE STATE OF TH

NFCK-

Supple, Thyromegaly, Carotid of the Nasal Septum, JVD, lymphadenopathy-Within Normal Limits .

CV:

 $\ensuremath{\mathsf{RRR}}\textsc{-Within Normal Limits}$.

RESP:

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

GI:

Soft, Non Tender, Non Distended, Masses-Within Normal Limits .

Bowel Sounds present in all four quadrants-Within Normal Limits .

Plan Note:

Plan Note Status: Finalized

Do you same treatment plan has previous. Reviewed and continue same medications, no new medications noted this visit. Medication adherence education was given to the patient and 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 systolic blood pressure greater than 200. Patient encouraged to exercise daily as tolerated. No labs needed this visit. The patient verbalized understanding of the above plan was giving the office number for any questions

or concerns. Prognosis is fair and patient stable. Reviewed old records of the patient. Follow up appointment in 4-6 weeks.

- 1. Osteoarthritis with chronic pain, continue current plan.
- 2. Diabetes mellitus type 2 with neuropathy, continue current plan.
- 3. Hypertension with vascular complications, continue current plan.
- 4. Benign prostatic hyperplasia, continue current plan.
- 5. Bladder cancer, continue current plan.
- 6. Glaucoma, continue current plan.
- 7. Urinary incontinence, continue current plan.
- 8. Chronic pain syndrome, continue current pain medication.

No medication refills needed this visit.

Medical Problem:

Description	Status	Start Date	End Date
Primary generalized (osteo)arthritis (ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2016-08-17	
Polyosteoarthritis, unspecified (ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2016-08-17	
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-08-17	
Type 2 diabetes mellitus with diabetic neuropathy, unspecified (ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2016-08-17	
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	2016-08-17	
Enlarged prostate without lower urinary tract symptoms (ICD10:N40.0 Enlarged prostate without lower urinary tract symptoms) Unknown or N/A	Active	2016-06-27	
Bilateral primary osteoarthritis of knee (ICD10:M17.0 Bilateral primary osteoarthritis of knee) Unknown or N/A	Active	2016-06-24	
Type 2 diabetes mellitus without complications (ICD10:E11.9 Type 2 diabetes mellitus without complications) Unknown or N/A	Active	2016-03-03	
Enlarged prostate with lower urinary tract symptoms (ICD10:N40.1 Enlarged prostate with lower urinary tract symptoms) Unknown or N/A	Active	2016-03-03	
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2016-03-03	
Unspecified glaucoma (ICD10:H40.9 Unspecified glaucoma) Unknown or N/A	Active	2016-03-03	
Malignant neoplasm of bladder, unspecified (ICD10:C67.9 Malignant neoplasm of bladder, unspecified) Unknown or N/A	Active	2016-03-03	
Type 1 diabetes mellitus with diabetic nephropathy (ICD10:E10.21 Type 1 diabetes mellitus with diabetic nephropathy) Unknown or N/A	Active	2016-02-25	
Long term (current) use of insulin (ICD10:Z79.4 Long term (current) use of insulin) Unknown or N/A	Active	2016-02-25	
Unilateral primary osteoarthritis, unspecified knee (ICD10:M17.10 Unilateral primary osteoarthritis, unspecified knee) Unknown or N/A	Active	2016-02-25	
Rheumatoid bursitis, right shoulder (ICD10:M06.211 Rheumatoid bursitis, right shoulder) Unknown or N/A	Active	2016-02-25	

Active

2016-02-25

Allergies:

	Description	Status	Start Date	End Date
Penicillin.		Active		
Unknown or N/A		7101170		

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: YES

Is House Visit Needed: YES Next Visit Duration (in days): 31

Current home health agency: Integrity Home Health Care Services

Primary Justification Medical Conditions: Hyperplasia, diabetes, Glaucoma, HTN, Heart_Disease

Additional Medical Conditions: Bladder cancer

Nursing Required: YES Physical Therapy: NO

Occupational Therapy Required: NO Speech-language Pathology Required: NO

Clinical Findings To Justify Home Health: Skilled nursing needed due to debility and dressing changes to left foot.

Certification Statement: Patient is home bound due to debility and decubitus on left foot. Patient is weak with poor balance and

at risk for fall.

Signed by (NP): 16

Signed On (NP): 2016-08-17 05:52 **Signed By (Physician):** 18

Signed on (Physician): 2016-08-24 05:52

Form_status: finalized

Procedure Order:

Patient ID	6110	Order ID	845
Patient Name	Wilkerson, Herbert	Ordered By	Love-Jones, Derrick
Order Date	2016-10-23	Print Date	2016-10-23
Order Status	complete	Encounter Date	2016-10-23
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2016-10-23		Final ✓		0097	Pulse Oximetry	No	97%	97% to 100%		



Electronically Signed by Derrick Love-Jones on 2016-08-24.

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