Mildred Wallace: Patient Information

Patient Record Number:5908

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: Mildred Wallace External ID: 5908 **DOB**: 1950-10-24 Sex: Female Marital Status: Single

User Defined: Schedule on Mon, Wed & Friday

genericval1: 214-288-1428

Patient Drive Folder: https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B1v8FHBd\_SfCZ3ZMU1FpdFRRaDg

Address: 9308 Beck Ave

City: Dallas State: Texas Postal Code: 75228 Country: USA

Mother's Name: Dialasis on Tuesday and Thursdy

Home Phone: 214-859-0227 Street Address: 9308 Beck Ave

Apt/Suite/Other: 106

# **Past Medical History:**

Last Recorded On: 12-07-2016. Risk Factors: Lumbago.

### **Family History:**

Last Recorded On: 12-07-2016.

Father: Father died of diabetes mellitus type 2.. Mother: Mother died of child birth and hypertension..

Siblings: Two brothers alive and healthy and one brother died of diabetes mellitus type 2, coronary artery disease, hypertension.

One sister alive with diabetes mellitus type 2 and hypertension and another sister died of breast cancer..

Offspring: Patient has three daughters who are alive and healthy...

# **Primary Family Med Conditions:**

Last Recorded On: 12-07-2016.

Chronic Conditions: Diabetes, Hypertension, Ischemic Heart Disease, Female/Male Breast Cancer.

## **Social History:**

Last Recorded On: 12-07-2016.

**Tobacco:** Never smoker No smoking. Status: Never

Alcohol: No alcohol. Status: Never

Recreational Drugs: No drug abuse. Status: Never

Nutrition History: Good.. Developmental History: Well.. Other History: One year of college..

#### **Tests and Exams:**

Last Recorded On: 12-07-2016.

### Insurance:

#### Medicare B Texas (SMTX0)

**Priority:** Primary **Start Date**: 0000-00-00 Relationship to Insured: Self

Type: N/A

Payer: Medicare B Texas (SMTX0)

Priority: Primary
Start Date: 2015-09-10 Relationship to Insured : Self

Type: N/A

Payer : Medicare B Texas (SMTX0)

**Priority**: Secondary Start Date: 0000-00-00 Relationship to Insured : Self

Type: N/A

Payer: Humana (61101)

Copay:

Insured ID Number: 458948774A

**Group Number:** 

Employer Name : Mildred Wallace

Copay : Insured ID Number : 458948774A

**Group Number:** 

Employer Name : Mildred Wallace

Copay:

Insured ID Number: H68314344

**Group Number:** 

Employer Name : Mildred Wallace

### **Immunizations:**

# **Medical Problem:**

Description	Status	Start Date	End Date
Hypertensive heart and chronic kidney disease without heart failure, with stage 5 chronic kidney disease, or end stage renal disease (ICD10:I13.11 Hypertensive heart and chronic kidney disease without heart failure, with stage 5 chronic kidney disease, or end stage renal disease) Unknown or N/A	Active	2016-11-09	
Generalized anxiety disorder ( ICD10:F41.1 Generalized anxiety disorder) Unknown or N/A	Active	2016-11-09	
Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease (ICD10:I12.0 Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease) Unknown or N/A	Active	2016-11-09	
Other polyosteoarthritis ( ICD10:M15.8 Other polyosteoarthritis) Unknown or N/A	Active	2016-11-09	
Lumbago ( ICD10:M54.5 Low back pain) Unknown or N/A	Active	2015-10-01	

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