Debra Smith: Patient Information

Patient Record Number:5970

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: Debra Smith External ID: 5970 **DOB**: 1962-06-11 Sex: Female S.S.: 450-25-1115

User Defined: 469-709-8284

genericval1: lives with Thomas, Andrew

Patient Drive Folder:

https://drive.google.com/drive/u/0/folders/0B1v8FHBd_SfCflpRTGImaHp4NFhQd1AzRHJ5NTNPcTlxX2RRc3dlQnJndzQwSmo1

OEhMc3c

Address: 2269 Aspen Dr

City: Dallas State: Texas Postal Code: 75227 Country: USA

Emergency Phone: 469-709-8284 Home Phone: 214-845-1309 Mobile Phone: 214-381-8848 Street Address: 2269 Aspen Dr Apt/Suite/Other: House

Family History:

Last Recorded On: 11-10-2016.

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

Social History:

Last Recorded On: 11-10-2016. Tobacco: No smoking. Status: Never Alcohol: No alcohol. Status: Never

Recreational Drugs: No drug abuse. Status: Never

Nutrition History: Regular. Developmental History: Well.

Insurance:

Medicare B Texas (SMTX0)

Priority: Primary Start Date: 2008-03-01 Relationship to Insured : Self

Type: N/A

Payer: Medicare B Texas (SMTX0)
Priority: Primary Start Date: 2010-01-01 Relationship to Insured : Self

Type: N/A

Payer: Medicare B Texas (SMTX0)
Priority: Secondary

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

Type: N/A

Payer: Molina Healthcare of Texas (Z1161)

Copay : Insured ID Number : 450251115A Group Number :

Employer Name: Debra Smith

Copay : Insured ID Number : 450251115A

Group Number : Employer Name : Debra Smith

Copay:

Insured ID Number: 520947195

Group Number:

Employer Name : Debra Smith

Immunizations:

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