

Patient Record Number:5599

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: Bernard Mathis

External ID: 5599

DOB: 1964-06-16

Sex: Male

S.S.: 463-45-3567

Patient Drive Folder: <https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B0Q2MIHiECb5ZktRU0hLbzY3dFU>

Address: 3200 South Lancaster Road

City: Dallas

State: Texas

Postal Code: 75216

Country: USA

Street Address: 3200 South Lancaster Road

Past Medical History:

Last Recorded On: 12-04-2016.

Risk Factors: Seizures.

Additional Medical History: GSW in head, abnormal gait, and CAD.

Family History:

Last Recorded On: 12-04-2016.

Father: Unknown..

Mother: Unknown..

Siblings: Unknown..

Other Family Relative: Flu shot given, 0.5 mL left deltoid on 10/24/2016..

Primary Family Med Conditions:

Last Recorded On: 12-04-2016.

Risk Factors: None.

Social History:

Last Recorded On: 12-04-2016.

Tobacco: Smokes sometimes. **Status:** Current

Alcohol: No alcohol. **Status:** Never

Recreational Drugs: No drug use. **Status:** Never

Nutrition History: Regular diet..

Developmental History: Educational level is 12th grade..

Other History: Goes to daycare. Influenza in 2014.

Tests and Exams:

Last Recorded On: 12-04-2016.

HbA, C Hemoglobin (if DM every 3 mo) Abnormal Done on 2/26/2015, at Evolution Health, Ordered by Dr. Sumana Ketha.

TSH Thyroid-Stimulating Hormone (every year) Normal Done on 2/26/2015, at Evolution Health,
Ordered by Dr. Sumana Ketha.

CBC Complete Blood Count (3 months) Abnormal Done on 2/26/2015, at Evolution Health, Ordered by Dr. Sumana Ketha.

CMP Comprehensive Metabolic Panel (3 months) Normal Done on 2/26/2015, at Evolution Health, Ordered by Dr. Sumana Ketha.

LIPIDS (once year unless chol meds) Abnormal Done on 2/26/2015, at Evolution Health, Ordered by Dr. Sumana Ketha.

UA - Urinalysis - (Yearly - HH primary responsibility) Normal Done on 2/26/2015, at Evolution Health, Ordered by Dr. Sumana Ketha.

Insurance:

Medicare B Texas (SMTX0)

Priority : Primary

Start Date : 1989-10-01

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)

Copay :

Insured ID Number : 463453567A

Group Number :

Employer Name : Bernard Mathis

Copay :

Insured ID Number : 463453567A

Group Number :

Employer Name : Bernard Mathis

Immunizations:

Bernard Mathis: Chief Complaint
Patient Record Number:5599

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

Seen by Derrick Love-Jones
Seen on 24-October-2016

Chief Complaint Status:finalized

Follow up home visit for management of coronary artery disease, abnormal gait, visual impairment, generalized muscle weakness, hyperlipidemia, hypertension, osteoarthritis, abnormal gait, gastroesophageal reflux disease,, neuropathy, and epilepsy. Patient complains of pain in his feet.

History of Present illness:

HPI Status:Finalized

A 52-year-old AA male in NAD with multiple chronic conditions of coronary artery disease, abnormal gait, visual impairment, generalized muscle weakness, hyperlipidemia, hypertension, osteoarthritis, abnormal gait, gastroesophageal reflux disease,neuropathy, and epilepsy. Patient states that he has been having numbness and tingling in both feet that has increased over the last several weeks. Patient denies any other issues upon examination. Patient denies any chest pain, headache, or nausea or vomiting recently.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-10-24	117	62	236.00	72.00	97.80	16.00	~	32.0	0.00

Review of Systems:

Constitutional:

General/Endocrine/Metabolic:

No Weight Change
No Fever
No Night Sweats
No Excessive Thirst
No Excessive Hunger
No Change In Range Of Motion
No Change In Appetite
No Change In Mentation
No Boredom
No Obstruction

Physical Exam:

HEENT:

Head: Within Normal Limits .
Eyes: Within Normal Limits .
Ears: Within Normal Limits .
Nose: Within Normal Limits .
Throat: Within Normal Limits .

CV:

Heart: Within Normal Limits .
Lungs: Within Normal Limits .

CV: Within Normal Limits .

Murmur, Rubs, Gallops-Within Normal Limits .

Medication:

Description	Status	Start Date	End Date
Aspirin-81 ,81 MG TBEC, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 0			
Unknown or N/A	Active	2015-05-18	
by ketha, Dr sumana - BK6230281			
Texas Physician House Calls			

Levetiracetam ER ,500 MG TB24, BID, Quantity: 60, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2015-05-18
Pravastatin Sodium ,20 MG TABS, TAKE 1 TABLET DAILY AT BEDTIME, Quantity: 30, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2015-05-18
Triamterene-HCTZ ,37.5-25 MG TABS, TAKE ONE TABLET BY MOUTH ONCE DAILY WITH FOOD, Quantity: 30, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2015-05-18
Aspirin ,81 MG TBEC, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-05-17
Levetiracetam ER ,500 MG TB24, BID, Quantity: 60, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-05-17
Pravastatin Sodium ,20 MG TABS, TAKE 1 TABLET DAILY AT BEDTIME, Quantity: 30, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-05-17
Triamterene-HCTZ ,37.5-25 MG TABS, TAKE ONE TABLET BY MOUTH ONCE DAILY WITH FOOD, Quantity: 30, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-05-17

Plan Note:

Plan Note Status: Finalized

Continue same treatment plan as previous. Reviewed and continue with current medication. Medication adherence education was given to the patient. Patient was educated on benefits of low salt, low fat, low cholesterol diet with current medical issues. Patient was instructed to go to the emergency room for symptoms of chest pain, shortness of breath, headache, blurred vision or systolic blood pressure over 200. Patient encouraged continuing weight loss efforts via daily exercise and certain food restrictions. No labs needed this visit. The patient verbalized understanding of the above plan, and was given the office number to call for any questions or concern. Prognosis is fair and patient is stable.

1. Neuropathy, continue current plan.
2. Hypertension with vascular complications, continue current plan.
3. Epilepsy, continue current plan.
4. Gastroesophageal reflux disease, continue current plan.
5. Muscle spasms, continue current plan.
6. Coronary artery disease, continue current plan.
7. Osteoarthritis with chronic pain, continue current plan.
8. Hyperlipidemia, continue current plan.
9. Abnormal gait, continue to monitor.
10. Visual impairment, continue to monitor.

Medication refills as follows:

Levetiracetam 500 mg b.i.d.
Triamterene/HCTZ 37.5/12.5 mg q.d.
Pravastatin 20 mg q.h.s.

Medical Problem:

Description	Status	Start Date	End Date
Profound impairment, one eye, impairment level not further specified (ICD10:H54.40 Blindness, one eye, unspecified eye) Unknown or N/A	Active	2015-10-01	

Other convulsions (ICD10:R56.9 Unspecified convulsions) Unknown or N/A	Active	2015-10-01
Obesity, unspecified (ICD10:E66.9 Obesity, unspecified) Unknown or N/A	Active	2015-10-01
Late effects of cerebrovascular disease, hemiplegia affecting dominant side (ICD10:I69.951 Hemiplegia and hemiparesis following unspecified cerebrovascular disease affecting right dominant side) Unknown or N/A	Active	2015-10-01
Unspecified essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01
Epilepsy, unspecified, without mention of intractable epilepsy (ICD10:G40.909 Epilepsy, unspecified, not intractable, without status epilepticus) Unknown or N/A	Active	2015-10-01
Muscle weakness (generalized) (ICD10:M62.81 Muscle weakness (generalized)) Unknown or N/A	Active	2015-10-01
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01
Other and unspecified hyperlipidemia (ICD10:E78.4 Other hyperlipidemia) (ICD10:E78.5 Hyperlipidemia, unspecified) Unknown or N/A	Active	2015-10-01
Pure hypercholesterolemia (ICD10:E78.0 Pure hypercholesterolemia) Unknown or N/A	Active	2015-10-01
Generalized nonconvulsive epilepsy, without mention of intractable epilepsy (ICD10:G40.A01 Absence epileptic syndrome, not intractable, with status epilepticus) Unknown or N/A	Active	2015-10-01
Coronary atherosclerosis of native coronary artery (ICD10:I25.10 Atherosclerotic heart disease of native coronary artery without angina pectoris) Unknown or N/A	Active	2015-10-01
Epilepsy, unspecified, with intractable epilepsy (ICD10:G40.911 Epilepsy, unspecified, intractable, with status epilepticus) (ICD10:G40.919 Epilepsy, unspecified, intractable, without status epilepticus) Unknown or N/A	Active	2015-10-01
Coronary atherosclerosis of unspecified type of vessel, native or graft (ICD10:I25.10 Atherosclerotic heart disease of native coronary artery without angina pectoris) Unknown or N/A	Active	2015-10-01
Osteoarthritis, localized, primary, lower leg (ICD10:M17.10 Unilateral primary osteoarthritis, unspecified knee) Unknown or N/A	Active	2015-10-01
Abnormality of gait (ICD10:R26.9 Unspecified abnormalities of gait and mobility) Unknown or N/A	Active	2015-10-01
Diabetes with neurological manifestations, type II or unspecified type, not stated as uncontrolled (ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2015-10-01
Polyneuropathy in diabetes (ICD10:E08.42 Diabetes mellitus due to underlying condition with diabetic polyneuropathy) Unknown or N/A	Active	2015-10-01
Primary tuberculous infection, bacteriological or histological examination not done (ICD10:A15.7 Primary respiratory tuberculosis) Unknown or N/A	Active	2015-10-01
Tuberculous pleurisy in primary progressive tuberculosis, unspecified (ICD10:A15.6 Tuberculous pleurisy) Unknown or N/A	Active	2015-10-01
Esophageal reflux (ICD10:K21.9 Gastro-esophageal reflux disease without esophagitis) Unknown or N/A	Active	2015-10-01

Allergies:

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

Surgeries:

Description	Status	Start Date	End Date
Craniotomy with steel plate 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): 31

Current home health agency: Prosperity Health Services

Primary Justification Medical Conditions: blindness,Epilepsy,hyperlipidemia,HTN,Heart_Disease

Additional Medical Conditions: Abnormal gait,

Nursing Required: YES

Physical Therapy: NO

Occupational Therapy Required: NO

Speech-language Pathology Required: NO

Clinical Findings To Justify Home Health: SN needed due to mental illness, CVA effects and inability to self medicate currently.

Certification Statement: Patient is home bound due to abnormal gait. Patient requires the assistance of another person to ambulate at all times due to unsafe gait pattern.

Signed by (NP): 16

Signed On (NP): 2016-10-24 06:40

Signed By (Physician): 18

Signed on (Physician): 2016-10-31 06:40

Form_status: finalized

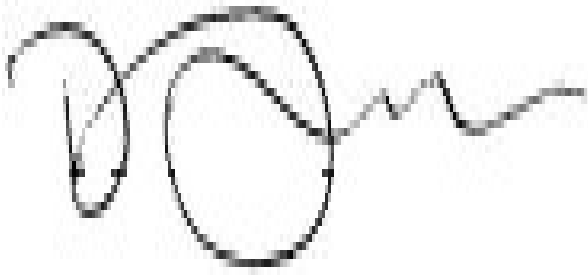
DME:

Description	Status	Start Date	End Date
Profound impairment, one eye, impairment level not further specified ordered cane quad from Trinity Companies (ICD9:369.60 Profound impairment, one eye, impairment level not further specified) Unknown or N/A	Active		

Procedure Order:

Patient ID	5599	Order ID	1038
Patient Name	Mathis, Bernard	Ordered By	Love-Jones, Derrick
Order Date	2016-12-04	Print Date	2016-12-04
Order Status	complete	Encounter Date	2016-12-04
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2016-12-04		Final ✓		0097	Pulse Oximetry	No	98%	97% to 100%		

A handwritten signature in black ink, consisting of a series of loops and a trailing wavy line.

Electronically Signed by **Derrick Love-Jones** on **2016-10-31**.

Printed on 04-Dec-2016 22:09:16 pm.