

**Andy Thomas: Patient Information**  
Patient Record Number:5940

**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:** Andy Thomas

**External ID:** 5940

**DOB:** 1927-06-25

**Sex:** Male

**S.S.:** 493-34-3794

**User Defined:** call in btw 10-2

**Patient Drive Folder:**

[https://drive.google.com/drive/u/0/folders/0B1v8FHBd\\_SfCfm9yQWxjbE9ITDE5U1NhWmZRcGRyRXZCbUdyLWJOdDBybDIwRD RHdUdNblk](https://drive.google.com/drive/u/0/folders/0B1v8FHBd_SfCfm9yQWxjbE9ITDE5U1NhWmZRcGRyRXZCbUdyLWJOdDBybDIwRD RHdUdNblk)

**Address:** 2655 Exeter Ave

**City:** Dallas

**State:** Texas

**Postal Code:** 75216

**Country:** USA

**Guardian's Name:** Helen Clewis(Daughter)

**Emergency Contact:** 214-732-3545

**Home Phone:** 214-732-3545

**Street Address:** 2655 Exeter Ave

**Apt/Suite/Other:** House

## Family History:

**Last Recorded On:** 10-01-2016.

**Father:** Denies..

**Mother:** Denies..

**Siblings:** Denies..

**Offspring:** Patient has 2 children..

## Social History:

**Last Recorded On:** 10-01-2016.

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

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

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

**Nutrition History:** Regular diet..

**Developmental History:** Educational level is 6th grade..

**Other History:** Influenza in 2014..

## Tests and Exams:

**Last Recorded On:** 10-01-2016.

**HbA, C Hemoglobin (if DM every 3 mo)** Abnormal Done on 06/23/2016 at HealthCor Lab, Ordered by Dr. Ketha.

**CBC Complete Blood Count (3 months)** Abnormal Done on 06/23/2016 at HealthCor Lab, Ordered by Dr. Ketha.

**CMP Comprehensive Metabolic Panel (3 months)** Normal Done on 06/23/2016 at HealthCor Lab, Ordered by Dr. Ketha.

**UA - Urinalysis - (Yearly - HH primary responsibility)** Normal Done on 03/04/2016 at HealthCor Lab, Ordered by Dr. Ketha.

**Prostate Exam** N/A Surgery done 18 years ago.

## Insurance:

### Medicare B Texas (SMTX0)

**Priority :** Primary  
**Start Date :** 1992-06-01  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Medicare B Texas (SMTX0)  
**Priority :** Primary  
**Start Date :** 2015-09-26  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Medicare B Texas (SMTX0)  
**Priority :** Secondary  
**Start Date :** 2015-07-01  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Medicaid Texas (SKTX0)

**Copay :**  
**Insured ID Number :** 439343794A  
**Group Number :**  
**Employer Name :** Andy Thomas  
**Copay :**  
**Insured ID Number :** 439343794A  
**Group Number :**  
**Employer Name :** Andy Thomas  
**Copay :**  
**Insured ID Number :** 524232116  
**Group Number :**  
**Employer Name :** Andy Thomas

## Immunizations:

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