

**Laura Kennedy: Patient Information**  
Patient Record Number:5252

**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:** Laura Kennedy

**External ID:** 5252

**DOB:** 1960-06-19

**Sex:** Female

**Patient Drive Folder:** <https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B-x5JZCm9BpXWEs0MFFxT0FmUUk>

**Address:** 2733 S Marsalis Ave

**City:** Dallas

**State:** Texas

**Postal Code:** 75216

**Country:** USA

**Home Phone:** 469-826-8013

**Work Phone:** 940-745-8801

**Mobile Phone:** 972-375-7179

**Street Address:** 2733 S Marsalis Ave

## Family History:

**Last Recorded On:** 09-30-2016.

**Father:** Unknown..

**Mother:** Unknown..

**Siblings:** Unknown..

**Offspring:** Unknown..

## Social History:

**Last Recorded On:** 09-30-2016.

**Tobacco:** Smoker, current status unknown Smokes cigars per day. **Status:** Current

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

**Recreational Drugs:** No drugs **Status:** Never

**Nutrition History:** Regular..

**Developmental History:** Well..

**Other History:** Influenza November 2015..

## Tests and Exams:

**Last Recorded On:** 09-30-2016.

**Mammogram (>40yrs, Yearly)** Abnormal 07/22/2014

## Insurance:

**Molina Healthcare of Texas (Z1161)**

**Priority** : Primary  
**Start Date** : 2010-01-01  
**Relationship to Insured** : Self  
**Type** : N/A  
**Payer** : Molina Healthcare of Texas (Z1161)  
**Priority** : Primary  
**Start Date** : 2014-04-01  
**Relationship to Insured** : Self  
**Type** : N/A  
**Payer** : Molina Healthcare of Texas (Z1161)  
**Priority** : Primary  
**Start Date** : 2015-05-01  
**Relationship to Insured** : Self  
**Type** : N/A  
**Payer** : Molina Healthcare of Texas (Z1161)

**Copay** :  
**Insured ID Number** : 523766865  
**Group Number** :  
**Employer Name** : Laura Kennedy  
**Copay** :  
**Insured ID Number** : 523766865  
**Group Number** :  
**Employer Name** : Laura Kennedy  
**Copay** :  
**Insured ID Number** : 523766865  
**Group Number** :  
**Employer Name** : Laura Kennedy

## **Immunizations:**

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1. Chronic obstructive pulmonary disease, refilled ProAir.
2. Bipolar disorder. Sees MHMR.
3. Hypertension, education on taking low-sodium diet.
4. Gastroesophageal reflux disease, Omeprazole 40 mg daily.
5. Coronary artery disease. Patient says she has myocardial infarction in the past.
6. Asthma exacerbation, on medications.
7. Tobacco abuse. Discussed with the patient to quit smoking.
8. Patient was given blood pressure and GERD medications.
9. Medication adherence was given to the patient.

10. Patient was given card with number to the office for any questions or concerns. Patient was instructed to go to emergency room for any life threatening emergency. Patient verbalized understanding of the above plan.
11. Reviewed old records of the patient.
12. Follow up appointment in 4-6 weeks.

## Medical Problem:

Description	Status	Start Date	End Date
Benign essential hypertension ( ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2016-08-24	
Nicotine dependence, unspecified, uncomplicated ( ICD10:F17.200 Nicotine dependence, unspecified, uncomplicated) Unknown or N/A	Active	2016-06-22	
Idiopathic progressive neuropathy ( ICD10:G60.3 Idiopathic progressive neuropathy) Unknown or N/A	Active	2016-05-04	
Chronic obstructive pulmonary disease, unspecified ( ICD10:J44.9 Chronic obstructive pulmonary disease, unspecified) Unknown or N/A	Active	2016-03-09	
Atherosclerotic heart disease of native coronary artery without angina pectoris ( ICD10:I25.10 Atherosclerotic heart disease of native coronary artery without angina pectoris) Unknown or N/A	Active	2016-03-09	
Malignant neoplasm of unspecified site of unspecified female breast ( ICD10:C50.919 Malignant neoplasm of unspecified site of unspecified female breast) Unknown or N/A	Active	2015-12-02	
Chronic ischemic heart disease, unspecified ( ICD10:I25.9 Chronic ischemic heart disease, unspecified) Unknown or N/A	Active	2015-12-02	
Gastro-esophageal reflux disease without esophagitis ( ICD10:K21.9 Gastro-esophageal reflux disease without esophagitis) Unknown or N/A	Active	2015-12-02	
Myocardial infarction ( ICD10:I25.2 Old myocardial infarction) Unknown or N/A	Active	2015-12-02	
Asthma, unspecified type, unspecified ( ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2015-10-01	
Bipolar disorder, unspecified ( ICD10:F31.9 Bipolar disorder, unspecified) Unknown or N/A	Active	2015-10-01	
Anxiety state, unspecified ( ICD10:F41.9 Anxiety disorder, unspecified) Unknown or N/A	Active	2015-10-01	
Allergic rhinitis, cause unspecified ( ICD10:J30.9 Allergic rhinitis, unspecified) Unknown or N/A	Active	2015-10-01	

## Allergies:

Description	Status	Start Date	End Date
Penicillin Unknown or N/A	Active	2015-12-02	

## Surgeries:

Description	Status	Start Date	End Date
Left mastectomy Unknown or N/A	Active	2015-12-02	
Tubal ligation. Unknown or N/A	Active	2015-12-02	

## Face to Face HH Plan:

**Patient Home Bound or Can't Drive:** NO

**Is Home Health Care Needed:** NO

**Does Patient have reliable other Primary Care Physician:** NO

**Is House Visit Needed:** NO

**Nursing Required:** NO

**Clinical Findings To Justify Home Health:** No HHC needed.

**Signed By (Physician):** 18

**Signed on (Physician):** 2016-08-24 04:04

**Form\_status:** finalized

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