Jewel Brown: Patient Information

Patient Record Number: 1221

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: Jewel Brown External ID: 1221 **DOB**: 1943-08-09 Sex: Female S.S.: 458-48-6775 Marital Status: Divorced

Patient Drive Folder: 0B0x\_tbqdBDPhcGlBekh3T2w3OUU

Address: 900 River Bend Dr

City: Lancaster State: Texas Postal Code: 75146 Country: USA

Home Phone: 214-916-8861 Mobile Phone: 469-285-8077 User Email: jbrown@gmail.com Street Address: 900 River Bend Dr

Apt/Suite/Other: House

## **Past Medical History:**

Last Recorded On: 01-26-2017. Risk Factors: Gout, Lumbago.

Additional Medical History: Allergic rhinitis, cardiomyopathy...

# **Family History:**

Last Recorded On: 01-26-2017.

Father: Father had heart disease and liver cirrhosis..

Mother: Mother had hypertension, congestive heart failuer, and history of cancer..

Offspring: Two children..

# **Primary Family Med Conditions:**

Last Recorded On: 01-26-2017.

Chronic Conditions: Heart Failure, Hypertension.

Chronic Body System Category: Diseases of the circulatory system ,Diseases of the digestive system .

## **Social History:**

Last Recorded On: 01-26-2017.

**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: Well..

Other History: Education level is 11th grade. Influenza November 2015...

### **Tests and Exams:**

Last Recorded On: 01-26-2017.

**PT/INR** (if no HH)&nbsp&nbsp Abnormal&nbsp&nbsp Done on 08/31/2015, at Evolution Health, ordered by Dr. Sumana Ketha. **Vitamin D** (6 mo if on pills)&nbsp&nbsp Abnormal&nbsp&nbsp Done on 09/03/2014, at Evolution Health, ordered by Dr. Sumana Ketha.

**HbA, C Hemoglobin (if DM every 3 mo)**&nbsp&nbsp Abnormal&nbsp&nbsp Done on 09/03/2014, at Evolution Health, ordered by Dr. Sumana Ketha.

**TSH Thyroid-Stimulating Hormone (every year)**&nbsp&nbsp Normal&nbsp&nbsp Done on 09/03/2014, at Evolution Health, ordered by Dr. Sumana Ketha.

**CBC Complete Blood Count (3 months)**&nbsp&nbsp Abnormal&nbsp&nbsp Done on 09/03/2014, at Evolution Health, ordered by Dr. Sumana Ketha.

**CMP Comprehensive Metabolic Panel (3 months)**&nbsp&nbsp Abnormal&nbsp&nbsp Done on 09/03/2014, at Evolution Health, ordered by Dr. Sumana Ketha.

**LIPIDS (once year unless chol meds)**&nbsp&nbsp Abnormal&nbsp&nbsp Done on 09/03/2014, at Evolution Health, ordered by Dr. Sumana Ketha.

**UA - Urinalysis - (Yearly - HH primary responsibility)**&nbsp&nbsp Normal&nbsp&nbsp Done on 09/03/2014, at Evolution Health, ordered by Dr. Sumana Ketha.

Mammogram (>40yrs, Yearly)&nbsp&nbsp N/A&nbsp&nbsp Done on 2011.

Sigmoid/Colonoscopy&nbsp&nbsp N/A&nbsp&nbsp Done

PAP Smear&nbsp&nbsp N/A&nbsp&nbsp Done on 2011.

### Insurance:

### **Medicare B Texas (SMTX0)**

Priority: Primary Start Date: 2008-08-01 Relationship to Insured: Self

Type: N/A

Payer: Medicare B Texas (SMTX0)

Priority: Primary Start Date: 2016-03-01 Relationship to Insured: Self

Type: N/A
Payer: Medicare B Texas (SMTX0)

Priority: Secondary Start Date: 2011-02-01 Relationship to Insured: Self

Type: N/A

Payer: Molina Healthcare of Texas (Z1161)

Priority: Secondary Start Date: 2012-12-01 Relationship to Insured: Self

Type: N/A

Payer: Molina Healthcare of Texas (Z1161)

Copay:

Insured ID Number: 458486775D6

**Group Number:** 

Employer Name: Jewel Brown

Copay:

Insured ID Number: 458486775D6 Group Number: Employer Name: Jewel Brown Copay:

Insured ID Number: 523789206 Group Number:

Employer Name : Jewel Brown

Copay :

Insured ID Number: 523789206

**Group Number:** 

Employer Name : Jewel Brown

### Immunizations:

Jewel Brown: Chief Complaint Patient Record Number:1221 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

**Seen by** Derrick Love-Jones **Seen on** 29-November-2016

#### Chief Complaint Status: finalized

Follow up home visit for management of schizophrenia, osteoarthritis, insomnia, cough, chronic pain, cataract, sleep apnea, allergic rhinitis, hyperlipidemia, diabetes-2, hypertension, atrial fibrillation, backache, chest pain, asthma, urinary incontinence, gout, bronchitis, convulsions, depression, and cardiomegaly. Patient complains of cough and congestion x 4 weeks.

# **History of Present illness:**

### **HPI Status:**Finalized

A 73-year-old African-American female in no acute distress with multiple chronic conditions of schizophrenia, osteoarthritis, insomnia, chronic pain, cataract, sleep apnea, allergic rhinitis, hyperlipidemia, diabetes-2, hypertension, atrial fibrillation, urinary incontinence, backache, chest pain, asthma, gout, bronchitis, convulsions, depression and cardiomegaly. Patient states that she has had a cough and congestion with no relief for 2 weeks. Patient continues to complain that she has chronic lower back pain. Patient rates pain 7/10. Patient denies any other issues or complaints 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
2016-11-29	178	73	272.00	61.00	97.60	18.00	~	51.4	0.00

### **Review of Systems:**

### Constitutional:

**Splanting at an article of the second of th** 

**Objection** 

Noc Name and American

Moderate State Control

No Edition Range Of Motion

No ColpanyloketatinAphentiation

No Baneged Bowel

No Bloomydiang Gums

No Obatsertiess

No Use Of Dentures

### **Physical Exam:**

#### RIMARH-

#### **MUSICE**MITIES:

SEPTEMBER OF THE PROPERTY OF T

CV:

Murmur, Rubs, Gallops-Within Normal Limits .

### Medication:

Description	Status	Start Date	End Date	
Lantus SoloStar ,100 UNIT/ML SOPN, Inject 70 Units At Bedtime, Quantity: 15, Refill Quantity: 0				
Unknown or N/A	Active	2016-11-15		
by Jones, Derrick - MJ3217331				
Texas Physician House Calls				

Coumadin, 5 MG TABS, TAKE 1 TABLET DAILY AS DIRECTED, Quantity: 30, Refill Quantity: 0 Unknown or N/A Active 2016-10-19 by Jones, Derrick - MJ3217331 Texas Physician House Calls Warfarin Sodium ,2.5 MG TABS, TAKE 1 TABLET BY MOUTH EVERY DAY, Quantity: 30, Refill Quantity: 0 Active 2016-08-05 Unknown or N/A by ketha, Dr. sumana - BK6230281 Texas Physician House Calls Hydrocodone-Acetaminophen ,10-325 MG TABS, Take one tablet by mouth three times daily as needed, Quantity: 90, Refill Quantity: 0 2015-04-24 Unknown or N/A Active by ketha, Dr sumana - BK6230281 Texas Physician House Calls Lantus SoloStar ,100 UNIT/ML SOPN, Inject 70 Units At Bedtime, Quantity: 15, Refill Quantity: 4 Active 2014-11-07 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA

### Plan Note:

### Plan Note Status: Finalized

Continue same treatment plan as previous. Reviewed and continue same medications, no new medications noted this visit. Medication adherence education was given to the patient and the patient educated on the benefits of low salt, low-fat, low cholesterol diet with current medical conditions. Patient was instructed to go to ER for symptoms of chest pain, shortness of breath, headache, blurry vision or systolic blood pressure greater than 200. Patient encouraged to exercise daily as tolerated. No labs needed this visit. Patient verbalize understanding of the above plan was giving the office number for any questions or concerns. Prognosis is fair and patient is stable. Reviewed old records of the patient. Follow up appointment in 4-6 weeks.

- 1. Chronic bronchitis, start Z-pak.
- 2. Diabetes mellitus 2 with neuropathy, continue current plan.
- 3. Gout, continue current plan.
- 4. Hyperlipidemia, continue current plan.
- ${\bf 5.}\ {\bf Chronic\ pain\ syndrome,\ continue\ current\ pain\ medications.}$
- 6. Asthma, continue current plan.
- 7. Osteoarthritis with chronic pain, continue current plan.
- 8. Cataracts, continue current plan.
- 9. Sleep apnea, continue current plan.
- 10. Allergic rhinitis, continue current plan.
- 11. Atrial fibrillation, continue current plan.
- 12. Depression, continue to monitor.
- 13. Urinary incontinence, continue current plan.
- 14. Cardiomegaly, continue current plan.
- 15. Lumbago with chronic pain, continue current plan.
- 16. Schizophrenia, continue current plan.

Medication refills as follows, Warfarin 5 mg q.d. Lasix 40 mg q.d. HCTZ 25 mg q.d. Lisinopril 5 mg q.d. ProAir INH.

### **Medical Problem:**

Description	Status	Start Date	End Date
Other convulsions			
( ICD10:R56.9 Unspecified convulsions)	Active	2015-10-01	
Unknown or N/A			
Congestive heart failure, unspecified			
( ICD10:I50.9 Heart failure, unspecified)	Active	2015-10-01	
Unknown or N/A			
Asthma, unspecified type, unspecified			
( ICD10:J45.909 Unspecified asthma, uncomplicated)	Active	2015-10-01	
Unknown or N/A			

Other specified arthropathy, lower leg (ICD10:M12.869 Other specific arthropathies, not elsewhere classified, unspecified knee) Unknown or N/A	Active	2015-10-01
Obstructive chronic bronchitis with (acute) exacerbation (ICD10:J44.1 Chronic obstructive pulmonary disease with (acute) exacerbation) 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
Chest pain, unspecified ( ICD10:R07.9 Chest pain, unspecified) Unknown or N/A	Active	2015-10-01
Unspecified essential hypertension ( ICD10:110 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01
Diabetes mellitus without mention of complication, type II or unspecified type, not stated as uncontrolled (ICD10:E11.9 Type 2 diabetes mellitus without complications) Unknown or N/A	Active	2015-10-01
Benign essential hypertension ( ICD10:110 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01
Backache, unspecified ( ICD10:M54.9 Dorsalgia, unspecified) Unknown or N/A	Active	2015-10-01
Chronic airway obstruction, not elsewhere classified (ICD10:J44.9 Chronic obstructive pulmonary disease, unspecified) Unknown or N/A	Active	2015-10-01
Gout, unspecified ( ICD10:M10.9 Gout, unspecified) Unknown or N/A	Active	2015-10-01
Malignant essential hypertension ( ICD10:110 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01
Diabetes mellitus without mention of complication, type II or unspecified type, uncontrolled ( ICD10:E11.65 Type 2 diabetes mellitus with hyperglycemia) Unknown or N/A	Active	2015-10-01
Major depressive disorder, single episode ( ICD9:296.20 Major depressive affective disorder, single episode, unspecified) Unknown or N/A	Active	
Unspecified schizophrenia, unspecified state (ICD9:295.90 Unspecified schizophrenia, unspecified) Unknown or N/A	Active	
Osteoarthrosis, localized, primary, involving hand (ICD9:715.14 Osteoarthrosis, localized, primary, hand) Unknown or N/A	Active	
Osteoarthrosis, localized, primary, involving lower leg (ICD9:715.16 Osteoarthrosis, localized, primary, lower leg) Unknown or N/A	Active	
Depressive disorder, NOS (ICD9:311 Depressive disorder, not elsewhere classified) Unknown or N/A	Active	
Insomnia, unspecified ( ICD9:780.52 Insomnia, unspecified) Unknown or N/A	Active	
Chronic pain syndrome ( ICD9:338.4 Chronic pain syndrome) Unknown or N/A	Active	
Cardiomegaly (ICD9:429.3 Cardiomegaly) Unknown or N/A	Active	

Nonsenile cataract, unspecified ( ICD9:366.00 Nonsenile cataract, unspecified) Unknown or N/A	Active
Obstructive sleep apnea (adult)(pediatric) ( ICD9:327.23 Obstructive sleep apnea (adult)(pediatric)) Unknown or N/A	Active
Allergic rhinitis, cause unspecified (ICD9:477.9 Allergic rhinitis, cause unspecified) Unknown or N/A	Active
Other primary cardiomyopathies ( ICD9:425.4 Other primary cardiomyopathies) Unknown or N/A	Active
Other and unspecified hyperlipidemia ( ICD9:272.4 Other and unspecified hyperlipidemia) Unknown or N/A	Active
Cough (ICD9:786.2 Cough) Unknown or N/A	Active
Other chronic pain ( ICD9:338.29 Other chronic pain) Unknown or N/A	Active

# **Allergies:**

	Description	Status	Start Date	End Date
Penicillin		Author		
Unknown or N/A		Active		

# **Surgeries:**

Description	Status	Start Date	End Date
Hospitalized at Baylor for Asthma Unknown or N/A	Active	2015-08-19	
Colonoscopy in 2012 Unknown or N/A	Active		
Partial hysterectomy Unknown or N/A	Active		
Cholecystectomy Unknown or N/A	Active		
CVA right hemi 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: YES

Is House Visit Needed: YES Next Visit Duration (in days): 31

Primary Justification Medical Conditions: Asthma, Cataract, Depression, diabetes, Heart\_Failure, HTN, Schizophrenia

Nursing Required: YES Physical Therapy: NO

Occupational Therapy Required: NO Speech-language Pathology Required: NO

Clinical Findings To Justify Home Health: Skilled nursing needed due to schizophrenia, asthma and inability to self medicate

correctly.

**Certification Statement:** Patient is home bound due to asthma and schizophrenia. Patient experiences confusion and shortness of breath and is unable to safely leave home alone.

Signed by (NP): 16

**Signed On (NP):** 2016-11-29 02:24 **Signed By (Physician):** 18

Signed on (Physician): 2016-12-06 02:24

Form\_status: finalized

# DME:

Wheelchair-Manual Unknown or N/A Active  Walker Unknown or N/A Active  Walker Unknown or N/A Active  Cane Unknown or N/A Active  Bathroom Safety Devices Unknown or N/A Active  Unknown or N/A Active  Active  Probe covers Unknown or N/A Active  Di Sumana Ketha  Active  Active  Covers Unknown or N/A Active  Active  Di Sumana Ketha  Active  Di Dr. Sumana Ketha  Active  Di Active  Di Active  Di Active  Di Active  Di Active  Di Active  Active  Active  Di Active  Di Active  Di Active  Di Active  Di Active  Active  Di Active  Di Active  Di Active  Di Active  Di Active  Active  Di Active  Di Active  Active  Di Active  Di Active  Di Active  Di Active  Active  Di Active  Di Active  Di Active  Active  Di Active  Di Active  Di Active  Di Active  Active  Di Active  Di Active  Di Active  Active  Di Active  Di Active  Di Active  Active  Di Active  Active  Active  Di Active  Di Active  Active  Di Active  Di Active  Di Active  Di Active  Active  Di Act	Description	Status	Start Date	End Date
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Unknown or N/A Active	by Dr. Sumana Ketha			
Unknown or N/A Active	Diabetic Supplies			
by Dr. Sumana Ketha	Unknown or N/A	Active		
	by Dr. Sumana Ketha			

# **Procedure Order:**

Patient ID	1221	Order ID	1381
Patient Name	Brown, Jewel	Ordered By	Love-Jones, Derrick
Order Date	2017-01-28	Print Date	2017-01-28
Order Status	complete	Encounter Date	2017-01-28
Lab	.HH Agency	Specimen Type>	

Ordered Procedure Report Reported	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2017-01-28		Final 🗸		0097	Pulse Oximetry	No	98%	97% to 100%		



Electronically Signed by Derrick Love-Jones on 2016-12-06.

Printed on 28-Jan-2017 18:58:07 pm.