Earlene Trigg: Patient Information

Patient Record Number:6327

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: Earlene Trigg External ID: 6327 **DOB**: 1953-11-24 Sex: Female **S.S.**: 450-02-3128

Address: 1328 Regent St

City: Mesquite State: Texas Postal Code: 75149 Country: USA

Mobile Phone: 469-865-6376 Street Address: 1328 Regent St Apt/Suite/Other: House

Family History:

Last Recorded On: 01-06-2017.

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

Other Family Relative: Grandmother diet of myocardial infarction and coronary artery disease..

Social History:

Last Recorded On: 01-06-2017.

Tobacco: Smokes one and half pack per day. Status: Current

Alcohol: No alcohol use. Status: Never

Recreational Drugs: No drug abuse. Status: Never

Nutrition History: Regular.. Developmental History: Well..

Other History: Had colonoscopy 4 yrs ago. Refused tetanus. Gave flu shot and Prevnair 13 shot..

Insurance:

Medicare B Texas (SMTX0)

Priority: Primary Start Date: 2007-02-01

Relationship to Insured : Self

Type: N/A

Payer: Medicare B Texas (SMTX0)

Copay:

Insured ID Number: 450023128A

Group Number:

Employer Name: Earlene Trigg

Immunizations:

Earlene Trigg: Chief Complaint Patient Record Number:6327 Texas Physician House Calls (H)

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Seen by Derrick Love-Jones **Seen on** 01-December-2016

Chief Complaint Status: finalized

Follow-up home visit to prevent further decline of the following chronic medical conditions of insomnia, lumbago, diabetes mellitus type 2, neuropathy and hypertension. Patient complains of lower back pain.

History of Present illness:

HPI Status:Finalized

A 63-year-old African-American female in no acute distress multiple chronic conditions of the following insomnia, lumbago, diabetes mellitus type 2, neuropathy, and hypertension. Patient has a history of lower back pain and rates her current pain at 7/10. Patient states that she does get relief from current pain medication. Patient denies any other issues upon examination. Patient denies any chest pain, headache, nausea/vomiting recently.

Vitals:

| Service Date | BPS | BPD | Wt | Ht | Temperature | RR | Note | ВМІ | Head circ |
|--------------|-----|-----|--------|-------|-------------|-------|------|------|-----------|
| 2016-12-01 | 144 | 86 | 190.00 | 65.00 | 97.40 | 16.00 | ~ | 31.6 | 0.00 |

Review of Systems:

Constitutional:

Spylifiki i jaya ki kiskin e kalngat:

No BEGANTINE THE STREET

No. Company and Co

No **Typital distriction**

Necessary strangers to

No Climita Mille Manager of Motion

No Constipation

Physical Exam:

SEED MITIES:

ROMERS:

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CV-

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Peripheral Edema-Within Normal Limits .

Medication:

| Description | Status | Start Date | End Date |
|---|--------|------------|----------|
| Mirtazapine ,30 MG TABS, Take 1 tablet twice a day, Quantity: 30, Refill Quantity: 2 | | | |
| Unknown or N/A | Active | 2016-12-04 | |
| by Jones, Derrick - MJ3217331 | | | |
| Texas Physician House Calls | | | |
| Ventolin HFA ,108 (90 Base) MCG/ACT AERS, INHALE 1 TO 2 PUFFS EVERY 4 TO 6 HOURS AS NEEDED, Quantity: 2, Refill Quantity: 0 | | | |
| Unknown or N/A | Active | 2016-12-04 | |
| by Jones, Derrick - MJ3217331 | | | |
| Texas Physician House Calls | | | |

Lyrica ,200 MG CAPS, Take 1 Tablet 2 Times A Day, Quantity: 60, Refill
Quantity: 0
Unknown or N/A
by Jones, Derrick - MJ3217331
Texas Physician House Calls

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, excessive headache, blurry vision or systolic blood pressure greater than 200. Patient encouraged exercise daily as tolerated. No labs needed this visit. The patient verbalized understanding of the above plan and was given 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. Hypertension with vascular complications, continue current plan.
- 2. Insomnia, continue current plan.
- 3. Neuropathy, continue current plan.
- 4. Diabetes mellitus type 2 with neuropathy, continue current plan.
- 5. Chronic pain syndrome, continue current pain medications.
- 6. Lumbago with chronic pain, continue current plan.

Medication refills as follows, Norco 10/325 t.i.d. Zolpidem 10 mg q.h.s. Metformin 1000 mg b.i.d. Lyrica 200 mg b.i.d. Mirtazapine 30mg q.d. Ventolin HFA.

Medical Problem:

| Description | Status | Start Date | End Date |
|--|--------|------------|----------|
| Insomnia, unspecified (ICD10:G47.00 Insomnia, unspecified) Unknown or N/A | Active | 2016-12-01 | |
| Low back pain (ICD10:M54.5 Low back pain) Unknown or N/A | Active | 2016-10-19 | |
| Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A | Active | 2016-10-19 | |
| Type 2 diabetes mellitus with diabetic neuropathy, unspecified (ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A | Active | 2016-10-19 | |
| Other disorders of peripheral nervous system (ICD10:G64 Other disorders of peripheral nervous system) Unknown or N/A | Active | 2016-10-19 | |
| Chronic venous hypertension (idiopathic) without complications of unspecified lower extremity (ICD10:I87.309 Chronic venous hypertension (idiopathic) without complications of unspecified lower extremity) Unknown or N/A | Active | 2016-10-19 | |
| Nicotine dependence, unspecified, uncomplicated (ICD10:F17.200 Nicotine dependence, unspecified, uncomplicated) Unknown or N/A | Active | 2016-10-19 | |

Allergies:

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

Surgeries:

| Description | Status | Start Date | End Date | | |
|--|--------|------------|----------|--|--|
| C-section & Tonsillectomy. | Active | | | | |
| Unknown or N/A | Active | | | | |
| Hospitalized for depression 3 years ago. | Andrea | | | | |
| Unknown or N/A | Active | | | | |

Face to Face HH Plan:

Patient Home Bound or Can't Drive: YES

Is Home Health Care Needed: NO

Does Patient have reliable other Primary Care Physician: NO

Is House Visit Needed: YES Next Visit Duration (in days): 31 Current home health agency:

Primary Justification Medical Conditions: HTN, diabetes

Additional Medical Conditions: Insomnia, Lumbago, DM2, Neuropathy.

Nursing Required: Physical Therapy:

Occupational Therapy Required: Speech-language Pathology Required: Requested Care/Treatments Required:

Clinical Findings To Justify Home Health: No skilled nursing needed at this time.

Certification Statement: Patient is homebound due to limited mobility due to back pain. No skilled nurse she needed at this time.

Signed by (NP): 16

Signed On (NP): 2016-12-01 02:42 **Signed By (Physician):** 18

Signed on (Physician): 2016-12-08 02:42

Form_status: finalized

Procedure Order:

| Patient ID | 6327 | Order ID | 1417 |
|--------------|----------------|----------------|---------------------|
| Patient Name | Trigg, Earlene | Ordered By | Love-Jones, Derrick |
| Order Date | 2017-01-06 | Print Date | 2017-01-06 |
| Order Status | complete | Encounter Date | 2017-01-06 |
| Lab | .HH Agency | Specimen Type> | |

| Ordered Procedure | Report | | | | Results | | | | | | |
|---------------------|----------|----------|--------|------|---------|------|-----|-------|-------|-------|------|
| | Reported | Specimen | Status | Note | Code | Name | Abn | Value | Range | Units | Note |
| 026: Pulse Oximetry | | | | | | | | | | | |



Electronically Signed by Derrick Love-Jones on 2016-12-08.

Printed on 06-Jan-2017 21:28:37 pm.