

David Henderson: Patient Information
Patient Record Number:6192

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: David Henderson
External ID: 6192
DOB: 1959-09-28
Sex: Male

Address: 1211 Morell Rd
City: Dallas
State: Texas
Postal Code: 75203
Country: USA
Mobile Phone: 469-321-4673
Street Address: 1211 Morell Rd
Apt/Suite/Other: House

Family History:

Last Recorded On: 09-06-2016.
Father: Unknown. .
Mother: Unknown..
Siblings: Unknown..
Offspring: Unknown..

Social History:

Last Recorded On: 09-06-2016.
Tobacco: No smoking. **Status:** Never
Alcohol: No alcohol. **Status:** Never
Recreational Drugs: No drug abuse. **Status:** Never

Insurance:

Superior Health Plan Texas (39188)

Priority : Primary
Start Date : 2016-05-01
Relationship to Insured : Self
Type : N/A
Payer : Superior Health Plan Texas (39188)

Copay :
Insured ID Number : 510601943
Group Number :
Employer Name : David Henderson

Immunizations:

David Henderson: Chief Complaint
Patient Record Number:6192

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Seen by Sumana Ketha MD
Seen on 18-August-2016

Chief Complaint Status:finalized

Follow up home visit to prevent further decline of the following chronic medical conditions of lumbago, osteoarthritis, hypertension, hyperlipidemia, insomnia, and mental illness. Patient complains of knee pain.

History of Present illness:

HPI Status:Finalized

Patient is a 56-year-old AA male in NAD with multiple chronic conditions of the following of lumbago, osteoarthritis, hypertension, hyperlipidemia, insomnia, and mental illness. Patient reports that he has pain in his knees. Patient rates current pain at 7/10 today and reports he does get relief from current pain medication. Patient denies any other issues upon examination and denied chest pain, headaches or nausea/vomiting recently.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-08-18	134	84	250.00	69.00	98.20	20.00	~	0.0	0.00

Review of Systems:

Constitutional:

No weight change
No fever
No chills
No night sweats
No fatigue
No anorexia
No photophobia

Physical Exam:

GENRO:

No acute distress, no significant findings, no acute distress, no acute distress.

HEENT:

No acute distress, no acute distress, no acute distress, no acute distress, no acute distress.

ENT:

No acute distress, no acute distress, no acute distress, no acute distress, no acute distress.

NECK:

Supple, Thyromegaly, Carotid of the Nasal Septum, JVD, lymphadenopathy-Within Normal Limits .

CV:

RRR-Within Normal Limits .

RESP:

Lungs Clear, Rales, Rhonchi, Wheezes-Within Normal Limits .

GI:

Soft, Non Tender, Non Distended, Masses-Within Normal Limits .

Bowel Sounds present in all four quadrants-Within Normal Limits .

Medication:

Description	Status	Start Date	End Date
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Amitriptyline HCl ,50 MG TABS, TAKE 1 TABLET AT BEDTIME, Quantity: 30, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 DFW Primary Care PLLC	Active	2016-05-23
AmLODIPine Besylate ,10 MG TABS, Take 1 tablet daily at bed time, Quantity: 30, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 DFW Primary Care PLLC	Active	2016-05-23
Lisinopril ,20 MG TABS, Take 1 tablet daily at bedtime, Quantity: 30, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 DFW Primary Care PLLC	Active	2016-05-23

Plan Note:

Plan Note Status:Finalized

Continue same treatment plan as previous. Reviewed and continue same medications, no new medications noted. Medication adherence education was given to the patient and the patient educated on the benefits of low salt, low-fat, low cholesterol diet current medical conditions. Patient was instructed to go to ER for symptoms of chest pain, shortness of breath, excessive headache, blurry vision was to stop it but pressure greater than 200. Patient encouraged to 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. Osteoarthritis with chronic pain, continue current plan.
2. Hypertension with vascular complications, continue current plan.
3. Hyperlipidemia, continue current plan.
4. Chronic pain syndrome, continue current pain medication.
5. Lumbago with chronic pain, continue current plan.
6. Insomnia, continue current plan.
7. Mental illness, continue current plan.

Medication refills as follows:

Norco 10/325 mg t.i.d.
Atorvastatin 40 mg q.h.s.
Metoprolol 25 mg b.i.d.
Amitriptyline 50 mg q.h.s.
Amlodipine 10 mg q.d.
ASA 81 mg q.d.
Lisinopril 20 mg q.d.

Medical Problem:

Description	Status	Start Date	End Date
Low back pain (ICD10:M54.5 Low back pain) Unknown or N/A	Active	2016-07-13	
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-07-13	
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2016-07-13	
Other hyperlipidemia (ICD10:E78.4 Other hyperlipidemia) Unknown or N/A	Active	2016-07-13	
Hyperlipidemia, unspecified (ICD10:E78.5 Hyperlipidemia, unspecified) Unknown or N/A	Active	2016-07-13	

Allergies:

Description	Status	Start Date	End Date
No known drug allergies. 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:

Primary Justification Medical Conditions: hyperlipidemia,Schizophrenia,HTN

Additional Medical Conditions:

Nursing Required: YES

Physical Therapy: NO

Occupational Therapy Required: NO

Speech-language Pathology Required: NO

Requested Care/Treatments Required:

Clinical Findings To Justify Home Health: Skilled nursing needed due to multiple complex diseases and patient lack of knowledge on how to manage the disease process and medications.

Certification Statement: Patient is home bound due to mental illness and unsafe to leave home alone due to his change in mental status.

Signed by (NP): 16

Signed On (NP): 2016-08-18 05:25

Signed By (Physician): 18

Signed on (Physician): 2016-08-25 05:25

Form_status: finalized

Procedure Order:

Patient ID	6192	Order ID	855
Patient Name	Henderson, David	Ordered By	Love-Jones, Derrick
Order Date	2016-09-25	Print Date	2016-09-25
Order Status	complete	Encounter Date	2016-09-25
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 **Sumana Ketha, MD** on **2016-08-25**.

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