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: 12-04-2016.

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

Social History:

Last Recorded On: 12-04-2016.

Tobacco: Smokes 1 1/2 pack per day. Status: Current

Alcohol: No alcohol. 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 Copay: **Start Date**: 2007-02-01

Insured ID Number: 450023128A Relationship to Insured: Self

Group Number : Type: N/A

Employer Name: Earlene Trigg Payer: Medicare B Texas (SMTX0)

Immunizations:

Earlene Trigg: Chief Complaint Patient Record Number:6327

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> Seen by Derrick Love-Jones Seen on 19-October-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 62-year-old African-American female in NAD 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	BMI	Head circ	
2016-10-19	145	78	189.99	65.00	97.80	16.00	~	31.6	0.00	

Review of Systems:

Constitutional:

Musikin@Taingat:

No BEGANTINATION SESSIONS

No. Salar Manager History

Harabig Brableens

Noc Production States

No Distribution Mentigreg Of Motion

No Constipation

Physical Exam:

SECOMITIES:

HEADERNE :

: **Printiplication of the Company of**

Peripheral Edema-Within Normal Limits .

Medication:

Description	Status	Start Date	End Date				
Lyrica ,200 MG CAPS, Take 1 Tablet 2 Times A Day, Quantity: 60, Refill							
Quantity: 0							
Unknown or N/A	Active	2016-10-24					
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. Lumbago with chronic pain, continue current plan.
- 2. Diabetes mellitus type 2 with neuropathy, continue current plan.
- 3. Neuropathy, continue current plan.
- 4. Hypertension with vascular complications, continue current plan.
- 5. Insomnia, continue current plan.
- 6. Chronic pain syndrome, continue current pain.

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.

Medical Problem:

Description	Status	Start Date	End Date
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		7.0.170		

Surgeries:

Description	Status	Start Date	End Date
C-section & Tonsillectomy. Unknown or N/A	Active		
Hospitalized for depression 3 years ago. 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): 2016-10-18 03:03 **Signed By (Physician):** 18

Signed on (Physician): 2016-10-25 03:03

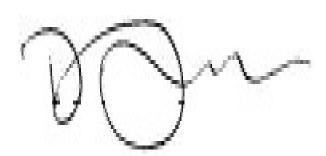
Form_status: finalized

Printed:

Procedure Order:

Patient ID	6327	Order ID	1207
Patient Name	Trigg, Earlene	Ordered By	Love-Jones, Derrick
Order Date	2016-12-04	Print Date	2016-12-04
Order Status	complete	Encounter Date	2016-12-04
Lab	.HH Agency	Specimen Type>	

C	Ordered Procedure	Report				Results						
		Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
	026: Pulse Oximetry	2016-12-04		Final ✓		0097	Pulse Oximetry	No	97%	97% to 100%		



Electronically Signed by Derrick Love-Jones on 2016-10-26.

Printed on 04-Dec-2016 21:16:10 pm.