

David Henderson: Patient Information
Patient Record Number:6192

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: David Henderson
External ID: 6192
DOB: 1959-09-28
Sex: Male
User Defined: 972-646-8070

Address: 1211 Morrell Ave
City: Dallas
State: Texas
Postal Code: 75203
Country: USA
Home Phone: 972-646-8070
Mobile Phone: 469-321-4673
Street Address: 1211 Morrell Ave
Apt/Suite/Other: House

Family History:

Last Recorded On: 12-15-2016.
Father: Unknown. .
Mother: Unknown..
Siblings: Unknown..
Offspring: Unknown..

Social History:

Last Recorded On: 12-15-2016.
Tobacco: No smoking. **Status:** Never
Alcohol: No alcohol. **Status:** Never
Recreational Drugs: No drug abuse. **Status:** Never
Nutrition History: Regular. .
Developmental History: Well..

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 01-November-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 lower back pain.

History of Present illness:

HPI Status:Finalized

Patient is a 57-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 lower back. 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
2016-11-01	132	82	247.00	69.00	97.80	16.00	~	36.5	0.00

Review of Systems:

Constitutional:

Other Medical History:
No Diabetes Mellitus
No Hypertension
No Chest Pain
No Dyslipidemia
No Asthma
No Chronic Kidney Disease
No Chronic Liver Disease
No Chronic Pancreas
No Chronic Pylori
No Photophobia

Physical Exam:

GENRO:

Notes to the Financial Statements

FISCH:

Small-Medium-Terminals-Distal-Artian-Of-lesion-63-Within-Normal-Bilateral-Nasal-Turbinate-Within-Normal-Limits.

ENT:

Baseline Mean \pm SD for Baseline Mood and Normal Limits.

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 .

Gl:

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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Q-PAP Extra Strength ,500 MG TABS, TAKE 1 TABLET BY MOUTH TWICE A DAY, Quantity: 60, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-11-04
Aspir-81 ,81 MG TBEC, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-09-05
Aspir-81 ,81 MG TBEC, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-08-24
Metoprolol Tartrate ,25 MG TABS, TAKE 1 TABLET TWICE DAILY, Quantity: 60, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-08-23
Atorvastatin Calcium ,40 MG TABS, TAKE 1 TABLET DAILY AT BEDTIME, Quantity: 30, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-08-23
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
Metoprolol Tartrate ,25 MG TABS, TAKE 1 TABLET TWICE DAILY, Quantity: 60, 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. Hypertension with vascular complications, continue current plan.
2. Lumbago with chronic pain, continue current plan.
3. Hyperlipidemia, continue current plan.
4. Chronic pain syndrome, continue current pain medication.
5. Coronary artery disease, continue current plan.
6. Insomnia, continue current plan.
7. Unspecified 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
Chronic ischemic heart disease, unspecified (ICD10:I25.9 Chronic ischemic heart disease, unspecified) Unknown or N/A	Active	2016-09-22	
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	2016-09-22	
Chronic pain syndrome (ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-09-22	
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,HTN,Schizophrenia

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): 2016-11-01 05:05

Signed By (Physician): 18

Signed on (Physician): 2016-11-08 05:05

Form_status: finalized

Procedure Order:

Patient ID	6192	Order ID	1294
Patient Name	Henderson, David	Ordered By	Love-Jones, Derrick
Order Date	2016-12-16	Print Date	2016-12-16
Order Status	complete	Encounter Date	2016-12-16
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2016-12-16		Final ✓		0097	Pulse Oximetry	No	98%	97% to 100%		



Electronically Signed by **Sumana Ketha, MD** on **2016-11-08**.

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