Delores Burns: Patient Information

Patient Record Number:6184

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: Delores Burns External ID: 6184 DOB: 1952-07-23 Sex: Female **S.S.:** 460-962-040

Address: 3130 Kingbridge St

City: Dallas State: Texas Postal Code: 75212 Country: USA

Mobile Phone: 214-334-1697 Street Address: 3130 Kingbridge St

Apt/Suite/Other: APT#73

Past Medical History:

Last Recorded On: 11-19-2016.

Risk Factors: Arthritis, High Cholestrol, Lumbago, Neuropathy.

Family History:

Last Recorded On: 11-19-2016. Father: Father had hypertension.. Mother: Mother had diabetes..

Social History:

Last Recorded On: 11-19-2016.

Tobacco: Current some day smoker Smoker. Status: Current

Alcohol: No alcohol. Status: Never

Recreational Drugs: No drug abuse. Status: Never Exercise Patterns: Exercise daily. Status: Current

Work Status: Disabled.

Insurance:

Medicare B Texas (SMTX0)

Priority: Primary Start Date : 2011-04-01 Relationship to Insured: Self

Type: N/A

Payer : Medicare B Texas (SMTX0)

Insured ID Number: 460962040A

Group Number:

Employer Name: Delores Burns

Immunizations:

Delores Burns: Chief Complaint Patient Record Number:6184 Texas Physician House Calls (H)

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Seen by Derrick Love-Jones Seen on 28-September-2016

Chief Complaint Status: finalized

Follow up home visit to prevent further decline of the following chronic conditions of diabetes mellitus, hypertension, hyperlipidemia, asthma, arthritis, and chronic pain syndrome and neuropathy. Patient complains of numbness and tingling in feet.

History of Present illness:

HPI Status:Finalized

Patient is a 64-year-old African-American female in NAD chronic conditions of the following chronic pain syndrome, diabetes mellitus 2 with neuropathy, hypertension with vascular complications, hyperlipidemia, anxiety, and neuropathy. Patient has a history of chronic pain in feet, knees and lower extremities. Patient rates her current pain at 6/10 today. Patient states that pain comes and goes often but that she gets some relief from current pain medication. Patient denies any other issues upon examination. Patient denies any hypoglycemic episodes and a foot check revealed numbness and tingling in both feet. Patient denies any chest pain, headache, or nausea/vomiting recently.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-09-28	136	76	230.00	63.00	97.80	16.00	~	40.7	0.00

Review of Systems:

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RESP:

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

Plan Note:

Plan Note Status: Finalized

Continue same treatment plan as previous. Review to 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 a systolic blood pressure greater than 200. Patient encouraged to exercise daily. No

labs needed this visit. The patient verbalize understanding of the above plan and was given the office number for any questions or concerns. Prognosis is fair and patient is stable.

- 1. Lumbago with chronic pain, continue current plan.
- 2. Neuropathy, continue current plan.
- 3. Hypertension with vascular complications, continue current plan.
- 4. Chronic pain syndrome, continue current pain medication.
- 5. Diabetes mellitus type 2 with neuropathy, continue current plan.
- 6. Hyperlipidemia, continue current plan.
- 7. Asthma, continue current plan.

Medication refills as follows:

Norco 10/325 mg t.i.d.

Medical Problem:

Description	Status	Start Date	End Date
Low back pain (ICD10:M54.5 Low back pain) Unknown or N/A	Active	2016-09-28	
Nicotine dependence, unspecified, uncomplicated (ICD10:F17.200 Nicotine dependence, unspecified, uncomplicated) Unknown or N/A	Active	2016-09-28	
Encounter for general adult medical examination without abnormal findings (ICD10:Z00.00 Encounter for general adult medical examination without abnormal findings) Unknown or N/A	Active	2016-08-01	
Other disorders of peripheral nervous system (ICD10:G64 Other disorders of peripheral nervous system) Unknown or N/A	Active	2016-06-22	
Type 2 diabetes mellitus with diabetic neuropathy, unspecified (ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2016-06-22	
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	2016-06-22	
Chronic pain syndrome (ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-06-22	
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-05-18	
Type 2 diabetes mellitus without complications (ICD10:E11.9 Type 2 diabetes mellitus without complications) Unknown or N/A	Active	2016-05-18	
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2016-05-18	
Other hyperlipidemia (ICD10:E78.4 Other hyperlipidemia) Unknown or N/A	Active	2016-05-18	
Hyperlipidemia, unspecified (ICD10:E78.5 Hyperlipidemia, unspecified) Unknown or N/A	Active	2016-05-18	
Unspecified asthma, uncomplicated (ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2016-05-18	
Mononeuropathy, unspecified (ICD10:G58.9 Mononeuropathy, unspecified) Unknown or N/A	Active	2016-05-18	

Allergies:

Description	Status	Start Date	End Date
penicillin	Author		
Unknown or N/A	Active		
Darvon	Antivo		
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): 45

Current home health agency: Too Care home health

Primary Justification Medical Conditions: Asthma, diabetes, HTN, hyperlipidemia **Additional Medical Conditions:** Chronic Pain Syndrome and Neuropathy

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: Patient is homebound due to chronic pain that is uncontrolled and limited mobility.

Certification Statement: Skilled nursing is needed to manage chronic pain and uncontrolled diabetes.

Signed by (NP): 16

Signed On (NP): 2016-09-28 04:26 **Signed By (Physician):** 18

Signed on (Physician): 2016-10-05 04:26

Form_status: finalized



Electronically Signed by Derrick Love-Jones on 2016-10-05.

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