

**Linda Heidleberg: Patient Information**  
Patient Record Number:6195

**Texas Physician House Calls (H)**  
2925 Skyway Circle North, Irving, TX, USA, 75038-3510  
www.texas-house-calls.com, Phone:(972) 675-7313, Fax:(972) 675-7310,  
Email:hhsupport@texas-house-calls.com

**Name:** Linda Heidleberg  
**External ID:** 6195  
**DOB:** 1928-12-07  
**Sex:** Female  
**S.S.:** 458-52-7091

**Address:** 919 Woodvale  
**City:** Dallas  
**State:** Texas  
**Postal Code:** 75217  
**Country:** USA  
**Home Phone:** 469-458-3631  
**Work Phone:** 214-476-9550  
**Mobile Phone:** 214-552-1651  
**Street Address:** 919 Woodvale  
**Apt/Suite/Other:** House

## Family History:

**Last Recorded On:** 11-24-2016.  
**Father:** Unknown.  
**Mother:** Unknown.  
**Siblings:** Unknown.

## Social History:

**Last Recorded On:** 11-24-2016.  
**Tobacco:** No smoking **Status:** Never  
**Alcohol:** No alcohol **Status:** Never  
**Recreational Drugs:** No drugs **Status:** Never  
**Nutrition History:** Regular.  
**Developmental History:** Well.

## Insurance:

### Medicare B Texas (SMTX0)

**Priority :** Primary  
**Start Date :** 1989-10-01  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Medicare B Texas (SMTX0)  
**Priority :** Primary  
**Start Date :** 2016-08-01  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Humana (61101)

**Copay :**  
**Insured ID Number :** 458527091A  
**Group Number :**  
**Employer Name :** Linda Heidleberg  
**Copay :**  
**Insured ID Number :** H48659192  
**Group Number :**  
**Employer Name :** Linda Heidleberg

**Immunizations:**

**Linda Heidleberg: Chief Complaint**  
Patient Record Number:6195

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**Seen by** Sumana Ketha MD  
**Seen on** 07-September-2016

**Chief Complaint Status:**finalized

Follow-up home visit to prevent further decline of the following chronic medical condition: asthma/chronic obstructive pulmonary disease, chronic pain syndrome, epilepsy, hypertension, neuropathy, constipation, gastroesophageal reflux disease, osteoarthritis with chronic pain. Patient complains of pain in back and throughout body.

## History of Present illness:

**HPI Status:**Finalized

An 87-year-old Caucasian elderly female in NAD with multiple chronic conditions of the following: asthma/chronic obstructive pulmonary disease, epilepsy, hypertension, neuropathy, gastroesophageal reflux disease, constipation, osteoarthritis with chronic pain and chronic pain syndrome. Patient complains of pain in her back and throughout her body. Patient rates pain at 8/10 and gets relief from current pain medication. Patient denies any chest pain, headache or nausea vomiting at this time. Reviewed labs. Reviewed medications.

## Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-09-07	185	98	139.00	65.00	97.80	16.00	~	23.1	0.00

## Review of Systems:

**Constitutional:**

**General/Endocrine/Metabolic:**

No Weight Loss/Gain

No Excessive Thirst

No Excessive Hunger

No Fatigue

No Fever

No Chills

No Night Sweats

No Anorexia

No Polyuria

No Polydipsia

No Polyphagia

No Pruritus

No Alopecia

No Hirsutism

No Gynecomastia

No Amenorrhea

No Menstrual Irregularities

No Infertility

No Osteoporosis

No Osteoarthritis

No Rheumatoid Arthritis

No Systemic Lupus Erythematosus

No Scleroderma

No Dermatomyositis

No Polymyositis

No Sjögren's Syndrome

No Psoriasis

No Eczema

No Vitiligo

No Alopecia Areata

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No Infertility

No Osteoporosis

2. Lumbago with sciatica, continue current plan.
3. Chronic obstructive pulmonary disease/asthma, continue current plan.
4. Hypertension with vascular complications, continue current plan.
5. Atrial fibrillation, continue current plan.
6. Coronary artery disease, continue current plan.
7. Gastroesophageal reflux disease, continue current plan.
8. Congestive heart failure with systolic complications, continue current plan.
9. Chronic pain syndrome, continue current pain medication.
10. Neuropathy, continue current plan.
11. Dementia, continue to monitor.
12. Epilepsy, continue current plan.
13. Heart disease, continue current plan.
14. Constipation, continue current plan.

Medication refills as follows:

Norco 10/325 mg t.i.d.  
 Diphenhydramine 25 mg q.h.s.  
 Pro-Air INH  
 Donepezil 10 mg q.d.  
 Advair Diskus 500/50 mg.  
 Carbamazepine 200 mg b.i.d.  
 Colace 100 mg b.i.d.  
 Famotidine 20 mg q.d.  
 Levetiracetam 500 mg b.i.d.  
 Lidocaine 5% patch q 12 h.s.  
 Metoprolol 25 mg b.i.d.,  
 Gabapentin 300 mg t.i.d.

## Medical Problem:

Description	Status	Start Date	End Date
Lumbago with sciatica, unspecified side ( ICD10:M54.40 Lumbago with sciatica, unspecified side) Unknown or N/A	Active	2016-09-07	
Lumbago with sciatica, right side ( ICD10:M54.41 Lumbago with sciatica, right side) Unknown or N/A	Active	2016-08-03	
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	2016-08-03	
Unspecified systolic (congestive) heart failure ( ICD10:I50.20 Unspecified systolic (congestive) heart failure) Unknown or N/A	Active	2016-08-03	
Primary generalized (osteo)arthritis ( ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2016-06-23	
Polyosteoarthritis, unspecified ( ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2016-06-23	
Other chronic pain ( ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-06-23	
Epilepsy, unspecified, not intractable, without status epilepticus ( ICD10:G40.909 Epilepsy, unspecified, not intractable, without status epilepticus) Unknown or N/A	Active	2016-06-23	
Chronic pain syndrome ( ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-06-23	
Benign essential hypertension ( ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2016-05-31	
Other generalized epilepsy and epileptic syndromes, not intractable, without status epilepticus ( ICD10:G40.409 Other generalized epilepsy and epileptic syndromes, not intractable, without status epilepticus) Unknown or N/A	Active	2016-05-31	

Chronic obstructive pulmonary disease, unspecified ( ICD10:J44.9 Chronic obstructive pulmonary disease, unspecified) Unknown or N/A	Active	2016-05-31
Other disorders of peripheral nervous system ( ICD10:G64 Other disorders of peripheral nervous system) Unknown or N/A	Active	2016-05-31
Unspecified asthma, uncomplicated ( ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2016-05-31
Hypertensive heart disease with heart failure ( ICD10:I11.0 Hypertensive heart disease with heart failure) Unknown or N/A	Active	2016-05-05
Acute on chronic diastolic (congestive) heart failure ( ICD10:I50.33 Acute on chronic diastolic (congestive) heart failure) Unknown or N/A	Active	2016-05-05
Chronic obstructive pulmonary disease with (acute) exacerbation ( ICD10:J44.1 Chronic obstructive pulmonary disease with (acute) exacerbation) Unknown or N/A	Active	2016-05-05
Acute respiratory failure with hypercapnia ( ICD10:J96.02 Acute respiratory failure with hypercapnia) Unknown or N/A	Active	2016-05-05
Lobar pneumonia, unspecified organism ( ICD10:J18.1 Lobar pneumonia, unspecified organism) Unknown or N/A	Active	2016-05-05
Pleural effusion, not elsewhere classified ( ICD10:J90 Pleural effusion, not elsewhere classified) Unknown or N/A	Active	2016-05-05
Paroxysmal atrial fibrillation ( ICD10:I48.0 Paroxysmal atrial fibrillation) Unknown or N/A	Active	2016-05-05
Hyperosmolality and hypernatremia ( ICD10:E87.0 Hyperosmolality and hypernatremia) Unknown or N/A	Active	2016-05-05
Thrombocytopenia, unspecified ( ICD10:D69.6 Thrombocytopenia, unspecified) Unknown or N/A	Active	2016-05-05

## Allergies:

Description	Status	Start Date	End Date
No known drug allergies Unknown or N/A	Active		

## Surgeries:

Description	Status	Start Date	End Date
Hysterectomy Unknown or N/A	Active		
Cholecystectomy Unknown or N/A	Active		
Hospitalized for stroke. 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:** VCP Home Health Agency Inc

**Primary Justification Medical Conditions:** Asthma,COPD,Epilepsy,HTN,Mobility\_Impairments

**Additional Medical Conditions:** GERD, Chronic Pain Syndrome, Neuropathy, Constipation

**Nursing Required:** YES

**Physical Therapy:** NO

**Occupational Therapy Required:** NO

**Speech-language Pathology Required:** NO

**Clinical Findings To Justify Home Health:** Patient is homebound due to chronic pain, limited mobility issues.

**Certification Statement:** Skilled nursing is needed due to chronic pain, limited mobility, and inability to self medicate correctly.

**Signed by (NP):** 16

**Signed On (NP):** 2016-09-07 07:17

**Signed By (Physician):** 18

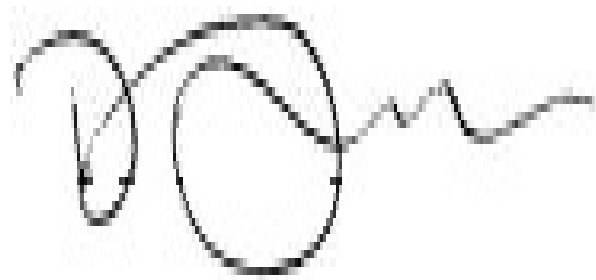
**Signed on (Physician):** 2016-09-14 07:17

**Form\_status:** finalized

## Procedure Order:

Patient ID	6195	Order ID	998
Patient Name	Heidleberg, Linda	Ordered By	Love-Jones, Derrick
Order Date	2016-11-24	Print Date	2016-11-24
Order Status	complete	Encounter Date	2016-11-24
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2016-11-24		Final ✓		0097	Pulse Oximetry	No	97%	97% to 100%		



Electronically Signed by **Derrick Love-Jones** on **2016-09-14**.

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