Guadalupe Luna: Patient Information

Patient Record Number: 1245

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: Guadalupe Luna External ID: 1245 **DOB**: 1931-09-30 Sex: Male S.S.: 457-04-2557 Marital Status: Single

Patient Drive Folder: https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B0Q2MIHiECb5VGktb3BPTIIRbFk

Address: 213 W Woodin Boulevard

City: Dallas State: Texas Postal Code: 75224 Country: USA

Home Phone: 214-229-4040

Street Address: 213 W Woodin Boulevard

Apt/Suite/Other: House

Past Medical History:

Last Recorded On: 12-08-2016.

Additional Medical History: Urinary retention, spinal stenosis, and dementia...

Family History:

Last Recorded On: 12-08-2016.

Father: Unknown... Mother: Unknown.. Siblings: Unknown.. Offspring: Unknown...

Social History:

Last Recorded On: 12-08-2016.

Tobacco: Smokes 8 cigarettes a day Status: Current

Coffee: Status: N/A

Alcohol: No alcohol. Status: Never

Recreational Drugs: No drug abuse. Status: Never

Nutrition History: Regular diet.. Developmental History: Good..

Other History: Influenza November 2015.

Tests and Exams:

Last Recorded On: 12-08-2016.

Insurance:

Medicare B Texas (SMTX0)

Priority: Primary Start Date: 1996-09-01 Relationship to Insured: Self

Type : N/A
Payer : Medicare B Texas (SMTX0)

Priority: Secondary Start Date: 2011-10-25 Relationship to Insured: Self

Type: N/A

Payer : Medicaid Texas (SKTX0)

Copay : Insured ID Number : 457042557A

Group Number : Employer Name : Guadalupe Luna

Copay : Insured ID Number : 527516723 Group Number :

Employer Name : Guadalupe Luna

Immunizations:

Guadalupe Luna: Chief Complaint

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> Seen by Darolyn Perkins Seen on 31-May-2016

Chief Complaint Status: finalized

Followup home visit for management of diabetes mellitus type 2, hypertension, end-stage renal disease, asthma, tobacco use, senile dementia, mental disorder, debility, and spinal stenosis.

History of Present illness:

HPI Status:Finalized

An 84-year-old male in NAD with multiple chronic conditions of diabetes mellitus type 2, hypertension, end stage renal disease, and asthma. Patient denies any new issues or complaints upon examination. Patient denies any pain at this time. Patient denies any hypoglycemia and foot check revealed no issues. Patient denies any CP, HA, or N/V.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-05-31	134	68	140.00	70.00	98.20	18.00		20.1	0.00

Review of Systems:

Constitutional:

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Physical Exam:

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SETEREMITIES:

Transplant Militar Stablish Limits Limits .

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Medication:

Description	Status	Start Date	End Date
BD Pen Needle Short U/F ,31G X 8 MM MISC, USE AS DIRECTED TWICE DAILY, Quantity: 200, Refill Quantity: 3			
Unknown or N/A	Active	2015-03-25	
by ketha, Dr sumana - BK6230281			
Sumana Ketha MDPA			
Lisinopril ,10 MG TABS, TAKE 1 TABLET DAILY, Quantity: 90, Refill Quantity: 1			
Unknown or N/A	Active	2014-12-11	
by Jones, Derrick - MJ3217331			
Texas Physician House Calls			

Plan Note:

Plan Note Status: Finalized

Continue same treatment plan. Reviewed and continue with current medication. Medication adherence education was given to the patient. Patient was educated on benefits of low salt, low fat, low cholesterol diet with current medical issues. Patient encouraged continuing weight loss efforts via daily exercise and certain food restrictions. No labs needed at this time. The patient verbalized understanding of the above plan, and was given the office number to call for any questions or concern. Discussed the treatment plan with the patient. Prognosis is fair.

- 1. Continue current plan for diabetes mellitus type 2.
- 2. Continue current plan for hypertension.
- 3. Continue current plan for end-stage renal disease.
- 4. Continue current plan for asthma.
- 5. Continue current plan for spinal stenosis.

No refills at this time.

Medical Problem:

Description	Status	Start Date	End Date
Hyperplasia of prostate, unspecified, without urinary obstruction and other lower urinary symptoms (LUTS) (ICD10:N40.0 Enlarged prostate without lower urinary tract symptoms) Unknown or N/A	Active	2015-10-01	Lift Date
Hypertrophy (benign) of prostate without urinary obstruction and other lower urinary tract symptom (LUTS) (ICD10:N40.0 Enlarged prostate without lower urinary tract symptoms) Unknown or N/A	Active	2015-10-01	
Diabetes with neurological manifestations, type II or unspecified type, not stated as uncontrolled (ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2015-10-01	
Polyneuropathy in diabetes (ICD10:E08.42 Diabetes mellitus due to underlying condition with diabetic polyneuropathy) Unknown or N/A	Active	2015-10-01	
Benign hypertensive heart disease with heart failure (ICD10:I11.0 Hypertensive heart disease with heart failure) Unknown or N/A	Active	2015-10-01	
Obstructive chronic bronchitis without exacerbation (ICD10:J44.9 Chronic obstructive pulmonary disease, unspecified) Unknown or N/A	Active	2015-10-01	
Osteoarthrosis, localized, primary, lower leg (ICD10:M17.10 Unilateral primary osteoarthritis, unspecified knee) Unknown or N/A	Active	2015-10-01	
Diabetes mellitus without mention of complication, type II or unspecified type, not stated as uncontrolled (ICD10:E11.9 Type 2 diabetes mellitus without complications) Unknown or N/A	Active	2015-10-01	
Unspecified essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01	
Hypertrophy (benign) of prostate with urinary obstruction and other lower urinary tract symptoms (LUTS) (ICD10:N40.1 Enlarged prostate with lower urinary tract symptoms) Unknown or N/A	Active	2015-10-01	
Constipation, unspecified (ICD10:K59.00 Constipation, unspecified) Unknown or N/A	Active	2015-10-01	
Dementia, unspecified, with behavioral disturbance (ICD10:F03.91 Unspecified dementia with behavioral disturbance) Unknown or N/A	Active	2015-10-01	
Hyperlipidemia (ICD10:E78.4 Other hyperlipidemia) (ICD10:E78.5 Hyperlipidemia, unspecified) Unknown or N/A	Active	2015-10-01	

Senile cataract, unspecified (ICD10:H25.9 Unspecified age-related cataract) Unknown or N/A	Active	2015-10-01
Tobacco use disorder (ICD10:F17.200 Nicotine dependence, unspecified, uncomplicated) Unknown or N/A	Active	2015-10-01
Senile dementia, uncomplicated (ICD10:F03.90 Unspecified dementia without behavioral disturbance) Unknown or N/A	Active	2015-10-01
Chronic obstructive asthma, unspecified (ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2015-10-01
Diabetes mellitus without mention of complication, type II or unspecified type, uncontrolled (ICD10:E11.65 Type 2 diabetes mellitus with hyperglycemia) Unknown or N/A	Active	2015-10-01
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01
Other persistent mental disorders due to conditions classified elsewhere (ICD10:F06.8 Other specified mental disorders due to known physiological condition) Unknown or N/A	Active	2015-10-01
Debility, unspecified (ICD10:R53.81 Other malaise) Unknown or N/A	Active	2015-10-01
Spinal stenosis, unspecified region (ICD10:M48.00 Spinal stenosis, site unspecified) Unknown or N/A	Active	2015-10-01
End stage renal disease (ICD10:N18.6 End stage renal disease) Unknown or N/A	Active	2015-10-01
Asthma, unspecified type, with (acute) exacerbation (ICD10:J45.901 Unspecified asthma with (acute) exacerbation) Unknown or N/A	Active	2015-10-01
Spinal stenosis, lumbar region, without neurogenic claudication (ICD9:724.02 Spinal stenosis, lumbar region, without neurogenic claudication) Unknown or N/A	Active	
Aftercare following surgery of the musculoskeletal system, NEC (ICD9:V58.78 Aftercare following surgery of the musculoskeletal system, NEC) Unknown or N/A	Active	

Allergies:

Description	Status	Start Date	End Date	
No Known Drug Allergies	Active			
Unknown or N/A	Houve			

Surgeries:

Description	Status	Start Date	End Date
CVA left hemi in 2009 and cataract surgery in left eye	Active		
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: YES

Is House Visit Needed: YES Next Visit Duration (in days): 31

Current home health agency: Aaron Home Health

Primary Justification Medical Conditions: Asthma, Kidney_Disease, diabetes, HTN

Nursing Required: YES

Physical Therapy: NO

Occupational Therapy Required: NO Speech-language Pathology Required: NO

Clinical Findings To Justify Home Health: Skilled nursing needed due to senile dementia and inability to self medicate and

debility.

Certification Statement: Patient is home-bound due to ESRD and senile dementia. Patient cannot be left unattended due to

wandering behaviors and poor cognition.

Signed by (NP): 302

Signed On (NP): 2016-05-31 08:59 **Signed By (Physician):** 18

Signed on (Physician): 2016-06-07 08:59

Form_status: finalized

Printed: NO

DME:

Description	Status	Start Date	End Date
Alcohol Pads Unknown or N/A by Dr. Sumana Ketha	Active		
Cane Unknown or N/A by Dr. Sumana Ketha	Active		
Gloves: Non-sterile Unknown or N/A by Dr. Sumana Ketha	Active		
Lancet Unknown or N/A by Dr. Sumana Ketha	Active		
Probe Unknown or N/A by Dr. Sumana Ketha	Active		
Chemstrips Unknown or N/A by Dr. Sumana Ketha	Active		
Walker Unknown or N/A by Dr. Sumana Ketha	Active		



Electronically Signed by Darolyn Perkins on 2016-06-07.

Printed on 10-Dec-2016 20:24:21 pm.