

Janice Howard: Patient Information
Patient Record Number:6103

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

Name: Janice Howard
External ID: 6103
DOB: 1950-05-24
Sex: Female
S.S.: 451788839

Address: 8440 Willoughby Blvd
City: Dallas
State: Texas
Postal Code: 75232
Country: USA
Home Phone: 214-854-2581
Mobile Phone: 214-772-0031
Street Address: 8440 Willoughby Blvd
Apt/Suite/Other: Apt # 121 Building # 8440

Family History:

Last Recorded On: 10-30-2016.
Father: Unknown..
Mother: Unknown..
Siblings: Unknown..
Offspring: Unknown..

Social History:

Last Recorded On: 10-30-2016.
Tobacco: No smoking **Status:** Never
Alcohol: No alcohol **Status:** Never
Recreational Drugs: No drugs **Status:** Never
Nutrition History: Regular.
Developmental History: Well..
Other History: Influenza November 2015..

Tests and Exams:

Last Recorded On: 10-30-2016.
HbA, C Hemoglobin (if DM every 3 mo) Abnormal Done on 10/06/2016 at Choice Clinical Laboratory,
Ordered by Dr. Ketha.

Insurance:

Medicare B Texas (SMTX0)

Priority : Primary
Start Date : 2015-05-01
Relationship to Insured : Self
Type : N/A
Payer : Medicare B Texas (SMTX0)
Priority : Secondary
Start Date : 2015-09-01
Relationship to Insured : Self
Type : N/A
Payer : Molina Healthcare of Texas (Z1161)

Copay :
Insured ID Number : 451788839A
Group Number :
Employer Name : Janice Howard
Copay :
Insured ID Number : 503000115
Group Number :
Employer Name : Janice Howard

Immunizations:

Janice Howard: Chief Complaint
Patient Record Number:6103

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Seen by Derrick Love-Jones
Seen on 13-September-2016

Chief Complaint Status:finalized

Follow up home visit to prevent further decline of chronic conditions of diabetes 2, hypertension, hyperlipidemia, heart disease, lung infection, urinary incontinence, obesity, and mood disorder. Patient complains of vomiting and stump pain.

History of Present illness:

HPI Status:Finalized

Patient is a 66-year-old female with multiple chronic conditions of diabetes 2, hypertension, hyperlipidemia, heart disease, lung infection, blood clot in lung, chronic pain, left below knee amputation, and obesity. Patient states that she has had a several vomiting episodes and is not able to keep any solid food down. Patient also states she has chronic pain in her stump. Patient denies any other issues upon examination. Patient denies any hypoglycemic episodes in a stump check review some pain issues. Patient denies any chest pain, headache at this time.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-09-13	166	96	250.00	65.00	97.80	16.00	~	0.0	0.00

Review of Systems:

Constitutional:

Revisiting the Tale of the Tailor:

~~Not for distribution~~

☒ No ☐ Yes

~~Not for Release~~

NOTES

No Blood-Boiling Effects

No Orthopnea

No Peripheral

No Edema

No History Murmur

Heart Problem YES

Physical Exam:

SEERO:

Septal Position- Centered, Slightly Deviated to the Right. No Evidence of Polyps or Inflammation. Bilateral Nasal Turbinates-Within Normal Limits.

DEUTSCH:

Normal Limits: Normal Limits.

NECK:

RAPIRE, Thoracic Lymphadenopathy, Chronic Obstructive Pulmonary Disease, Normal JVD, Lungs, Lymphadenopathy-Within Normal Limits.

CV:

RRR-Within Normal Limits .

RESP:

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

G|:

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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Acetaminophen-Codeine #3 ,300-30 MG TABS, TAKE ONE TABLET THREE TIMES A DAY, Quantity: 90, Refill Quantity: 0	Active	2016-10-19
Unknown or N/A		
by ketha, Dr sumana - BK6230281		
Texas Physician House Calls		
Carvedilol ,6.25 MG TABS, TAKE 1 TABLET TWICE DAILY, WITH MORNING AND EVENING MEAL, Quantity: 180, Refill Quantity: 0	Active	2016-09-19
Unknown or N/A		
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Isosorbide Mononitrate ER ,60 MG TB24, TAKE 1 TABLET ONCE DAILY, Quantity: 90, Refill Quantity: 0	Active	2016-09-19
Unknown or N/A		
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Ranitidine HCl ,150 MG CAPS, TAKE 1 CAPSULE TWICE DAILY, Quantity: 180, Refill Quantity: 0	Active	2016-09-19
Unknown or N/A		
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Sertraline HCl ,50 MG TABS, TAKE 1 TABLET BY MOUTH EVERY DAY, Quantity: 90, Refill Quantity: 0	Active	2016-09-19
Unknown or N/A		
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Carvedilol ,6.25 MG TABS, TAKE 1 TABLET TWICE DAILY, WITH MORNING AND EVENING MEAL, Quantity: 60, Refill Quantity: 1	Active	2016-08-15
Unknown or N/A		
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Nitrostat ,0.4 MG SUBL, PLACE 1 TABLET UNDER THE TONGUE EVERY 5 MINUTES UP TO 3 DOSES AS NEEDED FOR CHEST PAIN, Quantity: 90, Refill Quantity: 3	Active	2016-07-16
Unknown or N/A		
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Sertraline HCl ,50 MG TABS, TAKE 1 TABLET BY MOUTH EVERY DAY, Quantity: 30, Refill Quantity: 0	Active	2016-07-16
Unknown or N/A		
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Sertraline HCl ,50 MG TABS, TAKE 1 TABLET BY MOUTH EVERY DAY, Quantity: 30, Refill Quantity: 0	Active	2016-07-13
Unknown or N/A		
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Atorvastatin Calcium ,80 MG TABS, TAKE 1 TABLET AT BEDTIME, Quantity: 90, Refill Quantity: 0	Active	2016-05-26
Unknown or N/A		
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Carvedilol ,6.25 MG TABS, TAKE 1 TABLET TWICE DAILY, WITH MORNING AND EVENING MEAL, Quantity: 60, Refill Quantity: 0	Active	2016-05-19
Unknown or N/A		
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Isosorbide Mononitrate ER ,60 MG TB24, TAKE 1 TABLET ONCE DAILY, Quantity: 30, Refill Quantity: 3	Active	2016-05-16
Unknown or N/A		
by ketha, Dr sumana - BK6230281		
Texas Physician House Calls		
Bactrim DS ,800-160 MG TABS, TAKE 1 TABLET BY MOUTH TWICE A DAY, Quantity: 20, Refill Quantity: 0	Active	2016-04-14
Unknown or N/A		
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Isosorbide Mononitrate ER ,60 MG TB24, TAKE 1 TABLET ONCE DAILY, Quantity: 30, Refill Quantity: 0	Active	2016-04-14
Unknown or N/A		
by ketha, Dr sumana - BK6230281		
Texas Physician House Calls		

Ranitidine HCl ,150 MG CAPS, TAKE 1 CAPSULE TWICE DAILY, Quantity: 60, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-03-17
ProAir HFA ,108 (90 Base) MCG/ACT AERS, INHALE 1 TO 2 PUFFS EVERY 4 TO 6 HOURS AS NEEDED, Quantity: 8.5, Refill Quantity: 6 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-03-17
Sertraline HCl ,50 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-03-17
Furosemide ,20 MG TABS, Take One Tablet By Mouth Twice A Day, Quantity: 180, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-03-10
Tylenol with Codeine #3 ,300-30 MG TABS, Take One Tablet Three times a Day, Quantity: 90, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-02-22
Lisinopril ,20 MG TABS, TAKE 1 TABLET DAILY FOR BLOOD PRESSURE, Quantity: 90, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-02-21

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 low-salt, low-fat, low cholesterol diet. Patient instructed to go to ER for symptoms of chest pain, shortness of breath, excessive headache, blurry vision or systolic blood pressure greater than 200. No labs needed this visit. Reviewed recent labs with patient. The patient verbalize understanding of the above plan and was given the office number for any questions or concerns. Prognosis is fair and patient was stable.

1. Hypertension with vascular complications, continue current plan.
2. Diabetes mellitus 2 with neuropathy, continue current plan.
3. Heart disease, continue current plan.
4. Urinary incontinence, continue current plan.
5. Osteoarthritis with chronic pain, continue current plan.
6. Chronic pain syndrome, continue current pain medication.
7. Hyperlipidemia, continue current plan.
8. Obesity, continue to monitor.
9. Mood disorder, continue current plan.

Medication refills as follows:

1. Tylenol 3 t.i.d.
2. Isosorbide 60 mg q.d.
3. Gabapentin 100 mg t.i.d.
4. Sertraline 50 mg q.d.
5. Carvedilol 6.25 mg b.i.d.
6. Ranitidine 150 mg b.i.d.
7. Atorvastatin 80 mg q.d.

Medical Problem:

Description	Status	Start Date	End Date
Heart failure, unspecified (ICD10:I50.9 Heart failure, unspecified) Unknown or N/A	Active	2016-09-13	

Unspecified urinary incontinence (ICD10:R32 Unspecified urinary incontinence) Unknown or N/A	Active	2016-09-13
Periapical abscess with sinus (ICD10:K04.6 Periapical abscess with sinus) Unknown or N/A	Active	2016-08-02
Major depressive disorder, single episode, unspecified (ICD10:F32.9 Major depressive disorder, single episode, unspecified) Unknown or N/A	Active	2016-07-05
Peripheral vascular disease, unspecified (ICD10:I73.9 Peripheral vascular disease, unspecified) Unknown or N/A	Active	2016-07-05
Type 2 diabetes mellitus with diabetic neuropathy, unspecified (ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2016-05-25
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	2016-05-25
Chronic ischemic heart disease, unspecified (ICD10:I25.9 Chronic ischemic heart disease, unspecified) Unknown or N/A	Active	2016-05-25
Chronic pain syndrome (ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-05-25
Urinary tract infection, site not specified (ICD10:N39.0 Urinary tract infection, site not specified) Unknown or N/A	Active	2016-04-20
Other disorders of peripheral nervous system (ICD10:G64 Other disorders of peripheral nervous system) Unknown or N/A	Active	2016-03-16
Type 2 diabetes mellitus with hyperglycemia (ICD10:E11.65 Type 2 diabetes mellitus with hyperglycemia) Unknown or N/A	Active	2016-02-19
Atherosclerotic heart disease of native coronary artery without angina pectoris (ICD10:I25.10 Atherosclerotic heart disease of native coronary artery without angina pectoris) Unknown or N/A	Active	2016-02-19
Other abnormalities of gait and mobility (ICD10:R26.89 Other abnormalities of gait and mobility) Unknown or N/A	Active	2016-02-19
Acquired absence of left leg below knee (ICD10:Z89.512 Acquired absence of left leg below knee) Unknown or N/A	Active	2016-02-19
Hyperlipidemia, unspecified (ICD10:E78.5 Hyperlipidemia, unspecified) Unknown or N/A	Active	2016-02-19
Major depressive disorder, recurrent, mild (ICD10:F33.0 Major depressive disorder, recurrent, mild) Unknown or N/A	Active	2016-02-19
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2016-02-17
Type 2 diabetes mellitus without complications (ICD10:E11.9 Type 2 diabetes mellitus without complications) Unknown or N/A	Active	2016-02-17
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-02-17
Obesity, unspecified (ICD10:E66.9 Obesity, unspecified) Unknown or N/A	Active	2016-02-17

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: JK Home health

Primary Justification Medical Conditions: diabetes,Heart_Disease,HTN,hyperlipidemia

Additional Medical Conditions: Left BKA

Nursing Required: YES

Physical Therapy: YES

Occupational Therapy Required: NO

Speech-language Pathology Required: NO

Requested Care/Treatments Required:

Clinical Findings To Justify Home Health: Skilled nursing needed due to chronic pain and BKA and inability to self medicate correctly.

Certification Statement: Patient is home bound due to chronic pain and BKA. Patient is weak with poor balance and at risk for fall.

Signed by (NP): 16

Signed On (NP): 2016-09-13 03:51

Signed By (Physician): 18

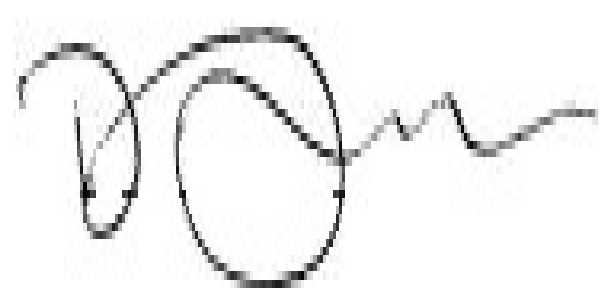
Signed on (Physician): 2016-09-20 03:51

Form_status: finalized

Procedure Order:

Patient ID	6103	Order ID	915
Patient Name	Howard, Janice	Ordered By	Love-Jones, Derrick
Order Date	2016-10-30	Print Date	2016-10-30
Order Status	complete	Encounter Date	2016-10-30
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2016-10-30		Final ✓		0097	Pulse Oximetry	No	97%	97% to 100%		



Electronically Signed by **Derrick Love-Jones** on **2016-09-20**.

Printed on 30-Oct-2016 20:12:08 pm.