Ebony Rivers: Patient Information

Patient Record Number:6159

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: Ebony Rivers External ID: 6159 DOB: 1986-01-14

Sex: Female **S.S.**: 466775798

Patient Drive Folder: 0B0x_tbqdBDPhTzgwckp2TnNHTkU

Address: 9315 Cuba St

City: Dallas State: Texas Postal Code: 75217 Country: USA

Mobile Phone: 214-859-8922 User Email: queen429es@gmail.com Street Address: 9315 Cuba St Apt/Suite/Other: House

Family History:

Last Recorded On: 02-11-2017. Father: Father deceased diabetes..

Mother: Mother is alive with complaints of PE/DVT, hypertension, diabetes mellitus, and cellulitis...

Siblings: Six sisters and eight brother are alive..

Offspring: No children..

Social History:

Last Recorded On: 02-11-2017.

Tobacco: Smokes 1/2 packet per day. Status: Current

Alcohol: Occasionally drinks. Status: Current Recreational Drugs: No drug abuse. Status: Never

Nutrition History: Regular..

Developmental History: Education level is Associate of Applied Science..

Other History: Influenza 2015..

Tests and Exams:

Last Recorded On: 02-11-2017.

Mammogram (>40yrs, Yearly) N/A Done in 2015.

Sigmoid/Colonoscopy N/A Colonoscopy done three years ago.

PAP Smear N/A Done in 2015 within normal limits.

Insurance:

Medicare B Texas (SMTX0)

Priority: Primary Start Date: 2010-07-01 Relationship to Insured: Self

Type: N/A

Payer: Medicare B Texas (SMTX0)
Priority: Secondary
Start Date: 2016-04-01
Relationship to Insured: Self

Type: N/A

Payer : Medicaid Texas (SKTX0)

Copay : Insured ID Number : 466775798A

Group Number:

Employer Name : Ebony Rivers Copay: Insured ID Number: 506533585

Group Number : Employer Name : Ebony Rivers

Immunizations:

Ebony Rivers: Chief Complaint Patient Record Number:6159 Texas Physician House Calls (H)

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Seen by Derrick Love-Jones **Seen on** 21-December-2016

Chief Complaint Status: finalized

Follow up home visit to prevent further decline of the following chronic medical conditions of anxiety, depression, hypertension, chronic pain due to trauma, history of peripheral edema/deep venous thrombosis, gout, asthma, chronic obstructive pulmonary disease, and morbid obesity. Patient complains of knee pain.

History of Present illness:

HPI Status:Finalized

Patient is a 30-year-old African-American female in no acute distress with multiple chronic conditions including hypertension, anxiety, gout, depression, anticoagulant use for the prevention of peripheral edema/deep venous thrombosis. Patient complains of pain in both of her knees. Patient denies any chest pain, headache, or nausea or vomiting.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-12-21	149	96	0.00	69.00	97.80	16.00	~	0.0	0.00

Review of Systems:

Constitutional:

Splanting at Ingatunologic:

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New Park Transport Line Of Urine

Nada Branding States

No Diraitation In Range Of Motion

No Constipation

Physical Exam:

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RESP:

Buonglevoithan Provintal Nomital Limits.

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

Medication:

Description	Status	Start Date	End Date
Albuterol Sulfate ,0.63 MG/3ML NEBU, USE 1 VIAL IN NEBULIZER 3 TIMES DAILY AS NEEDED, Quantity: 90, Refill Quantity: 6			
Unknown or N/A	Active	2016-12-21	
by Jones, Derrick - MJ3217331			
Texas Physician House Calls			

Albuterol Sulfate ,0.63 MG/3ML NEBU, USE 1 VIAL IN NEBULIZER 3		
TIMES DAILY AS NEEDED, Quantity: 90, Refill Quantity: 6		
Unknown or N/A	Active	2016-12-21
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
Furosemide ,80 MG TABS, TAKE 1 TABLET EVERY MORNING AND 1 TABLET EVERY EVENING, Quantity: 60, Refill Quantity: 2	Active	2016-11-28
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
Furosemide ,80 MG TABS, TAKE 1 TABLET EVERY MORNING AND 1		
TABLET EVERY EVENING, Quantity: 60, Refill Quantity: 2 Unknown or N/A	Active	2016-11-28
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
Potassium Chloride Crys ER ,20 MEQ TBCR, TAKE 1 TABLET BY MOUTH TWICE A DAY, Quantity: 60, Refill Quantity: 2		
Unknown or N/A	Active	2016-11-28
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
Potassium Chloride Crys ER ,20 MEQ TBCR, TAKE 1 TABLET BY MOUTH TWICE A DAY, Quantity: 60, Refill Quantity: 2		
Unknown or N/A	Active	2016-11-28
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
Enoxaparin Sodium ,150 MG/ML SOLN, INJECT 1ML SUBCUTANEOUSLY DAILY, Quantity: 30, Refill Quantity: 2		
Unknown or N/A	Active	2016-09-08
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
Enoxaparin Sodium ,150 MG/ML SOLN, INJECT 1ML SUBCUTANEOUSLY DAILY, Quantity: 30, Refill Quantity: 2		
Unknown or N/A	Active	2016-09-08
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
Enoxaparin Sodium ,100 MG/ML SOLN, INJECT 1ML SUBCUTANEOUSLY FOR A COMBINED TOTAL OF 25ML/DAILY, Quantity: 30, Refill Quantity: 0		
Unknown or N/A	Active	2016-07-27
by ketha, Dr sumana - BK6230281		
Texas Physician House Calls		
Enoxaparin Sodium ,100 MG/ML SOLN, INJECT 1ML SUBCUTANEOUSLY FOR A COMBINED TOTAL OF 25ML/DAILY, Quantity: 30, Refill Quantity: 0		
Unknown or N/A	Active	2016-07-27
by ketha, Dr sumana - BK6230281 Texas Physician House Calls		
ALPRAZolam ,2 MG TABS, TAKE 1 TABLET BY MOUTH DAILY, Quantity: 15, Refill Quantity: 0		
Unknown or N/A	Active	2016-07-09
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
ALPRAZolam ,2 MG TABS, TAKE 1 TABLET BY MOUTH DAILY, Quantity: 15, Refill Quantity: 0		
Unknown or N/A	Active	2016-07-09
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
Enoxaparin Sodium ,100 MG/ML SOLN, INJECT 1ML SUBCUTANEOUSLY FOR A COMBINED TOTAL OF 25ML/DAILY, Quantity: 30, Refill Quantity: 2		
Unknown or N/A	Active	2016-07-09
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
Enoxaparin Sodium ,100 MG/ML SOLN, INJECT 1ML SUBCUTANEOUSLY FOR A COMBINED TOTAL OF 25ML/DAILY,		
Quantity: 30, Refill Quantity: 2	Active	2016-07-09
Unknown or N/A		
by Jones, Derrick - MJ3217331 Texas Physician House Calls		
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Enoxaparin Sodium ,150 MG/ML SOLN, INJECT 1ML SUBCUTANEOUSLY FOR A COMBINED TOTAL OF 25ML/DAILY, Quantity: 30, Refill Quantity: 2 Active 2016-07-09 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls Enoxaparin Sodium ,150 MG/ML SOLN, INJECT 1ML SUBCUTANEOUSLY FOR A COMBINED TOTAL OF 25ML/DAILY, Quantity: 30, Refill Quantity: 2 Active 2016-07-09 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls ALPRAZolam, 2 MG TABS, TAKE 1 TABLET BY MOUTH DAILY, Quantity: 30, Refill Quantity: 0 2016-05-31 Active Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls ALPRAZolam, 2 MG TABS, TAKE 1 TABLET BY MOUTH DAILY, Quantity: 30, Refill Quantity: 0 Unknown or N/A Active 2016-05-31 by Jones, Derrick - MJ3217331 Texas Physician House Calls Warfarin Sodium ,5 MG TABS, TAKE 1 TABLET DAILY AS DIRECTED, Quantity: 30, Refill Quantity: 0 Active 2016-05-31 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls Warfarin Sodium ,5 MG TABS, TAKE 1 TABLET DAILY AS DIRECTED, Quantity: 30, Refill Quantity: 0 Unknown or N/A Active 2016-05-31 by Jones, Derrick - MJ3217331 Texas Physician House Calls Cetirizine HCI ,10 MG TABS, TAKE 1 TABLET BY MOUTH EVERY DAY, Quantity: 30, Refill Quantity: 2 2016-05-31 Unknown or N/A Active by Jones, Derrick - MJ3217331 Texas Physician House Calls Cetirizine HCI ,10 MG TABS, TAKE 1 TABLET BY MOUTH EVERY DAY, Quantity: 30, Refill Quantity: 2 Unknown or N/A Active 2016-05-31 by Jones, Derrick - MJ3217331 Texas Physician House Calls Allopurinol, 100 MG TABS, TAKE 1 TABLET DAILY AS DIRECTED, Quantity: 30, Refill Quantity: 1 Active 2016-04-28 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls Allopurinol, 100 MG TABS, TAKE 1 TABLET DAILY AS DIRECTED, Quantity: 30, Refill Quantity: 1 Unknown or N/A Active 2016-04-28 by Jones, Derrick - MJ3217331 Texas Physician House Calls Ammonium Lactate ,12 % LOTN, APPLY AND RUB IN A THIN FILM TO AFFECTED AREAS TWICE DAILY(AM AND PM), Quantity: 450, Refill Quantity: 3 Active 2016-04-28 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls Ammonium Lactate ,12 % LOTN, APPLY AND RUB IN A THIN FILM TO AFFECTED AREAS TWICE DAILY(AM AND PM), Quantity: 450, Refill Quantity: 3 Active 2016-04-28 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls Colchicine, 0.6 MG TABS, 1 TABLET ON DAY 1 2 TABLETS ON DAY FOR A TOTAL OF 3 TABLETS PER MONTH, Quantity: 3, Refill Quantity: 2 2016-04-28 Active Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls

FOR A TOTAL OF 3 TABLETS PER MONTH, Quantity: 3, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-28
Furosemide ,40 MG TABS, TAKE 1 TABLET 3 TIMES DAILY @ 0800, 1200, 1600, Quantity: 90, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-28
Furosemide ,40 MG TABS, TAKE 1 TABLET 3 TIMES DAILY @ 0800, 1200, 1600, Quantity: 90, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-28
Ondansetron HCI ,4 MG TABS, TAKE 1 TABLET 30 MINUTES BEFORE BREAKFAST DAILY, Quantity: 30, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-28
Ondansetron HCI ,4 MG TABS, TAKE 1 TABLET 30 MINUTES BEFORE BREAKFAST DAILY, Quantity: 30, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-28
Potassium Chloride Crys ER ,20 MEQ TBCR, TAKE 1 TABLET 3 TIMES DAILY AFTER MEALS, Quantity: 90, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-28
Potassium Chloride Crys ER ,20 MEQ TBCR, TAKE 1 TABLET 3 TIMES DAILY AFTER MEALS, Quantity: 90, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-28
Warfarin Sodium ,10 MG TABS, TAKE 3 TABLETS DAILY, Quantity: 90, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-28
Warfarin Sodium ,10 MG TABS, TAKE 3 TABLETS DAILY, Quantity: 90, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-28
AmLODIPine Besylate ,5 MG TABS, TAKE 1 TABLET DAILY FOR BLOOD PRESSURE, Quantity: 30, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-28
AmLODIPine Besylate ,5 MG TABS, TAKE 1 TABLET DAILY FOR BLOOD PRESSURE, Quantity: 30, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-28
Cetirizine HCI ,10 MG TABS, TAKE 1 TABLET BY MOUTH EVERY DAY, Quantity: 30, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-28
Cetirizine HCI ,10 MG TABS, TAKE 1 TABLET BY MOUTH EVERY DAY, Quantity: 30, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-28
Alprazolam 2mg qd Unknown or N/A	Active	2016-04-26
Ondonsetron 4mg qd	Active	2016-04-26

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 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 systolic blood pressure greater than 200. 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. Anxiety, continue current plan.
- 3. Chronic obstructive pulmonary disease/asthma, continue current plan.
- 4. Chronic pain syndrome, continue current pain medications.
- 5. Osteoarthritis with chronic pain, continue current plan.
- 6. Congestive heart failure with systolic complications, continue current plan.
- 7. Depression, continue current plan.
- 8. Allergic rhinitis, continue current plan.
- 9. Anticoagulant use (for prevention of peripheral edema/deep venous thrombosis), follow up with Hematologist.

Medication refills as follows,
Alprazolam 2 mg q.d.
Norco 10/325 mg t.i.d.
Ondonsetron 4 mg q.d.
Cetirizone 10 mg q.d.
Lasix 40 mg t.i.d.
Potassium Cl 20 mEq,
Amlodipine Besy 10 mg q.d.
Enoxaparin 150 mg/mL.
Colchicine 0.6 mg 3 tabs monthly.
ProAir INH,
Ammonium Lactate 12%.
Allopurinol 100 mg q.d.

Medical Problem:

Description	Status	Start Date	End Date
Chronic pain syndrome (ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-12-21	
Unspecified systolic (congestive) heart failure (ICD10:I50.20 Unspecified systolic (congestive) heart failure) Unknown or N/A	Active	2016-11-22	
Major depressive disorder, single episode, unspecified (ICD10:F32.9 Major depressive disorder, single episode, unspecified) Unknown or N/A	Active	2016-11-22	
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-09-10	
Major depressive disorder, recurrent, moderate (ICD10:F33.1 Major depressive disorder, recurrent, moderate) Unknown or N/A	Active	2016-09-10	
Primary generalized (osteo)arthritis (ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2016-09-07	
Polyosteoarthritis, unspecified (ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2016-09-07	
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	2016-08-09	
Embolism and thrombosis of unspecified artery (ICD10:I74.9 Embolism and thrombosis of unspecified artery) Unknown or N/A	Active	2016-07-12	

Primary pulmonary hypertension (ICD10:I27.0 Primary pulmonary hypertension) Unknown or N/A	Active	2016-07-12
Bilateral primary osteoarthritis of hip (ICD10:M16.0 Bilateral primary osteoarthritis of hip) Unknown or N/A	Active	2016-07-12
Morbid (severe) obesity due to excess calories (ICD10:E66.01 Morbid (severe) obesity due to excess calories) Unknown or N/A	Active	2016-07-12
Difficulty in walking, not elsewhere classified (ICD10:R26.2 Difficulty in walking, not elsewhere classified) Unknown or N/A	Active	2016-07-12
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	2016-07-07
Anxiety disorder, unspecified (ICD10:F41.9 Anxiety disorder, unspecified) Unknown or N/A	Active	2016-07-07
Allergic rhinitis, unspecified (ICD10:J30.9 Allergic rhinitis, unspecified) Unknown or N/A	Active	2016-07-07
Heart failure, unspecified (ICD10:I50.9 Heart failure, unspecified) Unknown or N/A	Active	2016-05-31
Ceturizine 10mg qd Unknown or N/A	Active	2016-04-26
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2016-04-26
Unspecified asthma, uncomplicated (ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2016-04-26
Chronic obstructive pulmonary disease, unspecified (ICD10:J44.9 Chronic obstructive pulmonary disease, unspecified) Unknown or N/A	Active	2016-04-26
Gout, unspecified (ICD10:M10.9 Gout, unspecified) Unknown or N/A	Active	2016-04-26
Chronic pain due to trauma (ICD10:G89.21 Chronic pain due to trauma) Unknown or N/A	Active	2016-04-26
Nicotine dependence, unspecified, uncomplicated (ICD10:F17.200 Nicotine dependence, unspecified, uncomplicated) Unknown or N/A	Active	2016-04-26

Allergies:

Description	Status	Start Date	End Date
Tramadol Unknown or N/A	Active	2016-04-26	
Coconut. Unknown or N/A	Active	2016-04-26	

Surgeries:

Description	Status	Start Date	End Date
Pins in knee.	Active	2016-04-26	
Unknown or N/A	Active	2010-04-20	
Left shoulder surgery	Active	2016-04-26	
Unknown or N/A	Active	2010-04-20	

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): 7

Current home health agency: Divine Edge Health Services

Primary Justification Medical Conditions: Asthma,HTN,Mobility_Impairments

Additional Medical Conditions: Chronic Pain, Morbid Obesity

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 limited mobility chronic pain morbid obesity he and the

inability to self medicate

Certification Statement: Skilled nursing needed due to mobility issues being in the in the ability to self medicate correctly.

Signed by (NP): 16

Signed On (NP): 2016-12-21 07:44 **Signed By (Physician):** 18

Signed on (Physician): 2016-12-28 07:44

Form_status: finalized

Procedure Order:

Patient ID	6159	Order ID	1390
Patient Name	Rivers, Ebony	Ordered By	Love-Jones, Derrick
Order Date	2016-12-21 00:00:00	Print Date	2017-02-12
Order Status	complete	Encounter Date	2017-02-12
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2016-12-21 00:00:00		Final ✓		0097	Pulse Oximetry	No	98 %	97% to 100%		



Electronically Signed by Derrick Love-Jones on 2016-12-28.

Printed on 12-Feb-2017 17:37:28 pm.