

**Cedric Green: Patient Information**  
Patient Record Number:5907

**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:** Cedric Green

**External ID:** 5907

**DOB:** 1966-11-14

**Sex:** Male

**S.S.:** 461722597

**Marital Status:** Single

**User Defined:** Elvira Drennon same address

**Patient Drive Folder:** [https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B1v8FHBd\\_SfCV3IIWF9CX3hibFk](https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B1v8FHBd_SfCV3IIWF9CX3hibFk)

**Address:** 2331 Kathleen Ave

**City:** Dallas

**State:** Texas

**Postal Code:** 75216

**Country:** USA

**Emergency Contact:** 214-462-0183

**Home Phone:** 214-462-0186

**Street Address:** 2331 Kathleen Ave

**Apt/Suite/Other:** House

## Family History:

**Last Recorded On:** 07-14-2016.

**Father:** Father died of weakness.

**Mother:** Mother died of weakness due to breast cancer.

**Siblings:** 4 brothers , 2 died and the other 2 unhealthy..

**Offspring:** Patient is single and has no children..

## Social History:

**Last Recorded On:** 07-14-2016.

**Tobacco:** Current every day smoker smokes 1 ppd    **Status:** Current

**Alcohol:** Drinks occasionally.    **Status:** Current

**Recreational Drugs:** No drug abuse.    **Status:** Never

**Other History:** Flu shot in 2014 Denies pneumonia.

## Tests and Exams:

**Last Recorded On:** 07-14-2016.

## Insurance:

**Medicare B Texas (SMTX0)**

**Priority** : Primary  
**Start Date** : 1990-09-01  
**Relationship to Insured** : Self  
**Type** : N/A  
**Payer** : Medicare B Texas (SMTX0)  
**Priority** : Primary  
**Start Date** : 2016-01-01  
**Relationship to Insured** : Self  
**Type** : N/A  
**Payer** : Superior Health Plan Texas (39188)  
**Priority** : Primary  
**Start Date** : 2016-04-01  
**Relationship to Insured** : Self  
**Type** : N/A  
**Payer** : Medicare B Texas (SMTX0)  
**Priority** : Secondary  
**Start Date** : 2013-01-01  
**Relationship to Insured** : Self  
**Type** : N/A  
**Payer** : Superior Health Plan Texas (39188)

**Copay** :  
**Insured ID Number** : 461722597C1  
**Group Number** :  
**Employer Name** : Cedric Green  
**Copay** :  
**Insured ID Number** : 426356601  
**Group Number** :  
**Employer Name** : Cedric Green  
**Copay** :  
**Insured ID Number** : 461722597C1  
**Group Number** :  
**Employer Name** : Cedric Green  
**Copay** :  
**Insured ID Number** : 426356601  
**Group Number** :  
**Employer Name** : Cedric Green

## Immunizations:

## Medical Problem:

Description	Status	Start Date	End Date
Other chronic pain ( ICD9:338.29 Other chronic pain) Unknown or N/A	Inactive	2015-09-15	2015-09-30
Rheumatoid arthritis ( ICD9:714.0 Rheumatoid arthritis) Unknown or N/A	Inactive	2015-09-15	2015-09-30
Other convulsions ( ICD9:780.39 Other convulsions) Unknown or N/A	Inactive	2015-07-13	2015-09-30
Depressive disorder, not elsewhere classified ( ICD9:311 Depressive disorder, not elsewhere classified) Unknown or N/A	Inactive	2015-07-13	2015-09-30
Anxiety state, unspecified ( ICD9:300.00 Anxiety state, unspecified) Unknown or N/A	Inactive	2015-07-13	2015-09-30
Unspecified schizophrenia, unspecified ( ICD9:295.90 Unspecified schizophrenia, unspecified) Unknown or N/A	Inactive	2015-07-13	2015-09-30

## Medical Problem:

Description	Status	Start Date	End Date
Unspecified urinary incontinence ( ICD10:R32 Unspecified urinary incontinence) Unknown or N/A	Active	2016-02-11	
Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with simple partial seizures, not intractable, with status epilepticus ( ICD10:G40.101 Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with simple partial seizures, not intractable, with status epilepticus) Unknown or N/A	Active	2015-11-15	
Bilateral primary osteoarthritis of hip ( ICD10:M16.0 Bilateral primary osteoarthritis of hip) Unknown or N/A	Active	2015-11-15	
History of falling ( ICD10:Z91.81 History of falling) Unknown or N/A	Active	2015-11-15	

Moderate or severe impairment, both eyes, impairment level not further specified

( ICD10:H54.2 Low vision, both eyes)

Active

2015-10-01

Unknown or N/A

Printed on 17-Sep-2016 07:31:42 am.