

**Andrew Thomas: Patient Information**  
Patient Record Number:1243

**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:** Andrew Thomas  
**External ID:** 1243  
**DOB:** 1967-06-01  
**Sex:** Male  
**S.S.:** 256-19-4529  
**Marital Status:** Single  
**User Defined:** Lives with Debra Smith  
**Patient Drive Folder:** 0B0x\_tbqdBDPhb1BTR1M5NFJtVE0

**Address:** 2269 Aspen Drive  
**City:** Dallas  
**State:** Texas  
**Postal Code:** 75227  
**Country:** USA  
**Home Phone:** 214-845-1309  
**Mobile Phone:** 214-641-7087  
**Street Address:** 2269 Aspen Drive  
**Apt/Suite/Other:** House

## Past Medical History:

**Last Recorded On:** 01-27-2017.  
**Risk Factors:** Chronic Pain,Constipation,Insomnia.

## Family History:

**Last Recorded On:** 01-27-2017.  
**Father:** Unknown..  
**Mother:** Unknown..  
**Siblings:** Unknown..  
**Offspring:** Four children.

## Social History:

**Last Recorded On:** 01-27-2017.  
**Tobacco:** Smokes 2 cigarettes a day **Status:** Current  
**Alcohol:** No alcohol use. **Status:** Never  
**Recreational Drugs:** Social drinker. **Status:** Current  
**Nutrition History:** Regular diet..  
**Developmental History:** Educational level is 11th grade..

## Tests and Exams:

**Last Recorded On:** 01-27-2017.  
**Vitamin D (6 mo if on pills)** Abnormal Done on 01/02/2014, at MetroStat Diagnostic Services, ordered by Dr. Ketha.  
**TSH Thyroid-Stimulating Hormone (every year)** Normal Done on 01/02/2014, at MetroStat Diagnostic Services, ordered by Dr. Ketha.  
**CBC Complete Blood Count (3 months)** Abnormal Done on 01/02/2014, at MetroStat Diagnostic Services, ordered by Dr. Ketha.  
**CMP Comprehensive Metabolic Panel (3 months)** Abnormal Done on 01/02/2014, at MetroStat

Diagnostic Services, ordered by Dr. Ketha.

**LIPIDS (once year unless chol meds)** Abnormal Done on 01/02/2014, at MetroStat Diagnostic Services, ordered by Dr. Ketha.

**LDL / HDL** Abnormal Done on 01/02/2014, at MetroStat Diagnostic Services, ordered by Dr. Ketha.

**PSA (over 50 yrs)** Normal Done on 01/02/2014, at MetroStat Diagnostic Services, ordered by Dr. Ketha.

## Insurance:

### Medicare B Texas (SMTX0)

**Priority** : Primary

**Start Date** : 2010-05-01

**Relationship to Insured** : Self

**Type** : N/A

**Payer** : Medicare B Texas (SMTX0)

**Priority** : Secondary

**Start Date** : 2012-09-13

**Relationship to Insured** : Self

**Type** : N/A

**Payer** : Medicaid Texas (SKTX0)

**Copay** :

**Insured ID Number** : 256194529A

**Group Number** :

**Employer Name** : Andrew Thomas

**Copay** :

**Insured ID Number** : 525088403

**Group Number** :

**Employer Name** : Andrew Thomas

## Immunizations:

**Andrew Thomas: Chief Complaint**  
Patient Record Number:1243

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

**Chief Complaint Status:**finalized

Followup home visit for management of chronic obstructive pulmonary disease, osteoarthritis, chronic pain, vitamin D deficiency, neuropathy, hyperlipidemia, lumbago, and hypertension. Patient complains of shortness of breath and pain in his knees and lower back.

**History of Present illness:**

**HPI Status:**Finalized

Patient is a 49-year-old African-American male in no acute distress with multiple chronic conditions of chronic obstructive pulmonary disease, osteoarthritis, chronic pain, vitamin D deficiency, neuropathy, hyperlipidemia, lumbago, and hypertension. Patient states that over the last 3-4 days he has had shortness of breath. Patient also has a history of chronic knee pain and back pain. Patient denies any other issues or complaints upon examination. Patient denies any hypoglycemia and foot check revealed no major issues. 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	145	78	200.00	72.00	97.60	16.00	~	27.1	0.00

## Review of Systems:

**Constitutional:**

**NO Biting Of Fingers**  
**NO Biting Of Nails**  
**NO Biting Of Lips**  
**NO Biting Of Cheeks**  
**NO Biting Of Palate**  
**NO Biting Of Skin**  
**NO Biting Of Gums**  
**NO Biting Of**  
**NO Biting Of**  
**NO Biting Of**

### Physical Exam:

1. **Normality:** **Normality** is a measure of the concentration of a solution, expressed as the number of moles of solute per liter of solution. It is calculated using the formula:  $\text{Normality} = \frac{\text{Moles of solute}}{\text{Volume of solution (L)}}$ .

**PERMIT LIMITS:**

**CV:** **Revised Blood Chemistry and Hematology, Vitamin and Mineral Levels.**

Murmur, Rubs, Gallops-Within Normal Limits .

**Medication:**

Description	Status	Start Date	End Date
Advair Diskus ,250-50 MCG/DOSE AEPB, INHALE 1 PUFF TWICE DAILY, Quantity: 1, Refill Quantity: 3			
Unknown or N/A	Active	2016-06-13	
by ketha, Dr sumana - BK6230281			
DFW Primary Care PLLC			

Hydrocodone-Acetaminophen ,10-325 MG TABS, TAKE 1 TABLET EVERY 8 HOURS AS NEEDED FOR PAIN, Quantity: 90, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2015-05-14
Lisinopril ,10 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2015-05-14
ProAir HFA ,108 (90 Base) MCG/ACT AERS, INHALE 1 TO 2 PUFFS EVERY 4 TO 6 HOURS AS NEEDED, Quantity: 8, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2015-05-14

## Plan Note:

### Plan Note Status:Finalized

Continue same treatment plan as previous. Reviewed and continue with current medication, no new medication noted. 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 to exercise daily. No labs needed this visit. The patient verbalized understanding of the above plan, and was given the office number to call for any questions or concern. Prognosis is fair and patient is stable. Reviewed old records of the patient. Follow up appointment in 4-6 weeks.

1. Chronic obstructive pulmonary disease/asthma, continue current plan.
2. Hypertension with vascular complications, continue current plan.
3. Neuropathy, continue current plan.
4. Chronic pain syndrome, continue current pain medications.
5. Lumbago with chronic pain, continue current plan.
6. Osteoarthritis with chronic pain, continue current plan.
7. Diabetes mellitus 2 with neuropathy, continue current plan.
8. Gastroesophageal reflux disease, continue current plan.
9. Neuropathy, continue current plan.
10. Hyperlipidemia, continue current plan.
11. Vitamin D Deficiency, continue current plan.
12. Bipolar, continue current plan.
13. Abnormal gait, continue to monitor.

Medication refills as follows,

Norco 10/325 mg t.i.d

Pravastatin 20 mg q.d.

ProAir INH

## Medical Problem:

Description	Status	Start Date	End Date
Chronic airway obstruction, not elsewhere classified ( ICD10:J44.9 Chronic obstructive pulmonary disease, unspecified) Unknown or N/A	Active	2015-10-01	
Osteoarthritis, localized, primary, lower leg ( ICD10:M17.10 Unilateral primary osteoarthritis, unspecified knee) Unknown or N/A	Active	2015-10-01	
Unspecified hereditary and idiopathic peripheral neuropathy ( ICD10:G60.9 Hereditary and idiopathic neuropathy, unspecified) Unknown or N/A	Active	2015-10-01	
Benign essential hypertension ( ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01	
Mixed hyperlipidemia ( ICD10:E78.2 Mixed hyperlipidemia) Unknown or N/A	Active	2015-10-01	
Lumbago ( ICD10:M54.5 Low back pain) Unknown or N/A	Active	2015-10-01	

Other chronic pain ( ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2015-10-01
Migraine with aura, without mention of intractable migraine without mention of status migrainosus ( ICD10:G43.109 Migraine with aura, not intractable, without status migrainosus) 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
Unspecified essential hypertension ( ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01
Obstructive chronic bronchitis with (acute) exacerbation ( ICD10:J44.1 Chronic obstructive pulmonary disease with (acute) exacerbation) Unknown or N/A	Active	2015-10-01
Osteoarthritis, generalized, multiple sites ( ICD10:M15.0 Primary generalized (osteo)arthritis) 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
Chest pain, unspecified ( ICD10:R07.9 Chest pain, unspecified) Unknown or N/A	Active	2015-10-01
Constipation ( ICD10:K59.00 Constipation, unspecified) Unknown or N/A	Active	2015-10-01
Bipolar disorder ( ICD10:F30.10 Manic episode without psychotic symptoms, unspecified) Unknown or N/A	Active	2015-10-01
Esophageal reflux ( ICD10:K21.9 Gastro-esophageal reflux disease without esophagitis) Unknown or N/A	Active	2015-10-01
Osteoarthritis, generalized, site unspecified ( ICD10:M15.0 Primary generalized (osteo)arthritis) ( ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2015-10-01
Unspecified vitamin D deficiency ( ICD10:E55.9 Vitamin D deficiency, unspecified) Unknown or N/A	Active	2015-10-01
Mononeuritis of unspecified site ( ICD10:G58.9 Mononeuropathy, unspecified) Unknown or N/A	Active	2015-10-01

## Allergies:

Description	Status	Start Date	End Date
No known drug allergies Unknown or N/A	Active	2015-02-09	

## Face to Face HH Plan:

**Patient Home Bound or Can't Drive:** YES

**Is Home Health Care Needed:** NO

**Does Patient have reliable other Primary Care Physician:** YES

**Is House Visit Needed:** YES

**Next Visit Duration (in days):** 31

**Nursing Required:** NO

**Physical Therapy:** NO

**Occupational Therapy Required:** NO

**Speech-language Pathology Required:** NO

**Clinical Findings To Justify Home Health:** No SN needed at this time.

**Signed by (NP):** 16

Signed On (NP): 2016-12-21 08:04  
Signed By (Physician): 18  
Signed on (Physician): 2016-12-28 08:04  
Form\_status: finalized

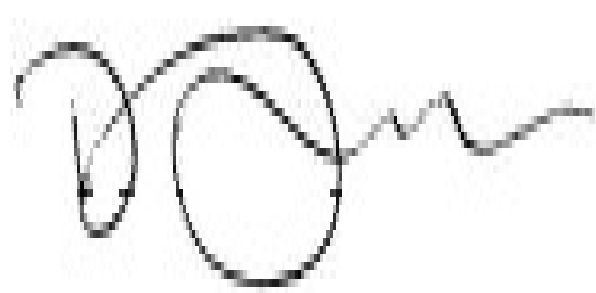
## DME:

Description	Status	Start Date	End Date
Gloves, Cane, Walker, Wheel chair Unknown or N/A	Active		

## Procedure Order:

Patient ID	1243	Order ID	1391
Patient Name	Thomas, Andrew	Ordered By	Love-Jones, Derrick
Order Date	2017-01-28	Print Date	2017-01-28
Order Status	complete	Encounter Date	2017-01-28
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2017-01-28		Final ✓		0097	Pulse Oximetry	No	98%	97% to 100%		



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

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