

Eddie Mcmillan: Patient Information
Patient Record Number:3285

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: Eddie Mcmillan
External ID: 3285
DOB: 1958-09-04
Sex: Female
Marital Status: Single
Patient Drive Folder: <https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B0AwTMa8jPNAa3pSc0JURXJNYWc>

Address: 7436 Hunnicut Road #1104
City: Dallas
State: Texas
Postal Code: 75227
Country: USA
Home Phone: 214-388-7001
Mobile Phone: 469-386-7059
Street Address: 7436 Hunnicut Road
Apt/Suite/Other: 1104

Past Medical History:

Last Recorded On: 11-19-2016.
Risk Factors: Gout.

Family History:

Last Recorded On: 11-19-2016.
Father: Unknown..
Mother: Unknown..
Siblings: Unknown..
Offspring: Four children..

Social History:

Last Recorded On: 11-19-2016.
Tobacco: Current every day smoker Smoke one pack every 3-4 days. **Status:** Current
Alcohol: Used to drink in the past. **Status:** Quit
Recreational Drugs: No drugs **Status:** Never
Nutrition History: Regular diet..
Developmental History: Education level is 10th grade..
Other History: Influenza November 2015.

Tests and Exams:

Last Recorded On: 11-19-2016.
Mammogram (>40yrs, Yearly) N/A N/A Due
PAP Smear N/A N/A Due

Insurance:

Molina Healthcare of Texas (Z1161)

Priority : Primary
Start Date : 2014-05-01
Relationship to Insured : Self
Type : N/A
Payer : Molina Healthcare of Texas (Z1161)

Copay :
Insured ID Number : 252328401
Group Number :
Employer Name : Eddie Mcmillan

Immunizations:

Eddie Mcmillan: Chief Complaint
Patient Record Number:3285

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Seen by Sumana Ketha MD
Seen on 28-September-2016

Chief Complaint Status:finalized

Follow up home visit for management of diabetes mellitus type 2, hypertension, chronic airway obstruction, gout, insomnia, asthma, chronic pain, osteoarthritis, obesity, and mood disorder. Patient complains of allergies and hoarseness.

History of Present illness:

HPI Status:Finalized

A 58-year-old African American female in NAD with multiple chronic conditions diabetes, hypertension, asthma, and chronic pain. Patient states she is still very short of breath upon exertion. Patient is a newly diagnosed diabetic. Patient denies any other issues or complaints upon examination. Patient denies any pain at this time. Patient denies any CP, HA, or N/V.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-09-28	147	95	0.00	60.00	98.20	18.00	~	0.0	0.00

Review of Systems:

Constitutional:

General/Physical/Anatomic:

No Change in Weight
No Change in Appetite
No Change in Sleep
No Change in Energy
No Change in Mood
No Change in Nature Of Urine
No Change in Menstruation
No Change in Range Of Motion YES
No Change in Bowel
No Change in Use Of Dentures

Physical Exam:

HEENT:

Oral cavity, tongue, throat, and larynx - Within Normal Limits .

ENT:

ENT - Within Normal Limits .

CV:

CV - Within Normal Limits .

Murmur, Rubs, Gallops - Within Normal Limits .

Medication:

Description	Status	Start Date	End Date
Albuterol Sulfate ,(2.5 MG/3ML) 0.083% NEBU, USE 1 UNIT DOSE IN NEBULIZER EVERY 4 HOURS AS NEEDED, Quantity: 360, Refill Quantity: 3	Active	2015-06-03	
Unknown or N/A			
by ketha, Dr sumana - BK6230281			
Sumana Ketha MDPA			

Furosemide ,20 MG TABS, TAKE 1 TABLET DAILY AS DIRECTED, Quantity: 10, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-06-03
ProAir HFA ,108 (90 Base) MCG/ACT AERS, Take 2 puffs 2-3 times daily as needed, Quantity: 8.5, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-06-03
AmLODIPine Besylate ,5 MG TABS, TAKE 1 TABLET DAILY FOR BLOOD PRESSURE, Quantity: 30, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-03-13
Hydrochlorothiazide ,25 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-03-13
ProAir HFA ,108 (90 Base) MCG/ACT AERS, 2 puffs 4 times a day, Quantity: 1, Refill Quantity: 6 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-03-13

Plan Note:

Plan Note Status:Finalized

1. Coronary artery disease, monitor.
2. Valvular heart disease, continue current treatment plan.
3. Hypertension with vascular complications, continue blood pressure medications.
4. Diabetes mellitus 2 with neuropathy, monitor HbA1c.
5. Chronic obstructive pulmonary disease, on nebulizers.
6. Gout, monitor.
7. Chronic pain syndrome, on pain medications.
8. Insomnia, continue medications.
9. Atrial fibrillation, monitor.
10. Osteoarthritis with chronic pain, continue medications.
11. Bipolar disease, continue medications.
12. Medication refills are metformin 500 mg bid and glucometer kit.
13. Medication adherence was given to the patient. Continue treatment as planned.
14. Patient was given card with number to the office for any questions or concerns. Patient was instructed to go to emergency room for any life threatening emergency. Patient verbalized understanding of the above plan.
15. Reviewed old records of the patient.
16. Follow up appointment in 4-6 weeks.

Medical Problem:

Description	Status	Start Date	End Date
Gastro-esophageal reflux disease without esophagitis (ICD10:K21.9 Gastro-esophageal reflux disease without esophagitis) Unknown or N/A	Active	2016-09-28	
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	2016-07-28	
Nonrheumatic aortic valve disorder, unspecified (ICD10:I35.9 Nonrheumatic aortic valve disorder, unspecified) Unknown or N/A	Active	2016-07-28	
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	2016-07-28	

Type 2 diabetes mellitus with diabetic neuropathy, unspecified (ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2016-07-28
Type 2 diabetes mellitus without complications (ICD10:E11.9 Type 2 diabetes mellitus without complications) Unknown or N/A	Active	2015-11-10
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
Chronic airway obstruction, not elsewhere classified (ICD10:J44.9 Chronic obstructive pulmonary disease, unspecified) Unknown or N/A	Active	2015-10-01
Gout, unspecified (ICD10:M10.9 Gout, unspecified) Unknown or N/A	Active	2015-10-01
CVA effects (ICD10:I67.89 Other cerebrovascular disease) Unknown or N/A	Active	2015-10-01
Insomnia, unspecified (ICD10:G47.00 Insomnia, unspecified) Unknown or N/A	Active	2015-10-01
Asthma unspecified (ICD10:J45.901 Unspecified asthma with (acute) exacerbation) Unknown or N/A	Active	2015-10-01
Chronic pain syndrome (ICD10:G89.4 Chronic pain syndrome) 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
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2015-10-01
Unspecified episodic mood disorder (ICD10:F39 Unspecified mood [affective] disorder) Unknown or N/A	Active	2015-10-01
Obesity, unspecified (ICD10:E66.9 Obesity, unspecified) Unknown or N/A	Active	2015-10-01

Allergies:

Description	Status	Start Date	End Date
Penicillin Unknown or N/A	Active		
Ibuprofen Unknown or N/A	Active		
Benadryl Unknown or N/A	Active		
Lisinopril Unknown or N/A	Active		

Surgeries:

Description	Status	Start Date	End Date
Tubal ligation Unknown or N/A	Active		
Hysterectomy Unknown or N/A	Active		

Appendectomy Unknown or N/A	Active
Hospitalized at Parkland in 2014. Unknown or N/A	Active

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

Current home health agency:

Primary Justification Medical Conditions:

Additional Medical Conditions: Diabetes.

Nursing Required: NO

Physical Therapy: NO

Occupational Therapy Required: NO

Speech-language Pathology Required: NO

Requested Care/Treatments Required:

Clinical Findings To Justify Home Health: No skilled nursing needed.

Certification Statement:

Signed by (NP): 302

Signed On (NP): 2016-09-28 04:35

Signed By (Physician): 18

Signed on (Physician): 2016-10-05 04:35

Form_status: finalized

Printed:

DME:

Description	Status	Start Date	End Date
Benign essential hypertension ordered blood pressure monitor from Ace Medical Supply. (ICD9:401.1 Benign essential hypertension) Unknown or N/A	Active		
Chronic airway obstruction, not elsewhere classified ordered Nebulizer from Ace Medical. (ICD9:496 Chronic airway obstruction, not elsewhere classified) Unknown or N/A	Active		



Electronically Signed by **Sumana Ketha, MD** on **2016-10-05**.

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