Rebertha West: Patient Information

Patient Record Number:1119

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: Rebertha West External ID: 1119 **DOB**: 1937-02-15 Sex: Female S.S.: 450-98-3344 Marital Status: Widowed

Patient Drive Folder: https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B0Q2MIHiECb5UGxXOGx5THgwbnc

Address: 7575 Chaucer Place #101

City: Dallas State: Texas Postal Code: 75237 Country: USA

Home Phone: 972-296-7175 Street Address: 7575 Chaucer Place

Apt/Suite/Other: 101

Past Medical History:

Last Recorded On: 10-30-2016.

Risk Factors: GERD.

Family History:

Last Recorded On: 10-30-2016. Father: Father had heart disease...

Mother: Mother had diabetes mellitus type 2, hypertension, and blindness..

Siblings: Sister had cancer. Brother had heart disease..

Offspring: Four children..

Primary Family Med Conditions:

Last Recorded On: 10-30-2016.

Chronic Conditions: Diabetes, Hypertension, Ischemic Heart Disease. Disability Conditions: Sensory - Blindness and Visual Impairment.

Social History:

Last Recorded On: 10-30-2016.

Tobacco: Never smoker Nonsmoker. Status: Never

Alcohol: No alcohol. Status: Never

Recreational Drugs: No drug abuse. Status: Never

Nutrition History: Regular..

Developmental History: Education level 7th grade..

Work Status: Disabled.

Other History: Patient is a widow. She uses walker. She lives alone and takes help of her children...

Tests and Exams:

Last Recorded On: 10-30-2016.

Vitamin D (6 mo if on pills) Abnormal Done on 08/14/2014 at Evolution Health Laboratory, ordered by Dr. Sumana Ketha.

TSH Thyroid-Stimulating Hormone (every year) Normal Done on 08/14/2014 at Evolution Health Laboratory, ordered by Dr. Sumana Ketha.

CBC Complete Blood Count (3 months) Abnormal

CMP Comprehensive Metabolic Panel (3 months) Abnormal Done on 08/14/2014 at Evolution Health Laboratory, ordered by Dr. Sumana Ketha.

LIPIDS (once year unless chol meds) N/A Done on 08/14/2014 at Evolution Health Laboratory, ordered by Dr. Sumana Ketha.

Mammogram (>40yrs, Yearly) N/A Done in 2015. **Sigmoid/Colonoscopy** N/A Done longtime ago.

Insurance:

Medicare B Texas (SMTX0)

Priority: Primary Start Date: 2002-02-01 Relationship to Insured: Self

Type: N/A

Payer: Medicare B Texas (SMTX0)

Priority : Secondary Start Date : 2011-02-01 Relationship to Insured : Self

Type: N/A

Payer: Molina Healthcare of Texas (Z1161)

Priority : Secondary Start Date : 2015-05-14 Relationship to Insured : Self

Type: N/A

Payer: Molina Healthcare of Texas (Z1161)

Copay:

Insured ID Number: 450983344A

Group Number:

Employer Name: Rebertha West

Copay:

Insured ID Number: 515888560

Group Number:

Employer Name : Rebertha West

Copay

Insured ID Number: 515888560

Group Number:

Employer Name : Rebertha West

Immunizations:



Electronically Signed by Sumana Ketha, MD on 2016-08-02 at 20:04.

Printed on 30-Oct-2016 19:21:20 pm.