

**Bobbie Rice: Patient Information**  
Patient Record Number:6217

**Texas Physician House Calls (H)**  
2925 Skyway Circle North, Irving, TX, USA, 75038-3510  
www.texas-housecalls.com, Phone:(972) 675-7313, Fax:(972) 675-7310,  
Email:hhsupport@texas-housecalls.com

**Name:** Bobbie J Rice  
**External ID:** 6217  
**DOB:** 1947-10-20  
**Sex:** Female  
**S.S.:** 451-84-3917  
**Marital Status:** Single

**Address:** 8630 Tonawanda Dr  
**City:** Dallas  
**State:** Texas  
**Postal Code:** 75217  
**Country:** USA  
**Guardian's Name:** Debra ( Daughter)  
**Emergency Phone:** 469-671-4602  
**Mobile Phone:** 940-703-3065  
**Street Address:** 8630 Tonawanda Dr  
**Apt/Suite/Other:** House

## Family History:

**Last Recorded On:** 10-15-2016.  
**Father:** Father is died, complains of prostate cancer, coronary artery disease, and diabetes mellitus 3..  
**Mother:** Mother is died, complains of coronary artery disease..  
**Siblings:** One brother is died. One sister died with complains of CVA and hypertension. .  
**Other Family Relative:** One boy and two girls..

## Social History:

**Last Recorded On:** 10-15-2016.  
**Tobacco:** No smoking. **Status:** Never  
**Alcohol:** No alcohol. **Status:** Never  
**Recreational Drugs:** No drugs. **Status:** Never  
**Nutrition History:** Regular.  
**Developmental History:** Well.  
**Other History:** Influenza in 2015. Pneumovax 5 years ago..

## Insurance:

### Medicare B Texas (SMTX0)

**Priority :** Primary  
**Start Date :** 1994-10-01  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Medicare B Texas (SMTX0)  
**Priority :** Secondary  
**Start Date :** 2016-06-01  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Medicaid Texas (SKTX0)

**Copay :**  
**Insured ID Number :** 451843917A  
**Group Number :**  
**Employer Name :** Bobbie Rice  
**Copay :**  
**Insured ID Number :** 511173066  
**Group Number :**  
**Employer Name :** Bobbie Rice

**Immunizations:**

**Medical Problem:**

Description	Status	Start Date	End Date
Polyosteoarthritis, unspecified ( ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2016-06-30	
Benign essential hypertension ( ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2016-05-28	
Low vision, both eyes ( ICD10:H54.2 Low vision, both eyes) Unknown or N/A	Active	2016-05-28	
Difficulty in walking, not elsewhere classified ( ICD10:R26.2 Difficulty in walking, not elsewhere classified) Unknown or N/A	Active	2016-05-28	
Low back pain ( ICD10:M54.5 Low back pain) Unknown or N/A	Active	2016-05-28	

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