

**Rebertha West: Patient Information**  
Patient Record Number:1119

**Texas Physician House Calls (H)**  
2925 Skyway Circle North, Irving, TX, USA, 75038-3510  
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**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)

|   |                                       |
|---|---------------------------------------|
| <b>Priority :</b> Primary                         | <b>Copay :</b>                        |
| <b>Start Date :</b> 2002-02-01                    | <b>Insured ID Number :</b> 450983344A |
| <b>Relationship to Insured :</b> Self             | <b>Group Number :</b>                 |
| <b>Type :</b> N/A                                 | <b>Employer Name :</b> Rebertha West  |
| <b>Payer :</b> Medicare B Texas (SMTX0)           | <b>Copay :</b>                        |
| <b>Priority :</b> Secondary                       | <b>Insured ID Number :</b> 515888560  |
| <b>Start Date :</b> 2011-02-01                    | <b>Group Number :</b>                 |
| <b>Relationship to Insured :</b> Self             | <b>Employer Name :</b> Rebertha West  |
| <b>Type :</b> N/A                                 | <b>Copay :</b>                        |
| <b>Payer :</b> Molina Healthcare of Texas (Z1161) | <b>Insured ID Number :</b> 515888560  |
| <b>Priority :</b> Secondary                       | <b>Group Number :</b>                 |
| <b>Start Date :</b> 2015-05-14                    | <b>Employer Name :</b> Rebertha West  |
| <b>Relationship to Insured :</b> Self             |                                       |
| <b>Type :</b> N/A                                 |                                       |
| <b>Payer :</b> Molina Healthcare of Texas (Z1161) |                                       |

## Immunizations:

## Medication:

| Description   | Status | Start Date | End Date |
|---|--------|------------|----------|
| Cyclobenzaprine HCl ,10 MG TABS, Take 1 Tablet By Mouth Twice Daily As Needed, Quantity: 60, Refill Quantity: 0<br>Unknown or N/A<br>by Jones, Derrick - MJ3217331<br>Texas Physician House Calls | Active | 2016-06-07 |          |
| Aspercreme Heat ,10 % GEL, APPLY TO BOTH KNEES AT LEAST 8 HOURS APART, Quantity: 141.6, Refill Quantity: 2<br>Unknown or N/A<br>by Jones, Derrick - MJ3217331<br>Texas Physician House Calls      | Active | 2016-05-09 |          |
| Analgesic Cream/Aloe ,10 % CREA, APPLY AS DIRECTED, Quantity: 85, Refill Quantity: 6<br>Unknown or N/A<br>by Jones, Derrick - MJ3217331<br>Texas Physician House Calls                            | Active | 2016-02-24 |          |
| Levothyroxine Sodium ,125 MCG TABS, TAKE 1 TABLET EVERY MORNING, Quantity: 90, Refill Quantity: 2<br>Unknown or N/A<br>by Jones, Derrick - MJ3217331<br>Texas Physician House Calls               | Active | 2014-12-03 |          |

## Medical Problem:

| Description | Status | Start Date | End Date |
|-------------|--------|------------|----------|
|-------------|--------|------------|----------|

|   |        |            |
|---|--------|------------|
| <b>Osteoarthritis, localized, primary, lower leg</b><br>( ICD10:M17.10 Unilateral primary osteoarthritis, unspecified knee)<br>Unknown or N/A                                   | Active | 2015-10-01 |
| <b>Obesity, unspecified</b><br>( ICD10:E66.9 Obesity, unspecified)<br>Unknown or N/A  | Active | 2015-10-01 |
| <b>Hypertonicity of bladder</b><br>( ICD10:N32.81 Overactive bladder)<br>Unknown or N/A   | Active | 2015-10-01 |
| <b>Unspecified acquired hypothyroidism</b><br>( ICD10:E03.9 Hypothyroidism, unspecified)<br>Unknown or N/A  | Active | 2015-10-01 |
| <b>Asthma, unspecified type, unspecified</b><br>( ICD10:J45.909 Unspecified asthma, uncomplicated)<br>Unknown or N/A  | Active | 2015-10-01 |
| <b>Osteoarthritis, unspecified whether generalized or localized, site unspecified</b><br>( ICD10:M19.90 Unspecified osteoarthritis, unspecified site)<br>Unknown or N/A         | Active | 2015-10-01 |
| <b>Osteoarthritis, localized, not specified whether primary or secondary, pelvic region and thigh</b><br>( ICD10:M16.9 Osteoarthritis of hip, unspecified)<br>Unknown or N/A    | Active | 2015-10-01 |
| <b>Difficulty in walking</b><br>( ICD10:R26.2 Difficulty in walking, not elsewhere classified)<br>Unknown or N/A  | Active | 2015-10-01 |
| <b>Chronic obstructive asthma with status asthmaticus</b><br>( ICD10:J44.0 Chronic obstructive pulmonary disease with acute lower respiratory infection)<br>Unknown or N/A      | Active | 2015-10-01 |
| <b>Esophageal reflux</b><br>( ICD10:K21.9 Gastro-esophageal reflux disease without esophagitis)<br>Unknown or N/A   | Active | 2015-10-01 |
| <b>Unspecified essential hypertension</b><br>( ICD10:I10 Essential (primary) hypertension)<br>Unknown or N/A  | Active | 2015-10-01 |
| <b>Extrinsic asthma, unspecified</b><br>( ICD10:J45.20 Mild intermittent asthma, uncomplicated)<br>Unknown or N/A   | Active | 2015-10-01 |
| <b>Osteoarthritis, generalized, site unspecified</b><br>( ICD10:M15.0 Primary generalized (osteo)arthritis)<br>( ICD10:M15.9 Polyosteoarthritis, unspecified)<br>Unknown or N/A | Active | 2015-10-01 |
| <b>Urinary incontinence, unspecified</b><br>( ICD10:R32 Unspecified urinary incontinence)<br>Unknown or N/A   | Active | 2015-10-01 |
| <b>Functional urinary incontinence</b><br>( ICD10:R39.81 Functional urinary incontinence)<br>Unknown or N/A   | Active | 2015-10-01 |
| <b>Other and unspecified hyperlipidemia</b><br>( ICD10:E78.4 Other hyperlipidemia)<br>( ICD10:E78.5 Hyperlipidemia, unspecified)<br>Unknown or N/A                              | Active | 2015-10-01 |
| <b>Allergic rhinitis, cause unspecified</b><br>( ICD10:J30.9 Allergic rhinitis, unspecified)<br>Unknown or N/A  | Active | 2015-10-01 |
| <b>Chronic airway obstruction, not elsewhere classified</b><br>( ICD10:J44.9 Chronic obstructive pulmonary disease, unspecified)<br>Unknown or N/A                              | Active | 2015-10-01 |
| <b>Benign essential hypertension</b><br>( ICD10:I10 Essential (primary) hypertension)<br>Unknown or N/A   | Active | 2015-10-01 |
| <b>Other chronic pain</b><br>( ICD10:G89.29 Other chronic pain)<br>Unknown or N/A   | Active | 2015-10-01 |
| <b>Malignant essential hypertension</b><br>( ICD10:I10 Essential (primary) hypertension)<br>Unknown or N/A  | Active | 2015-10-01 |

|   |        |            |
|---|--------|------------|
| Coronary atherosclerosis of native coronary artery<br>( ICD10:I25.10 Atherosclerotic heart disease of native coronary artery without angina pectoris)<br>Unknown or N/A   | Active | 2015-10-01 |
| Coronary atherosclerosis due to lipid rich plaque<br>( ICD10:I25.83 Coronary atherosclerosis due to lipid rich plaque)<br>Unknown or N/A                                  | Active | 2015-10-01 |
| Osteoarthritis, localized, not specified whether primary or secondary, lower leg<br>( ICD10:M17.10 Unilateral primary osteoarthritis, unspecified knee)<br>Unknown or N/A | Active | 2015-10-01 |
| Congenital factor XI deficiency<br>( ICD10:D68.1 Hereditary factor XI deficiency)<br>Unknown or N/A   | Active | 2015-10-01 |
| Chronic pain syndrome<br>( ICD9:338.4 Chronic pain syndrome)<br>Unknown or N/A  | Active |            |

## Allergies:

| Description                               | Status | Start Date | End Date |
|---|--------|------------|----------|
| No Known Drug Allergies<br>Unknown or N/A | Active |            |          |

## Surgeries:

| Description  | Status | Start Date | End Date |
|--|--------|------------|----------|
| Hysterectomy<br>Unknown or N/A   | Active | 2015-02-26 |          |
| Colosystectomy<br>Unknown or N/A   | Active | 2015-02-26 |          |
| Hospitalized at Methodist Charlton Hospital for Blood Clots in 2015.<br>Unknown or N/A | Active |            |          |

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