Donnie Miller: Patient Information

Patient Record Number:6283

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: Donnie Miller External ID: 6283 **DOB**: 1960-04-07 Sex: Female S.S.: 452237077 Marital Status: Divorced

Address: 3200 S Lancaster Rd

City: Dallas State: Texas Postal Code: 75216 Country: USA

Street Address: 3200 S Lancaster Rd

Family History:

Last Recorded On: 10-30-2016.

Father: Father died of coronary artery disease and colon cancer..

Mother: Mother died of coronary artery disease..

Siblings: One sister is alive..

Offspring: Denies..

Social History:

Last Recorded On: 10-30-2016. Tobacco: No smoking. Status: Never Alcohol: No alcohol. Status: Never

Recreational Drugs: No drug abuse. Status: Never Developmental History: Education level is 12th grade..

Other History: Influenza, tetanus, pneumovax and PPD done on 2015. .

Tests and Exams:

Last Recorded On: 10-30-2016.

Sigmoid/Colonoscopy N/A Done in 2016. Prostate Exam N/A Done in 2016.

Insurance:

Medicare B Texas (SMTX0)

Priority: Primary Start Date: 1995-06-01 Relationship to Insured: Self

Type: N/A

Payer: Medicare B Texas (SMTX0)

Copay:

Insured ID Number: 452237077A

Group Number:

Employer Name: Donnie Miller

Immunizations:

Medication:

Description	Status	Start Date	End Date
Dicyclomine HCI ,20 MG TABS, TAKE 1 TABLET EVERY MORNING AND 1 TABLET EVERY EVENING, Quantity: 60, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-09-30	
Texas Physician House Calls			
Keppra ,750 MG TABS, TAKE 1 TABLET TWICE DAILY, Quantity: 180, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-09-30	
Topiramate ,50 MG TABS, TAKE 1 TABLET 3 TIMES DAILY, Quantity: 90, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-09-30	

Medical Problem:

Description	Status	Start Date	End Date
Low back pain (ICD10:M54.5 Low back pain) Unknown or N/A	Active	2016-08-26	
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-08-26	
Chronic venous hypertension (idiopathic) without complications of unspecified lower extremity (ICD10:187.309 Chronic venous hypertension (idiopathic) without complications of unspecified lower extremity) Unknown or N/A	Active	2016-08-26	
Enlarged prostate with lower urinary tract symptoms (ICD10:N40.1 Enlarged prostate with lower urinary tract symptoms) Unknown or N/A	Active	2016-08-26	
Primary generalized (osteo)arthritis (ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2016-08-26	

Printed on 30-Oct-2016 22:09:45 pm.