

**Jimmy BrownJr: Patient Information**  
Patient Record Number:1274

**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:** Jimmy Lee BrownJr  
**External ID:** 1274  
**DOB:** 1970-01-23  
**Sex:** Male  
**S.S.:** 452-35-2055  
**Marital Status:** Single  
**User Defined:** 469-684-8991  
**Patient Drive Folder:** 0B0x\_tbqdBDPhdWx1bWNqU25jT0U

**Address:** 3727 Malcolm X Blvd  
**City:** Dallas  
**State:** Texas  
**Postal Code:** 75215  
**Country:** USA  
**Home Phone:** 214-434-8436  
**Street Address:** 3727 Malcolm X Blvd  
**Apt/Suite/Other:** House

## Past Medical History:

**Last Recorded On:** 02-03-2017.  
**Risk Factors:** Chronic Pain,Neuropathy,Seizures,Severe Migraine..  
**Additional Medical History:** Allergic Rhinitis Herniated back disc.

## Family History:

**Last Recorded On:** 02-03-2017.  
**Father:** Father had hypertension..  
**Mother:** Mother had hypertension, osteoarthritis, and asthma..  
**Offspring:** Patient has 2 children..

## Primary Family Med Conditions:

**Last Recorded On:** 02-03-2017.  
**Chronic Conditions:** Asthma,Hypertension,RA/OA (Rheumatoid Arthritis/ Osteoarthritis).

## Social History:

**Last Recorded On:** 02-03-2017.  
**Tobacco:** Smokes 12 cigarettes a day **Status:** Current  
**Alcohol:** No alcohol. **Status:** Never  
**Recreational Drugs:** Marijuana **Status:** Current  
**Nutrition History:** Regular diet..  
**Developmental History:** Good..  
**Other History:** Influenza November 2015..

## Tests and Exams:

**Last Recorded On:** 02-03-2017.

**Insurance:**

**Superior Health Plan Texas (39188)**

**Priority :** Primary  
**Start Date :** 2012-08-01  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Superior Health Plan Texas (39188)

**Copay :**  
**Insured ID Number :** 524869902  
**Group Number :**  
**Employer Name :** Jimmy BrownJr

**Immunizations:**

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**Chief Complaint Status:**finalized

Followup home visit for management of hypertension, chronic pain, epilepsy, anxiety, thoracic lumbar neuropathy, asthma, osteoarthritis, migraine, tobacco use, allergic rhinitis, and abnormality of gait. Patient complains of lower back pain and neck pain.

**HPI Status:**Finalized  
Patient is a 46-year-old African-American male in no acute distress with multiple chronic conditions of hypertension, osteoarthritis, chronic pain, epilepsy, and anxiety. Patient states that he has lower back and neck pain and has been having issues walking. Patient rates pain at 6/10 at this time. Patient denies any other issues or complaints upon examination. Patient denies any chest pain, headache, or nausea/vomiting recently. Reviewed labs. Reviewed medications.

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-12-21	131	71	156.00	64.00	98.20	18.00	~	26.8	0.00

**Constitutional:**

- No Pain In The Mouth
- No Swelling Of Gums
- No Bleeding From Gums
- No Change In Taste
- No Change In Range Of Motion
- No Change In Nature Of Urine
- No Changes In Respiration
- No Bleeding Gums
- No Blood In Stool
- No Use Of Dentures

**SOUND:**  
~~Murmur, Rubs, Gallops-Within Normal Limits .~~  
**RISPERILITIES:**  
~~Stomach growling, no rumbling or gurgling sounds-Mid-Gut-Mishin Normal Limits .~~  
**CV:**  
~~Heart Sounds-Within Normal Limits .~~  
 Murmur, Rubs,Gallops-Within Normal Limits .

Description	Status	Start Date	End Date
CarBAMazepine ,200 MG TABS, TAKE 1 TABLET BY MOUTH TWICE DAILY, Quantity: 60, Refill Quantity: 3			
Unknown or N/A	Active	2016-07-16	
by Jones, Derrick - MJ3217331			
Texas Physician House Calls			

NexIUM ,40 MG CPDR, TAKE 1 CAPSULE BY MOUTH DAILY, Quantity: 30, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Sumana Ketha MDPA	Active	2016-07-16
NexIUM ,40 MG CPDR, TAKE 1 CAPSULE BY MOUTH DAILY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-07-16
Propranolol HCl ,40 MG TABS, TAKE 1 TABLET BY MOUTH TWICE PER DAY, Quantity: 60, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Sumana Ketha MDPA	Active	2016-07-16
Propranolol HCl ,40 MG TABS, TAKE 1 TABLET BY MOUTH TWICE PER DAY, Quantity: 60, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-07-16
CarBAMazepine ,200 MG TABS, TAKE 1 TABLET BY MOUTH TWICE DAILY, Quantity: 60, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 DFW Primary Care PLLC	Active	2016-04-08
NexIUM ,40 MG CPDR, TAKE 1 CAPSULE BY MOUTH DAILY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 DFW Primary Care PLLC	Active	2016-04-08
Propranolol HCl ,40 MG TABS, TAKE 1 TABLET BY MOUTH TWICE PER DAY, Quantity: 60, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 DFW Primary Care PLLC	Active	2016-04-08
Hydrocodone-Acetaminophen ,10-325 MG TABS, Take 1 Tablet By Mouth Every 8 Hours As Needed For Pain, Quantity: 90, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-04-28
Phenytoin Sodium Extended ,100 MG CAPS, ONE TAB THREE TIMES A DAY, Quantity: 90, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-04-28
Triamcinolone Acetonide ,0.1 % CREA, APPLY AND RUB IN A THIN FILM TO AFFECTED AREAS TWICE DAILY(AM AND PM), Quantity: 240, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-04-28
Atrovent HFA ,17 MCG/ACT AERS, INHALE 2 PUFFS TWICE DAILY, Quantity: 166.41, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-02-18
CarBAMazepine ,200 MG TABS, TAKE 1 TABLET TWICE DAILY, Quantity: 60, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-02-18
Colace ,100 MG CAPS, TAKE ONE CAPSULE TWICE A DAY, Quantity: 60, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-02-18
Propranolol HCl ,40 MG TABS, TAKE 1 TAB TWICE PER DAY, Quantity: 60, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-02-18

Proventil HFA ,108 (90 Base) MCG/ACT AERS, INHALE 1 TO 2 PUFFS EVERY 4 TO 6 HOURS AS NEEDED, Quantity: 6.7, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-02-18
Qnasl ,80 MCG/ACT AERS, INSERT 1 SQUIRT IN ONE NOSTRIL EVERY DAY, ALTERNATING EACH NOSTRIL, Quantity: 8.7, Refill Quantity: 8 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-02-18
Singulair ,10 MG TABS, TAKE 1 TABLET AT BEDTIME, Quantity: 90, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-02-18
Qnasl ,80 MCG/ACT AERS, INSERT 1 SQUIRT IN ONE NOSTRIL EVERY DAY, ALTERNATING EACH NOSTRIL, Quantity: 8.7, Refill Quantity: 8 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2014-11-18

## Plan Note:

### Plan Note Status:Finalized

Continue same treatment plan as previous. Reviewed and continue same medications, no new medications noted this visit. Medication adherence education was given to the patient and the patient educated on the benefits of low salt, low-fat, low cholesterol diet with current medical conditions. Patient was instructed to go to ER for symptoms of chest pain, shortness of breath, excessive headache, blurry vision or systolic blood pressure greater than 200. Patient encouraged to exercise daily as tolerated. Reviewed recent labs with patient. No labs needed this visit. Patient verbalized understanding of the above plan was given the office number for any questions or concerns. Prognosis is fair and patient is stable.

1. Thoracic lumbosacral neuritis, continue current plan.
2. Hypertension with vascular complications, continue current plan.
3. Anxiety, continue current plan.
4. Epilepsy, continue current plan.
5. Osteoarthritis with chronic pain, continue current plan.
6. Neuropathy, continue current plan.
7. Constipation, continue current plan.
8. Chronic pain syndrome, continue current pain medication.
9. Asthma, continue current plan.
10. Chronic migraines, continue current plan.
11. Muscle spasms, continue current plan.
12. Allergic rhinitis, continue current plan.
13. Abnormal gait, continue to monitor.
14. Hyperlipidemia, continue current plan.

Medication refills as follows:

Norco 10/325 mg t.i.d.

Lisinopril

## Medical Problem:

Description	Status	Start Date	End Date
Benign essential hypertension ( ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01	
Asthma, unspecified type, unspecified ( ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2015-10-01	
Epilepsy, unspecified, without mention of intractable epilepsy ( ICD10:G40.909 Epilepsy, unspecified, not intractable, without status epilepticus) 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	

Osteoarthritis, generalized, site unspecified ( ICD10:M15.0 Primary generalized (osteo)arthritis) ( ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2015-10-01
Thoracic or lumbosacral neuritis or radiculitis, unspecified ( ICD10:M54.14 Radiculopathy, thoracic region) ( ICD10:M54.15 Radiculopathy, thoracolumbar region) ( ICD10:M54.16 Radiculopathy, lumbar region) ( ICD10:M54.17 Radiculopathy, lumbosacral region) Unknown or N/A	Active	2015-10-01
Migraine, unspecified, without mention of intractable migraine without mention of status migrainosus ( ICD10:G43.909 Migraine, unspecified, not intractable, without status migrainosus) Unknown or N/A	Active	2015-10-01
Tobacco use disorder ( ICD10:F17.200 Nicotine dependence, unspecified, uncomplicated) Unknown or N/A	Active	2015-10-01
Allergic rhinitis, cause unspecified ( ICD10:J30.9 Allergic rhinitis, unspecified) Unknown or N/A	Active	2015-10-01
Other convulsions ( ICD10:R56.9 Unspecified convulsions) Unknown or N/A	Active	2015-10-01
Contact dermatitis and other eczema, unspecified cause ( ICD10:L25.9 Unspecified contact dermatitis, unspecified cause) Unknown or N/A	Active	2015-10-01
Abnormality of gait ( ICD10:R26.9 Unspecified abnormalities of gait and mobility) Unknown or N/A	Active	2015-10-01
Thoracic or lumbosacral neuritis or radiculitis, unspecified ( ICD10:M54.14 Radiculopathy, thoracic region) ( ICD10:M54.15 Radiculopathy, thoracolumbar region) ( ICD10:M54.16 Radiculopathy, lumbar region) ( ICD10:M54.17 Radiculopathy, lumbosacral region) Unknown or N/A	Active	2015-10-01
Anxiety state, unspecified ( ICD10:F41.9 Anxiety disorder, unspecified) Unknown or N/A	Active	2015-10-01
Unspecified hereditary and idiopathic peripheral neuropathy ( ICD10:G60.9 Hereditary and idiopathic neuropathy, unspecified) Unknown or N/A	Active	2015-10-01
Spasm of muscle ( ICD10:M62.838 Other muscle spasm) Unknown or N/A	Active	2015-10-01
Other and unspecified hyperlipidemia ( ICD10:E78.4 Other hyperlipidemia) ( ICD10:E78.5 Hyperlipidemia, unspecified) Unknown or N/A	Active	2015-10-01

## Allergies:

Description	Status	Start Date	End Date
No known drug allergies 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:**

**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):** 2016-12-21 01:24

**Signed By (Physician):** 18

**Signed on (Physician):** 2016-12-28 01:24

**Form\_status:** finalized

**Printed:**



Electronically Signed by **Darolyn Perkins** on **2016-12-28**.

Printed on 04-Feb-2017 21:30:02 pm.