

Billy Conner: Patient Information
Patient Record Number:4990

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: Billy Conner
External ID: 4990
DOB: 1943-07-30
Sex: Male
S.S.: 460-72-2216
Marital Status: Widowed
Patient Drive Folder: 0B0x_tbqdBDPhcGNILURqLUk3LUE

Address: 1418 Claude St
City: Dallas
State: Texas
Postal Code: 75203
Country: USA
Home Phone: 214-941-4919
Street Address: 1418 Claude St
Apt/Suite/Other: House

Past Medical History:

Last Recorded On: 01-28-2017.
Risk Factors: GERD,Urinary Tract Infections.
Additional Medical History: Bone marrow cancer..

Family History:

Last Recorded On: 01-28-2017.
Father: Heart disease..
Mother: Breast cancer, hypertension, and type II diabetes..
Siblings: Brother had pancreas cancer, hypertension, and hyperlipidemia..
Other Family Relative: Grandmother had Alzheimer disease. Grandfather had pancreas cancer..

Primary Family Med Conditions:

Last Recorded On: 01-28-2017.
Chronic Conditions: Alzheimers,Diabetes,Hyperlipidemia,Hypertension,Ischemic Heart Disease,Female/Male Breast Cancer.

Social History:

Last Recorded On: 01-28-2017.
Tobacco: Current every day smoker Marijuana use **Status:** Current
Alcohol: No alcohol. **Status:** Never
Recreational Drugs: No drug abuse. **Status:** Never
Nutrition History: Regular diet..
Developmental History: Well..

Tests and Exams:

Last Recorded On: 01-28-2017.

Insurance:

Medicare B Texas (SMTX0)

Priority : Primary
Start Date : 2010-01-01
Relationship to Insured : Self
Type : N/A
Payer : Medicare B Texas (SMTX0)

Copay :
Insured ID Number : 460722216A
Group Number :
Employer Name : Billy Conner

Immunizations:

Billy Conner: Chief Complaint
Patient Record Number:4990

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Seen by Derrick Love-Jones
Seen on 01-November-2016

Chief Complaint Status:finalized

Followup home visit for management of bone malignancy cancer, hypertension, gastroesophageal reflux disease, hyperlipidemia, paraplegia, and edema in both feet. Patient complains of pain in his entire body.

History of Present illness:

HPI Status:Finalized

Patient is a 73-year-old male in NAD with multiple chronic conditions of hypertension, hyperlipidemia, and paraplegia. Patient states that he is having pain throughout his entire body. Patient states this has been happening for several days. Patient also has some edema in his feet. Patient denies any other issues or complaints upon examination. Patient rates his pain at 7/10 today. Patient denies any chest pain, headache, or nausea or vomiting. Patient is wheelchair bound.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-11-01	133	69	145.00	63.00	97.80	16.00	~	25.7	0.00

Review of Systems:

Constitutional:

Dissemination Strategy and the Manager:

No DISSEMINATION

No ~~Person~~ Telling Breath

No BPH-Related Symptoms Of Urine

No Blinding Good As Referee Of Motion

No Discrepancy with Mentation

No Apnea

No Bleeding Gums

No Abstracts

No Use Of Dentures

Physical Exam:

REMARKS:

~~Engine Oil Temperature - Within Normal Limits.~~

DEFERMITIES:

PERMITTED TO BE USED BY THE NATIONAL BIRMINGHAM

PSYCH:

Definite Subtle Signs of Defect - Within Normal Limits Within Normal Limits .

Change In Sleeping Habit-Within Normal Limits .

Medication:

Description	Status	Start Date	End Date
Metoprolol Tartrate ,25 MG TABS, Take 1/2 tab every day, Quantity: 30, Refill Quantity: 1			
Unknown or N/A	Active	2016-09-25	
by Jones, Derrick - MJ3217331			
Texas Physician House Calls			

Omeprazole ,20 MG CPDR, TAKE 1 CAPSULE DAILY EVERY MORNING BEFORE BREAKFAST, Quantity: 90, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-01-08
Bicalutamide ,50 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-03-31
Lisinopril ,5 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-03-31
Omeprazole ,20 MG CPDR, TAKE 1 CAPSULE DAILY EVERY MORNING BEFORE BREAKFAST, Quantity: 90, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-03-31

Plan Note:

Plan Note Status:Finalized

Continue same treatment plan as previous. Reviewed and continue with current medication. Medication adherence education was given to the patient. Patient was educated on benefits of low salt, low fat, low cholesterol diet with current medical issues. Patient encouraged continuing weight loss efforts via daily exercise and certain food restrictions. No labs needed at this time. The patient verbalized understanding of the above plan, and was given the office number to call for any questions or concern. Discussed the treatment plan with the patient. Prognosis is fair. Followup in 4-6 weeks. Patient is to continue followup with cancer doctor.

1. Hypertension with vascular complications, continue current plan.
2. Bone cancer, continue current plan.
3. Prostate cancer, continue current plan.
4. Chronic pain syndrome, continue current pain medication.
5. Benign prostatic hyperplasia, continue current plan.
6. Edema of lower extremities, continue to monitor.
7. Hyperlipidemia, continue current plan.
8. Gastroesophageal reflux disease, continue current plan.
9. Paraplegia, continue to monitor.

Medication refills as follows:

Omeprazole 20 mg q.d.

Metroprolol ER 20 mg 1/2 tab q.d.

Norco 10/325 mg t.i.d.

Atorvastatin 40 mg q.d.

Medical Problem:

Description	Status	Start Date	End Date
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2015-10-01	
Hypertrophy (benign) of prostate without urinary obstruction and other lower urinary tract symptom (LUTS) (ICD10:N40.0 Enlarged prostate without lower urinary tract symptoms) Unknown or N/A	Active	2015-10-01	
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01	
Malignant neoplasm of prostate (ICD10:C61 Malignant neoplasm of prostate) Unknown or N/A	Active	2015-10-01	
Secondary malignant neoplasm of bone and bone marrow (ICD10:C79.51 Secondary malignant neoplasm of bone) (ICD10:C79.52 Secondary malignant neoplasm of bone marrow) 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
Late effects of acute poliomyelitis (ICD10:B91 Sequelae of poliomyelitis) Unknown or N/A	Active	2015-10-01
Difficulty in walking (ICD10:R26.2 Difficulty in walking, not elsewhere classified) Unknown or N/A	Active	2015-10-01
Pain in joint, pelvic region and thigh (ICD10:M25.559 Pain in unspecified hip) Unknown or N/A	Active	2015-10-01
Esophageal reflux (ICD10:K21.9 Gastro-esophageal reflux disease without esophagitis) 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
Acute paralytic poliomyelitis specified as bulbar, poliovirus, unspecified type (ICD10:A80.39 Other acute paralytic poliomyelitis) Unknown or N/A	Active	2015-10-01
Chronic pain syndrome (ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2015-10-01
Unspecified essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01
Malignant neoplasm of bone and articular cartilage, site unspecified (ICD10:C41.9 Malignant neoplasm of bone and articular cartilage, unspecified) Unknown or N/A	Active	2015-10-01
Paraplegia (ICD10:G82.20 Paraplegia, unspecified) Unknown or N/A	Active	2015-10-01
Polio Surgery Unknown or N/A	Active	

Allergies:

Description	Status	Start Date	End Date
No known drug allergies Unknown or N/A	Active		

Surgeries:

Description	Status	Start Date	End Date
Open heart surgery 2010 Unknown or N/A	Active		

Face to Face HH Plan:

Patient Home Bound or Can't Drive: YES

Is Home Health Care Needed: YES

Does Patient have reliable other Primary Care Physician: YES

Is House Visit Needed: YES

Next Visit Duration (in days): 31

Current home health agency: Novel Home health care agency

Primary Justification Medical Conditions: Mobility_Impairments,hyperlipidemia,HTN

Additional Medical Conditions: Bone cancer, GERD.

Nursing Required: YES

Physical Therapy: NO

Occupational Therapy Required: NO

Speech-language Pathology Required: NO

Requested Care/Treatments Required:

Clinical Findings To Justify Home Health: Patient needs closely monitoring for vital signs, skin check, and medication administration.

Certification Statement: Patient requires considerable taxing effort to leave home.

Signed by (NP): 16

Signed On (NP): 2016-11-01 04:59

Signed By (Physician): 18

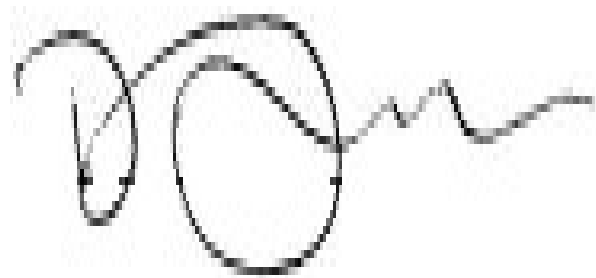
Signed on (Physician): 2016-11-08 04:59

Form_status: finalized

Procedure Order:

Patient ID	4990	Order ID	1293
Patient Name	Conner, Billy	Ordered By	Love-Jones, Derrick
Order Date	2017-01-28	Print Date	2017-01-28
Order Status	complete	Encounter Date	2017-01-28
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2017-01-28		Final ✓		0097	Pulse Oximetry	No	98%	97% to 100%		



Electronically Signed by **Derrick Love-Jones** on **2016-11-08**.

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