

**Dianne Gipson: Patient Information**  
Patient Record Number:2287

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

**Name:** Dianne Gipson  
**External ID:** 2287  
**DOB:** 1946-04-25  
**Sex:** Female  
**S.S.:** 450-74-2889  
**Marital Status:** Single  
**Patient Drive Folder:** <https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B0Q2MIHiECb5Y18xam5tVjZwNW8>

**Address:** 12245 Galva Sreet  
**City:** Dallas  
**State:** Texas  
**Postal Code:** 75243  
**Country:** USA  
**Mobile Phone:** 214-407-3129  
**Street Address:** 12245 Galva Sreet  
**Apt/Suite/Other:** House

## Past Medical History:

**Last Recorded On:** 07-14-2016.  
**Risk Factors:** Degenerative Joint Disease,Gout.  
**Additional Medical History:** CHF,obesity,bronchitis and edema..

## Family History:

**Last Recorded On:** 07-14-2016.  
**Mother:** Mother has hypertension..  
**Offspring:** Has one son..

## Primary Family Med Conditions:

**Last Recorded On:** 07-14-2016.  
**Chronic Conditions:** Hypertension.

## Social History:

**Last Recorded On:** 07-14-2016.  
**Tobacco:** Never smoker No smoking. **Status:** Never  
**Alcohol:** No alcohol abuse. **Status:** Never  
**Recreational Drugs:** No drug abuse. **Status:** Never  
**Work Status:** Disabled.  
**Other History:** Patient uses cane..

## Tests and Exams:

**Last Recorded On:** 07-14-2016.  
**HbA, C Hemoglobin (if DM every 3 mo)** Abnormal Done on 05/05/2014, at MetroStat Diagnostic Services ordered by Dr. Sumana Ketha  
**CBC Complete Blood Count (3 months)** Abnormal Done on 05/05/2014, at MetroStat Diagnostic Services ordered by Dr. Sumana Ketha

**CMP Comprehensive Metabolic Panel (3 months)** Abnormal Done on 05/05/2014, at MetroStat Diagnostic Services ordered by Dr. Sumana Ketha  
**LIPIDS (once year unless chol meds)** Normal Done on 05/05/2014, at MetroStat Diagnostic Services ordered by Dr. Sumana Ketha

## Insurance:

### Medicare B Texas (SMTX0)

**Priority :** Primary  
**Start Date :** 2011-04-01  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Medicare B Texas (SMTX0)  
**Priority :** Primary  
**Start Date :** 2015-08-01  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Molina Healthcare of Texas (Z1161)  
**Priority :** Primary  
**Start Date :** 2015-11-04  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Medicare B Texas (SMTX0)  
**Priority :** Secondary  
**Start Date :** 2013-07-09  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Molina Healthcare of Texas (Z1161)  
**Priority :** Secondary  
**Start Date :** 2015-01-01  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Molina Healthcare of Texas (Z1161)  
**Priority :** Secondary  
**Start Date :** 2015-09-02  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Molina Healthcare of Texas (Z1161)

**Copay :**  
**Insured ID Number :** 450742689B  
**Group Number :**  
**Employer Name :** Dianne Gipson  
**Copay :**  
**Insured ID Number :** 500000043738  
**Group Number :**  
**Employer Name :** Dianne Gipson  
**Copay :**  
**Insured ID Number :** 450742689B  
**Group Number :**  
**Employer Name :** Dianne Gipson  
**Copay :**  
**Insured ID Number :** 508837632  
**Group Number :**  
**Employer Name :** Dianne Gipson  
**Copay :**  
**Insured ID Number :** 508837632  
**Group Number :**  
**Employer Name :** Dianne Gipson  
**Copay :**  
**Insured ID Number :** 508837632  
**Group Number :**  
**Employer Name :** Dianne Gipson

## Immunizations:

**Texas Physician House Calls (H)**  
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Follow up home visit for management of osteoarthritis, congestive heart failure, neuropathy, gastroesophageal reflux disease, coronary artery disease, chronic obstructive pulmonary disease, asthma, gout, chronic pain, morbid obesity, and atrial fibrillation. Patient continues to complain of knee pain and back pain.

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-06-27	127	79	240.00	66.00	98.20	18.00	~	38.7	0.00

Description	Status	Start Date	End Date
Albuterol Sulfate ,(2.5 MG/3ML) 0.083% NEBU, USE 1 UNIT DOSE IN NEBULIZER EVERY 4 HOURS AS NEEDED, Quantity: 1080, Refill Quantity: 6	Active	2015-05-19	
Unknown or N/A			
by Jones, Derrick - MJ3217331			
Texas Physician House Calls			

Promethazine-DM ,6.25-15 MG/5ML SYRP, TAKE 1 TO 2 TEASPOONSFUL EVERY 6 HOURS AS NEEDED, Quantity: 1200, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-05-19
Hydrocodone-Acetaminophen ,10-325 MG TABS, TAKE 1 TABLET EVERY 8 HOURS AS NEEDED FOR PAIN, Quantity: 90, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2015-05-12
ALPRAZolam ,0.5 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-04-16
Amoxicillin ,500 MG CAPS, TAKE 1 CAPSULE 3 TIMES DAILY, Quantity: 90, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-04-16
Allopurinol ,300 MG TABS, TAKE 1 TABLET DAILY, Quantity: 90, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-03-13
Lasix ,40 MG TABS, TAKE 1 TABLET DAILY, Quantity: 90, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-03-13
Potassium Chloride ER ,10 MEQ TBCR, TAKE 1 TABLET DAILY WITH FOOD, Quantity: 90, Refill Quantity: 1 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-03-13
Warfarin Sodium ,3 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 2 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-03-13
Lasix ,20 MG TABS, 1 TAB DAILY IN THE EVENING, Quantity: 90, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2015-02-16

## Plan Note:

### Plan Note Status:Finalized

Continue same treatment plan as previous. Reviewed and continue with same medications. No new medications noted at this visit. Medication adherence education was given to the patient and the patient was educated on the benefits of low salt, low-fat, low cholesterol diet with current medical conditions. Patient was instructed to go to the 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. Patient verbalized understanding of the above plan and was given the office number for any questions or concerns. Discussed treatment plan with the patient. Prognosis is fair and patient is stable at this time.

1. Congestive heart failure, continue current plan.
2. Atrial fibrillation, continue current plan.
3. Hypertension, continue current plan.
4. Chronic pain syndrome, continue current pain medication.
5. Asthma, continue current plan.
6. Osteoarthritis, continue current plan.
7. Diabetes mellitus type 2, continue current plan.
8. Gastroesophageal reflux disease, continue current plan.
9. Urinary incontinence, continue current plan.
10. Lumbago, continue current plan.
11. Gout, continue current plan.

Refilled Xanax and Norco

## Medical Problem:

Description	Status	Start Date	End Date
Asthma, unspecified type, unspecified ( ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2015-10-01	
Osteoarthritis, unspecified whether generalized or localized, lower leg ( ICD10:M17.9 Osteoarthritis of knee, unspecified) 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	
Diabetes mellitus without mention of complication, type II or unspecified type, uncontrolled ( ICD10:E11.65 Type 2 diabetes mellitus with hyperglycemia) Unknown or N/A	Active	2015-10-01	
Benign essential hypertension ( ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01	
Diabetes mellitus without mention of complication, type II or unspecified type, not stated as uncontrolled ( ICD10:E11.9 Type 2 diabetes mellitus without complications) Unknown or N/A	Active	2015-10-01	
Unspecified essential hypertension ( ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01	
Congestive heart failure, unspecified ( ICD10:I50.9 Heart failure, unspecified) Unknown or N/A	Active	2015-10-01	
Obstructive chronic bronchitis with (acute) exacerbation ( ICD10:J44.1 Chronic obstructive pulmonary disease with (acute) exacerbation) Unknown or N/A	Active	2015-10-01	
Edema ( ICD10:R60.9 Edema, unspecified) Unknown or N/A	Active	2015-10-01	
Atrial fibrillation ( ICD10:I48.91 Unspecified atrial fibrillation) Unknown or N/A	Active	2015-10-01	
Morbid obesity ( ICD10:E66.01 Morbid (severe) obesity due to excess calories) Unknown or N/A	Active	2015-10-01	
Gout, unspecified ( ICD10:M10.9 Gout, unspecified) Unknown or N/A	Active	2015-10-01	
Other malaise and fatigue ( ICD10:R53.81 Other malaise) ( ICD10:R53.83 Other fatigue) Unknown or N/A	Active	2015-10-01	
Shortness of breath ( ICD10:R06.02 Shortness of breath) 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	
Spasm of muscle ( ICD10:M62.838 Other muscle spasm) Unknown or N/A	Active	2015-10-01	
Lumbago ( ICD10:M54.5 Low back pain) Unknown or N/A	Active	2015-10-01	
Benign hypertensive heart disease without heart failure ( ICD10:I11.9 Hypertensive heart disease without heart failure) 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
Unspecified hereditary and idiopathic peripheral neuropathy ( ICD10:G60.9 Hereditary and idiopathic neuropathy, unspecified) Unknown or N/A	Active	2015-10-01
Urinary incontinence, unspecified ( ICD10:R32 Unspecified urinary incontinence) Unknown or N/A	Active	2015-10-01
Congestive heart failure, unspecified ( ICD9:428.0 Congestive heart failure, unspecified) 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
colonoscopy in 2012 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:** NO

**Is House Visit Needed:** NO

**Next Visit Duration (in days):** 31

**Current home health agency:** Divine Edge Health Services

**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:** Patient is home bound due to limited mobility issues and morbid obesity

**Certification Statement:** No SN needed at this time

**Signed by (NP):** 302

**Signed On (NP):** 2016-06-27 05:11

**Signed By (Physician):** 18

**Signed on (Physician):** 2016-06-29 05:11

**Form\_status:** finalized

**Printed:** NO

## DME:

Description	Status	Start Date	End Date
XL Protective Underwear Unknown or N/A 2015-05-07 by Dr. Sumana Ketha	Active	2015-05-07	
Disposable underpads Unknown or N/A 2015-05-07 by Dr. Sumana Ketha	Active	2015-05-07	
Aloetouch Wipes Unknown or N/A 2015-05-07 by Dr. Sumana Ketha	Active	2015-05-07	

Soothe & Cool Moisture Barrier Cream

Unknown or N/A

Active

2015-05-07

2015-05-07 by Dr. Sumana Ketha

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