

Vivian Amacchi: Patient Information
Patient Record Number:3471

Texas Physician House Calls (H)
2925 Skyway Circle North, Irving, TX, USA, 75038-3510
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Email:hhsupport@texas-housecalls.com

Name: Vivian L Amacchi

External ID: 3471

DOB: 1957-04-30

Sex: Female

User Defined: 214-994-5922

genericval1: 214-994-2832

genericname2: 214-325-7999

Patient Drive Folder: <https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B0Q2MIHiECb5QjdkT2tjcTZkeUE>

Address: 1103 Forester Drive

City: Dallas

State: Texas

Postal Code: 75216

Country: USA

Mother's Name: 214-325-7999

Emergency Contact: Brenda (Sister)

Emergency Phone: 214-840-9623

Home Phone: 214-946-3000

Work Phone: 214-723-0871

Mobile Phone: 214-946-1404

User Email: 214-994-5922 new

Street Address: 1103 Forester Drive

Apt/Suite/Other: House

Past Medical History:

Last Recorded On: 12-15-2016.

Risk Factors: Arthritis,High Cholesterol,Degenerative Joint Disease,Insomnia,Chronic Pain.

Family History:

Last Recorded On: 12-15-2016.

Father: Father Died in 2011 with myocardial infarction..

Mother: Mother with hypertension and diabetes..

Offspring: One child..

Primary Family Med Conditions:

Last Recorded On: 12-15-2016.

Chronic Conditions: Acute Myocardial Infarction,Diabetes,Hypertension.

Social History:

Last Recorded On: 12-15-2016.

Tobacco: Current every day smoker Smokes half a pack per day. **Status:** Current

Alcohol: No alcohol. **Status:** Never

Recreational Drugs: No drug abuse. **Status:** Never

Nutrition History: Regular..

Developmental History: Well..

Tests and Exams:

Last Recorded On: 12-15-2016.

TSH Thyroid-Stimulating Hormone (every year) Normal Done on 02/19/2014, at MetroStat Laboratory Services, ordered by Dr. Sumana Ketha

CBC Complete Blood Count (3 months) Abnormal Done on 02/19/2014, at MetroStat Laboratory Services, ordered by Dr. Sumana Ketha

Mammogram (>40yrs, Yearly) N/A Ordered.

Sigmoid/Colonoscopy N/A Needs.

Retinal Exam N/A Consult eye doctor on 03/15

Insurance:

Medicare B Texas (SMTX0)

Priority : Primary

Start Date : 2009-11-01

Relationship to Insured : Self

Type : N/A

Payer : Medicare B Texas (SMTX0)

Copay :

Insured ID Number : 455086412A

Group Number :

Employer Name : Vivian Amacchi

Immunizations:

Medication:

Description	Status	Start Date	End Date
Omeprazole ,40 MG CPDR, TAKE 1 CAPSULE BY MOUTH EVERY DAY, Quantity: 90, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-08-18	
Gabapentin ,300 MG CAPS, Take 1 Capsule 3 Times A Day, Quantity: 60, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-06-17	
ProAir HFA ,108 (90 Base) MCG/ACT AERS, INHALE 1 TO 2 PUFFS EVERY 4 TO 6 HOURS AS NEEDED, Quantity: 3, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-06-17	
Gabapentin ,300 MG CAPS, Take 1 Capsule 3 Times A Day, Quantity: 60, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-06-15	
Metoprolol Succinate ER ,50 MG TB24, TAKE ONE TABLET BY MOUTH ONCE A DAY AS DIRECTED, Quantity: 90, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-06-15	
ProAir HFA ,108 (90 Base) MCG/ACT AERS, INHALE 1 TO 2 PUFFS EVERY 4 TO 6 HOURS AS NEEDED, Quantity: 3, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-06-15	
Crestor ,10 MG TABS, TAKE 1 TABLET BY MOUTH AT BEDTIME, Quantity: 90, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-05-03	

Omeprazole ,40 MG CPDR, TAKE 1 CAPSULE BY MOUTH EVERY DAY, Quantity: 90, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-05-03
Triamterene-HCTZ ,37.5-25 MG TABS, TAKE 1 TABLET DAILY WITH FOOD, Quantity: 90, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-05-03
Norco ,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 Sumana Ketha MDPA	Active	2015-05-11
Gabapentin ,300 MG CAPS, Take 1 Capsule 3 Times A Day, Quantity: 180, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2015-04-13
Hydrochlorothiazide ,25 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2015-04-13
Metoprolol Tartrate ,25 MG TABS, Take One Tablet By Mouth Every Day, Quantity: 30, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2015-04-13
ProAir HFA ,108 (90 Base) MCG/ACT AERS, INHALE 1 TO 2 PUFFS EVERY 4 TO 6 HOURS AS NEEDED, Quantity: 2, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-02-18
Triamterene-HCTZ ,37.5-25 MG TABS, TAKE 1 TABLET DAILY WITH FOOD, Quantity: 30, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-02-18

Medical Problem:

Description	Status	Start Date	End Date
Unspecified hereditary and idiopathic peripheral neuropathy (ICD10:G60.9 Hereditary and idiopathic neuropathy, unspecified) Unknown or N/A	Active	2015-10-01	
Osteoarthritis, unspecified whether generalized or localized, site unspecified (ICD10:M19.90 Unspecified osteoarthritis, unspecified site) 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	
Chronic airway obstruction, not elsewhere classified (ICD10:J44.9 Chronic obstructive pulmonary disease, unspecified) 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	
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	

Esophageal reflux (ICD10:K21.9 Gastro-esophageal reflux disease without esophagitis) Unknown or N/A	Active	2015-10-01
Unspecified essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01
Other specified idiopathic peripheral neuropathy (ICD10:G60.8 Other hereditary and idiopathic neuropathies) Unknown or N/A	Active	2015-10-01
Hyperlipidemia (ICD10:E78.2 Mixed hyperlipidemia) Unknown or N/A	Active	2015-10-01
Dementia NOS (ICD10:F03.90 Unspecified dementia without behavioral disturbance) Unknown or N/A	Active	2015-10-01
Right leg deformity (ICD10:M21.969 Unspecified acquired deformity of unspecified lower leg) 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
Asthma, unspecified type, with (acute) exacerbation (ICD10:J45.901 Unspecified asthma with (acute) exacerbation) 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
Insomnia, unspecified (ICD9:780.52 Insomnia, unspecified) Unknown or N/A	Active	
Polyneuropathy in other diseases classified elsewhere (ICD9:357.4 Polyneuropathy in other diseases classified elsewhere) Unknown or N/A	Active	
Lumbago (ICD9:724.2 Lumbago) Unknown or N/A	Active	
Acute upper respiratory infections of unspecified site (ICD9:465.9 Acute upper respiratory infections of unspecified site) Unknown or N/A	Active	
Pain in joint involving lower leg (ICD9:719.46 Pain in joint, lower leg) Unknown or N/A	Active	
Tobacco use disorder (ICD9:305.1 Tobacco use disorder) Unknown or N/A	Active	
Constipation, unspecified (ICD9:564.00 Constipation, 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
Back surgery Unknown or N/A	Active		
Neck surgery Unknown or N/A	Active		

Ankle surgery Unknown or N/A	Active
Pneumonia, hospitalized one year ago at Methodist. Unknown or N/A	Active

DME:

Description	Status	Start Date	End Date
Cane Unknown or N/A	Active		
Elevated Toilet seat Unknown or N/A	Active		
Tub/Shower bench Unknown or N/A	Active		
Walker Unknown or N/A	Active		
Exam Gloves Unknown or N/A	Active		

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