

Ravenell Sharon: Patient Information
Patient Record Number:6237

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

Name: Ravenell Sharon
External ID: 6237
DOB: 1967-01-16
Sex: Female
S.S.: 451-39-6732
Marital Status: Single

Address: 3333 Edgewood St
City: Dallas
State: Texas
Postal Code: 75215
Country: USA
Mobile Phone: 469-709-0640
Street Address: 3333 Edgewood St
Apt/Suite/Other: APT#1209

Family History:

Last Recorded On: 11-19-2016.
Father: Father died of hypertension and hyperlipidemia..
Mother: Mother died of hypertension and diabetes mellitus 2..
Siblings: One sister died. Two brothers and five sisters are alive..
Offspring: One boy and one girl, which are alive..

Social History:

Last Recorded On: 11-19-2016.
Tobacco: No smoking. **Status:** Never
Alcohol: No alcohol use. **Status:** Never
Recreational Drugs: No drug abuse. **Status:** Never
Developmental History: Education level is 12 grade + 1..
Other History: Influenza and pneumovax taken in 2015..

Insurance:

Wellcare HMO, Inc. (14163)

Priority : Primary
Start Date : 2006-10-01
Relationship to Insured : Self
Type : N/A
Payer : Wellcare HMO, Inc. (14163)

Copay :
Insured ID Number : 17866369
Group Number :
Employer Name : Ravenell Sharon

Immunizations:

Ravenell Sharon: Chief Complaint
Patient Record Number:6237

Texas Physician House Calls (H)

Seen by Sumana Ketha MD
Seen on 22-September-2016

Chief Complaint Status:finalized

Followup home visit to prevent further decline of the following chronic medical conditions schizophrenia, depression, neuropathy, diabetes mellitus type 2 with neuropathy, hypertension with vascular complications, muscle spasms, gastroesophageal reflux disease, coronary artery disease, congestive heart failure, lumbago and chronic pain syndrome. Patient complains of low back pain that radiates to legs and feet.

History of Present illness:

HPI Status:Finalized

A 49-year-old African-American female in NAD with multiple chronic conditions of the following of schizophrenia, depression, neuropathy, diabetes mellitus type 2 with neuropathy, hypertension with vascular complications, muscle spasms, gastroesophageal reflux disease, coronary artery disease, congestive heart failure, lumbago and chronic pain syndrome. Patient has a history of chronic low back pain and mental health issues. Patient states that she is having low back pain that radiates into her legs and feet. Patient describes pain in legs and feet as numbness and tingling on. Patient rates pain at 7/10 at this time. Patient states she does get relief from her current pain medication. Patient denies any other issues upon examination. Patient denies any hypoglycemic episodes recently and a foot check revealed no major issues other than described above. Patient denies any chest pain, headache, nausea/vomiting recently.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-09-22	154	94	0.00	65.00	98.20	18.00	~	0.0	0.00

Review of Systems:

Constitutional:

Penyakit yang ditularkan melalui air:

Non-Confidential Wikis

No Employment History

No ~~Respiratory~~ Breath

No ~~unintentional~~ monogram

[illegible]

No **INDEPENDENCE**

No ~~600-777-0198~~ ~~600-777-0198~~

No BLM-Related Harassments

No Effect of Proliferation

No ~~Flashed~~ ~~Blind~~ ~~termur~~

No Significant Acceleration Of Motion

No ~~Wanted~~ ~~For~~ ~~the~~ ~~air~~

No Bleeding (Bowel)

No Bimodal

No Obstacles

No Disputes about Disputes

Physical Exam:

FIGURE 3

Stomach: FLATTENED, NO DISCRETE LESIONS, NO MUCOSA BRUSH BORDER, NO DYSPLASIA, NO INFLAMMATION, NO Lymphadenopathy-Within Normal Limits

NAEKO:

ENT: External Ear-Left: Normal. Right: Normal. Middle Ear-Left: Normal. Right: Normal. Eustachian Tube-Left: Normal. Right: Normal. Throat-Left: Normal. Right: Normal. Larynx-Left: Normal. Right: Normal. Trachea-Left: Normal. Right: Normal. Bronchi-Left: Normal. Right: Normal. Lungs-Left: Normal. Right: Normal. Pleura-Left: Normal. Right: Normal. Diaphragm-Left: Normal. Right: Normal. Abdomen-Left: Normal. Right: Normal. Pelvis-Left: Normal. Right: Normal. Genitals-Left: Normal. Right: Normal. Bilateral Nasal Turbinates-Within Normal Limits.

PSYCH:

RESULTS: FOW with Normal Insects

RESP:

Abn. TCAS with Questions Appropriately-Within Normal Limits.

Lungs Clear,Rales,Rhonchi,Wheezes-Within Normal Limits .

Medication:

Description	Status	Start Date	End Date
Escitalopram Oxalate ,20 MG TABS, TAKE 1 TABLET DAILY, Quantity: 90, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-09-22	
Furosemide ,40 MG TABS, TAKE ONE TABLET EVERY DAY, Quantity: 90, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-09-22	
Acetaminophen-Codeine #3 ,300-30 MG TABS, TAKE 1 TABLET 3 TIMES DAILY AFTER MEALS, Quantity: 90, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-09-22	
Potassium Chloride ER ,10 MEQ CPCR, TAKE 1 CAPSULE DAILY, Quantity: 90, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-09-22	
ARIPiprazole ,10 MG TABS, TAKE 1/2 TABLET BY MOUTH TWICE DAILY, Quantity: 30, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-08-24	
Acetaminophen-Codeine #3 ,300-30 MG TABS, TAKE 1 TABLET 3 TIMES DAILY AFTER MEALS, Quantity: 90, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-08-24	

Plan Note:

Plan Note Status:Finalized

Continue same treatment plan as previous provider. 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 missions. 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. Full set of labs of the following ordered: CBC, CMP, UA, TSH, A1C, VIT D , LIPID LDL/HDL. Patient verbalized understanding of the above client was given the office number for any questions or concerns. Prognosis is fair and patient is stable.

1. Neuropathy, continue current plan.
2. Hypertension with vascular complications, continue current plan.
3. Muscle spasms, continue current plan.
4. Chronic pain syndrome, continue current pain medication.
5. Depression, continue current plan.
6. Diabetes mellitus type 2 with neuropathy, continue current plan.
7. Gastroesophageal reflux disease, continue current plan.
8. Coronary artery disease, continue current plan.
9. Congestive heart failure with systolic complications, continue current plan.
10. Schizophrenia, continue current plan.

Medication refills as :

Tylenol #3 2tabs q.d.

Medical Problem:

Description	Status	Start Date	End Date
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Major depressive disorder, single episode, unspecified (ICD10:F32.9 Major depressive disorder, single episode, unspecified) Unknown or N/A	Active	2016-09-22
Other disorders of peripheral nervous system (ICD10:G64 Other disorders of peripheral nervous system) Unknown or N/A	Active	2016-08-23
Chronic venous hypertension (idiopathic) without complications of unspecified lower extremity (ICD10:I87.309 Chronic venous hypertension (idiopathic) without complications of unspecified lower extremity) Unknown or N/A	Active	2016-08-23
Separation of muscle (nontraumatic), unspecified site (ICD10:M62.00 Separation of muscle (nontraumatic), unspecified site) Unknown or N/A	Active	2016-08-23
Other muscle spasm (ICD10:M62.838 Other muscle spasm) Unknown or N/A	Active	2016-08-23
Chronic pain syndrome (ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-08-23

Allergies:

Description	Status	Start Date	End Date
Lisinopril & Anaphylaxis. Unknown or N/A	Active		

Surgeries:

Description	Status	Start Date	End Date
C-section in 1985 & 1988. 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: NO

Is House Visit Needed: YES

Next Visit Duration (in days): 31

Current home health agency:

Primary Justification Medical Conditions: Mobility_Impairments,Schizophrenia,Rheumatoid Arthritis_Osteoarthr,HTN,diabetes,Depression

Additional Medical Conditions: Neuropathy, Muscle Spasms, gastroesophageal reflux disease, coronary artery disease, congestive heart failure, Lumbago and Chronic Pain Syndrome

Nursing Required: YES

Physical Therapy:

Occupational Therapy Required:

Speech-language Pathology Required:

Requested Care/Treatments Required:

Clinical Findings To Justify Home Health: Patient is homebound due to chronic pain and mental health issues.

Certification Statement: Skilled nursing is needed due to mental health issues and inability to self medicate correctly.

Signed by (NP): 302

Signed On (NP): 2016-09-22 13:21

Signed By (Physician): 18

Signed on (Physician): 2016-09-27 13:21

Form_status: finalized



Electronically Signed by **Sumana Ketha, MD** on **2016-09-29**.

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