Rhoda Spicer: Patient Information

Patient Record Number:1272

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: Rhoda Spicer External ID: 1272 DOB: 1958-11-04 Sex: Female S.S.: 463-15-7731 Marital Status: Single

User Defined: 972-904-3424 don't call

genericval1: Tue Dialysis

Patient Drive Folder: https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B0Q2MIHiECb5MGdLNIExTjE4STQ

Address: 4826 Burnside Avenue

City: Dallas State: Texas Postal Code: 75216 Country: USA

Home Phone: 469-941-0210 Work Phone: 214-376-3870 Mobile Phone: 972-904-3424

Street Address: 4826 Burnside Avenue

Apt/Suite/Other: House

Past Medical History:

Last Recorded On: 01-07-2017. Risk Factors: GERD, Neuropathy.

Family History:

Last Recorded On: 01-07-2017.

Father: Unable to assess patient is deaf and mute.. Mother: Unable to assess patient is deaf and mute.. Siblings: Unable to assess patient is deaf and mute.. Offspring: Two children living in Houston and Alaska...

Primary Family Med Conditions:

Last Recorded On: 01-07-2017.

Risk Factors: None.

Social History:

Last Recorded On: 01-07-2017.

Tobacco: Never smoker No smoking. Status: Never

Alcohol: No alcohol. Status: Never

Recreational Drugs: No drug use. Status: Never

Nutrition History: Meals on wheels..

Developmental History: Unable to assess patient is deaf and mute...

Other History: Influenza November 2015..

Tests and Exams:

Last Recorded On: 01-07-2017.

Vitamin D (6 mo if on pills) Abnormal Done on 01/14/2014, at MetroStat Diagnostic Services ordered by Dr. Sumana Ketha

HbA, C Hemoglobin (if DM every 3 mo) Abnormal Done on 05/14/2014 at MetroStat Diagnostic Services ordered by Dr. Sumana Ketha

TSH Thyroid-Stimulating Hormone (every year) Normal Done on 01/14/2014, at MetroStat Diagnostic Services ordered by Dr. Sumana Ketha

CBC Complete Blood Count (3 months) Abnormal Done on 01/14/2014, at MetroStat Diagnostic Services ordered by Dr. Sumana Ketha

CMP Comprehensive Metabolic Panel (3 months) Abnormal Done on 01/14/2014, at MetroStat Diagnostic Services ordered by Dr. Sumana Ketha

LIPIDS (once year unless chol meds) Abnormal Done on 01/14/2014, at MetroStat Diagnostic Services ordered by Dr. Sumana Ketha

Insurance:

Medicare B Texas (SMTX0)

Priority: Primary Start Date: 2003-11-01 Relationship to Insured: Self

Type: N/A

Payer: Medicare B Texas (SMTX0)

Copay:

Insured ID Number: 463157731A

Group Number :

Employer Name: Rhoda Spicer

Immunizations:

Rhoda Spicer: Chief Complaint Patient Record Number:1272 Texas Physician House Calls (H)

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Seen by Derrick Love-Jones Seen on 09-November-2016

Chief Complaint Status: finalized

Follow up home visit for management of end-stage renal disease, diabetes mellitus type 2, hypertension, chronic obstructive pulmonary disease, osteoarthritis/rheumatoid arthritis, chronic pain, congestive heart failure, gout, anemia, glaucoma, hyperlipidemia, deaf/mute, and heart disease. Patient complains of shortness of breath.

History of Present illness:

HPI Status:Finalized

A 57-year-old African-American female in no acute distress with multiple chronic conditions including end-stage renal disease, diabetes mellitus type 2, hypertension, chronic obstructive pulmonary disease, osteoarthritis/rheumatoid arthritis. Patient states that she has been SOB because she goes several days without hemodialysis. Patient missed a hemodialysis, and is fluid overloaded. Patient denies any other issues upon examination. Patient rates pain at 5/10. Patient denies any chest pain, headache, or nausea, or vomiting recently.

Vitals:

Service Date	BPS	BPD	\A/+	LI+	Temperature	RR	Note	BMI	Head circ
2016-11-09	139	67	212.00	64.00	97.40	16.00	~	36.4	0.00

Review of Systems:

Constitutional:

Spulfidirjiballtifilth@Tahroet:

New Company Transport

No. The Transport of the No.

No Shiring Makes Of Urine

No Bridge de Motion

No Chipangiglestrith Alphpentiation

No Alpanea

No Bloomydiang Gums

No Obatelettess

No Use Of Dentures

Physical Exam:

Biological Particular State of the Annual Particular State o

SECREMITIES:

SECONDESIDATION OF THE PROPERTY OF THE PROPERT

CV:

Murmur, Rubs, Gallops-Within Normal Limits .

Medication:

Description	Status	Start Date	End Date
Furosemide ,80 MG TABS, TAKE 2 TABLETS BY MOUTH TWICE A			
DAY,AT 6 AM AND 6 PM, Quantity: 120, Refill Quantity: 0			
Unknown or N/A	Active	2016-11-02	
by Jones, Derrick - MJ3217331			
Texas Physician House Calls			

Disalisans HOLAEMO TADO TAKE A TADLET EVEDY MODAINO		
Pioglitazone HCI ,45 MG TABS, TAKE 1 TABLET EVERY MORNING, Quantity: 30, Refill Quantity: 0		
Unknown or N/A	Active	2016-10-06
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Sensipar ,30 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 0		
Unknown or N/A	Active	2016-10-06
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Folic Acid ,1 MG TABS, TAKE ONE TABLET BY MOUTH EVERY DAY, Quantity: 30, Refill Quantity: 3		
Unknown or N/A	Active	2016-07-14
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Clopidogrel Bisulfate ,75 MG TABS, TAKE ONE TABLET BY MOUTH EVERY DAY, Quantity: 30, Refill Quantity: 3		
Unknown or N/A	Active	2016-06-17
by ketha, Dr sumana - BK6230281		
DFW Primary Care PLLC		
Folic Acid ,1 MG TABS, TAKE ONE TABLET BY MOUTH EVERY DAY, Quantity: 30, Refill Quantity: 3		
Unknown or N/A	Active	2016-06-17
by ketha, Dr sumana - BK6230281		
DFW Primary Care PLLC		
Aspirin EC ,325 MG TBEC, TAKE 1 TABLET BY MOUTH EVERY DAY,		
Quantity: 30, Refill Quantity: 3 Unknown or N/A	Active	2016-03-23
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
TraZODone HCI ,50 MG TABS, TAKE 1 TABLET AT BEDTIME,		
Quantity: 30, Refill Quantity: 30 Unknown or N/A	Active	2016-03-23
by Jones, Derrick - MJ3217331		
Texas Physician House Calls		
Aspirin EC ,325 MG TBEC, TAKE 1 TABLET BY MOUTH EVERY DAY,		
Quantity: 30, Refill Quantity: 3 Unknown or N/A	Active	2016-03-10
by ketha, Dr sumana - BK6230281		
Texas Physician House Calls		
TraZODone HCI ,50 MG TABS, TAKE 1 TABLET AT BEDTIME,		
Quantity: 30, Refill Quantity: 30 Unknown or N/A	Active	2016-02-15
by ketha, Dr sumana - BK6230281		
Texas Physician House Calls		
Allopurinol ,100 MG TABS, TAKE 1 TABLET TWICE DAILY, Quantity:		
60, Refill Quantity: 3 Unknown or N/A	Active	2015-05-14
by ketha, Dr sumana - BK6230281	710470	2510 00 1.
Sumana Ketha MDPA		
AmLODIPine Besylate ,10 MG TABS, Take One Tablet By Mouth Every		
Day For Blood Pressure, Quantity: 30, Refill Quantity: 3 Unknown or N/A	Active	2015-05-14
by ketha, Dr sumana - BK6230281	710470	2510 00 1.
Sumana Ketha MDPA		
Dorzolamide HCI-Timolol Mal ,22.3-6.8 MG/ML SOLN, Use 1 Drop In		
Each Eye Twice Daily As Directed, Quantity: 10, Refill Quantity: 3 Unknown or N/A	Active	2015-05-14
by ketha, Dr sumana - BK6230281		
Sumana Ketha MDPA		
Gabapentin ,400 MG CAPS, TAKE 1 CAPSULE TWICE DAILY,		
Quantity: 60, Refill Quantity: 3 Unknown or N/A	Active	2015-05-14
by ketha, Dr sumana - BK6230281		
Sumana Ketha MDPA		
Glimepiride ,1 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill		
Quantity: 3 Unknown or N/A	Active	2015-05-14
by ketha, Dr sumana - BK6230281		25.5 55
Sumana Ketha MDPA		

HydrALAZINE HCI ,10 MG TABS, Take One Tablet By Mouth Three Times Daily, Quantity: 90, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-05-14
Isosorbide Dinitrate ER ,40 MG TBCR, TAKE 1 TABLET ONCE DAILY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-05-14
Losartan Potassium ,100 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-05-14
Carvedilol ,25 MG TABS, TAKE ONE TABLET BY MOUTH TWICE DAILY, Quantity: 60, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-05-13
Furosemide ,80 MG TABS, TAKE ONE TABLET BY MOUTH EVERY DAY AS DIRECTED, Quantity: 30, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-05-13
Omeprazole ,40 MG CPDR, TAKE 2 CAPSULES BY MOUTH EVERY DAY, Quantity: 60, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-05-13
Renvela ,800 MG TABS, TAKE 2 TABLETS BY MOUTH THREE TIMES DAILY WITH A MEAL, Quantity: 180, Refill Quantity: 2 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-04-20
TraZODone HCI ,50 MG TABS, TAKE 1 TABLET AT BEDTIME, Quantity: 30, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-03-02
Potassium Chloride Crys ER ,20 MEQ TBCR, TAKE ONE TABLET BY MOUTH EVERY DAY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-02-05

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 was instructed to go to the emergency room for symptoms of chest pain, shortness of breath, headache, blurred vision or systolic blood pressure over 200. 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 and patient is stable.

- 1. Diabetes mellitus with neuropathy, continue current plan.
- $2. \ Hypertension \ with \ vascular \ complications, \ continue \ current \ plan.$
- 3. Gout, continue current plan.
- 4. Hyperlipidemia, continue current plan.
- 5. Fluid overload, educate and monitor.
- 6. Congestive heart failure with systolic complications, continue current plan.
- 7. Neuropathy, continue current plan.
- 8. Osteoarthritis with chronic pain, continue current plan.
- 9. End-stage renal disease, continue current plan.
- 10. Gastroesophageal reflux disease, continue current plan.
- 11. Chronic obstructive pulmonary disease/asthma, continue current plan.
- 12. Insomnia, continue current plan.
- 13. Lumbago with chronic pain, continue current plan.

- 14. Anemia, continue current plan.15. Coronary artery disease, continue current plan.
- 16. Diabetic retinopathy, continue current plan.
- 17. Glaucoma, continue current plan.
- 18. Mobility impairment, continue current plan.
- 19. Mute/deaf, continue to monitor.

No refills needed in this visit.

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	
Gout, unspecified (ICD10:M10.9 Gout, unspecified) Unknown or N/A	Active	2015-10-01	
Osteoarthrosis, unspecified whether generalized or localized, lower leg (ICD10:M17.9 Osteoarthritis of knee, unspecified) Unknown or N/A	Active	2015-10-01	
Diabetes with neurological manifestations, type II or unspecified type, not stated as uncontrolled (ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2015-10-01	
Polyneuropathy in diabetes (ICD10:E08.42 Diabetes mellitus due to underlying condition with diabetic polyneuropathy) Unknown or N/A	Active	2015-10-01	
Hypertensive chronic kidney disease, unspecified, with chronic kidney disease stage V or end stage renal disease (ICD10:l12.0 Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease) 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:l10 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	
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	
Mononeuritis of unspecified site (ICD10:G58.9 Mononeuropathy, unspecified) Unknown or N/A	Active	2015-10-01	
Benign essential hypertension (ICD10:l10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01	
Anemia in chronic kidney disease (ICD10:D63.1 Anemia in chronic kidney disease) Unknown or N/A	Active	2015-10-01	
Endometrial hyperplasia with atypia (ICD10:N85.02 Endometrial intraepithelial neoplasia [EIN]) Unknown or N/A	Active	2015-10-01	
Coronary atherosclerosis of unspecified type of vessel, native or graft (ICD10:I25.10 Atherosclerotic heart disease of native coronary artery without angina pectoris) Unknown or N/A	Active	2015-10-01	
Esophageal reflux (ICD9:530.81 Esophageal reflux) Unknown or N/A	Active		

End stage renal disease (ICD9:585.6 End stage renal disease) Unknown or N/A	Active
Other and unspecified hyperlipidemia (ICD9:272.4 Other and unspecified hyperlipidemia) Unknown or N/A	Active
Lumbago (ICD9:724.2 Lumbago) Unknown or N/A	Active
Insomnia, unspecified (ICD9:780.52 Insomnia, unspecified) Unknown or N/A	Active
Background diabetic retinopathy (ICD9:362.01 Background diabetic retinopathy) Unknown or N/A	Active
Chronic ischemic heart disease, unspecified (ICD9:414.9 Chronic ischemic heart disease, unspecified) Unknown or N/A	Active
Chronic airway obstruction, not elsewhere classified (ICD9:496 Chronic airway obstruction, not elsewhere classified) Unknown or N/A	Active
Glaucoma (ICD9:365.9 Unspecified glaucoma) Unknown or N/A	Active

Allergies:

	Description	Status	Start Date	End Date
No known drug allergies.		Active		
Unknown or N/A		7101140		

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: Emrick Services INC **Primary Justification Medical Conditions:**

 $Anemia, COPD, diabetes, Glaucoma, Heart_Failure, HTN, hyperlipidemia, Kidney_Disease$

Additional Medical Conditions: 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: Skilled nursing needed due to deaf/mute and inability to self medicate correctly. Certification Statement: Patient is home bound due to chronic pain. Patient has unsteady, painful ambulation with extremely

poor balance. Signed by (NP): 16

Signed On (NP): 2016-11-09 03:11 **Signed By (Physician):** 18

Signed on (Physician): 2016-11-09 03:11

Form_status: finalized

DME:

Description	Status	Start Date	End Date	
Diabetic Supplies				
Unknown or N/A	Active			
by Dr. Sumana Ketha				

Gloves Unknown or N/A by Dr. Sumana Ketha	Active
Alcohol Pads Unknown or N/A by Dr. Sumana Ketha	Active
Probe covers Unknown or N/A by Dr. Sumana Ketha	Active

Procedure Order:

Patient ID	1272	Order ID	1143
Patient Name	Spicer, Rhoda	Ordered By	Love-Jones, Derrick
Order Date	2017-01-07	Print Date	2017-01-07
Order Status	complete	Encounter Date	2017-01-07
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry											



Electronically Signed by **Derrick Love-Jones** on **2016-11-16**.

Printed on 07-Jan-2017 20:20:12 pm.