**Nicole Birdow: Patient Information** 

Patient Record Number:6234

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: Nicole E Birdow External ID: 6234 DOB: 1978-05-24 Sex: Female **S.S.**: 457-59-3348

Patient Drive Folder: +12143717859-0714-112456-207

Address: 3200 S Lancaster

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

Guardian's Name: Shonna Mobile Phone: 214-743-0482 Street Address: 3200 S Lancaster

# **Family History:**

**Last Recorded On:** 12-18-2016.

Father: Unknown... Mother: Unknown.. Siblings: Unknown... Offspring: Unknown..

### **Social History:**

Last Recorded On: 12-18-2016.

Tobacco: Current some day smoker Smokes one packet per day. Status: Current

Alcohol: Drinks alcohol. Status: Current

Recreational Drugs: Acid/Cocaine/Methyl Status: Current

Nutrition History: Regular diet..

Developmental History: Education level is 10th grade...

### **Tests and Exams:**

Last Recorded On: 12-18-2016.

### Insurance:

#### Molina Healthcare of Texas (Z1161)

**Priority:** Primary Start Date: 2015-04-01 Relationship to Insured: Self

Type: N/A
Payer: Molina Healthcare of Texas (Z1161)

Priority: Secondary Start Date: 2015-04-01 Relationship to Insured: Self

Type: N/A

Payer: Molina Healthcare of Texas (Z1161)

Insured ID Number: 500000022630

**Group Number:** 

Employer Name : Nicole Birdow

Copay:

Insured ID Number: 504309897

**Group Number:** 

Employer Name : Nicole Birdow

Immunizations:			

Nicole Birdow: Chief Complaint Patient Record Number:6234 Texas Physician House Calls (H)

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Seen by Sumana Ketha MD Seen on 04-November-2016

#### Chief Complaint Status: finalized

Follow-up visit to prevent further decline of the following chronic medical conditions of hypertension with vascular complications, asthma, depression, insomnia, urinary incontinence, and schizophrenia. Patient complains of not sleeping through the night.

### **History of Present illness:**

#### **HPI Status:**Finalized

A 38-year-old African-American female in NAD with multiple chronic conditions of the following hypertension with vascular complications, asthma, depression, insomnia, urinary incontinence, and schizophrenia. Patient complains of having not sleeping through the night. Patient denies sleeping during the day. Patient has also been having hallucinations per patient report. Patient also states she has pain in her leg. Patient denies any other issues upon examination. Patient denies any chest pain, headache, nausea/vomiting at this time.

#### Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-11-04	142	78	284.00	66.00	97.80	16.00	~	45.8	0.00

### **Review of Systems:**

#### Constitutional:

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**Medicinal Material States** 

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#### **Physical Exam:**

#### SEEREMITIES:

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#### ENAISK:

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### NEURO:

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#### RSSCH:

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#### 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 conditions. 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. No that's needed this visit. The patient verbalize understanding of the above planning office number for any questions or concerns. Prognosis is fair and patient is stable. Reviewed old records of the patient. Follow up appointment in 4-6 weeks.

1. Hypertension with vascular complications, continue current plan.

- 2. Insomnia, continue current plan.
- 3. Asthma, continue current plan.
- 4. Urinary incontinence, continue current plan.
- 5. Depression, continue current plan.
- 6. Schizophrenia, continue current plan.

No medication refills needed this visit.

### **Medical Problem:**

Description	Status	Start Date	End Date
Unspecified urinary incontinence ( ICD10:R32 Unspecified urinary incontinence) Unknown or N/A	Active	2016-11-04	
Schizophrenia, unspecified ( ICD10:F20.9 Schizophrenia, unspecified) Unknown or N/A	Active	2016-09-30	
Chronic venous hypertension (idiopathic) without complications of unspecified lower extremity (ICD10:187.309 Chronic venous hypertension (idiopathic) without complications of unspecified lower extremity) Unknown or N/A	Active	2016-07-22	
Unspecified asthma, uncomplicated ( ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2016-07-22	
Major depressive disorder, single episode, unspecified (ICD10:F32.9 Major depressive disorder, single episode, unspecified) Unknown or N/A	Active	2016-07-22	
Insomnia, unspecified ( ICD10:G47.00 Insomnia, unspecified) Unknown or N/A	Active	2016-07-22	

# **Allergies:**

	Description	Status	Start Date	End Date
Divalproex		Active		
Unknown or N/A				

## **Surgeries:**

D	Description	Status	Start Date	End Date
Tubal ligation. 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

Primary Justification Medical Conditions: Asthma, Depression, HTN, Intellectual Disabilities, Schizophrenia

Additional Medical Conditions: Insomnia

Nursing Required: YES

Clinical Findings To Justify Home Health: Patient is homebound due to mental illness and the inability to self medicate

correctly.

Certification Statement: Skilled nursing is needed due to mental illness and they believe so.

Signed by (NP): 16

**Signed On (NP):** 2016-11-04 02:35 **Signed By (Physician):** 18

Signed on (Physician): 2016-11-11 02:35

Form\_status: finalized

# **Procedure Order:**

Patient ID	6234	Order ID	1306
Patient Name	Birdow, Nicole E	Ordered By	Love-Jones, Derrick
Order Date	2016-12-18	Print Date	2016-12-18
Order Status	complete	Encounter Date	2016-12-18
Lab	.HH Agency	Specimen Type>	

G	Ordered Procedure	Report				Results						
		Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
	026: Pulse Oximetry	2016-12-18		Final ✓		0097	Pulse Oximetry	No	98%	97% to 100%		



Electronically Signed by Sumana Ketha, MD on 2016-11-11.

Printed on 18-Dec-2016 16:55:44 pm.