David Johnson: Patient Information

Patient Record Number: 5986

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: David Johnson External ID: 5986 **DOB**: 1975-09-16 Sex: Male

Patient Drive Folder: https://drive.google.com/drive/u/0/folders/0B1v8FHBd_SfCa045RE5QVXdtM2M

Address: 3200 S Lancaster Rd

City: Dallas State: Texas

Postal Code: 75216-4555

Country: USA

Street Address: 3200 S Lancaster Rd

Family History:

Last Recorded On: 10-30-2016.

Father: Father is alive..

Mother: Mother is alive with complains of diabetes...

Offspring: Two children..

Social History:

Last Recorded On: 10-30-2016.

Tobacco: Current some day smoker Smoker. Status: Current

Alcohol: No alcohol. Status: Never

Recreational Drugs: No drug abuse. Status: Never Developmental History: Education level is 12th grade..

Insurance:

Medicare B Texas (SMTX0)

Priority: Primary Start Date: 2004-07-01 Relationship to Insured: Self

Type: N/A

Payer: Medicare B Texas (SMTX0)

Priority: Primary Start Date: 2016-06-01 Relationship to Insured: Self

Type: N/A

Payer: Wellcare HMO, Inc. (14163)

Priority: Secondary Start Date: 2013-12-01 Relationship to Insured: Self

Type: N/A

Payer: Medicaid Texas (SKTX0)

Copay:

Insured ID Number: 464391652A

Group Number:

Employer Name: David Johnson

Copay:

Insured ID Number: 10328909

Group Number:

Employer Name: David Johnson

Copay:

Insured ID Number: 508361690

Group Number:

Employer Name: David Johnson

Immunizations:		

David Johnson: Chief Complaint Patient Record Number: 5986

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> Seen by Sumana Ketha MD Seen on 19-August-2016

Chief Complaint Status: finalized

Follow-up home visit to prevent further decline and chronic medical conditions of osteoarthritis, hypertension, anxiety, hyperlipidemia, human immunodeficiency virus, and chronic pain. Patient complains of pain in both knees.

History of Present illness:

HPI Status:Finalized

Patient is a 40-year-old African American male in NAD with multiple chronic conditions of osteoarthritis, hypertension, anxiety, hyperlipidemia, human immunodeficiency virus, and chronic pain. Patient currently states that his has pain in his back and both knees. Patient is a smoker. Patient denies any chest pain, headache, nausea or vomiting at this time.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	ВМІ	Head circ
2016-08-19	140	96	240.00	74.00	97.80	18.00	~	0.0	0.00

Review of Systems:

Constitutional:

Gergatingatunologic:

NO PROPERTY CONTRACTOR THE SECTION OF THE 9th NetN **StadDitablication**ies YES

Use Of Antideprassants YES No Thought Content

Physical Exam:

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BATOREMITIES:

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ROM-Within Normal Limits .

Medication:

Description	Status	Start Date	End Date
ALPRAZolam ,1 MG TABS, TAKE 1 TABLET BY MOUTH TWICE			
DAILY, Quantity: 60, Refill Quantity: 0			
Unknown or N/A	Active	2016-04-18	
by ketha, Dr sumana - BK6230281			
Texas Physician House Calls			

ALPRAZolam ,1 MG TABS, TAKE 1 TABLET BY MOUTH TWICE DAILY, Quantity: 60, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-04-18
Acetaminophen-Codeine #3 ,300-30 MG TABS, 1 TAB PO BID PRN, Quantity: 60, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-03-17
Acetaminophen-Codeine #3 ,300-30 MG TABS, 1 TAB PO BID PRN, Quantity: 60, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-03-17
ALPRAZolam ,1 MG TABS, TAKE 1 TABLET TWICE DAILY, Quantity: 60, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-03-14
ALPRAZolam ,1 MG TABS, TAKE 1 TABLET TWICE DAILY, Quantity: 60, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-03-14
Acetaminophen-Codeine #3 ,300-30 MG TABS, 1 TAB PO BID PRN, Quantity: 60, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-02-17
Acetaminophen-Codeine #3 ,300-30 MG TABS, 1 TAB PO BID PRN, Quantity: 60, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-02-17

Plan Note:

Plan Note Status:Finalized

Continue same treatment plan as previous. Reviewed and continue same medications. No new medications noted this visit. Medication adherence education was given to patient. Patient educated on benefits of low salt, low fat and 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 and educated on smoking cessation. Patient verbalized understanding of the above treatment plan and was given the office number for any questions or concerns. Prognosis is fair and patient is stable.

- 1. Osteoarthritis with chronic pain, continue current plan.
- 2. Hypertension with vascular complications, continue current plan.
- 3. Anxiety, continue current plan.
- 4. Hyperlipidemia, continue current plan.
- ${\bf 5.}\ {\bf Chronic\ pain\ syndrome,\ continue\ current\ pain\ medication.}$

Medication refills as follows:

Tylenol #3 Xanax 1 mg t.i.d TAC 1% cream.

Medical Problem:

Description	Status	Start Date	End Date
Chronic pain syndrome			
(ICD10:G89.4 Chronic pain syndrome)	Active	2016-05-27	
Unknown or N/A			
Complex regional pain syndrome I, unspecified			
(ICD10:G90.50 Complex regional pain syndrome I, unspecified)	Active	2016-05-03	
Unknown or N/A			

Encounter for general adult medical examination without abnormal findings (ICD10:Z00.00 Encounter for general adult medical examination without abnormal findings) Unknown or N/A	Active	2016-04-27
Nicotine dependence, unspecified, uncomplicated (ICD10:F17.200 Nicotine dependence, unspecified, uncomplicated) Unknown or N/A	Active	2016-01-08
Essential (primary) hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-23
Osteoarthrosis, generalized, site unspecified (ICD10:M15.0 Primary generalized (osteo)arthritis) (ICD10:M15.9 Polyosteoarthritis, unspecified) 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
Anxiety state, unspecified (ICD10:F41.9 Anxiety disorder, unspecified) 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
Intestinal infection due to Clostridium difficile (ICD10:A04.7 Enterocolitis due to Clostridium difficile) Unknown or N/A	Active	2015-10-01
Diarrhea (ICD10:R19.7 Diarrhea, unspecified) Unknown or N/A	Active	2015-10-01
Human immunodeficiency virus [HIV] disease (ICD10:B20 Human immunodeficiency virus [HIV] disease) 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

Allergies:

Description	Status	Start Date	End Date
Bactrim	Active		
Unknown or N/A	Active		
Sustiva	Active		
Unknown or N/A	Active		

Surgeries:

Description	Status	Start Date	End Date	
Eye surgery 2014 Unknown or N/A	Active			
Motor vehicle accident in 2014. 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: Americane Speciality

Primary Justification Medical Conditions: Depression, HTN, Schizophrenia

Nursing Required: YES

Physical Therapy: NO

Occupational Therapy Required: NO Speech-language Pathology Required: NO

Clinical Findings To Justify Home Health: SN needed due to mental illness and inability to self medicate correctly Certification Statement: Patient is homebound and does require skilled nursing due to mental illness and inability to self

medicate correct. You Signed by (NP): 16

Signed On (NP): 2016-08-19 06:04 **Signed By (Physician):** 18

Signed on (Physician): 2016-08-26 06:04

Form_status: finalized

Procedure Order:

Patient ID	5986	Order ID	862
Patient Name	Johnson, David	Ordered By	Love-Jones, Derrick
Order Date	2016-10-30	Print Date	2016-10-30
Order Status	complete	Encounter Date	2016-10-30
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2016-10-30		Final ✓		0097	Pulse Oximetry		97%	97% to 100%		



Electronically Signed by Sumana Ketha, MD on 2016-08-26.

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