

Billie Piggee: Patient Information
Patient Record Number:5640

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

Name: Billie R Piggee
External ID: 5640
DOB: 1945-09-24
Sex: Female
Marital Status: Widowed
Patient Drive Folder: <https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B0Q2MIHiECb5OGdkWXYtaXEtbjQ>

Address: 2255 North Washington Ave #212
City: Dallas
State: Texas
Postal Code: 75204
Country: USA
Home Phone: 214-264-9146
Mobile Phone: 214-777-3830
Street Address: 2255 North Washington Ave
Apt/Suite/Other: 212

Past Medical History:

Last Recorded On: 08-12-2016.
Risk Factors: Chronic Pain,GERD,Lumbago,Neuropathy.

Family History:

Last Recorded On: 08-12-2016.
Father: Father also died had DM2 and HTN.
Mother: Mother died with DM2, MI, CKD, and CVA..
Siblings: No siblings.
Offspring: Patient has 5 children, 4 boys and 1 girl. All healthy..
Other Family Relative: Grandfather had throat cancer and grandmother had leukemia..

Primary Family Med Conditions:

Last Recorded On: 08-12-2016.
Chronic Conditions: Acute Myocardial Infarction,Chronic Kidney Disease,Diabetes,Hypertension,Stroke / Transient Ischemic Attack.

Social History:

Last Recorded On: 08-12-2016.
Tobacco: Never smoker No smoking **Status:** Never
Alcohol: No alcohol **Status:** Never
Recreational Drugs: No drug abuse **Status:** Never
Nutrition History: Good.
Developmental History: Good.
Other History: Influenza November 2015..

Tests and Exams:

Last Recorded On: 08-12-2016.

Mammogram (>40yrs, Yearly) N/A Done on August 25th.
Sigmoid/Colonoscopy N/A Done.
Prostate Exam N/A Not done.

Insurance:

Medicare B Texas (SMTX0)

Priority : Primary
Start Date : 1987-12-01
Relationship to Insured : Self
Type : N/A
Payer : Medicare B Texas (SMTX0)

Copay :
Insured ID Number : 457761881A
Group Number :
Employer Name : Billie Piggee

Immunizations:

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