

Tosha Yates: Patient Information
Patient Record Number:6027

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: Tosha Yates
External ID: 6027
DOB: 1984-09-26
Sex: Female
User Defined: 469-818-8389 New
Patient Drive Folder: https://drive.google.com/drive/u/0/folders/0B1v8FHBd_SfCS1NycHIXYkZsOGc

Address: 712 Havenwood Dr
City: Dallas
State: Texas
Postal Code: 75232
Country: USA
Home Phone: 972-224-5032
Work Phone: 469-818-8389
Mobile Phone: 469-610-9806
Street Address: 712 Havenwood Dr
Apt/Suite/Other: House

Past Medical History:

Last Recorded On: 10-30-2016.
Risk Factors: Chronic Wounds,Chronic Pain.

Family History:

Last Recorded On: 10-30-2016.
Father: Null.
Mother: Hypertension..
Siblings: Null.
Spouse: Null.
Offspring: Null.

Social History:

Last Recorded On: 10-30-2016.
Tobacco: Current every day smoker Smokes daily. **Status:** Current
Coffee:
Alcohol: Socially **Status:** Current
Recreational Drugs: No drug use. **Status:** Never
Counseling:
Exercise Patterns:
Hazardous Activities:
Nutrition History: Regular.
Developmental History: Well.

Insurance:

Superior Health Plan Texas (39188)

Priority : Primary
Start Date : 1993-11-01
Relationship to Insured : Self
Type : N/A
Payer : Superior Health Plan Texas (39188)

Copay :
Insured ID Number : 523255876
Group Number :
Employer Name : Tosha Yates

Immunizations:

Tosha Yates: Chief Complaint
Patient Record Number:6027

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Seen by Sumana Ketha MD
Seen on 21-September-2016

Chief Complaint Status:finalized

Follow up home visit for management of status post wound, anxiety, depression, colostomy, chronic pain syndrome, vitamin D deficiency, OA with chronic pain, anemia and schizophrenia. Patient complains of pain in legs.

History of Present illness:

HPI Status:Finalized

Patient is a 32-year-old African-American female in NAD with multiple chronic conditions of necrotizing fasciitis to left buttock, colostomy, depression, osteoarthritis with chronic pain, chronic pain syndrome, anxiety, anemia schizophrenia, and Vitamin D deficiency. Patient states that she has been having pain in both legs and throughout her body for several weeks. Patient states that she does get relief from current pain medication. Patient denies any other issues upon examination. Patient denies CP, HA, and N/V recently. Patient states she is going to have surgery next month.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-09-21	110	81	170.00	62.00	97.40	16.00	~	0.0	0.00

Review of Systems:

Respiratory:

Psychiatry:

Anxiety YES
Psych Diagnosis YES
Psych Medication YES
Depression YES
Anxiety YES

Physical Exam:

EXTREMITIES:

Upper Extremities: Within Normal Limits .
Lower Extremities: Within Normal Limits .

SKIN:

Normal Skin Color, Good Skin Turgor, No Wounds .

HEENT:

Soft, Non Tender, Non Distended, Masses-Within Normal Limits .
Soft, Non Tender, Non Distended, Masses-Within Normal Limits .

ENTOM:

Soft, Non Tender, Non Distended, Masses-Within Normal Limits .

NECK:

Supple, Thyromegaly, Carotid of the Nasal Septum, JVD, lymphadenopathy-Within Normal Limits .

BACK:

Normal Curvature, Tenderness-Within Normal Limits .

CV:

RRR-Within Normal Limits .

RESP:

Lungs CTAB-Within Normal Limits .

GI:

Organomegaly-Within Normal Limits .

Soft, Non Tender, Non Distended, Masses-Within Normal Limits .

Medication:

Description	Status	Start Date	End Date
Advair Diskus ,250-50 MCG/DOSE AEPB, INHALE 1 PUFF TWICE DAILY, Quantity: 1, Refill Quantity: 6 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-05-09	
Advair Diskus ,250-50 MCG/DOSE AEPB, INHALE 1 PUFF TWICE DAILY, Quantity: 1, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-04-25	
Norco ,10-325 MG TABS, TAKE 1 TABLET EVERY 8 HOURS AS NEEDED FOR PAIN, Quantity: 90, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-03-22	
Norco ,10-325 MG TABS, TAKE 1 TABLET EVERY 8 HOURS AS NEEDED FOR PAIN, Quantity: 90, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-02-22	
Proventil HFA ,108 (90 Base) MCG/ACT AERS, INHALE 1 TO 2 PUFFS EVERY 4 TO 6 HOURS AS NEEDED, Quantity: 6.7, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-11-19	
Advair Diskus ,250-50 MCG/DOSE AEPB, INHALE 1 PUFF TWICE DAILY, Quantity: 1, Refill Quantity: 4 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-11-19	

Plan Note:

Plan Note Status:Finalized

Continue with treatment plan as previous. Reviewed and continue with current medication. Continue with wound treatment and colostomy care. 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. Prognosis is fair and patient is stable.

Osteoarthritis with chronic pain continue current plan.
Anxiety, continue current plan.
Depression, continue current plan.
Chronic pain syndrome, continue current pain medication.
Schizophrenia, continue current plan.
Anemia, continue current plan.
Vitamin D deficiency, continue current plan.

Patient has been requested to refill Norco 10/325 mg t.i.d.
Advair 250/50
Provential INH

Medical Problem:

Description	Status	Start Date	End Date
Primary generalized (osteo)arthritis (ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2016-06-22	
Polyosteoarthritis, unspecified (ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2016-06-22	

Chronic pain syndrome (ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-06-22
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-05-04
Schizophrenia, unspecified (ICD10:F20.9 Schizophrenia, unspecified) Unknown or N/A	Active	2016-05-04
Infection following a procedure, initial encounter (ICD10:T81.4XXA Infection following a procedure, initial encounter) Unknown or N/A	Active	2016-01-11
Non-pressure chronic ulcer of buttock with fat layer exposed (ICD10:L98.412 Non-pressure chronic ulcer of buttock with fat layer exposed) Unknown or N/A	Active	2015-11-21
Encounter for change or removal of surgical wound dressing (ICD10:Z48.01 Encounter for change or removal of surgical wound dressing) Unknown or N/A	Active	2015-11-21
Encounter for attention to other artificial openings of digestive tract (ICD10:Z43.4 Encounter for attention to other artificial openings of digestive tract) Unknown or N/A	Active	2015-11-21
Anemia, unspecified (ICD10:D64.9 Anemia, unspecified) Unknown or N/A	Active	2015-11-21
Undifferentiated schizophrenia (ICD10:F20.3 Undifferentiated schizophrenia) Unknown or N/A	Active	2015-11-21
Other abnormalities of breathing (ICD10:R06.89 Other abnormalities of breathing) Unknown or N/A	Active	2015-11-21
Encounter for change or removal of nonsurgical wound dressing (ICD10:Z48.00 Encounter for change or removal of nonsurgical wound dressing) Unknown or N/A	Active	2015-11-19
Major depressive disorder, single episode, unspecified (ICD10:F32.9 Major depressive disorder, single episode, unspecified) Unknown or N/A	Active	2015-11-19
Anxiety disorder, unspecified (ICD10:F41.9 Anxiety disorder, unspecified) Unknown or N/A	Active	2015-11-19
Colostomy status (ICD10:Z93.3 Colostomy status) Unknown or N/A	Active	2015-11-19
Other schizophrenia (ICD10:F20.89 Other schizophrenia) Unknown or N/A	Active	2015-11-19
Encounter for planned postprocedural wound closure (ICD10:Z48.1 Encounter for planned postprocedural wound closure) Unknown or N/A	Active	2015-10-14

Allergies:

Description	Status	Start Date	End Date
No known drug allergies. 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: Eminent Home Healthcare LLC

Primary Justification Medical Conditions: Schizophrenia,Asthma,Depression

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: SN needed due to schizophrenia and colostomy.

Certification Statement: Patient is home bound due to schizophrenia and colostomy. Patient experience confusion and unable to safely leave home. Patient requires assistance with colostomy.

Signed by (NP): 16

Signed On (NP): 2016-09-21 11:48

Signed By (Physician): 18

Signed on (Physician): 2016-09-27 11:48

Form_status: finalized

Procedure Order:

Patient ID	6027	Order ID	952
Patient Name	Yates, Tosha	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											

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