Jacquelyn Prater: Patient Information

Patient Record Number: 2042

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: Jacquelyn Prater External ID: 2042 **DOB**: 1953-07-03 Sex: Female S.S.: 439-02-1472 Marital Status: Divorced

Patient Drive Folder: +19729190425-0608-151539-290

Address: 2255 N Washington Ave

City: Dallas State: Texas Postal Code: 75204 Country: USA

Mobile Phone: 214-779-7966

Street Address: 2255 N Washington Ave

Apt/Suite/Other: APT#303

# **Family History:**

Last Recorded On: 08-31-2016.

Father: Father died of unknown disease. .

Mother: Mother died of brain cancer, hypertension, and diabetes mellitus 2...

Siblings: Three brothers are alive, two brothers are died. Three sisters are alive and one sister died..

Offspring: Three children, one is deceased..

# **Social History:**

Last Recorded On: 08-31-2016. Tobacco: No smoking. Status: Never Alcohol: No alcohol. Status: Never

Recreational Drugs: No drug abuse. Status: Never

Nutrition History: Regular.. Developmental History: Well..

Other History: Influenza November 2015..

### Insurance:

### **Medicare B Texas (SMTX0)**

**Priority:** Primary Start Date: 2012-07-01 Relationship to Insured: Self

Type: N/A

Payer: Medicare B Texas (SMTX0)

**Priority**: Secondary Start Date: 2016-04-01 Relationship to Insured: Self Type: N/A

Payer : Medicaid Texas (SKTX0)

Copay:

Insured ID Number: 439021472A

Group Number:

Employer Name: Jacquelyn Prater

Copay:

**Insured ID Number:** 512359830

**Group Number:** 

Employer Name : Jacquelyn Prater

Immunizations:		

Jacquelyn Prater: Chief Complaint Patient Record Number: 2042

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> Seen by Derrick Love-Jones Seen on 16-August-2016

### Chief Complaint Status: finalized

Follow up home visit to prevent further decline of the following chronic medical conditions of hypertension, neuropathy, muscle spasms, depression, anxiety, chronic pain syndrome, osteoarthritis with chronic pain, lumbago with sciatica, constipation, and memory loss. Patient complains of not sleeping at night.

# **History of Present illness:**

### **HPI Status:**Finalized

A 63-year-old African American female in NAD multiple chronic conditions of the following hypertension, neuropathy, muscle spasms, depression, anxiety, chronic pain syndrome, osteoarthritis with chronic pain, lumbago with sciatica, constipation, and memory loss. Patient has a history of a traumatic brain injury from and motor vehicle accident in 2005. As a result, patient has some memory loss. Patient states that she has lower back pain that travels into both legs. Patient rates pain at 6/10. Patient states that she does get relief from current pain medication. Patient complains today of not sleeping at night. Reviewed labs. Reviewed medications.

### Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	ВМІ	Head circ
2016-08-16	178	97	212.00	62.00	98.20	18.00	~	0.0	0.00

# **Review of Systems:**

## Constitutional:

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**Children College** Seriesto

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Mediatric Petroseye YES

No Discortigitatisi a Nature Of Urine

No Ditenitalijestion Peetige Of Motion

Migraines YES

# **Physical Exam:**

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### WESSEMITIES:

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CV:

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Murmur, Rubs, Gallops-Within Normal Limits .

### **Medication:**

Status	Start Date	End Date
Active	2016-08-17	

Amoxicillin ,500 MG CAPS, Take 2 Times a Day, Quantity: 20, Refill Quantity: 0 Unknown or N/A Active 2016-08-09 by Jones, Derrick - MJ3217331 Texas Physician House Calls DiazePAM ,10 MG TABS, TAKE 1 TABLET 3 TIMES DAILY, Quantity: 90, Refill Quantity: 0 Active 2016-07-20 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls DiazePAM ,10 MG TABS, TAKE 1 TABLET 3 TIMES DAILY, Quantity: 90. Refill Quantity: 0 Active 2016-07-16 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls Hydrocodone-Acetaminophen ,10-325 MG TABS, Take 1 tablet 3 times a day as needed for pain, Quantity: 90, Refill Quantity: 0 Active 2016-06-20 Unknown or N/A by ketha. Dr sumana - BK6230281 DFW Primary Care PLLC

### 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 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 chest pain, shortness of breath, excessive headache, blurry vision or systolic blood pressure greater than 200. Patient encouraged to exercise daily as tolerated. No labs needed this visit. Patient verbalized understanding of the above plan and was given the 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. Insomnia, continue current plan.
- 2. Hypertension with vascular complications, continue current plan.
- 3. Osteoarthritis with chronic pain, continue current plan.
- 4. Anxiety, continue current plan.
- 5. Neuropathy, continue current plan.
- 6. Muscle spasms, continue current plan.
- 7. Depression, continue current plan.
- 8. Lumbago with sciatica, continue current plan.
- 9. Memory loss, continue current plan.
- 10. Constipation, continue current plan.

Medication refills as follows: Ambien 10 mg q.h.s. Norco 10/325 mg t.i.d. Diazepam 10 mg t.i.d. Losartan 100 mg b.i.d.

### **Medical Problem:**

Description	Status	Start Date	End Date
Insomnia, unspecified ( ICD10:G47.00 Insomnia, unspecified) Unknown or N/A	Active	2016-08-16	
Primary generalized (osteo)arthritis ( ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2016-08-16	
Polyosteoarthritis, unspecified (ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2016-08-16	
Other chronic pain ( ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-08-16	
Anxiety disorder, unspecified (ICD10:F41.9 Anxiety disorder, unspecified) Unknown or N/A	Active	2016-08-16	

Lumbago with sciatica, right side ( ICD10:M54.41 Lumbago with sciatica, right side) Unknown or N/A	Active	2016-07-12
Chronic pain syndrome ( ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-07-12
Chronic venous hypertension (idiopathic) without complications of unspecified lower extremity (ICD10:I87:309 Chronic venous hypertension (idiopathic) without complications of unspecified lower extremity) Unknown or N/A	Active	2016-06-14
Other disorders of peripheral nervous system (ICD10:G64 Other disorders of peripheral nervous system) Unknown or N/A	Active	2016-06-14
Major depressive disorder, single episode, unspecified (ICD10:F32.9 Major depressive disorder, single episode, unspecified) Unknown or N/A	Active	2016-06-14
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2016-05-30
Low back pain (ICD10:M54.5 Low back pain) Unknown or N/A	Active	2016-05-30
Chronic obstructive pulmonary disease with acute lower respiratory infection (ICD10:J44.0 Chronic obstructive pulmonary disease with acute lower respiratory infection) Unknown or N/A	Active	2016-05-30
Other muscle spasm ( ICD10:M62.838 Other muscle spasm) Unknown or N/A	Active	2016-05-30
Major depressive disorder, single episode, mild (ICD10:F32.0 Major depressive disorder, single episode, mild) Unknown or N/A	Active	2016-05-30

# Allergies:

	Description	Status	Start Date	End Date
Tramadol		Active		
Unknown or N/A			2016-06-14	
Tylenol #4		Active	2016-06-14	
Unknown or N/A		Active	2010-00-14	
Trazadone		Active	2016-06-14	
Unknown or N/A		Active	2010-00-14	

# Surgeries:

Description	Status	Start Date	End Date
Hysterectomy at age 37. Unknown or N/A	Active		
Motor vehicle accident in 2005. 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: Promise Home Health,Inc

 $\textbf{Primary Justification Medical Conditions:} \ Asthma, Depression, HTN, Traumatic\_Brain\_Injury$ 

Additional Medical Conditions: Lumbago, Muscle Spasms, Constipation, Chronic Pain Syndrome, Memory Loss

Nursing Required: YES

Physical Therapy: NO

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

Clinical Findings To Justify Home Health: Patient is homebound due to a for Maddock brain injury and and ability to self

medicate correctly.

Certification Statement: Skilled nursing is needed to do to make Trumatic brain injury and, and the inability to self medicate

correctly.

Signed by (NP): 16

**Signed On (NP):** 2016-08-16 05:43 **Signed By (Physician):** 18

Signed on (Physician): 2016-08-23 05:43

Form\_status: finalized

## **Procedure Order:**

Patient ID	2042	Order ID	839
Patient Name	Prater, Jacquelyn	Ordered By	Love-Jones, Derrick
Order Date	2016-09-11	Print Date	2016-09-11
Order Status	complete	Encounter Date	2016-09-11
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
Reported	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2016-09-11		Final ✓		0097	Pulse Oximetry	No	98%	97% to 100%		



Electronically Signed by Derrick Love-Jones on 2016-08-23.

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