

Tosha Yates: Patient Information
Patient Record Number:6027

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: Tosha Yates
External ID: 6027
DOB: 1984-09-26
Sex: Female
User Defined: 469-818-8389 New
Patient Drive Folder: 0B0x_tbqdBDPhMmdjRHdjaUtDS0E

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

Past Medical History:

Last Recorded On: 01-21-2017.
Risk Factors: Chronic Wounds,Chronic Pain.

Family History:

Last Recorded On: 01-21-2017.
Father: Null..
Mother: Hypertension..
Siblings: Null..
Spouse: Null..
Offspring: Null..

Social History:

Last Recorded On: 01-21-2017.
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 08-December-2016

Chief Complaint Status:finalized

Followup home visit for management of status post wound, anxiety, depression, colostomy, chronic pain syndrome, vitamin D deficiency, osteoarthritis with chronic pain, anemia, and schizophrenia. Patient complains of pain in her lower back.

History of Present illness:

HPI Status:Finalized

Patient is a 32-year-old African-American female in no acute distress 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 more pain in her lower back. Patient states that she does get relief from current pain medication. Patient denies any other issues upon examination. Patient denies chest pain, headache, and nausea or vomiting recently.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-12-08	141	85	174.00	62.00	98.20	18.00	~	31.8	0.00

Review of Systems:

Constitutional:

Revised: 11/17/2014

No ~~Yes~~ **Yes**

No ~~competition~~ **Yes**

Notwithstanding

No. 1114564

No Photo Content

No Obstructions

No substitution

Physical Exam:

EXTREMITIES:

Boston, **Cincinnati**, **Dallas**, **Denver**, **Houston**, **Kansas City**, **Louisville**, **Miami**, **Nashville**, **New Orleans**, **Oklahoma City**, **Pittsburgh**, **Rio Grande**, **Salt Lake City**, **Tampa**.

SKETCH:

Aldemosa (the Bare Ground Kill) (Twinhorn Mountain) has its wound on buttocks.

MYISC:

Strongly Negative, Normal Limit, Discharge, Wax, Oral Lesions, Gums pink, Bilateral Nasal Turbinates-Within Normal Limits .left eye strabism.

ENTOM-Within Normal Limits .

TM's/EAM's/EE, Ext Nose-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:

Oroganomegaly-Within Normal Limits .

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

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. Reviewed old records of the patient. Follow up appointment in 4-6 weeks.

1. Lumbago with chronic pain, continue current plan.
2. Osteoarthritis with chronic pain, continue current plan.
3. Anxiety, continue current plan.
4. Chronic pain syndrome, continue current pain medication.
5. Depression, continue current plan.
6. Anemia, continue current plan.
7. Vitamin D deficiency, continue current plan.
8. Schizophrenia, continue current plan.

Patient has been requested to refill.
Norco 10/325 mg t.i.d.

Medical Problem:

Description	Status	Start Date	End Date
Low back pain (ICD10:M54.5 Low back pain) Unknown or N/A	Active	2016-10-26	
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	
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-05-04	
Anemia, unspecified (ICD10:D64.9 Anemia, unspecified) Unknown or N/A	Active	2015-11-21	
Anxiety disorder, unspecified (ICD10:F41.9 Anxiety disorder, unspecified) Unknown or N/A	Active	2015-11-19	

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: Asthma,Depression,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 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): 302

Signed On (NP): 2016-12-08 04:05

Signed By (Physician): 18

Signed on (Physician): 2016-12-15 04:05

Form_status: finalized



Electronically Signed by **Darolyn Perkins** on **2016-12-15**.

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