

**Sylvester Henderson: Patient Information**  
Patient Record Number:6033

**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:** Sylvester Henderson  
**External ID:** 6033  
**DOB:** 1946-12-21  
**Sex:** Male  
**Patient Drive Folder:** 0B0x\_tbqdBDPhQXdRazdLOGZMU1k

**Address:** 2519 John West Rd  
**City:** Dallas  
**State:** Texas  
**Postal Code:** 75228  
**Country:** USA  
**Guardian's Name:** Sister  
**Mobile Phone:** 214-560-7144  
**Street Address:** 2519 John West Rd  
**Apt/Suite/Other:** 18105 Gate Code 4444

## Past Medical History:

**Last Recorded On:** 02-03-2017.  
**Risk Factors:** Arthritis,High Cholestrol,Heart Burn, Reflux,Neuropathy,Chronic Pain.

## Family History:

**Last Recorded On:** 02-03-2017.  
**Father:** Deceased. .  
**Mother:** Deceased. .  
**Siblings:** Sister with diabetes..

## Social History:

**Last Recorded On:** 02-03-2017.  
**Tobacco:** Never smoker No smoking. **Status:** Never  
**Coffee:** 1 cup a day **Status:** Current  
**Alcohol:** No alcohol. **Status:** Never  
**Recreational Drugs:** No drug abuse. **Status:** Never  
**Counseling:**  
**Exercise Patterns:**  
**Hazardous Activities:**  
**Nutrition History:** Good..  
**Developmental History:** Well..

## Tests and Exams:

**Last Recorded On:** 02-03-2017.

## Insurance:

**Medicare B Texas (SMTX0)**

**Priority :** Primary  
**Start Date :** 1975-12-01  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Medicare B Texas (SMTX0)  
**Priority :** Secondary  
**Start Date :** 2015-10-01  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Medicaid Texas (SKTX0)

**Copay :**  
**Insured ID Number :** 455728809A  
**Group Number :**  
**Employer Name :** Sylvester Henderson  
**Copay :**  
**Insured ID Number :** 416665201  
**Group Number :**  
**Employer Name :** Sylvester Henderson

**Immunizations:**

**Sylvester Henderson: Chief Complaint**  
Patient Record Number:6033

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**Seen by** Darolyn Perkins  
**Seen on** 29-December-2016

**Chief Complaint Status:**finalized

Followup home visit for management of further decline of chronic conditions of hypertension, diabetes, hyperlipidemia, gastroesophageal reflux disease, osteoarthritis, lumbago and chronic pain syndrome. Patient complains of back pain and knee pain.

**History of Present illness:**

**HPI Status:**Finalized

Patient is a 69-year-old African-American male with multiple chronic conditions of hypertension, diabetes, hyperlipidemia, gastroesophageal reflux disease, osteoarthritis, lumbago and chronic pain syndrome. Patient states he has pain in his lower back and knees that is chronic. Patient rates pain at 6/10. 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
2016-12-29	170	101	212.00	74.00	98.20	18.00	~	27.2	0.00

**Review of Systems:**

**Constitutional:**

**Weight Loss** NO  
**Appetite** NO  
**Fatigue** NO  
**Fevers** NO  
**Chills** NO  
**Night Sweats** NO  
**Joint Pain** NO  
**Muscle Pain** YES

**Physical Exam:**

**HEENT:**  
Eyes-Within Normal Limits .  
Ears-Within Normal Limits .  
Nose-Within Normal Limits .  
Throat-Within Normal Limits .

**EXTREMITIES:**  
Upper Extremities-Within Normal Limits .  
Lower Extremities-Within Normal Limits .

**CYMPH:**  
Chest-Within Normal Limits .  
Lungs-Within Normal Limits .

**MUSC:**  
Strength-Within Normal Limits .  
Reflexes-Within Normal Limits .

ROM-Within Normal Limits .

**Medication:**

Description	Status	Start Date	End Date
Easy Touch FlipLock Insulin Sy ,31G X 5/16" 1 ML MISC, USE THREE TIMES DAILY, Quantity: 300, Refill Quantity: 0			
Unknown or N/A	Active	2017-01-03	
by Jones, Derrick - MJ3217331			
Texas Physician House Calls			

Gabapentin ,600 MG TABS, TAKE 1 TABLET 3 TIMES DAILY, Quantity: 90, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-07-25
HumuLIN N ,100 UNIT/ML SUSP, Inject SQ per sliding scale Hold if blood sugar is less than or equal to 90, Quantity: 50, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-07
FreeStyle Lite Test , STRP, Test blood sugars three times a day, Quantity: 300, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-03-21
CareFine Pen Needles ,32G X 4 MM MISC, USE AS DIRECTED, Quantity: 100, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-03-04
HumuLIN N ,100 UNIT/ML SUSP, Inject SQ per sliding scale Hold if blood sugar is less than or equal to 90, Quantity: 50, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 DFW Primary Care PLLC	Active	2015-12-10
Atenolol-Chlorthalidone ,50-25 MG TABS, TAKE 1 TABLET TWICE DAILY AS NEEDED, Quantity: 180, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-12-04
HumuLIN N ,100 UNIT/ML SUSP, USE AS DIRECTED, Quantity: 50, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-12-04

## Plan Note:

### Plan Note Status:Finalized

Continue same treatment plan his previous. Reviewed and continue same medications, No new medications noted this visit and medication adherence education was given to the patient. 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 symptoms of chest pain, shortness of breath, excessive headache, blurred vision or systolic blood pressure greater than 200. No labs need it this visit. Patient verbalize on the standing of the above plan and was given the office number for any questions or concerns. Prognosis is this fair and patient is stable. Reviewed old records of the patient. Follow up appointment in 4-6 weeks.

1. Osteoarthritis with chronic pain, continue current plan.
2. Diabetes mellitus type 2 with neuropathy, continue current plan.
3. Gastroesophageal reflux disease, continue current plan.
4. Hypertension with vascular complications, continue current plan.
5. Chronic pain syndrome, continue current pain medication.
6. Lumbago with chronic pain, continue current plan.
7. Hyperlipidemia, continue current plan.

Medication refills as follow

Trazodone and insulin

Norco 10/325 mg t.i.d.

## Medical Problem:

Description	Status	Start Date	End Date
Gastro-esophageal reflux disease without esophagitis ( ICD10:K21.9 Gastro-esophageal reflux disease without esophagitis) Unknown or N/A	Active	2016-11-02	

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	2016-07-28
Low back pain ( ICD10:M54.5 Low back pain) Unknown or N/A	Active	2016-07-20
Other disorders of peripheral nervous system ( ICD10:G64 Other disorders of peripheral nervous system) Unknown or N/A	Active	2016-07-20
Chronic pain syndrome ( ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-06-16
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	2016-05-12
Other chronic pain ( ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-05-12
Type 2 diabetes mellitus without complications ( ICD10:E11.9 Type 2 diabetes mellitus without complications) Unknown or N/A	Active	2015-12-22
Essential (primary) hypertension ( ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-11-23
Type 2 diabetes mellitus with diabetic neuropathy, unspecified ( ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2015-11-23
Other hyperlipidemia ( ICD10:E78.4 Other hyperlipidemia) Unknown or N/A	Active	2015-11-23
Hyperlipidemia, unspecified ( ICD10:E78.5 Hyperlipidemia, unspecified) Unknown or N/A	Active	2015-11-23
Primary generalized (osteo)arthritis ( ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2015-11-23
Polyosteoarthritis, unspecified ( ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2015-11-23

## 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:** NO

**Does Patient have reliable other Primary Care Physician:** NO

**Is House Visit Needed:** YES

**Next Visit Duration (in days):** 31

**Current home health agency:**

**Primary Justification Medical Conditions:** hyperlipidemia,HTN,Heart\_Failure,Asthma,diabetes

**Additional Medical Conditions:**

**Nursing Required:** NO

**Physical Therapy:** NO

**Occupational Therapy Required:** NO

**Speech-language Pathology Required:** NO

**Requested Care/Treatments Required:**

**Clinical Findings To Justify Home Health:** No SN needed

**Certification Statement:**

**Signed by (NP):** 302

**Signed On (NP):** 2016-12-29 01:04

**Signed By (Physician):** 18

**Signed on (Physician):** 2017-01-05 01:04

**Form\_status:** finalized

**Printed:**



Electronically Signed by **Darolyn Perkins** on **2017-01-05**.

Printed on 04-Feb-2017 22:05:19 pm.