### **Andy Thomas: Patient Information**

Patient Record Number:5940

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: Andy Thomas External ID: 5940 **DOB**: 1927-06-25 Sex: Male S.S.: 493-34-3794

User Defined: call in btw 10-2

**Patient Drive Folder:** 

https://drive.google.com/drive/u/0/folders/0B1v8FHBd\_SfCfm9yQWxjbE9ITDE5U1NhWmZRcGRyRXZCbUdyLWJOdDBybDlwRD

RHdUdNblk

Address: 2655 Exeter Ave

City: Dallas State: Texas Postal Code: 75216 Country: USA

Guardian's Name: Helen Clewis(Daughter) Emergency Contact: 214-732-3545 Home Phone: 214-732-3545 Street Address: 2655 Exeter Ave

Apt/Suite/Other: House

## **Family History:**

Last Recorded On: 07-14-2016. Offspring: Patient has 2 children.

# **Social History:**

Last Recorded On: 07-14-2016.

Developmental History: Educational level is 6th grade.

Other History: Influenza in 2014.

## **Tests and Exams:**

Last Recorded On: 07-14-2016.

Prostate Exam&nbsp&nbsp N/A&nbsp&nbsp surgery done 18 years ago

## Insurance:

Medicare B Texas (SMTX0)

**Priority**: Primary Start Date: 1992-06-01 Relationship to Insured : Self

Type: N/A

Payer: Medicare B Texas (SMTX0)
Priority: Primary **Start Date**: 2015-09-26 Relationship to Insured : Self

Type: N/A

Payer: Medicare B Texas (SMTX0)
Priority: Secondary
Start Date: 2015-07-01
Relationship to Insured: Self

Type: N/A

Payer : Medicaid Texas (SKTX0)

**Immunizations:** 

Printed on 25-Aug-2016 21:19:27 pm.

Copay: Insured ID Number: 439343794A

**Group Number:** 

Employer Name: Andy Thomas

Copay: Insured ID Number: 439343794A

Group Number : Employer Name : Andy Thomas

Copay:

Insured ID Number: 524232116

Group Number :

Employer Name : Andy Thomas