

**Sandra Thomas: Patient Information**  
Patient Record Number:5959

**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:** Sandra Thomas

**External ID:** 5959

**DOB:** 1953-11-23

**Sex:** Female

**User Defined:** 214-460-0234

**Patient Drive Folder:**

[https://drive.google.com/drive/u/0/folders/0B1v8FHBd\\_SfCfmxcGFUSW1BYIJZai03LUlxUXh3YW1tTzFDUFhIQ0s3MjItaWtpcnBYUXc](https://drive.google.com/drive/u/0/folders/0B1v8FHBd_SfCfmxcGFUSW1BYIJZai03LUlxUXh3YW1tTzFDUFhIQ0s3MjItaWtpcnBYUXc)

**Address:** 4925 Hovenkamp Dr

**City:** Dallas

**State:** Texas

**Postal Code:** 75227

**Country:** USA

**Emergency Contact:** Sister

**Emergency Phone:** 214-460-0234

**Home Phone:** 214-476-0165

**Street Address:** 4925 Hovenkamp Dr

**Apt/Suite/Other:** House

## Family History:

**Last Recorded On:** 10-23-2016.

**Father:** Father died of prostate cancer..

**Mother:** Mother died of colon cancer..

**Siblings:** Brother with stroke and hypertension..

**Other Family Relative:** Aunt died of pancreatic cancer.

## Social History:

**Last Recorded On:** 10-23-2016.

**Tobacco:** No smoking. **Status:** Never

**Alcohol:** No alcohol. **Status:** Never

**Recreational Drugs:** No drug abuse. **Status:** Never

**Nutrition History:** Regular.

**Developmental History:** Well.

## Tests and Exams:

**Last Recorded On:** 10-23-2016.

**Mammogram (>40yrs, Yearly)** N/A Mammogram in 2011

**Sigmoid/Colonoscopy** N/A Colonoscopy greater than 10 years ago, refused

## Insurance:

**Medicare B Texas (SMTX0)**

**Priority** : Primary  
**Start Date** : 2014-02-01  
**Relationship to Insured** : Self  
**Type** : N/A  
**Payer** : Medicare B Texas (SMTX0)  
**Priority** : Primary  
**Start Date** : 2015-10-09  
**Relationship to Insured** : Self  
**Type** : N/A  
**Payer** : Medicare B Texas (SMTX0)  
**Priority** : Secondary  
**Start Date** : 2014-12-01  
**Relationship to Insured** : Self  
**Type** : N/A  
**Payer** : United Health Care (87726)  
**Priority** : Secondary  
**Start Date** : 2015-11-01  
**Relationship to Insured** : Self  
**Type** : N/A  
**Payer** : Medicaid Texas (SKTX0)

**Copay** :  
**Insured ID Number** : 454924127W  
**Group Number** :  
**Employer Name** : Sandra Thomas  
**Copay** :  
**Insured ID Number** : 454924127W  
**Group Number** :  
**Employer Name** : Sandra Thomas  
**Copay** :  
**Insured ID Number** : 513530328  
**Group Number** :  
**Employer Name** : Sandra Thomas  
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## **Immunizations:**

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**Chief Complaint Status:**finalized  
Follow up home visit for management of hypertension, hyperlipidemia, chronic pain, insomnia, dementia and depression. Patient complains of insomnia at times.

**HPI Status:**Finalized  
A 62-year-old African American female in NAD with multiple chronic conditions of hypertension, depression, insomnia, hyperlipidemia, and chronic pain syndrome. Patient states that she has an increase in back pain over the last several weeks. Patient denies any recent trauma or injury to her back. Patient rates pain at 7/10 today. Patient denies any CP, HA, or N/V recently.

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-09-07	110	67	194.00	60.00	98.20	18.00	~	37.9	0.00

[illegible]

**H&A:**  
Eyes, Ears, Nose, Throat, Neck, Chest, Abdomen, Extremities, Skin - Within Normal Limits .

**VITALS:**  
Temp, Pulse, Resp, BP, HR, SpO<sub>2</sub>, RR, S<sub>1</sub>/S<sub>2</sub> - Within Normal Limits .

**CV:**  
Regular Rhythmic Normal Cardiac Findings - Within Normal Limits .

**RESP:**  
Lungs Clear, Rales, Rhonchi, Wheezes - Within Normal Limits .

Description	Status	Start Date	End Date
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Donepezil HCl ,10 MG TABS, TAKE ONE TABLET BY MOUTH EVERY NIGHT AT BEDTIME, Quantity: 30, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-07-13
HydroCHLORothiazide ,25 MG TABS, TAKE ONE TABLET BY MOUTH DAILY, Quantity: 30, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-07-13
Furosemide ,20 MG TABS, Take One Tablet By Mouth Twice A Day, Quantity: 180, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-05-31
FLUoxetine HCl ,20 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-03-15
Temazepam ,30 MG CAPS, TAKE ONE CAPSULE BY MOUTH EVERY NIGHT AT BEDTIME, Quantity: 30, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-03-15
Baclofen ,10 MG TABS, Take 1 Tablet By Mouth Twice Daily, Quantity: 60, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-03-15
Temazepam ,30 MG CAPS, TAKE ONE CAPSULE BY MOUTH EVERY NIGHT AT BEDTIME, Quantity: 30, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-02-22
Donepezil HCl ,10 MG TABS, QHS, Quantity: 30, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-01-11
Furosemide ,20 MG TABS, Take One Tablet By Mouth Twice A Day, Quantity: 180, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-01-11
Simvastatin ,10 MG TABS, TAKE 1 TABLET DAILY AT BEDTIME, Quantity: 90, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-01-11
Baclofen ,10 MG TABS, Take 1 Tablet By Mouth Twice Daily, Quantity: 60, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-01-11
Hydrochlorothiazide ,25 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-01-11

## Plan Note:

### Plan Note Status:Finalized

Continue same treatment plan as previous. Reviewed and continue with current medication. 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. Reviewed recent labs with patient. 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.

1. Lumbago with sciatica, continue current plan.
2. Hypertension with vascular complications, continue current plan.
3. Insomnia, continue current plan.
4. Chronic pain syndrome, continue current pain medication.
5. Osteoarthritis with chronic pain, continue current plan.
6. Depression, continue current plan.
7. Dementia, continue current plan.
8. Coronary artery disease, continue current plan.
9. Hyperlipidemia, continue current plan.

Medication refills as follows:

Simvastatin 20 mg q.d.  
 Lasix 20 mg q.d.  
 Temazepam 30 mg q.d.  
 Hydrochlorothiazide 25 mg q.d.  
 Donepezil 10 mg q.d.  
 Flouexetine 20 mg q.d.

## Medical Problem:

Description	Status	Start Date	End Date
Lumbago with sciatica, unspecified side ( ICD10:M54.40 Lumbago with sciatica, unspecified side) Unknown or N/A	Active	2016-08-04	
Chronic pain syndrome ( ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-08-04	
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	2016-06-28	
Unspecified dementia without behavioral disturbance ( ICD10:F03.90 Unspecified dementia without behavioral disturbance) Unknown or N/A	Active	2016-05-24	
Primary generalized (osteo)arthritis ( ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2016-04-19	
Polyosteoarthritis, unspecified ( ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2016-04-19	
Nicotine dependence, unspecified, uncomplicated ( ICD10:F17.200 Nicotine dependence, unspecified, uncomplicated) Unknown or N/A	Active	2016-04-19	
Heart failure, unspecified ( ICD10:I50.9 Heart failure, unspecified) Unknown or N/A	Active	2016-03-15	
Unilateral primary osteoarthritis, unspecified knee ( ICD10:M17.10 Unilateral primary osteoarthritis, unspecified knee) Unknown or N/A	Active	2016-02-27	
Other speech and language deficits following unspecified cerebrovascular disease ( ICD10:I69.928 Other speech and language deficits following unspecified cerebrovascular disease) Unknown or N/A	Active	2016-02-27	
Unspecified abnormalities of gait and mobility ( ICD10:R26.9 Unspecified abnormalities of gait and mobility) Unknown or N/A	Active	2016-02-27	
Other intervertebral disc degeneration, lumbar region ( ICD10:M51.36 Other intervertebral disc degeneration, lumbar region) Unknown or N/A	Active	2016-02-27	
Pure hypercholesterolemia ( ICD10:E78.0 Pure hypercholesterolemia) Unknown or N/A	Active	2016-02-27	
Bilateral primary osteoarthritis of knee ( ICD10:M17.0 Bilateral primary osteoarthritis of knee) Unknown or N/A	Active	2015-12-29	

Essential (primary) hypertension ( ICD10:I10 Essential (primary) hypertension) 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
Other chronic pain ( ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2015-11-23
Insomnia, unspecified ( ICD10:G47.00 Insomnia, unspecified) Unknown or N/A	Active	2015-11-23
Major depressive disorder, single episode, unspecified ( ICD10:F32.9 Major depressive disorder, single episode, unspecified) Unknown or N/A	Active	2015-11-23
Benign essential hypertension ( ICD9:401.1 Benign essential hypertension) Unknown or N/A	Active	2015-09-09
Other chronic pain ( ICD9:338.29 Other chronic pain) Unknown or N/A	Active	2015-09-09
Other and unspecified hyperlipidemia ( ICD9:272.4 Other and unspecified hyperlipidemia) Unknown or N/A	Active	2015-09-09
Insomnia, unspecified ( ICD9:780.52 Insomnia, unspecified) Unknown or N/A	Active	2015-09-09
Late effects of cerebrovascular disease, other speech and language deficits ( ICD9:438.19 Late effects of cerebrovascular disease, other speech and language deficits) Unknown or N/A	Active	2015-08-31
Unspecified essential hypertension ( ICD9:401.9 Unspecified essential hypertension) Unknown or N/A	Active	2015-08-31
Depressive disorder, not elsewhere classified ( ICD9:311 Depressive disorder, not elsewhere classified) Unknown or N/A	Active	2015-08-31

## Allergies:

Description	Status	Start Date	End Date
No known drug allergies. Unknown or N/A	Active		

## Surgeries:

Description	Status	Start Date	End Date
PEG tube removal Unknown or N/A	Active		
Hysterectomy Unknown or N/A	Active		
Back surgery for fracture Unknown or N/A	Active		
Left ankle surgery 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:** Med Plus Home Healthcare, Inc.

**Primary Justification Medical Conditions:** hyperlipidemia,HTN,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:** Skilled nursing needed due to deaf/mute, dementia and inability to self medicate currently.

**Certification Statement:** Patient is home bound due to chronic pain and dementia. Patient cannot be left unattended due to wandering behavior and extremely poor cognition.

**Signed by (NP):** 302

**Signed On (NP):** 2016-09-07 05:10

**Signed By (Physician):** 18

**Signed on (Physician):** 2016-09-14 05:10

**Form\_status:** finalized

**Printed:**



Electronically Signed by **Darolyn Perkins** on **2016-09-14**.

Printed on 23-Oct-2016 22:27:08 pm.