Joseph Bailey: Patient Information

Patient Record Number:6198

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: Joseph Bailey External ID: 6198 **DOB**: 1955-08-06 Sex: Male **S.S.:** 456-13-1250

Address: 1239 Hartsdale Drive

City: Dallas State: Texas Postal Code: 75211 Country: USA

Mobile Phone: 214-710-6348 Street Address: 1239 Hartsdale Drive Apt/Suite/Other: Bdlg#2 Apt#102

Past Medical History:

Last Recorded On: 11-05-2016.

Risk Factors: Insomnia.

Family History:

Last Recorded On: 11-05-2016.

Father: Father died of hypertension and cerebrovascular accident..

Mother: Mother is alive and complains of asthma..

Siblings: One sister..

Offspring: Children are unknown..

Other Family Relative: Influenza, tetanus, pneumovax and PPD in 2015...

Primary Family Med Conditions:

Last Recorded On: 11-05-2016.

Chronic Conditions: Asthma, Hypertension, Stroke / Transient Ischemic Attack.

Social History:

Last Recorded On: 11-05-2016.

Tobacco: Never smoker No smoking. Status: Never

Alcohol: No alcohol. Status: Never

Recreational Drugs: Uses heroin and heparin. Status: Current

Nutrition History: Regular..

Developmental History: Education level is +2 college...

Tests and Exams:

Last Recorded On: 11-05-2016.

Insurance:

Medicare B Texas (SMTX0)

Priority: Primary Start Date: 2012-06-01 Relationship to Insured: Self

Type: N/A
Payer: Medicare B Texas (SMTX0)

Copay: Insured ID Number: 456131250A Group Number: Employer Name: Joseph Bailey

Immunizations:

Joseph Bailey: Chief Complaint Patient Record Number:6198

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> Seen by Darolyn Perkins Seen on 08-September-2016

Chief Complaint Status: finalized

Follow up home visit for management of the following chronic medical conditions of diabetes mellitus type 2 with neuropathy, hypertension with vascular complications, chronic obstructive pulmonary disease/asthma, chronic kidney disease stage- III, hyperlipidemia, osteoarthritis with hip pain, schizophrenia, depression, insomnia and coronary artery disease. Patient complains of shortness of breath upon exertion.

History of Present illness:

HPI Status:Finalized

A 61-year-old African American male in NAD with multiple chronic conditions of the following: diabetes mellitus type 2 with neuropathy, hypertension with vascular complications, chronic obstructive pulmonary disease/asthma, chronic kidney disease stage-3, hyperlipidemia, osteoarthritis with hip pain, schizophrenia, depression, insomnia and coronary artery disease. Patient is on home oxygen at 3L continuously but complains of shortness of breath upon exertion. Patient also has chronic pain in knees, shoulders and hands. Patient does not currently have any pain upon examination. Patient denies any other issues upon examination. Patient denies any hypoglycemic episodes and a foot check revealed no major issues. Patient denies any chest pain, headaches or nausea vomiting at this time.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-09-08	143	115	253.00	70.00	8.00	18.00	~	36.3	0.00

Review of Systems:

Constitutional:

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No. Philippidia History

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No Blood In Stool

Physical Exam:

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NEBRO:

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NECK:

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BACK:

Normal Curvature, Tenderness-Within Normal Limits .

CV

RRR-Within Normal Limits .

RESP.

Lungs CTAB-Within Normal Limits .

Respirator Effort Unlabored-Within Normal Limits .

Plan Note:

Plan Note Status: Finalized

Continue same treatment plan as previous provided. Reviewed and continue same medications, no new medications noted in 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 emergency room for symptoms of chest pain, shortness of breath, excessive headache, blurry vision or systolic blood pressure greater than 200. The patient verbalize understanding of the above plan and was given the office number for any questions or concerns. Prognosis is fair and patient is stable.

- 1. Hypertension with vascular complications continue current plan.
- 2. Diabetes mellitus type 2 with neuropathy continue current plan.
- 3. Chronic obstructive pulmonary disease/asthma continue current plan.
- 4. Chronic kidney disease stage-III, continue current plan.
- 5. Osteoarthritis with chronic pain, continue current plan.
- 6. Chronic pain syndrome, continue current pain medication.
- 7. Schizophrenia, continue current plan.
- 8. Depression, continue current plan.
- 9. Insomnia, continue current plan.
- 10. Coronary artery disease.

Refill medication is Symbicort 160/4.5 and insulin needles

Medical Problem:

Description	Status	Start Date	End Date
Diabetes mellitus due to underlying condition with diabetic polyneuropathy (ICD10:E08.42 Diabetes mellitus due to underlying condition with diabetic polyneuropathy) Unknown or N/A	Active	2016-08-01	
Benign essential hypertension (ICD10:110 Essential (primary) hypertension) Unknown or N/A	Active	2016-08-01	
Chronic obstructive pulmonary disease with (acute) exacerbation (ICD10:J44.1 Chronic obstructive pulmonary disease with (acute) exacerbation) Unknown or N/A	Active	2016-08-01	
Type 2 diabetes mellitus without complications (ICD10:E11.9 Type 2 diabetes mellitus without complications) Unknown or N/A	Active	2016-07-14	
Major depressive disorder, single episode, unspecified (ICD10:F32.9 Major depressive disorder, single episode, unspecified) Unknown or N/A	Active	2016-07-14	
Insomnia, unspecified (ICD10:G47.00 Insomnia, unspecified) Unknown or N/A	Active	2016-07-14	
Chronic venous hypertension (idiopathic) without complications of unspecified lower extremity (ICD10:187.309 Chronic venous hypertension (idiopathic) without complications of unspecified lower extremity) Unknown or N/A	Active	2016-06-08	
Type 2 diabetes mellitus with diabetic neuropathy, unspecified (ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2016-06-08	
Chronic obstructive pulmonary disease, unspecified (ICD10:J44.9 Chronic obstructive pulmonary disease, unspecified) Unknown or N/A	Active	2016-06-08	

Unspecified asthma, uncomplicated (ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2016-06-08
Chronic kidney disease, stage 3 (moderate)		
(ICD10:N18.3 Chronic kidney disease, stage 3 (moderate))	Active	2016-06-08
Unknown or N/A		

Allergies:

Description	Status	Start Date	End Date
Penicillin.	Active	2016-06-08	
Unknown or N/A	Active	2010-00-00	

Surgeries:

Description	Status	Start Date	End Date	
Hospitalized at Baylor in 2016 for COPD.	Active	2016-06-08		
Unknown or N/A	710070	2010 00 00		

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: LG Charity Home Health

Primary Justification Medical Conditions: Kidney_Disease,hyperlipidemia,Schizophrenia,HTN,diabetes,COPD

Additional Medical Conditions: Insomnia, Chronic Pain Syndrome, coronary artery disease.

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: Patient is homebound due to mental illness and the inability to self medicate

correctly

Certification Statement: Skilled nursing is needed due to mental illness and the inability to self medicate correctly.

Signed by (NP): 302

Signed On (NP): 2016-09-08 05:16 **Signed By (Physician):** 18

Signed on (Physician): 2016-09-15 05:16

Form_status: finalized

Printed:



Electronically Signed by Darolyn Perkins on 2016-09-15.

Printed on 06-Nov-2016 17:40:09 pm.