Jeffrey Sanders: Patient Information

Patient Record Number:2144

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: Jeffrey Sanders External ID: 2144 **DOB**: 1958-07-09 Sex: Male **S.S.**: 435-11-0143 Marital Status: Single

Patient Drive Folder: https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B0Q2MIHiECb5eFlsekpNRU5ZY1U

Address: 3200 S Lancaster Rd

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

Home Phone: 469-463-0018

Street Address: 3200 S Lancaster Rd

Past Medical History:

Last Recorded On: 12-04-2016.

Additional Medical History: General weakness..

Family History:

Last Recorded On: 12-04-2016.

Father: Unknown.. Mother: Unknown.. Siblings: Unknown.. Offspring: Unknown...

Social History:

Last Recorded On: 12-04-2016.

Tobacco: Current every day smoker Smokes 1 pack per day Status: Current

Coffee: Status: N/A

Alcohol: No alcohol. Status: Never

Recreational Drugs: No drugs. Status: Never

Nutrition History: Regular.. Developmental History: Well.. Work Status: Disabled.

Other History: Influenza November 2015...

Tests and Exams:

Last Recorded On: 12-04-2016.

Insurance:

Medicare B Texas (SMTX0)

Priority: Primary Start Date: 1983-02-01 Relationship to Insured: Self

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

Copay: Insured ID Number: 435110143A Group Number: Employer Name: Jeffrey Sanders

Immunizations:

Medication:

Description	Status	Start Date	End Date
AmLODIPine Besylate ,10 MG TABS, TAKE 1 TABLET DAILY FOR BLOOD PRESSURE, Quantity: 90, Refill Quantity: 1			
Unknown or N/A	Active	2016-04-04	
by Jones, Derrick - MJ3217331			
Texas Physician House Calls			
AmLODIPine Besylate ,10 MG TABS, TAKE 1 TABLET TWICE DAILY FOR BLOOD PRESSURE, Quantity: 60, Refill Quantity: 0			
Unknown or N/A	Active	2015-05-24	
by Jones, Derrick - MJ3217331			
Texas Physician House Calls			
AmLODIPine Besylate ,10 MG TABS, TAKE 1 TABLET DAILY FOR BLOOD PRESSURE, Quantity: 90, Refill Quantity: 2			
Unknown or N/A	Active	2015-01-23	
by Jones, Derrick - MJ3217331			
Texas Physician House Calls			

Medical Problem:

Description	Status	Start Date	End Date
Essential (primary) hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-02	
Hypothyroidism, unspecified (ICD10:E03.9 Hypothyroidism, unspecified) Unknown or N/A	Active	2015-10-02	
Epilepsy, unspecified, not intractable, without status epilepticus (ICD10:G40.909 Epilepsy, unspecified, not intractable, without status epilepticus) Unknown or N/A	Active	2015-10-02	
Schizophrenia, unspecified (ICD10:F20.9 Schizophrenia, unspecified) Unknown or N/A	Active	2015-10-02	
Thyrotoxicosis without mention of goiter or other cause, and without mention of thyrotoxic crisis or storm (ICD10:E05.90 Thyrotoxicosis, unspecified without thyrotoxic crisis or storm) Unknown or N/A	Active	2015-10-01	
Epilepsy, unspecified, without mention of intractable epilepsy (ICD10:G40.909 Epilepsy, unspecified, not intractable, without status epilepticus) Unknown or N/A	Active	2015-10-01	
Disorganized type schizophrenia, chronic (ICD10:F20.1 Disorganized schizophrenia) Unknown or N/A	Active	2015-10-01	
Unspecified schizophrenia, unspecified (ICD10:F20.9 Schizophrenia, unspecified) Unknown or N/A	Active	2015-10-01	
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01	
Generalized nonconvulsive epilepsy, without mention of intractable epilepsy (ICD10:G40.A01 Absence epileptic syndrome, not intractable, with status epilepticus) Unknown or N/A	Active	2015-10-01	

Unspecified acquired hypothyroidism (ICD10:E03.9 Hypothyroidism, unspecified) Unknown or N/A	Active	2015-10-01
Simple type schizophrenia, unspecified (ICD10:F20.89 Other schizophrenia) Unknown or N/A	Active	2015-10-01
Coronary atherosclerosis of unspecified type of vessel, native or graft (ICD10:I25.10 Atherosclerotic heart disease of native coronary artery without angina pectoris) Unknown or N/A	Active	2015-10-01
Tobacco use disorder (ICD9:305.1 Tobacco use disorder) Unknown or N/A	Active	

Allergies:

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

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