### Janie Mccoy: Patient Information

Patient Record Number:6230

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: Janie D Mccoy External ID: 6230 **DOB**: 1942-05-06 Sex: Female **S.S.**: 450-64-1065

User Defined: (469)274-9884 Angela Care giver

Address: 2755 E Ledbetter Dr

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

**Mobile Phone:** 214-779-0976 Street Address: 2755 E Ledbetter Dr

Apt/Suite/Other: 1203

# **Past Medical History:**

Last Recorded On: 01-07-2017.

Risk Factors: Heart Burn, Reflux, GERD, Neuropathy.

# **Family History:**

Last Recorded On: 01-07-2017.

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

# **Social History:**

Last Recorded On: 01-07-2017.

Tobacco: Never smoker No smoking. Status: Never

Alcohol: No alcohol use. Status: Never

Recreational Drugs: No drug abuse. Status: Never

Counseling: **Exercise Patterns: Hazardous Activities:** Sleep Patterns: 6-7 hours. Seatbelt Use: Yes. Work Status: Disabled.

### Insurance:

Medicare B Texas (SMTX0)

Priority: Primary Start Date: 2007-05-01 Relationship to Insured: Self Type: N/A Payer: Medicare B Texas (SMTX0)

Copay : Insured ID Number : 450641065D Group Number : Employer Name : Janie Mccoy

# **Immunizations:**

Janie Mccoy: Chief Complaint Patient Record Number:6230 Texas Physician House Calls (H)

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Seen by Derrick Love-Jones Seen on 27-September-2016

### Chief Complaint Status: finalized

Follow-up home visit to prevent further decline of the following chronic medical conditions of diabetes, hypertension, gastroesophageal reflux disease, neuropathy, glaucoma, chronic obstructive pulmonary disease, edema of lower extremities, and allergic rhinitis. Patient complains of shortness of breath.

# **History of Present illness:**

#### **HPI Status:**Finalized

Patient is a 74-year-old female in NAD with multiple chronic diseases of diabetes, hypertension, gastroesophageal reflux disease, neuropathy, glaucoma, chronic obstructive pulmonary disease, edema of lower extremities, and allergic rhinitis. Patient states that she has had a very difficult time catching her breath. Patient states that this has been going in for 2 days. Patient denies any of symptoms. Patient is a smoker and admits to smoking several cigarettes per day. Patient denies any other issues upon examination. Patient denies any hypoglycemic episodes recently at a foot check revealed no major issues. Patient denies any chest pain, severe headaches or nausea/vomiting recently.

### Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	ВМІ	Head circ
2016-09-27	99	52	104.00	62.00	98.20	16.00	~	19.0	0.00

## **Review of Systems:**

### Eyes:

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## **Physical Exam:**

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#### RISHSCH:

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#### ENT:

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#### NECK:

Supple, Thyromegaly, Carotid of the Nasal Septum, JVD, lymphadenopathy-Within Normal Limits .

#### CV:

RRR-Within Normal Limits .

#### RESP:

Lungs Clear, Rales, Rhonchi, Wheezes-Within Normal Limits .

#### GI:

Soft, Non Tender, Non Distended, Masses-Within Normal Limits .

Bowel Sounds present in all four quadrants-Within Normal Limits .

## **Medication:**

Description	Status Start Date	End Date

Lancets Ultra Fine , MISC, CHECK BLOOD GLUCOSE TWICE PER DAY, Quantity: 200, Refill Quantity: 6 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-09-30
Lasix ,20 MG TABS, TAKE 1 TABLET BY MOUTH EVERY DAY, Quantity: 30, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-09-30
NovoLOG ,100 UNIT/ML SOLN, TAKE 5 UNITS IN THE MORNING TAKE 20 UNITS IN THE EVENING, Quantity: 20, Refill Quantity: 6 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-09-30
Zenpep ,5000 UNIT CPEP, TAKE 1 CAPSULE 3 TIMES DAILY, Quantity: 90, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-09-30

### **Plan Note:**

### Plan Note Status:Finalized

Continue same treatment plan as previous. Reviewed and continue same medications, no new medications noted 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 ER for symptoms of chest pain, shortness of breath, excessive headache, blurry vision or systolic blood pressure greater than 200. Patient encouraged to exercise daily as tolerated. No labs needed this visit. The patient verbalized understanding of the above plan and was given the office number for any questions or concerns. Prognosis is fair and patient is stable.

- 1. Chronic obstructive pulmonary disease, continue current plan.
- 2. Hypertension with vascular complications, continue current plan.
- $\label{eq:continue} \textbf{3. Diabetes mellitus type 2 with neuropathy, continue current plan.}$
- 4. Gastroesophageal reflux disease, continue current plan.
- 5. Neuropathy, continue current plan.
- 6. Allergic rhinitis, continue current plan.
- 7. Edema of lower extremities, continue to monitor.

Medication refills as follows:

Diabetes Lancets.

Novolog 5 units a.m., 20 units p.m.

Megestrol Ascetate.

Lasix 20 mg q.d.

Zenoep 5000 mg t.i.d.

# **Medical Problem:**

Description	Status	Start Date	End Date
Chronic obstructive pulmonary disease, unspecified (ICD10:J44.9 Chronic obstructive pulmonary disease, unspecified) Unknown or N/A	Active	2016-09-27	
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	2016-09-27	
Type 2 diabetes mellitus with diabetic neuropathy, unspecified (ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2016-09-27	
Nicotine dependence, unspecified, uncomplicated (ICD10:F17.200 Nicotine dependence, unspecified, uncomplicated) Unknown or N/A	Active	2016-09-27	
Type 2 diabetes mellitus without complications (ICD10:E11.9 Type 2 diabetes mellitus without complications) Unknown or N/A	Active	2016-07-14	

Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2016-07-14
Other disorders of peripheral nervous system (ICD10:G64 Other disorders of peripheral nervous system) Unknown or N/A	Active	2016-07-14
Gastro-esophageal reflux disease without esophagitis (ICD10:K21.9 Gastro-esophageal reflux disease without esophagitis) Unknown or N/A	Active	2016-07-14
Allergic rhinitis, unspecified (ICD10:J30.9 Allergic rhinitis, unspecified) Unknown or N/A	Active	2016-07-14
Unspecified open-angle glaucoma, stage unspecified (ICD10:H40.10X0 Unspecified open-angle glaucoma, stage unspecified) Unknown or N/A	Active	2016-07-01
Type 2 diabetes mellitus with other diabetic ophthalmic complication (ICD10:E11.39 Type 2 diabetes mellitus with other diabetic ophthalmic complication) Unknown or N/A	Active	2016-07-01
Other hereditary and idiopathic neuropathies ( ICD10:G60.8 Other hereditary and idiopathic neuropathies) Unknown or N/A	Active	2016-07-01
Chronic obstructive pulmonary disease with (acute) exacerbation (ICD10:J44.1 Chronic obstructive pulmonary disease with (acute) exacerbation) Unknown or N/A	Active	2016-07-01

### **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: Cataract, diabetes, HTN

Additional Medical Conditions: Neuropathy, edema

Nursing Required: YES Physical Therapy: NO

Occupational Therapy Required: NO Speech-language Pathology Required: NO

Clinical Findings To Justify Home Health: Skilled nursing needed due to multiple complex diseases and patient lack of knowledge on how to manage the disease process. Skilled nursing needed to assess and observe patient's condition and monitor blood sugars.

Certification Statement: Patient is home bound due to weakness, fatigue and diminished sensation in both feet cause patient to

be at risk for falls.

Signed by (NP): 16

**Signed On (NP):** 2016-09-27 04:44 **Signed By (Physician):** 18

Signed on (Physician): 2016-10-04 04:44

Form\_status: finalized

### **Procedure Order:**

Patient ID	6230	Order ID	987
Patient Name	Mccoy, Janie D	Ordered By	Love-Jones, Derrick
Order Date	2017-01-07	Print Date	2017-01-07
Order Status	complete	Encounter Date	2017-01-07
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2017-01-07		Final ✓		0097	Pulse Oximetry	No	97	97% to 100%		



Electronically Signed by **Derrick Love-Jones** on **2016-10-03**.

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