

**Clifford Johnson: Patient Information**  
Patient Record Number:5456

**Texas Physician House Calls (H)**  
2925 Skyway Circle North, Irving, TX, USA, 75038-3510  
www.texas-housecalls.com, Phone:(972) 675-7313, Fax:(972) 675-7310,  
Email:hhsupport@texas-housecalls.com

**Name:** Clifford Johnson

**External ID:** 5456

**DOB:** 1971-02-26

**Sex:** Male

**S.S.:** 451-49-0941

**Patient Drive Folder:** <https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B-x5JZCm9BpXQ25NX1cwM2VfSHM>

**Address:** 3200 South Lancaster Road

**City:** Dallas

**State:** Texas

**Postal Code:** 75216

**Country:** USA

**Home Phone:** 214-942-5216

**Street Address:** 3200 South Lancaster Road

## Past Medical History:

**Last Recorded On:** 07-21-2016.

**Risk Factors:** GERD,Seizures.

## Family History:

**Last Recorded On:** 07-21-2016.

**Father:** Father died of coronary artery disease..

**Mother:** Mother died of end-stage renal disease..

## Social History:

**Last Recorded On:** 07-21-2016.

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

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

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

**Nutrition History:** ADA diet..

**Other History:** Influenza in 2014..

## Tests and Exams:

**Last Recorded On:** 07-21-2016.

**Vitamin D (6 mo if on pills)** Abnormal Done on 02/18/2015 at Evolution Health Laboratory Services, ordered by Dr. Sumana Ketha

**TSH Thyroid-Stimulating Hormone (every year)** Normal Done on 02/18/2015 at Evolution Health Laboratory Services, ordered by Dr. Sumana Ketha

**CBC Complete Blood Count (3 months)** Abnormal Done on 02/18/2015 at Evolution Health Laboratory Services, ordered by Dr. Sumana Ketha

**CMP Comprehensive Metabolic Panel (3 months)** Abnormal Done on 02/18/2015 at Evolution Health Laboratory Services, ordered by Dr. Sumana Ketha

**LIPIDS (once year unless chol meds)** N/A Done on 02/18/2015 at Evolution Health Laboratory Services, ordered by Dr. Sumana Ketha

**UA - Urinalysis - (Yearly - HH primary responsibility)** Normal Done on 02/18/2015 at Evolution Health Laboratory Services, ordered by Dr. Sumana Ketha

**Prostate Exam** N/A done

## Insurance:

### Advantage by Superior HealthPlan (68069)

**Priority :** Primary  
**Start Date :** 2010-01-01  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Advantage by Superior HealthPlan (68069)  
**Priority :** Primary  
**Start Date :** 2016-07-01  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Medicare B Texas (SMTX0)  
**Priority :** Secondary  
**Start Date :** 2010-01-01  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Superior Health Plan Texas (39188)  
**Priority :** Secondary  
**Start Date :** 2015-05-01  
**Relationship to Insured :** Self  
**Type :** N/A  
**Payer :** Superior Health Plan Texas (39188)

**Copay :**  
**Insured ID Number :** C0007471101  
**Group Number :**  
**Employer Name :** Clifford Johnson  
**Copay :**  
**Insured ID Number :** 451490941A  
**Group Number :**  
**Employer Name :** Clifford Johnson  
**Copay :**  
**Insured ID Number :** 508756293  
**Group Number :**  
**Employer Name :** Clifford Johnson  
**Copay :**  
**Insured ID Number :** 508756293  
**Group Number :**  
**Employer Name :** Clifford Johnson

## Immunizations:

**Clifford Johnson: Chief Complaint**  
Patient Record Number:5456

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**Seen by** Derrick Love-Jones  
**Seen on** 15-July-2016

**Chief Complaint Status:**finalized

Follow up home visit for management of benign prostate hypertrophy, depression, hypertension, diabetes mellitus type 2, chronic kidney disease stage 4, seizure disorder, bipolar, neuropathy, peripheral vascular disease, schizophrenia, and gastroesophageal reflux disease. Patient continues to complain of foot pain.

## History of Present illness:

**HPI Status:**Finalized

A 45-year-old African American male in no acute distress with multiple chronic conditions of benign prostate hypertrophy, depression, hypertension, diabetes mellitus type 2, chronic kidney disease stage 4, seizure disorder, bipolar, neuropathy, peripheral vascular disease, schizophrenia, and gastroesophageal reflux disease. Patient continues to complain of foot pain in both feet. He states that it is like pins, needles and tingling. Patient rates pain 6/10. Patient denies any chest pain, headache, nausea or vomiting recently.

## Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-07-15	122	85	160.00	61.00	97.60	20.00	~	30.2	0.00

## Review of Systems:

**Constitutional:**

**General:** No weight loss

No fatigue

No fevers or chills

No night sweats

No anorexia

No change in libido

No change in hair or skin

No change in voice

No bleeding gums

No edema

No use of dentures

## Physical Exam:

**HEENT:**

Head: No tenderness or swelling. Neck: No tenderness or swelling. Eyes: No redness or swelling. Ears: No tenderness or swelling. Nose: No tenderness or swelling. Throat: No tenderness or swelling.

**HEENT:**

Head: No tenderness or swelling. Neck: No tenderness or swelling. Eyes: No redness or swelling. Ears: No tenderness or swelling. Nose: No tenderness or swelling. Throat: No tenderness or swelling.

**CV:**

Heart: No tenderness or swelling. Lungs: No tenderness or swelling.

Murmur, Rubs, Gallops-Within Normal Limits .

## Plan Note:

**Plan Note Status:**Finalized

1. Hypertension with vascular complications, educated the patient to have low-salt, low-fat, and low-cholesterol diet and exercise.
2. Epilepsy, continue current plan.
3. Diabetes mellitus type 2 with neuropathy, stable.
4. Chronic kidney disease stage-3, continue current plan.
5. Neuropathy, continue to monitor.
6. Depression, well controlled on medications.

7. Schizophrenia, continue current plan.
8. Bipolar, continue current plan.
9. Gastroesophageal reflux disease, continue current plan.
10. No medication refills needed this visit.
11. Medication adherence was given to the patient. Continue treatment as planned.
12. Patient was given card with number to the office for any questions or concerns. Patient was instructed to go to emergency room for any life threatening emergency. Patient verbalized understanding of the above plan.
13. Reviewed old records of the patient.
14. Follow up appointment in 4-6 weeks.

## Medical Problem:

Description	Status	Start Date	End Date
Diabetes mellitus without mention of complication, type II or unspecified type, not stated as uncontrolled ( ICD10:E11.9 Type 2 diabetes mellitus without complications) Unknown or N/A	Active	2015-10-01	
Benign essential hypertension ( ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01	
Depressive disorder, not elsewhere classified ( ICD10:F32.9 Major depressive disorder, single episode, unspecified) Unknown or N/A	Active	2015-10-01	
Chronic kidney disease, unspecified ( ICD10:N18.9 Chronic kidney disease, unspecified) Unknown or N/A	Active	2015-10-01	
Unspecified essential hypertension ( ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01	
Diabetes with neurological manifestations, type II or unspecified type, uncontrolled ( ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2015-10-01	
Polyneuropathy in diabetes ( ICD10:E08.42 Diabetes mellitus due to underlying condition with diabetic polyneuropathy) Unknown or N/A	Active	2015-10-01	
Acute venous embolism and thrombosis of unspecified deep vessels of lower extremity ( ICD10:I82.409 Acute embolism and thrombosis of unspecified deep veins of unspecified lower extremity) Unknown or N/A	Active	2015-10-01	
Unspecified schizophrenia, unspecified ( ICD10:F20.9 Schizophrenia, unspecified) Unknown or N/A	Active	2015-10-01	
Hypertensive chronic kidney disease, malignant, with chronic kidney disease stage I through stage IV, or unspecified ( ICD10:I12.9 Hypertensive chronic kidney disease with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease) ( ICD10:N18.9 Chronic kidney disease, unspecified) Unknown or N/A	Active	2015-10-01	
Bipolar I disorder, most recent episode (or current) depressed, unspecified ( ICD10:F31.30 Bipolar disorder, current episode depressed, mild or moderate severity, unspecified) Unknown or N/A	Active	2015-10-01	
Other convulsions ( ICD10:R56.9 Unspecified convulsions) Unknown or N/A	Active	2015-10-01	
Esophageal reflux ( ICD10:K21.9 Gastro-esophageal reflux disease without esophagitis) Unknown or N/A	Active	2015-10-01	
Unspecified schizophrenia, unspecified ( ICD10:F20.9 Schizophrenia, unspecified) Unknown or N/A	Active	2015-10-01	
Hypertrophy (benign) of prostate without urinary obstruction and other lower urinary tract symptom (LUTS) ( ICD9:600.00 Hypertrophy (benign) of prostate without urinary obstruction and other lower urinary tract symptom (LUTS)) Unknown or N/A	Active		

Epilepsy, unspecified, without mention of intractable epilepsy ( ICD9:345.90 Epilepsy, unspecified, without mention of intractable epilepsy) Unknown or N/A	Active
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## Allergies:

Description	Status	Start Date	End Date
phenobarbital 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:** Prosperity Health Services

**Primary Justification Medical Conditions:**

Hyperplasia,bipolar,Kidney\_Disease,Depression,diabetes,Epilepsy,HTN,Schizophrenia

**Additional Medical Conditions:** GERD

**Nursing Required:** YES

**Physical Therapy:** NO

**Occupational Therapy Required:** NO

**Speech-language Pathology Required:** NO

**Clinical Findings To Justify Home Health:** SN needed due to mental illness and inability to self medicate currently. Patient has mental illness which requires medication management and inventory.

**Certification Statement:** Patient is home bound due to schizophrenia. Patient experiences confusion and is unable to leave home safely alone. Patient is too disoriented to leave home safely by himself.

**Signed by (NP):** 16

**Signed On (NP):** 2016-07-15 02:58

**Signed By (Physician):** 18

**Signed on (Physician):** 2016-07-21 02:58

**Form\_status:** finalized

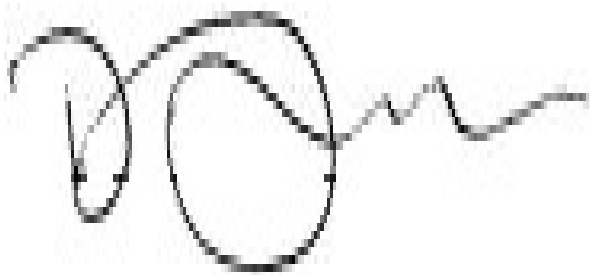
## DME:

Description	Status	Start Date	End Date
Diabetes mellitus without mention of complication, type II or unspecified type, not stated as uncontrolled ordered diabetic supplies from CCS Medical. ( ICD9:250.00 Diabetes mellitus without mention of complication, type II or unspecified type, not stated as uncontrolled) Unknown or N/A	Active		
Gloves Unknown or N/A by Dr. Sumana Ketha	Active		
Thermometer Covers Unknown or N/A by Dr. Sumana Ketha	Active		

## Procedure Order:

Patient ID	5456	Order ID	725
Patient Name	Johnson, Clifford	Ordered By	Love-Jones, Derrick
Order Date	2016-08-19	Print Date	2016-08-19
Order Status	complete	Encounter Date	2016-08-19
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2016-08-19		Final ✓		0097	Pulse Oximetry	No	98%	97% to 100%		

A handwritten signature in black ink, featuring a large, stylized 'D' followed by a series of loops and a wavy line extending to the right.

Electronically Signed by **Derrick Love-Jones** on **2016-07-21**.

Printed on 19-Aug-2016 20:12:15 pm.