

Marthalene Thompson: Patient Information
Patient Record Number:6122

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: Marthalene Thompson
External ID: 6122
DOB: 1964-02-18
Sex: Female
S.S.: 466314956
User Defined: 469-865-7122
Patient Drive Folder: In between 7-9 or after 3:30 everyday

Address: 3112 Zinnia Court
City: Plano
State: Texas
Postal Code: 75075
Country: USA
Emergency Phone: 214-402-0076
Home Phone: 469-781-3700
Work Phone: 469-865-7122
Mobile Phone: 469-863-1119
Street Address: 3112 Zinnia Court
Apt/Suite/Other: House

Family History:

Last Recorded On: 07-26-2016.
Father: Unknown.
Mother: Unknown.
Siblings: Unknown.

Social History:

Last Recorded On: 07-26-2016.
Tobacco: No smoking **Status:** Never
Alcohol: No alcohol **Status:** Never
Recreational Drugs: No drugs **Status:** Never
Nutrition History: Regular.
Developmental History: Well.
Other History: Influenza November 2015..

Insurance:

Superior Health Plan Texas (39188)

Priority : Primary
Start Date : 2015-03-01
Relationship to Insured : Self
Type : N/A
Payer : Superior Health Plan Texas (39188)

Copay :
Insured ID Number : 250350602
Group Number :
Employer Name : Marthalene Thompson

Immunizations:

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Description	Status	Start Date	End Date
TRUEtest Test , STRP, USE TO TEST GLUCOSE THREE TIMES DAILY, Quantity: 270, Refill Quantity: 0			
Unknown or N/A	Active	2016-07-29	
by ketha, Dr sumana - BK6230281			
Texas Physician House Calls			

Citalopram Hydrobromide ,10 MG TABS, TAKE 1/2 TABLET BY MOUTH EVERY MORNING, Quantity: 15, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-07-07
GNP Alcohol Swabs ,70 % PADS, USE TWICE DAILY PRIOR TO BLOOD SUGAR TEST, Quantity: 200, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-07-07
Levemir FlexTouch ,100 UNIT/ML SOPN, TAKE 40 UNITS PER DAY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-07-07
TRUEtest Test , STRP, USE TO TEST GLUCOSE TWICE DAILY, Quantity: 180, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-06-15
Tylenol ,325 MG TABS, Take One Tablet By Mouth 3 Time A Day, Quantity: 90, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-05-24
Vimpat ,200 MG TABS, TAKE 1 TABLET TWICE DAILY AS DIRECTED, Quantity: 60, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-05-17
Alcohol Pads ,70 % PADS, USE TWICE DAILY PRIOR TO BLOOD SUGAR TEST, Quantity: 200, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-14
Unifine Pentips ,31G X 5 MM MISC, USE BID, Quantity: 200, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-14
Levemir FlexTouch ,100 UNIT/ML SOPN, TAKE 40 UNITS PER DAY, Quantity: 30, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-07
NovoLOG Mix 70/30 FlexPen ,(70-30) 100 UNIT/ML SUPN, Inject SQ daily per sliding scale, Quantity: 30, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-07
NovoLOG Mix 70/30 FlexPen ,(70-30) 100 UNIT/ML SUPN, TAKE 18 UNITS IN MORNING TAKE 25 UNITS IN EVENING, Quantity: 30, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-07
Vimpat ,200 MG TABS, TAKE 1 TABLET TWICE DAILY AS DIRECTED, Quantity: 60, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-04-05
Nystatin ,100000 UNIT/GM POWD, APPLY SPARINGLY TO AFFECTED AREA(S) 3 TIMES A DAY, Quantity: 120, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-01
TraMADol HCl ,50 MG TABS, Take 1 tab every 6 hours as needed for pain, Quantity: 120, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-04-01

<p>Tylenol ,325 MG TABS, TAKE ONE TABLET TWICE A DAY, Quantity: 60, Refill Quantity: 0</p> <p>Unknown or N/A</p> <p>by Jones, Derrick - MJ3217331</p> <p>Texas Physician House Calls</p>	Active	2016-04-01
<p>Aspirin ,81 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 0</p> <p>Unknown or N/A</p> <p>by Jones, Derrick - MJ3217331</p> <p>Texas Physician House Calls</p>	Active	2016-04-01
<p>Aptiom ,400 MG TABS, TAKE 1 TABLET BY MOUTH DAILY, Quantity: 30, Refill Quantity: 2</p> <p>Unknown or N/A</p> <p>by Jones, Derrick - MJ3217331</p> <p>Texas Physician House Calls</p>	Active	2016-03-11
<p>Atorvastatin Calcium ,10 MG TABS, TAKE 1 TABLET AT BEDTIME, Quantity: 30, Refill Quantity: 2</p> <p>Unknown or N/A</p> <p>by Jones, Derrick - MJ3217331</p> <p>Texas Physician House Calls</p>	Active	2016-03-11
<p>Citalopram Hydrobromide ,10 MG TABS, TAKE 1/2 TABLET DAILY IN THE MORNING, Quantity: 15, Refill Quantity: 2</p> <p>Unknown or N/A</p> <p>by Jones, Derrick - MJ3217331</p> <p>Texas Physician House Calls</p>	Active	2016-03-11
<p>Divalproex Sodium ,500 MG TBEC, Take 1 Tablet By Mouth Twice Daily, Quantity: 60, Refill Quantity: 3</p> <p>Unknown or N/A</p> <p>by Jones, Derrick - MJ3217331</p> <p>Texas Physician House Calls</p>	Active	2016-03-11
<p>Furosemide ,40 MG TABS, TAKE ONE TABLET EVERY DAY, Quantity: 30, Refill Quantity: 2</p> <p>Unknown or N/A</p> <p>by Jones, Derrick - MJ3217331</p> <p>Texas Physician House Calls</p>	Active	2016-03-11
<p>Levermir FlexTouch ,100 UNIT/ML SOPN, TAKE 40 UNITS PER DAY, Quantity: 30, Refill Quantity: 6</p> <p>Unknown or N/A</p> <p>by Jones, Derrick - MJ3217331</p> <p>Texas Physician House Calls</p>	Active	2016-03-11
<p>LevETIRAcetam ,500 MG TABS, TAKE 1 TABLET TWICE DAILY, Quantity: 60, Refill Quantity: 3</p> <p>Unknown or N/A</p> <p>by Jones, Derrick - MJ3217331</p> <p>Texas Physician House Calls</p>	Active	2016-03-11
<p>Levothyroxine Sodium ,88 MCG TABS, TAKE 1 TABLET BY MOUTH EVERY MORNING, Quantity: 30, Refill Quantity: 2</p> <p>Unknown or N/A</p> <p>by Jones, Derrick - MJ3217331</p> <p>Texas Physician House Calls</p>	Active	2016-03-11
<p>NovoLOG Mix 70/30 FlexPen ,(70-30) 100 UNIT/ML SUPN, Inject SQ daily per sliding scale, Quantity: 30, Refill Quantity: 6</p> <p>Unknown or N/A</p> <p>by Jones, Derrick - MJ3217331</p> <p>Texas Physician House Calls</p>	Active	2016-03-11
<p>NovoLOG Mix 70/30 FlexPen ,(70-30) 100 UNIT/ML SUPN, TAKE 18 UNITS IN MORNING TAKE 25 UNITS IN EVENING, Quantity: 30, Refill Quantity: 6</p> <p>Unknown or N/A</p> <p>by Jones, Derrick - MJ3217331</p> <p>Texas Physician House Calls</p>	Active	2016-03-11
<p>Potassium Chloride ER ,10 MEQ TBCR, TAKE 1 TABLET DAILY WITH FOOD, Quantity: 90, Refill Quantity: 1</p> <p>Unknown or N/A</p> <p>by Jones, Derrick - MJ3217331</p> <p>Texas Physician House Calls</p>	Active	2016-03-11
<p>Vimpat ,200 MG TABS, TAKE 1 TABLET TWICE DAILY AS DIRECTED, Quantity: 60, Refill Quantity: 2</p> <p>Unknown or N/A</p> <p>by Jones, Derrick - MJ3217331</p> <p>Texas Physician House Calls</p>	Active	2016-03-11

Plan Note:

Plan Note Status:Finalized

1. Edema in feet patient to keep feet elevated during daytime.
2. Congestive heart failure with systolic complications, continue current plan.
3. Epilepsy, continue current plan.
4. Diabetes mellitus type 2 with neuropathy, continue current plan.
5. Hypertension with vascular complications, educated the patient on having low-salt, low-fat, and low-cholesterol diet and exercise.
6. Depression, continue medications.
7. Medication refills as follows; Novolog Flexpen-sliding scale.
8. Medication adherence was given to the patient. Continue treatment as planned.
9. 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.
10. Reviewed old records of the patient.
11. Follow up appointment in 4-6 weeks.

Medical Problem:

Description	Status	Start Date	End Date
Unspecified systolic (congestive) heart failure (ICD10:I50.20 Unspecified systolic (congestive) heart failure) Unknown or N/A	Active	2016-07-15	
Type 2 diabetes mellitus with diabetic neuropathy, unspecified (ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2016-07-15	
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	2016-07-15	
Major depressive disorder, single episode, unspecified (ICD10:F32.9 Major depressive disorder, single episode, unspecified) Unknown or N/A	Active	2016-04-13	
Type 2 diabetes mellitus without complications (ICD10:E11.9 Type 2 diabetes mellitus without complications) Unknown or N/A	Active	2016-03-10	
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2016-03-10	
Epilepsy, unspecified, not intractable, without status epilepticus (ICD10:G40.909 Epilepsy, unspecified, not intractable, without status epilepticus) Unknown or N/A	Active	2016-03-10	
Heart failure, unspecified (ICD10:I50.9 Heart failure, unspecified) Unknown or N/A	Active	2016-03-10	

Allergies:

Description	Status	Start Date	End Date
Penicillin. Unknown or N/A	Active	2016-03-10	

Surgeries:

Description	Status	Start Date	End Date
Thumb Amputation. Unknown or N/A	Active	2016-04-13	
Hospitalized in the ER on 03/2016 for high blood sugar. Unknown or N/A	Active	2016-04-13	

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): 7

Current home health agency: Metrostar Healthcare Svs LLC

Primary Justification Medical Conditions:

Cataract, Depression, diabetes, Epilepsy, Heart_Failure, HTN, hyperlipidemia, Learning_Disabilities, Mobility_Impairments

Additional Medical Conditions: Mental Retardation, Hypothyroidism, Abnormal Gait

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 required on visits due to mental retardation and intellectual disabilities and inability to self medicate correctly.

Certification Statement: Patient needs skilled nursing due to mental retard nation and intellectual disabilities and the inability to self medicate correctly.

Signed by (NP): 16

Signed On (NP): 2016-07-15 03:16

Signed By (Physician): 18

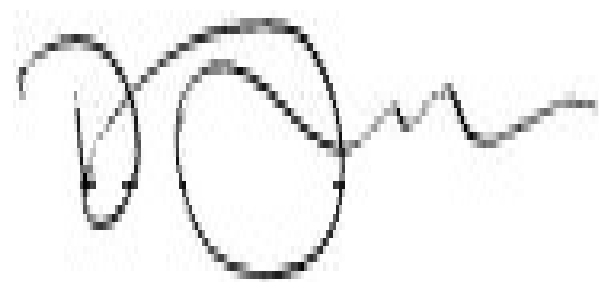
Signed on (Physician): 2016-07-21 03:16

Form_status: finalized

Procedure Order:

Patient ID	6122	Order ID	726
Patient Name	Thompson, Marthalene	Ordered By	Love-Jones, Derrick
Order Date	2016-09-11	Print Date	2016-09-11
Order Status	complete	Encounter Date	2016-09-11
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2016-09-11		Final ✓		0097	Pulse Oximetry	No	98%	97% to 100%		



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

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