

**Harlan Williams: Patient Information**  
Patient Record Number:5549

**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:** Harlan Williams

**External ID:** 5549

**DOB:** 1962-11-25

**Sex:** Male

**Marital Status:** Single

**Patient Drive Folder:** <https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B-x5JZCm9BpXeDZwcnhiLXY5bzA>

**Address:** 3200 South Lancaster Road

**City:** Dallas

**State:** Texas

**Postal Code:** 75216

**Country:** USA

**Street Address:** 3200 South Lancaster Road

## Past Medical History:

**Last Recorded On:** 12-31-2016.

**Risk Factors:** Chronic Pain,GERD,Lumbago.

**Additional Medical History:** Stab wound and GSW in eye..

## Family History:

**Last Recorded On:** 12-31-2016.

**Father:** Father had hypertension and diabetes mellitus type 2..

**Mother:** Unknown..

**Siblings:** Unknown..

**Offspring:** Two daughters..

**Other Family Relative:** Grandmother had unknown cancer. Flu shot given 0.5 mL on 10/24/2016..

## Primary Family Med Conditions:

**Last Recorded On:** 12-31-2016.

**Risk Factors:** Other (specify).

**Chronic Conditions:** Diabetes,Hypertension.

## Social History:

**Last Recorded On:** 12-31-2016.

**Tobacco:** Smokes 1 pack of cigarette for 3 days    **Status:** Current

**Alcohol:** Social drinker    **Status:** Current

**Recreational Drugs:** Marijuana.    **Status:** Current

**Nutrition History:** Regular diet..

**Developmental History:** Well..

**Other History:** Influenza November 2015..

## Tests and Exams:

**Last Recorded On:** 12-31-2016.

**UA - Urinalysis - (Yearly - HH primary responsibility)** N/A Done on 02/09/2016, at Evolution, Ordered by Dr. Sumana Ketha.

**Insurance:**

**Medicare B Texas (SMTX0)**

<b>Priority :</b> Primary	<b>Copay :</b>
<b>Start Date :</b> 2006-02-01	<b>Insured ID Number :</b> 434561269C1
<b>Relationship to Insured :</b> Self	<b>Group Number :</b>
<b>Type :</b> N/A	<b>Employer Name :</b> Harlan Williams
<b>Payer :</b> Medicare B Texas (SMTX0)	

**Immunizations:**

**Harlan Williams: Chief Complaint**  
Patient Record Number:5549

**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

**Seen by** Derrick Love-Jones  
**Seen on** 28-November-2016

**Chief Complaint Status:**finalized

Followup home visit for management of hypertension, osteoarthritis, chronic pain, gastroesophageal reflux disease, unknown mental disorders, and lumbago. Patient complains of back and neck pain.

**History of Present illness:**

**HPI Status:**Finalized

A 54-year-old African American male in NAD with multiple chronic conditions of hypertension and osteoarthritis. Patient states that he has been having pain in his lower back and neck for sometime. Patient states that he is getting relief from current pain medication. Patient denies any other issues at this time.

### Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-11-28	114	82	145.00	71.00	97.60	16.00	~	20.2	0.00

## Review of Systems:

**Constitutional:**

**Geometric Algebraic Topology:**

~~Do not use this form~~ **YES**

No ~~INTERVIEW~~ ~~INTERVIEW~~ YES

**No ~~Exemption~~ Exemption for US**

**Not a sign of poor appetite**

**NO Brand Mentation**

Most of the Pain YES

### No Bleeding Gun Range Of Motion

No Objections

### No Use Of Dentures

### Physical Exam:

**REMARKS:**

**Renal Function: Serum Creatinine: 0.8 mg/dl, BUN: 18 mg/dl, Urine Creatinine: 100 mg/dl, Urine Protein: 0.1 g/dl, Urine pH: 6.5, Urine Specific Gravity: 1.020, Urine Glucose: Negative, Urine Ketones: Negative, Urine Bilirubin: Negative, Urine Urobilinogen: Negative, Urine Hemoglobin: Negative, Urine RBCs: 0-1 WBCs, Urine Nitrite: Negative, Urine Leukocytes: 0-1 WBCs, Urine Epithelial Cells: 0-1, Urine Casts: 0-1, Urine Crystals: 0-1, Urine Mucus: 0-1, Urine Strands: 0-1, Urine Debris: 0-1, Urine Color: Yellow, Urine Odor: Ammoniacal, Urine Volume: 150 ml, Urine pH: 6.5, Urine Specific Gravity: 1.020, Urine Glucose: Negative, Urine Ketones: Negative, Urine Bilirubin: Negative, Urine Urobilinogen: Negative, Urine Hemoglobin: Negative, Urine RBCs: 0-1 WBCs, Urine Nitrite: Negative, Urine Leukocytes: 0-1 WBCs, Urine Epithelial Cells: 0-1, Urine Casts: 0-1, Urine Crystals: 0-1, Urine Mucus: 0-1, Urine Strands: 0-1, Urine Debris: 0-1, Urine Color: Yellow, Urine Odor: Ammoniacal, Urine Volume: 150 ml.**

**EXTREMITIES:**

**Nose:** Tip of the Nose - Within Normal Limits . Gums : pink , Bilateral Nasal Turbinates -Within Normal Limits .

**PSYCH:**

**REBROUKE'S COMPLAINTS DO NOT HAVE LIMITS.**

**RESP:**

Orange Clear Seas Rehab With No Normal Limits .

**Gl:**

Anus, Rectal Tenderness/Mass-Within Normal Limits .

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

**Medication:**

Description	Status	Start Date	End Date
<p>Tramadol HCl ,50 MG TABS, TAKE 1 TABLET TWICE DAILY AS NEEDED FOR PAIN, Quantity: 60, Refill Quantity: 0</p> <p>Unknown or N/A</p> <p>by ketha, Dr sumana - BK6230281</p> <p>Texas Physician House Calls</p>	Active	2016-03-22	

TraMADol HCl ,50 MG TABS, TAKE 1 TABLET TWICE DAILY AS  
NEEDED FOR PAIN, Quantity: 60, Refill Quantity: 0

Unknown or N/A

Active

2016-03-21

by Jones, Derrick - MJ3217331

Texas Physician House Calls

## 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 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. Patient verbalized understanding of the above plan was given the office number for any questions or concerns. Prognosis is fair and patient is stable. Reviewed old records of the patient. Follow up appointment in 4-6 weeks.

1. Lumbago with chronic pain, MRI needed of neck and continue current plan.
2. Coronary artery disease, continue current plan.
3. Hypertension with vascular complications, continue current plan.
4. Gastroesophageal reflux disease, continue current plan.
5. Chronic pain syndrome, continue current OTC pain medication.
6. Chronic obstructive pulmonary disease/asthma, continue current plan.
7. Osteoarthritis with chronic pain, continue current plan.
8. Insomnia, continue current plan.

No medication refills needed this visit.

## Medical Problem:

Description	Status	Start Date	End Date
Atherosclerotic heart disease of native coronary artery without angina pectoris ( ICD10:I25.10 Atherosclerotic heart disease of native coronary artery without angina pectoris) Unknown or N/A	Active	2016-11-28	
Encounter for immunization ( ICD10:Z23 Encounter for immunization) Unknown or N/A	Active	2016-10-25	
Lumbago with sciatica, unspecified side ( ICD10:M54.40 Lumbago with sciatica, unspecified side) Unknown or N/A	Active	2016-09-16	
Insomnia, unspecified ( ICD10:G47.00 Insomnia, unspecified) Unknown or N/A	Active	2016-08-12	
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	2016-07-08	
Chronic pain syndrome ( ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-07-08	
Lumbago with sciatica, right side ( ICD10:M54.41 Lumbago with sciatica, right side) Unknown or N/A	Active	2016-05-27	
Complex regional pain syndrome I, unspecified ( ICD10:G90.50 Complex regional pain syndrome I, unspecified) Unknown or N/A	Active	2016-05-03	
Encounter for general adult medical examination without abnormal findings ( ICD10:Z00.00 Encounter for general adult medical examination without abnormal findings) Unknown or N/A	Active	2016-04-27	
Unspecified asthma, uncomplicated ( ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2016-04-22	

Mild persistent asthma, uncomplicated ( ICD10:J45.30 Mild persistent asthma, uncomplicated) Unknown or N/A	Active	2016-01-08
Tobacco use disorder ( ICD10:F17.200 Nicotine dependence, unspecified, uncomplicated) Unknown or N/A	Active	2015-10-01
Pain in joint, pelvic region and thigh ( ICD10:M25.559 Pain in unspecified hip) Unknown or N/A	Active	2015-10-01
Benign essential hypertension ( ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01
Lumbago ( ICD10:M54.5 Low back pain) Unknown or N/A	Active	2015-10-01
Other chronic pain ( ICD10:G89.29 Other chronic pain) 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
Chronic airway obstruction, not elsewhere classified ( ICD10:J44.9 Chronic obstructive pulmonary disease, unspecified) Unknown or N/A	Active	2015-10-01
Osteoarthritis, generalized, site unspecified ( ICD10:M15.0 Primary generalized (osteo)arthritis) ( ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2015-10-01

## Allergies:

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

## Surgeries:

Description	Status	Start Date	End Date
Umbilical hernia repair Unknown or N/A	Active		

## Face to Face HH Plan:

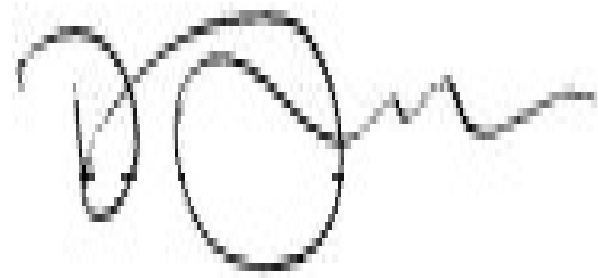
**Patient Home Bound or Can't Drive:** YES  
**Is Home Health Care Needed:** NO  
**Does Patient have reliable other Primary Care Physician:** NO  
**Is House Visit Needed:** YES  
**Next Visit Duration (in days):** 31  
**Nursing Required:** NO  
**Physical Therapy:** NO  
**Occupational Therapy Required:** NO  
**Speech-language Pathology Required:** NO  
**Clinical Findings To Justify Home Health:** No SN needed at this visit.  
**Signed by (NP):** 16  
**Signed On (NP):** 2016-11-28 01:53  
**Signed By (Physician):** 18  
**Signed on (Physician):** 2016-12-05 01:53  
**Form\_status:** finalized

## Procedure Order:

Patient ID	5549	Order ID	1264
------------	------	----------	------

Patient Name	Williams, Harlan	Ordered By	Love-Jones, Derrick
Order Date	2016-12-31	Print Date	2016-12-31
Order Status	complete	Encounter Date	2016-12-31
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2016-12-31		Final ✓		0097	Pulse Oximetry	No	98%	97% to 100%		



Electronically Signed by **Derrick Love-Jones** on **2016-12-05**.

Printed on 31-Dec-2016 21:26:02 pm.