

Randy Patterson: Patient Information
Patient Record Number:6331

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: Randy D Patterson
External ID: 6331
DOB: 1956-07-24
Sex: Male
S.S.: 451-04-1636
genericval1: 07/24/1956

Address: 3200 S Lancaster
City: Dallas
State: Texas
Postal Code: 75216
Country: USA
Mobile Phone: 214-371-7331
Street Address: 3200 S Lancaster

Family History:

Last Recorded On: 12-18-2016.
Father: Father died of unknown disease. .
Mother: Mother died of unknown disease and Alzheimer disease. .
Siblings: Denies..
Offspring: Two boys which are alive..

Social History:

Last Recorded On: 12-18-2016.
Tobacco: Smokes socially. **Status:** Current
Alcohol: No alcohol. **Status:** Never
Recreational Drugs: No drug abuse. **Status:** Never
Nutrition History: Regular..
Developmental History: Education level is 12th grade..
Other History: Influenza in 2016..

Insurance:

Molina Healthcare of Texas (Z1161)

Priority : Primary
Start Date : 2016-06-01
Relationship to Insured : Self
Type : N/A
Payer : Molina Healthcare of Texas (Z1161)

Copay :
Insured ID Number : 511990522
Group Number :
Employer Name : Randy Patterson

Immunizations:

Randy Patterson: Chief Complaint
Patient Record Number:6331

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Seen by Sumana Ketha MD

Seen on 18-November-2016

Chief Complaint Status:finalized

Follow up home visit to prevent further decline of the following chronic medical conditions: Lumbago, HTN, Asthma, GERD, AR, Muscle Spasms, Chronic Pain, OA and Schizophrenia. Patient complains of lower back pain and knee pain.

History of Present illness:

HPI Status:Finalized

A 60-year-old African-American male in NAD multiple chronic conditions of the following: Lumbago, HTN, Asthma, GERD, AR, Muscle Spasms, Chronic Pain, OA and Schizophrenia. Patient states that he has a history of chronic lower back, knee and shoulder pain. Today patient complains of lower back pain and knee pain in both knees. Patient denies any other issues upon examination. Patient denies any chest pain, headache, nausea/vomiting recently.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-11-18	168	90	145.00	61.00	97.40	16.00	~	27.4	0.00

Review of Systems:

Constitutional:

Blackburn City Council @Tainqat:

Physiological Mechanisms

No MORE TO DISH

No Decline

Notwithstanding

Need for Training and Education

No Discrete Paintures

No Dislocation Range Of Motion

Physical Exam:

~~CHALLENGES~~ CHALLENGES:

Spleen Tissue - Within Normal Limits; **Liver Tissue** - Within Normal Limits; **Adenopathy**-Within Normal Limits.

BRISK:

Sinuses: Right Maxillary Sinus - Within Normal Limits. Left Maxillary Sinus - Within Normal Limits. Right Ethmoidal Sinus - Within Normal Limits. Left Ethmoidal Sinus - Within Normal Limits. Sphenoidal Sinus - Within Normal Limits. Bilateral Nasal Turbinates - Within Normal Limits.

NEURO:

REPEAL THE ECONOMIC AND MORAL LIMITS .

RESEH:

Affects CtrAB Within Normal Limits. .

Normal Afferent Root Reflexes, Chaddock Reflexes, With and Without Oriented Lix-Within Normal Limits.

Medication:

Description	Status	Start Date	End Date
Lisinopril-Hydrochlorothiazide ,20-12.5 MG TABS, TAKE 1 TABLET TWICE DAILY, Quantity: 60, Refill Quantity: 2			
Unknown or N/A	Active	2016-10-27	
by Jones, Derrick - MJ3217331			
Texas Physician House Calls			

Plan Note:

Plan Note Status:Finalized

Continue same treatment plan his previous provider. 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 nice out, 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 verbalize understanding of the above plan was given the office number for any questions or concerns. Prognosis is fair and patient is stable.

Lumbago w/chronic pain continue current plan
HTN w/vascular continue current plan
Neuropathy continue current plan
Chronic Pain Syndrome continue current pain medication
RA/OA w/chronic pain continue current plan
Schizophrenia continue current plan
Muscle Spasms continue current plan
AR continue current plan
GERD continue current plan
Asthma continue current plan
Dementia continue current plan
Abnormal Gait continue to monitor

Medication refills as follows:

Meloxicam 15mg qd
Lisinopril/HCTZ 20/12.5mg bid
Baclofen 10mg qd
Simvastatin 20mg qhs
Norco 10/325mg tid
Promethazine DM

Medical Problem:

Description	Status	Start Date	End Date
Other disorders of peripheral nervous system (ICD10:G64 Other disorders of peripheral nervous system) Unknown or N/A	Active	2016-11-18	
Chronic pain syndrome (ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-11-18	
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	2016-10-24	
Unspecified asthma, uncomplicated (ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2016-10-24	
Gastro-esophageal reflux disease without esophagitis (ICD10:K21.9 Gastro-esophageal reflux disease without esophagitis) Unknown or N/A	Active	2016-10-24	
Low back pain (ICD10:M54.5 Low back pain) Unknown or N/A	Active	2016-10-24	
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-10-24	

Allergies:

Description	Status	Start Date	End Date
No known drug allergies. 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: We care daycare

Primary Justification Medical Conditions: Schizophrenia,Rheumatoid Arthritis_Osteoarthr,HTN,Asthma

Additional Medical Conditions: Lumbago, GERD, AR , Muscle Spasms

Nursing Required: YES

Physical Therapy:

Occupational Therapy Required:

Speech-language Pathology Required:

Requested Care/Treatments Required:

Clinical Findings To Justify Home Health: Patient is homebound due to mental illness and inability to self medicate correctly.

Certification Statement: Skilled nursing is needed due to mental illness and then ability to self medicate correctly.

Signed by (NP): 16

Signed On (NP): 2016-11-18 02:17

Signed By (Physician): 18

Signed on (Physician): 2016-11-25 02:17

Form_status: finalized

Procedure Order:

Patient ID	6331	Order ID	1203
Patient Name	Patterson, Randy D	Ordered By	Love-Jones, Derrick
Order Date	2016-12-18	Print Date	2016-12-18
Order Status	complete	Encounter Date	2016-12-18
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2016-12-18		Final ✓								

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