Bruce Bell: Patient Information

Patient Record Number:5707

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: Bruce Bell External ID: 5707 **DOB**: 1957-03-24 Sex: Male

Marital Status: Single

Patient Drive Folder: https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B-x5JZCm9BpXOFpocy1QTXZmTFU

Address: 3200 S Lancaster Rd

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

Street Address: 3200 S Lancaster Rd

Past Medical History:

Last Recorded On: 01-07-2017.

Additional Medical History: Right shoulder pain.

Family History:

Last Recorded On: 01-07-2017.

Mother: Sister had HTN. Brother had HTN..

Siblings: Two childrens..

Other Family Relative: Grandparents had HTN..

Primary Family Med Conditions:

Last Recorded On: 01-07-2017. Chronic Conditions: Hypertension.

Social History:

Last Recorded On: 01-07-2017.

Tobacco: Current every day smoker Smokes 1 ppd for 42 yrs Status: Current

Alcohol: Drinks 4 glasses a day. Status: Current

Recreational Drugs: Status: Never Nutrition History: Regular diet..

Tests and Exams:

Last Recorded On: 01-07-2017.

Insurance:

Molina Healthcare of Texas (Z1161)

Priority: Primary Start Date: 2014-02-01 Relationship to Insured: Self

Type: N/A
Payer: Molina Healthcare of Texas (Z1161)

Copay: Insured ID Number: 512783973 Group Number: Employer Name: Bruce Bell

Immunizations:

Bruce Bell: Chief Complaint Patient Record Number:5707

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> Seen by Sumana Ketha MD Seen on 28-November-2016

Chief Complaint Status: finalized

Follow-up home visit to prevent further decline of the following chronic medical conditions of gastroesophageal reflux disease, osteoarthritis, anxiety, chronic obstructive pulmonary disease, schizophrenia, depression, and hypertension. Patient complains of sinus pain.

History of Present illness:

HPI Status:Finalized

A 59-year-old male in NAD with multiple chronic conditions. Patient complains of sinus pain and congestion for 1 week with no relief. Patient also complains of pain, shoulder pain and neck pain has persisted without any relief for the last several days. Patient rates current pain at 6/10. Patient denies any new issues or complaints upon examination. Patient denies any chest pain, headache, or nausea or vomiting recently.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	ВМІ	Head circ
2016-11-28	126	70	130.00	71.00	97.60	16.00	~	18.1	0.00

Review of Systems:

Constitutional:

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No Apnea

No Bloorsyction g Gums

No Obatelettiess

No Use Of Dentures

Physical Exam:

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BXTCREMITIES:

Biddintifaktolebiethtkiihlilikbitmiesali mitsits.

CV:

Belike in Within all Limits A Lifroits quadrants-Within Normal Limits.

Murmur, Rubs, Gallops-Within Normal Limits .

Medication:

Description	Status	Start Date	End Date
TraZODone HCI ,100 MG TABS, TAKE 1 TABLET 3 TIMES DAILY, Quantity: 90, Refill Quantity: 0			
Unknown or N/A	Active	2015-05-10	
by Jones, Derrick - MJ3217331			
Texas Physician House Calls			

Plan Note:

Plan Note Status: Finalized

Continue same treatment plan as previous. Reviewed and continue with current medication. Medication adherence education was given to the patient. Patient was educated on benefits of low salt, low fat, low cholesterol diet with current medical issues. Patient was instructed to go to the emergency room for symptoms of chest pain, shortness of breath, headache, blurred vision or systolic blood pressure over 200. No labs needed at this time. The patient verbalized understanding of the above plan, and was given the office number to call for any questions or concern. Discussed the treatment plan with the patient. Prognosis is fair and patient is stable. Reviewed old records of the patient. Follow up appointment in 4-6 weeks.

- 1. Sinusitis start Levofloxacin 750 mg q.d. x 5 days.
- 2. Hypertension with vascular, continue current plan.
- 3. Gastroesophageal reflux disease, continue current plan.
- 4. Chronic obstructive pulmonary disease, continue current plan.
- 5. Depression, continue current plan.
- 6. Anxiety, continue current plan.
- 7. Osteoarthritis with chronic pain, continue current plan.
- 8. Chronic pain syndrome, continue current pain medication.
- 9. Schizophrenia, continue current plan.

No medication refills needed this visit.

Medical Problem:

Description	Status	Start Date	End Date
Chronic obstructive pulmonary disease with (acute) exacerbation (ICD10:J44.1 Chronic obstructive pulmonary disease with (acute) exacerbation) Unknown or N/A	Active	2015-10-09	
Essential (primary) hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-09	
Unspecified osteoarthritis, unspecified site (ICD10:M19.90 Unspecified osteoarthritis, unspecified site) Unknown or N/A	Active	2015-10-09	
Gastro-esophageal reflux disease without esophagitis (ICD10:K21.9 Gastro-esophageal reflux disease without esophagitis) Unknown or N/A	Active	2015-10-09	
Osteoarthrosis, unspecified whether generalized or localized, site unspecified (ICD10:M19.90 Unspecified osteoarthritis, unspecified site) Unknown or N/A	Active	2015-10-01	
Anxiety state, unspecified (ICD10:F41.9 Anxiety disorder, unspecified) 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	
Osteoarthrosis, generalized, site unspecified (ICD10:M15.0 Primary generalized (osteo)arthritis) (ICD10:M15.9 Polyosteoarthritis, unspecified) 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	
Benign essential hypertension (ICD9:401.1 Benign essential hypertension) Unknown or N/A	Active		
Depressive disorder, not elsewhere classified (ICD9:311 Depressive disorder, not elsewhere classified) Unknown or N/A	Active		
Tobacco use disorder (ICD9:305.1 Tobacco use disorder) Unknown or N/A	Active		
Chronic schizophrenia (ICD9:295.92 Unspecified schizophrenia, chronic) Unknown or N/A	Active		

Chronic obstructive lung disease (ICD9:496 Chronic airway obstruction, not elsewhere classified)	Active
Unknown or N/A	
Shoulder pain	
(ICD9:719.41 Pain in joint, shoulder region)	Active
Unknown or N/A	

Surgeries:

Description	Status	Start Date	End Date				
Colonoscopy in 2013 Unknown or N/A	Active						
Right ankle fracture Unknown or N/A	Active						
Left femur fracture	Active						
Unknown or N/A							

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: YES

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 time.

Signed by (NP): 16

Signed On (NP): 2016-11-28 01:43 **Signed By (Physician):** 18

Signed on (Physician): 2016-12-05 01:43

Form_status: finalized

Procedure Order:

Patient ID	5707	Order ID	1261
Patient Name	Bell, Bruce	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	98%	97% to 100%		



Electronically Signed by Sumana Ketha, MD on 2016-12-05.

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