

Mike Bowens: Patient Information
Patient Record Number:5980

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: Mike Bowens

External ID: 5980

DOB: 1969-03-01

Sex: Male

S.S.: 464-35-1972

User Defined: 469-427-7165

Patient Drive Folder:

https://drive.google.com/drive/u/0/folders/0B1v8FHBd_SfCfnlUV0VWMIVINWZfT3ZINGZTcmIBRXpGa2NKUzBzRlFleVpfMmZDLVk5OGs

Address: 3035 E Ledbetter Dr, Dallas

City: Dallas

State: Texas

Postal Code: 75216

Country: USA

Home Phone: 469-955-4712

Mobile Phone: 469-427-7165

Street Address: 3035 E Ledbetter Dr, Dallas

Apt/Suite/Other: 1310

Family History:

Last Recorded On: 11-10-2016.

Father: Unknown .

Mother: Unknown.

Siblings: Unknown.

Spouse: Unknown.

Social History:

Last Recorded On: 11-10-2016.

Tobacco: No smoking **Status:** Never

Alcohol: No alcohol **Status:** Never

Recreational Drugs: No drugs **Status:** Never

Nutrition History: Regular..

Developmental History: Well..

Insurance:

Medicare B Texas (SMTX0)

Priority : Primary

Start Date : 2010-08-01

Relationship to Insured : Self

Type : N/A

Payer : Medicare B Texas (SMTX0)

Priority : Secondary

Start Date : 2015-09-01

Relationship to Insured : Self

Type : N/A

Payer : Medicaid Texas (SKTX0)

Copay :

Insured ID Number : 464351972A

Group Number :

Employer Name : Mike Bowens

Copay :

Insured ID Number : 217600309

Group Number :

Employer Name : Mike Bowens

Immunizations:

Mike Bowens: Chief Complaint
Patient Record Number:5980

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Seen by Derrick Love-Jones
Seen on 06-October-2016

Chief Complaint Status:finalized

Follow up home visit for management of COPD/Asthma, hypertension, anxiety, chronic pain, depression, visual impairment, Bipolar , Insomnia and insomnia. Patient complain of lower back pain.

History of Present illness:

HPI Status:Finalized

Patient is a 47-year-old African American male with multiple chronic conditions of asthma, hypertension, anxiety, chronic pain, and insomnia. Patient states he continue to have back pain. Patient rates pain at 6/10. Patient also complained of stomach pain since having surgery. No CP, HA, or N/V recently.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-10-06	153	88	212.00	65.00	98.20	16.00	~	35.3	0.00

Review of Systems:

Constitutional:

Weight Change:
No Weight Change
Appetite:
No Change
Energy:
No Change
Fevers:
No
Sweats:
No
Chills:
No
Stomach Pain:
No
Diarrhea:
No
Constipation:
No

Physical Exam:

HEENT:

Examination of the head, neck, and throat. No abnormalities noted. Nasal Turbinates-Within Normal Limits .

ENT:

Examination of the ears, nose, and throat. No abnormalities noted. Within Normal Limits .

NECK:

Examination of the neck. No abnormalities noted. Nasal Septum, JVD, lymphadenopathy-Within Normal Limits .

BACK:

Examination of the back. No abnormalities noted. Within Normal Limits .

CV:

Examination of the cardiovascular system. No abnormalities noted. Within Normal Limits .

RESP:

Examination of the respiratory system. No abnormalities noted. Within Normal Limits .

Lungs Clear,Rales,Rhonchi,Wheezes-Within Normal Limits .

Medication:

Description	Status	Start Date	End Date
Acetaminophen-Codeine #3 , 300-30 MG TABS, TAKE 1 TABLET 3 TIMES DAILY AFTER MEALS, Quantity: 90, Refill Quantity: 0	Active	2016-10-07	
Unknown or N/A			
by ketha, Dr sumana - BK6230281			
Texas Physician House Calls			

ALPRAZolam ,0.5 MG TABS, TAKE 1 TABLET TWICE DAILY AS NEEDED, Quantity: 60, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-06-21
ProAir HFA ,108 (90 Base) MCG/ACT AERS, INHALE 1 TO 2 PUFFS EVERY 4 TO 6 HOURS AS NEEDED, Quantity: 2, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-03-23
QUEtiapine Fumarate ,100 MG TABS, TAKE 1 TABLET AT BEDTIME, Quantity: 30, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-03-23
Xanax ,1 MG TABS, TAKE 1 TABLET 3 TIMES DAILY, Quantity: 90, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-03-23
Acetaminophen-Codeine #4 ,300-60 MG TABS, TAKE 1 TABLET 3 TIMES DAILY AS NEEDED FOR PAIN, Quantity: 90, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-03-23
Xanax ,1 MG TABS, TAKE 1 TABLET 3 TIMES DAILY, Quantity: 90, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-02-24
Acetaminophen-Codeine #4 ,300-60 MG TABS, TAKE 1 TABLET 3 TIMES DAILY AS NEEDED FOR PAIN, Quantity: 90, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-02-24
AmLODIPine Besylate ,10 MG TABS, TAKE 1 TABLET DAILY FOR BLOOD PRESSURE, Quantity: 90, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-02-24
Advair Diskus ,100-50 MCG/DOSE AEPB, INHALE 1 PUFF TWICE DAILY, Quantity: 60, Refill Quantity: 6 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2015-12-18
Metoprolol Tartrate ,25 MG TABS, Take one tab every day, Quantity: 30, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2015-12-18
ProAir HFA ,108 (90 Base) MCG/ACT AERS, INHALE 1 TO 2 PUFFS EVERY 4 TO 6 HOURS AS NEEDED, Quantity: 2, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2015-12-18
Advair Diskus ,100-50 MCG/DOSE AEPB, INHALE 1 PUFF TWICE DAILY, Quantity: 60, Refill Quantity: 6 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-11-12
ProAir HFA ,108 (90 Base) MCG/ACT AERS, INHALE 1 TO 2 PUFFS EVERY 4 TO 6 HOURS AS NEEDED, Quantity: 2, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-11-12

Plan Note:

Plan Note Status:Finalized

Continue same treatment plan as previous. Reviewed and continue same medication, no new medications noted this visit.

Medication adherence was given to the patient the patient educated on the benefits of low salt, 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 courage to exercise daily. No new labs need it this quarter. 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 complications continue current plan
 COPD/Asthma continue current plan
 Anxiety continue current plan
 Depression continue current plan
 Chronic Pain Syndrome continue current pain medication
 Visual Impairment continue to monitor
 Insomnia continue current plan
 Bipolar continue current plan

Medication refills as follows:

Tylenol 3 tid

Alprazolam 1mg tid

Medical Problem:

Description	Status	Start Date	End Date
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	2016-10-06	
End stage renal disease (ICD10:N18.6 End stage renal disease) Unknown or N/A	Active	2016-10-06	
Major depressive disorder, single episode, unspecified (ICD10:F32.9 Major depressive disorder, single episode, unspecified) Unknown or N/A	Active	2016-06-20	
Low back pain (ICD10:M54.5 Low back pain) Unknown or N/A	Active	2016-05-11	
Unspecified visual loss (ICD10:H54.7 Unspecified visual loss) Unknown or N/A	Active	2016-05-11	
Unspecified asthma, uncomplicated (ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2015-11-12	
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2015-11-12	
Insomnia, unspecified (ICD10:G47.00 Insomnia, unspecified) Unknown or N/A	Active	2015-11-12	
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01	
Bipolar disorder, unspecified (ICD10:F31.9 Bipolar disorder, unspecified) 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	
Chronic airway obstruction, not elsewhere classified (ICD10:J44.9 Chronic obstructive pulmonary disease, unspecified) Unknown or N/A	Active	2015-10-01	
Backache, unspecified (ICD10:M54.9 Dorsalgia, unspecified) Unknown or N/A	Active	2015-10-01	
Tobacco use disorder (ICD10:F17.200 Nicotine dependence, unspecified, uncomplicated) Unknown or N/A	Active	2015-10-01	

Face to Face HH Plan:

Patient Home Bound or Can't Drive: NO

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

Current home health agency:

Primary Justification Medical Conditions:

Additional Medical Conditions:

Nursing Required: NO

Physical Therapy: NO

Occupational Therapy Required: NO

Speech-language Pathology Required: NO

Requested Care/Treatments Required:

Clinical Findings To Justify Home Health: No skilled nursing needed

Certification Statement:

Signed by (NP): 16

Signed On (NP): 2016-10-06 03:07

Signed By (Physician): 18

Signed on (Physician): 2016-10-12 03:07

Form_status: finalized

Printed on 10-Nov-2016 21:31:00 pm.