

Patient Record Number:5288

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: Judy Moten

External ID: 5288

DOB: 1948-11-05

Sex: Female

S.S.: 513-56-3108

Marital Status: Divorced

Patient Drive Folder: <https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B8TZVrWJciS3WW1LRENQT2kyZ1E>

Address: 2740 Maceo Cir

City: Dallas

State: Texas

Postal Code: 75216

Country: USA

Mother's Name: Schedule on Tuesday or Thursday

Emergency Contact: Son

Emergency Phone: 469-254-3791

Home Phone: 214-527-4228

Mobile Phone: 972-481-0877

Street Address: 2740 Maceo Cir

Apt/Suite/Other: House

Past Medical History:

Last Recorded On: 12-24-2016.

Additional Medical History: Heart murmur, ESRD, edema...

Family History:

Last Recorded On: 12-24-2016.

Father: Father has hypertension..

Mother: Mother has hypertension..

Siblings: Sister has history of uterine cancer and diabetes..

Spouse: Husband died in motor vehicle accident..

Offspring: Patient has 4 boys and 2 girls..

Social History:

Last Recorded On: 12-24-2016.

Tobacco: Never smoker **Status:** Never

Alcohol: No alcohol. **Status:** Never

Recreational Drugs: No drug abuse. **Status:** Never

Nutrition History: Regular..

Developmental History: Educational level is 12th grade...

Other History: Last physical exam in 2007 Influenza in 2015.

Tests and Exams:

Last Recorded On: 12-24-2016.

Sigmoid/Colonoscopy N/A done in 2010

Insurance:

Medicare B Texas (SMTX0)

Priority : Primary
Start Date : 2006-10-01
Relationship to Insured : Self
Type : N/A
Payer : Medicare B Texas (SMTX0)
Priority : Secondary
Start Date : 2013-12-01
Relationship to Insured : Self
Type : N/A
Payer : Medicaid Texas (SKTX0)

Copay :
Insured ID Number : 513563108A
Group Number :
Employer Name : Judy Moten
Copay :
Insured ID Number : 505598312
Group Number :
Employer Name : Judy Moten

Immunizations:

Judy Moten: Chief Complaint
Patient Record Number:5288

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Seen by Derrick Love-Jones
Seen on 25-October-2016

Chief Complaint Status:finalized

Follow up home visit for management of end-stage renal disease, diabetes mellitus type 2, hypertension, gastroesophageal reflux disease, congestive heart failure, and chronic obstructive pulmonary disease. Patient complains of pain in lower back and legs.

History of Present illness:

HPI Status:Finalized

Patient is a 68-year-old AA female in NAD with multiple chronic conditions of end-stage renal disease, hypertension, diabetes mellitus type 2, chronic obstructive pulmonary disease, and congestive heart failure, coronary artery disease, edema, and chronic pain. Patient states that she has been having pain in her lower back and legs. Patient rates pain 6/10 today. Patient denies any other issues upon examination. Patient denies any chest pain, headache, or nausea or vomiting recently.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-10-25	167	82	166.00	58.00	97.80	16.00	~	34.7	0.00

Review of Systems:

Constitutional:

Revised: 11/27/2018 @ 10:00 AM

No. 100-170-01 Vision

Not a member? Sign up for free YES

No Bacterial Outlets of Urine

NO DISCOVERY RELAYS OUTS MOTION

No Disguised Affiliation

No Apnea

No Bleeding Gums

No Abstracts

No Use Of Dentures

Physical Exam:

SIGABD:

A B C D E F G H I J K L M N O P Q R S T U V W X Y Z 0 1 2 3 4 5 6 7 8 9 .

NEERO:

Snake 2: Head Orientation Normal, Discharge Ass. Ventr. Horns, Gums pink, Bilateral Nasal Turbinates-Within Normal Limits.

ENYCH:

Heart Mucosa Within Septal Midline-Within Normal Limits.

NECK:

Supple, Affect, Lege, Car, add, Mb, ed, Nas, et, Sep, Un, i, ed, K, 3, With, de, Normal, -With, Normal Limits .

BACK:

Normal Curvature, Tenderness-Within Normal Limits .

RESP:

Respirator Effort Unlabored- Abnormal Limits.

Gl:

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

Bowel Sounds present in all four quadrants-Within Normal Limits .

Medication:

Description	Status	Start Date	End Date
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Pantoprazole Sodium ,40 MG TBEC, TAKE ONE TABLET BY MOUTH ONCE DAILY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-03-22
Aspirin ,81 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 6 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-02-16
Simvastatin ,40 MG TABS, TAKE 1 TABLET DAILY AT BEDTIME, Quantity: 30, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-02-16
Aspirin ,81 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 6 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-01-26
Hydrocodone-Acetaminophen ,10-325 MG TABS, TAKE ONE TABLET BY MOUTH EVERY 8 HOURS AS NEEDED FOR PAIN, Quantity: 90, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2015-05-20
Glucocard Vital Test , STRP, TEST TWICE DAILY, Quantity: 200, Refill Quantity: 2 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-04-20
Pantoprazole Sodium ,40 MG TBEC, TAKE ONE TABLET BY MOUTH ONCE DAILY, Quantity: 90, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-02-20

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 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. Patient encouraged continuing weight loss efforts via daily exercise and certain food restrictions. The patient verbalized understanding of the above plan, and was given the office number to call for any questions or concern. Prognosis is fair and patient is stable. Reviewed old records of the patient. Follow up appointment in 4-6 weeks.

1. Osteoarthritis with chronic pain, continue current plan.
2. Neuropathy, continue current plan.
3. Diabetes mellitus type 2 with neuropathy continue current plan.
4. Hypertension with vascular complications, continue current plan.
5. Lumbago with sciatica, continue current plan.
6. Congestive heart failure with systolic complications, continue current plan.
7. Chronic obstructive pulmonary disease, continue current plan.
8. Gastroesophageal reflux disease, continue current plan.
9. End-stage renal disease, continue current plan.
10. Chronic pain syndrome, continue current pain medication.

Medication refills as follows:

Norco 10/325 mg t.i.d.
ASA 81 mg q.d.
Pantoprazole 40 mg q.d.

Medical Problem:

Description	Status	Start Date	End Date
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Other disorders of peripheral nervous system (ICD10:G64 Other disorders of peripheral nervous system) 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	2016-09-22
Unspecified systolic (congestive) heart failure (ICD10:I50.20 Unspecified systolic (congestive) heart failure) Unknown or N/A	Active	2016-09-22
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	2016-05-26
Type 2 diabetes mellitus with diabetic neuropathy, unspecified (ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2016-05-26
Primary generalized (osteo)arthritis (ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2016-05-26
Polyosteoarthritis, unspecified (ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2016-05-26
Chronic pain syndrome (ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-05-26
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-02-16
Mild persistent asthma, uncomplicated (ICD10:J45.30 Mild persistent asthma, uncomplicated) Unknown or N/A	Active	2016-01-07
Chronic kidney disease, unspecified (ICD10:N18.9 Chronic kidney disease, unspecified) Unknown or N/A	Active	2015-11-10
Chronic airway obstruction, not elsewhere classified (ICD10:J44.9 Chronic obstructive pulmonary disease, unspecified) Unknown or N/A	Active	2015-10-01
Congestive heart failure, unspecified (ICD10:I50.9 Heart failure, unspecified) Unknown or N/A	Active	2015-10-01
End stage renal disease (ICD10:N18.6 End stage renal disease) Unknown or N/A	Active	2015-10-01
Hypertensive chronic kidney disease, unspecified, with chronic kidney disease stage V or end stage renal disease (ICD10:I12.0 Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease) Unknown or N/A	Active	2015-10-01
Diabetes mellitus without mention of complication, type II or unspecified type, not stated as uncontrolled (ICD10:E11.9 Type 2 diabetes mellitus without complications) Unknown or N/A	Active	2015-10-01
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01
Obstructive chronic bronchitis with (acute) exacerbation (ICD10:J44.1 Chronic obstructive pulmonary disease with (acute) exacerbation) Unknown or N/A	Active	2015-10-01
Diabetes mellitus without mention of complication, type II or unspecified type, uncontrolled (ICD10:E11.65 Type 2 diabetes mellitus with hyperglycemia) Unknown or N/A	Active	2015-10-01
Undiagnosed cardiac murmurs (ICD10:R01.1 Cardiac murmur, unspecified) Unknown or N/A	Active	2015-10-01
Edema (ICD10:R60.9 Edema, unspecified) Unknown or N/A	Active	2015-10-01

Allergies:

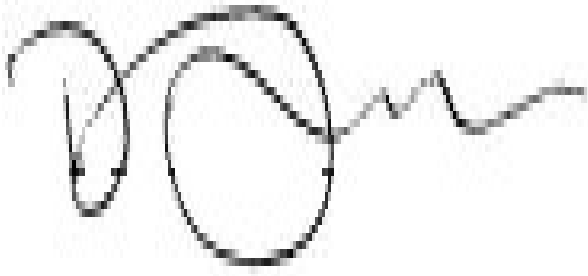
Surgeries:

Face to Face HH Plan:

DME:

Procedure Order:

[illegible]

A handwritten signature in black ink, consisting of a series of loops and a trailing wavy line.

Electronically Signed by **Derrick Love-Jones** on **2016-11-01**.

Printed on 25-Dec-2016 10:47:14 am.