Laquita Simpson: Patient Information

Patient Record Number:3468

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: Laquita Simpson External ID: 3468 DOB: 1956-03-07 Sex: Female Marital Status: Single

Patient Drive Folder: https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B2b-ca76_GQoeld2U0I5alAwaVU

Address: 4722 Meadow Street, Apt #1803

City: Dallas State: Texas Postal Code: 75215 Country: USA

Home Phone: 214-628-2025 Mobile Phone: 214-418-1844 Street Address: 4722 Meadow Street

Apt/Suite/Other: 1803

Past Medical History:

Last Recorded On: 01-11-2017.

Additional Medical History: Morbid obesity and gait abnormality...

Family History:

Last Recorded On: 01-11-2017. Father: Father with hypertension..

Mother: Mother with hypertension and hyperlipidemia..

Offspring: One boy..

Primary Family Med Conditions:

Last Recorded On: 01-11-2017.

Chronic Conditions: Hyperlipidemia, Hypertension.

Social History:

Last Recorded On: 01-11-2017.

Tobacco: Former smoker Stop smoking in 1993. Status: Quit

Alcohol: No alcohol. Status: Never

Recreational Drugs: No drug abuse. Status: Never Developmental History: Education level GED..

Tests and Exams:

Last Recorded On: 01-11-2017.

Vitamin D (6 mo if on pills) Abnormal Done on 11/07/2013, at MetroStat Diagnostic Services, ordered

by Dr. Sumana Ketha

TSH Thyroid-Stimulating Hormone (every year) Normal Done on 11/07/2013, at MetroStat

Diagnostic Services, ordered by Dr. Sumana Ketha

CBC Complete Blood Count (3 months) Abnormal Done on 11/07/2013, at MetroStat Diagnostic

Services, ordered by Dr. Sumana Ketha

CMP Comprehensive Metabolic Panel (3 months) Abnormal Done on 11/07/2013, at MetroStat Diagnostic Services,ordered by Dr. Sumana Ketha

LIPIDS (once year unless chol meds) Normal Done on 11/07/2013, at MetroStat Diagnostic Services,ordered by Dr. Sumana Ketha

UA - Urinalysis - (Yearly - HH primary responsibility) Normal Done on 11/07/2013, at MetroStat Diagnostic Services,ordered by Dr. Sumana Ketha

Urine Culture (prn) Normal Done on 11/07/2013, at MetroStat Diagnostic Services,ordered by Dr. Sumana Ketha

Insurance:

Superior Health Plan Texas (39188)

Priority: Primary Start Date: 2010-01-01 Relationship to Insured: Self

Type: N/A

Payer: Superior Health Plan Texas (39188)

Copay:

Insured ID Number: 519313430

Group Number :

Employer Name: Laquita Simpson

Immunizations:

Laquita Simpson: Chief Complaint

Patient Record Number:3468

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Seen by Sumana Ketha MD Seen on 01-December-2016

Chief Complaint Status: finalized

Followup home visit for management of hypertension, anxiety, chronic pain, osteoarthritis, bipolar, morbid obesity, abnormality of gait, chronic obstructive pulmonary disease, and muscle weakness. Patient complains of knee pain.

History of Present illness:

HPI Status:Finalized

A 60-year-old female in no acute distress with multiple chronic conditions of hypertension, anxiety, chronic pain, and osteoarthritis. Patient states that she has chronic knee pain that has been there for several years. Patient is morbidly obese and believes this is the cause of her knee pain. Patient denies any new issues or complaints upon examination. Patient denies any pain at this time. Patient denies any chest pain, headache, or nausea or vomiting recently.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-12-01	143	83	400.00	66.00	98.20	18.00	~	64.6	0.00

Review of Systems:

Constitutional:

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No Bitting and Bappetite

No Blackstate Clark termitation

No Dipriteatiction Range Of Motion

No Bleeding Gums

No Hoarseness

No Use Of Dentures

Physical Exam:

SEERO:

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MUNICH:

NECK:

Bapletel/Athinesheer grants and action of Microsol as at the plant of the plant of

CV:

RRR-Within Normal Limits .

RESP:

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

GI:

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

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

Medication:

Description	Ctatura	Ctart Data	Fud Data
Description	Status	Start Date	End Date

Valproic Acid ,250 MG CAPS, TAKE 1 CAPSULE 3 TIMES DAILY, Quantity: 90, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls Lisinopril-Hydrochlorothiazide ,20-12.5 MG TABS, TAKE 1 TABLET BY	Active	2016-12-06
MOUTH EVERY DAY, Quantity: 90, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-07-27
Valproic Acid ,250 MG CAPS, TAKE 1 CAPSULE 3 TIMES DAILY, Quantity: 90, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-05-09
Lisinopril-Hydrochlorothiazide ,20-12.5 MG TABS, TAKE 1 TABLET BY MOUTH EVERY DAY, Quantity: 30, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-05-04
TraMADol HCI ,50 MG TABS, TAKE 1 TABLET 4 TIMES DAILY WITH MEALS, Quantity: 120, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-05-07
Lisinopril-Hydrochlorothiazide ,20-12.5 MG TABS, TAKE 1 TABLET BY MOUTH EVERY DAY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-04-05
Lisinopril-Hydrochlorothiazide ,20-12.5 MG TABS, TAKE 1 TABLET BY MOUTH EVERY DAY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-02-26
Meloxicam ,7.5 MG TABS, TAKE 1 TABLET DAILY AS NEEDED, Quantity: 90, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-02-26
Meloxicam ,7.5 MG TABS, TAKE 1 TABLET DAILY AS NEEDED, Quantity: 90, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2014-12-02

Plan Note:

Plan Note Status: Finalized

Continue same treatment plan as previous. Reviewed and continue with current medication, no new medication noted this visit. 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 stable. Review old records of patient and summarize. Follow up appointment in 4-6 weeks.

Patient diagnoses are,

- 1. Osteoarthritis with chronic pain, continue current plan.
- 2. Bipolar, continue current plan.
- 3. Hypertension with vascular complications, continue current plan.
- 4. Chronic obstructive pulmonary disease, continue current plan.
- 5. Anxiety, continue current plan.
- 6. Morbid obesity, continue to monitor.
- 7. Abnormal gait, continue to monitor.
- 8. Chronic pain syndrome, continue current pain medication.

Medication refills as follows,

Tramadol 50 mg t.i.d. Valproic acid 250 mg t.i.d. Lisinopril/HCTZ 20/12.5 mg q.d. Meloxicam 7.5 mg q.d.

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	2016-09-15	
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) 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	
Other chronic pain (ICD10:G89.29 Other chronic pain) 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	
Morbid obesity (ICD10:E66.01 Morbid (severe) obesity due to excess calories) 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	
Other malaise and fatigue (ICD10:R53.81 Other malaise) (ICD10:R53.83 Other fatigue) Unknown or N/A	Active	2015-10-01	
Abnormality of gait (ICD10:R26.9 Unspecified abnormalities of gait and mobility) Unknown or N/A	Active	2015-10-01	
Muscle weakness (generalized) (ICD10:M62.81 Muscle weakness (generalized)) 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	

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: 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 at this time.

Certification Statement: Signed by (NP): 302

Signed On (NP): 2016-12-01 01:47 Signed By (Physician): 18

Signed on (Physician): 2016-12-08 01:47

Form_status: finalized

Printed:



Electronically Signed by **Darolyn Perkins** on **2016-12-08**.

Printed on 12-Jan-2017 19:55:58 pm.