

Delores Burns: Patient Information
Patient Record Number:6184

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: Delores Burns
External ID: 6184
DOB: 1952-07-23
Sex: Female
S.S.: 460-962-040

Address: 3130 Kingbridge St
City: Dallas
State: Texas
Postal Code: 75212
Country: USA
Mobile Phone: 214-334-1697
Street Address: 3130 Kingbridge St
Apt/Suite/Other: APT#73- Gate Code:75212

Past Medical History:

Last Recorded On: 12-31-2016.
Risk Factors: Arthritis,High Cholesterol,Lumbago,Neuropathy.

Family History:

Last Recorded On: 12-31-2016.
Father: Father had hypertension..
Mother: Mother had diabetes..

Social History:

Last Recorded On: 12-31-2016.
Tobacco: Daily smoker. **Status:** Current
Alcohol: No alcohol use. **Status:** Never
Recreational Drugs: No drug abuse. **Status:** Never
Exercise Patterns: Exercise daily. **Status:** Current
Work Status: Disabled.

Insurance:

Medicare B Texas (SMTX0)

Priority : Primary
Start Date : 2011-04-01
Relationship to Insured : Self
Type : N/A
Payer : Medicare B Texas (SMTX0)

Copay :
Insured ID Number : 460962040A
Group Number :
Employer Name : Delores Burns

Immunizations:

Delores Burns: Chief Complaint
Patient Record Number:6184

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Seen by Derrick Love-Jones
Seen on 16-November-2016

Chief Complaint Status:finalized

Follow up home visit to prevent further decline of the following chronic conditions of diabetes mellitus, hypertension, hyperlipidemia, asthma, arthritis, and chronic pain syndrome and neuropathy. Patient complains of lower back pain.

History of Present illness:

HPI Status:Finalized

Patient is a 64-year-old African-American female in no acute distress chronic conditions of the following chronic pain syndrome, diabetes mellitus 2 with neuropathy, hypertension with vascular complications, hyperlipidemia, anxiety, and neuropathy. Patient has a history of chronic pain in her lower back. Patient rates her current pain at 7/10 today. Patient states that pain comes and goes often but that she gets some relief from current pain medication. Patient denies any other issues upon examination. Patient denies any hypoglycemic episodes and a foot check revealed numbness and tingling in both feet. Patient denies any chest pain, headache, or nausea/vomiting recently.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-11-16	161	89	230.00	63.00	97.40	16.00	~	40.7	0.00

Review of Systems:

Constitutional:

Blockchain & Supply Chain Logistics:

NO DISCLOSED VICES

Neurobiology of Disease

Neurobiology of Learning and Memory

No ~~CONFIDENTIAL~~ sweetie

Normal Bladder Function

No Dimension

No Obstruction

Physical Exam:

SUBJECT:

Dealing with Outliers and Non-Normality in Normal Limits.

EXTREMITIES:

[illegible]

BYAIR:

Approved for Release by NSA on 08-22-2013 pursuant to E.O. 13526

WV:SC:

BRP-With-Within-Normal-Limits .

RESP:

Bonds With A Nonfinal Maturity Limits .

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

Plan Note:

Plan Note Status:Finalized

Continue same treatment plan as previous. Review to 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 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 a systolic blood pressure greater than 200. Patient encouraged to exercise daily. No

labs needed this visit. The patient verbalize understanding of the above plan and was given the office number for any questions or concerns. Prognosis is fair and patient is stable.

1. Diabetes mellitus with neuropathy, continue current plan.
2. Asthma, continue current plan.
3. Hypertension with vascular complications, continue current plan.
4. Hyperlipidemia, continue current plan.
5. Chronic pain syndrome, continue current pain medications.
6. Lumbago with chronic pain, continue current plan.
7. Neuropathy, continue current plan.

Medication refills as follows,
Norco 10/325 mg t.i.d.

Medical Problem:

Description	Status	Start Date	End Date
Low back pain (ICD10:M54.5 Low back pain) Unknown or N/A	Active	2016-09-28	
Nicotine dependence, unspecified, uncomplicated (ICD10:F17.200 Nicotine dependence, unspecified, uncomplicated) Unknown or N/A	Active	2016-09-28	
Encounter for general adult medical examination without abnormal findings (ICD10:Z00.00 Encounter for general adult medical examination without abnormal findings) Unknown or N/A	Active	2016-08-01	
Other disorders of peripheral nervous system (ICD10:G64 Other disorders of peripheral nervous system) Unknown or N/A	Active	2016-06-22	
Type 2 diabetes mellitus with diabetic neuropathy, unspecified (ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2016-06-22	
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	2016-06-22	
Chronic pain syndrome (ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-06-22	
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-05-18	
Type 2 diabetes mellitus without complications (ICD10:E11.9 Type 2 diabetes mellitus without complications) Unknown or N/A	Active	2016-05-18	
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2016-05-18	
Other hyperlipidemia (ICD10:E78.4 Other hyperlipidemia) Unknown or N/A	Active	2016-05-18	
Hyperlipidemia, unspecified (ICD10:E78.5 Hyperlipidemia, unspecified) Unknown or N/A	Active	2016-05-18	
Unspecified asthma, uncomplicated (ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2016-05-18	
Mononeuropathy, unspecified (ICD10:G58.9 Mononeuropathy, unspecified) Unknown or N/A	Active	2016-05-18	

Allergies:

Description	Status	Start Date	End Date
penicillin Unknown or N/A	Active		
Darvon 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): 45

Current home health agency: Too Care home health

Primary Justification Medical Conditions: Asthma,diabetes,HTN,hyperlipidemia

Additional Medical Conditions: Chronic Pain Syndrome and Neuropathy

Nursing Required: YES

Physical Therapy: NO

Occupational Therapy Required: NO

Speech-language Pathology Required: NO

Requested Care/Treatments Required:

Clinical Findings To Justify Home Health: Patient is homebound due to chronic pain that is uncontrolled and limited mobility.

Certification Statement: Skilled nursing is needed to manage chronic pain and uncontrolled diabetes.

Signed by (NP): 16

Signed On (NP): 2016-11-16 02:18

Signed By (Physician): 18

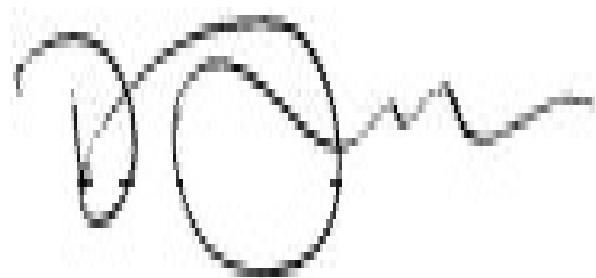
Signed on (Physician): 2016-11-23 02:18

Form_status: finalized

Procedure Order:

Patient ID	6184	Order ID	1174
Patient Name	Burns, Delores	Ordered By	Love-Jones, Derrick
Order Date	2016-12-31	Print Date	2016-12-31
Order Status	complete	Encounter Date	2016-12-31
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry											



Electronically Signed by **Derrick Love-Jones** on **2016-11-23**.

Printed on 31-Dec-2016 20:32:19 pm.