Willie Young: Patient Information

Patient Record Number:5213

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: Willie Young External ID: 5213 **DOB**: 1942-06-30 Sex: Male S.S.: 461-66-6486

User Defined: Mary L will also live with him

Patient Drive Folder: https://drive.google.com/a/smartmbbs.com/?tab=mo#folders/0B8TZVrWJciS3eFZ4eWJkNWdTSkE

Address: 2719 E Illinois Ave

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

Home Phone: 214-207-6002 Street Address: 2719 E Illinois Ave Apt/Suite/Other: Pythian Manor Apt#118

Past Medical History:

Last Recorded On: 12-15-2016. Risk Factors: Insomnia, Lumbago.

Additional Medical History: Allergic rhinitis..

Family History:

Last Recorded On: 12-15-2016.

Father: Father with deceased hypertension..

Mother: Mom-deceased with diabetes mellitus and hypertension..

Offspring: Patient has four children..

Primary Family Med Conditions:

Last Recorded On: 12-15-2016.

Chronic Conditions: Diabetes, Hypertension.

Social History:

Last Recorded On: 12-15-2016.

Tobacco: Current every day smoker Smokes 1-2 cigars/day Status: Current

Coffee: Status: N/A

Alcohol: No alcohol use. Status: Never

Recreational Drugs: No drug abuse. Status: Never

Nutrition History: Well maintained.. Developmental History: N/A.. Other History: Influenza in 2014..

Tests and Exams:

Last Recorded On: 12-15-2016.

Vitamin D (6 mo if on pills) Abnormal Done on 1/14/2015, at Evolution health laboratory services,

ordered by Dr. Ketha.

HbA, C Hemoglobin (if DM every 3 mo) Abnormal Done on 1/14/2015, at Evolution health laboratory services, ordered by Dr. Ketha.

TSH Thyroid-Stimulating Hormone (every year) Normal Done on 1/14/2015, at Evolution health laboratory services, ordered by Dr. Ketha.

CBC Complete Blood Count (3 months) Abnormal Done on 1/14/2015, at Evolution health laboratory services, ordered by Dr. Ketha.

CMP Comprehensive Metabolic Panel (3 months) Abnormal Done on 1/14/2015, at Evolution health laboratory services, ordered by Dr. Ketha.

LIPIDS (once year unless chol meds) Normal Done on 1/14/2015, at Evolution health laboratory services, ordered by Dr. Ketha.

UA - Urinalysis - (Yearly - HH primary responsibility) Abnormal Done on 1/14/2015, at Evolution health laboratory services, ordered by Dr. Ketha.

Urine Culture (prn) Normal Done on 1/14/2015, at Evolution health laboratory services, ordered by Dr. Ketha.

PSA (over 50 yrs) Abnormal Done on 1/14/2015, at Evolution health laboratory services, ordered by Dr. Ketha

Insurance:

Medicare B Texas (SMTX0)

Priority: Primary
Start Date: 2007-06-01
Relationship to Insured: Self

Type: N/A

Payer : Medicare B Texas (SMTX0)
Priority : Secondary

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

Type: N/A

Payer: Medicaid Texas (SKTX0)

Copay:

Insured ID Number: 461666426A

Group Number :

Employer Name : Willie Young Copay : Insured ID Number : 617645370

Group Number:

Employer Name: Willie Young

Immunizations:

Willie Young: Chief Complaint Patient Record Number:5213

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> Seen by Derrick Love-Jones Seen on 01-November-2016

Chief Complaint Status: finalized

Follow up home visit for management of diabetes mellitus type 2, hypertension, chronic pain, hyperlipidemia, low back pain, allergic rhinitis, benign prostatic hyperplasia, osteoarthritis, insomnia, peripheral neuropathy, and cataract. Patient continues of knee pain.

History of Present illness:

HPI Status:Finalized

A 74-year-old AA male in NAD with multiple chronic conditions including diabetes mellitus type 2, hypertension, chronic pain, and hyperlipidemia. Patient complains of knee pain that is chronic and he has had for many years. Patient rates current pain at 7/10. Patient denies any chest pain, headache, or nausea or vomiting recently.

Social History: Social history has been reviewed with the patient and updated.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-11-01	140	66	188.00	67.00	97.80	16.00	~	29.4	0.00

Review of Systems:

Constitutional:

Mighting at an ologic:

Nicy II **1037/853:9**087

Not Shipman

Medital States Of Urine

Bibliolestns

No Minimus Endoughettie Of Motion

No Black@fe&lrBiok/rehtationts

No Bleenweighting Countreent

No Obatelettiess

No Use Of Dentures

Physical Exam:

Meditendi Michiga (Philish de philipiga (Palica) Veritalish Neksarma urb im ettses - Within Normal Limits .

EXMERSE MITIES:

hier Michiel Michiels Limites .

CV:

RECONSTRUCTION WINDOWS Limits.

Murmur, Rubs, Gallops-Within Normal Limits .

Medication:

Description	Status	Start Date	End Date
Exforge ,5-160 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill			
Quantity: 2			
Unknown or N/A	Active	2016-09-15	
by Jones, Derrick - MJ3217331			
Texas Physician House Calls			

Exforge ,5-160 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-07-06
Janumet ,50-1000 MG TABS, TAKE 1 TABLET BY MOUTH TWICE A DAY WITH MEALS, Quantity: 60, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-04-05
Exforge ,5-160 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-05-14
Hydrocodone-Acetaminophen ,10-325 MG TABS, TAKE 1 TABLET BY MOUTH EVERY 8 HOURS AS NEEDED FOR PAIN, Quantity: 90, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-04-28
Crestor ,40 MG TABS, TAKE 1 TABLET BY MOUTH EVERY DAY, Quantity: 90, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-01-08
Janumet ,50-1000 MG TABS, TAKE 1 TABLET TWICE DAILY WITH MEALS, Quantity: 60, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-01-08
Lisinopril-Hydrochlorothiazide ,20-25 MG TABS, TAKE 1 TABLET BY MOUTH EVERY DAY, Quantity: 90, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-01-08
Crestor ,40 MG TABS, TAKE 1 TABLET BY MOUTH EVERY DAY, Quantity: 90, Refill Quantity: 1 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. 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. Patient encouraged continuing weight loss efforts via daily exercise and certain food restrictions. 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. Prognosis is fair and patient is stable.

- 1. Osteoarthritis with chronic pain, continue current plan.
- 2. Hypertension with vascular complications, continue current plan.
- 3. Diabetes mellitus type 2 with neuropathy, continue current plan.
- 4. Chronic pain syndrome, continue current pain medication.
- 5. Benign prostatic hyperglycemia, continue current plan.
- 6. Hyperlipidemia, continue current plan.
- 7. Allergic rhinitis, continue current plan.
- 8. Neuropathy, continue current plan.
- 9. Lumbago with chronic pain, continue current plan.
- 10. Constipation, continue current plan.

Medication refills are as follows:

Norco 10/325 mg t.i.d. Exforge 5/160 mg q.d. Polyethylene Glycol 3350 Docusate 100 mg b.i.d. Janumet 50/1000 mg b.i.d.

Medical Problem:

Description	01-1	Olask Date	Ford Date
Description	Status	Start Date	End Date
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	
Osteoarthrosis, generalized, site unspecified (ICD10:M15.0 Primary generalized (osteo)arthritis) (ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2015-10-01	
Hypertrophy (benign) of prostate without urinary obstruction and other	,		
lower urinary tract symptom (LUTS) (ICD10:N40.0 Enlarged prostate without lower urinary tract symptoms)	Active	2015-10-01	
Unknown or N/A			
Diabetes mellitus without mention of complication, type II or unspecified type, not stated as uncontrolled (ICD10:E11.9 Type 2 diabetes mellitus without complications)	Active	2015-10-01	
Unknown or N/A			
Unspecified essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01	
Chronic pain due to trauma (ICD10:G89.21 Chronic pain due to trauma) Unknown or N/A	Active	2015-10-01	
Osteoarthrosis, unspecified whether generalized or localized, site unspecified (ICD10:M19.90 Unspecified osteoarthritis, unspecified site)	Active	2015-10-01	
Unknown or N/A			
Hypertrophy (benign) of prostate with urinary obstruction and other lower urinary tract symptoms (LUTS)	Active	2015-10-01	
(ICD10:N40.1 Enlarged prostate with lower urinary tract symptoms) Unknown or N/A			
Benign essential hypertension			
(ICD10:I10 Essential (primary) hypertension)	Active	2015-10-01	
Unknown or N/A			
Other specified idiopathic peripheral neuropathy (ICD10:G60.8 Other hereditary and idiopathic neuropathies) Unknown or N/A	Active	2015-10-01	
Insomnia, unspecified (ICD10:G47.00 Insomnia, 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	
Constipation, unspecified (ICD10:K59.00 Constipation, unspecified) Unknown or N/A	Active	2015-10-01	
Cellulitis and abscess of oral soft tissues (ICD10:K12.2 Cellulitis and abscess of mouth) Unknown or N/A	Active	2015-10-01	
Other and unspecified hyperlipidemia (ICD9:272.4 Other and unspecified hyperlipidemia) Unknown or N/A	Active		
Bilateral cataracts (ICD9:366.9 Unspecified cataract) Unknown or N/A	Active		
Low back pain (ICD9:724.2 Lumbago) Unknown or N/A	Active		
Allergic rhinitis (ICD9:477.9 Allergic rhinitis, cause unspecified) Unknown or N/A	Active		
Chronic pain syndrome (ICD9:338.29 Other chronic pain)	Active		
Unknown or N/A			

Allergies:

Description	Status	Start Date	End Date
No known drug allergies	Active		
Unknown or N/A			

Surgeries:

Description	Status	Start Date	End Date
Cataract surgery both eyes (2010) Unknown or N/A	Active		
prostate exam Unknown or N/A	Active		
colonoscopy Unknown or N/A	Active		

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

Primary Justification Medical Conditions: Hyperplasia, Cataract, diabetes, hyperlipidemia, HTN

Additional Medical Conditions: Chronic pain, lower back pain, allergic rhinitis, insomnia, peripheral neuropathy.

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.

Certification Statement: Signed by (NP): 16

Signed On (NP): 2016-11-01 04:05 **Signed By (Physician):** 18

Signed on (Physician): 2016-11-08 04:05

Form_status: finalized

Procedure Order:

Patient ID	5213	Order ID	1290
Patient Name	Young, Willie	Ordered By	Love-Jones, Derrick
Order Date	2016-12-16	Print Date	2016-12-16
Order Status	complete	Encounter Date	2016-12-16
Lab	.HH Agency	Specimen Type>	

	Ordered Procedure	Report				Results						
		Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
	026: Pulse Ovimetry	2016-12-16		Final./		0097	Pulse Ovimetry	No	98%	97% to 100%		



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