

Rodney Foxall: Patient Information
Patient Record Number:6204

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: Rodney Foxall
External ID: 6204
DOB: 1959-10-24
Sex: Male
Marital Status: Single

Address: 6454 Seco Blvd
City: Dallas
State: Texas
Postal Code: 75217
Country: USA
Home Phone: 214-398-4562
Street Address: 6454 Seco Blvd
Apt/Suite/Other: House

Family History:

Last Recorded On: 08-19-2016.
Father: Father is alive with cerebrovascular effects, hypertension, and diabetes mellitus type 2..
Mother: Mother is alive with hypertension and brain cancer..
Siblings: Four sisters and two brothers in which one brother is alive and another brother is died. .
Offspring: None..

Social History:

Last Recorded On: 08-19-2016.
Tobacco: Smokes 1/2 packet per day. **Status:** Current
Alcohol: Drinks socially. **Status:** Current
Recreational Drugs: No drug abuse. **Status:** Never
Nutrition History: Regular diet..
Developmental History: Education level is 12th grade..

Tests and Exams:

Last Recorded On: 08-19-2016.
Prostate Exam N/A Done in 2004.

Insurance:

Superior Health Plan Texas (39188)

Priority : Primary
Start Date : 2016-06-01
Relationship to Insured : Self
Type : N/A
Payer : Superior Health Plan Texas (39188)

Copay :
Insured ID Number : 529515651
Group Number :
Employer Name : Rodney Foxall

Immunizations:

Rodney Foxall: Chief Complaint
Patient Record Number:6204

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Seen by Sumana Ketha MD
Seen on 10-August-2016

Chief Complaint Status:finalized

New admit to service to prevent further decline of the following chronic medical conditions of hypertension, chronic pain syndrome, anxiety, depression, osteoarthritis, and abnormal gait. Patient complains of ankle joint pain.

History of Present illness:

HPI Status:Finalized

A 56-year-old African-American male in NAD with multiple chronic conditions of the following hypertension, chronic pain syndrome, anxiety, depression, osteoarthritis, and abnormal gait. Patient states he has a history of trauma to his ankles, lower legs, and elbows. Patient states he does have chronic pain mostly in those areas. Patient denies any other issues upon examination. Patient denies any chest pain, headache, nausea/vomiting at this time.

Past Medical History:

Family History:

Social History:

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-08-10	185	93	195.00	67.00	97.60	20.00	~	0.0	0.00

Review of Systems:

Constitutional:

Weight: 195.00 lbs
Appetite: No Change
Energy: No Change
Weight loss: No Change
Weight gain: No Change
Stomach: No Change
Heart: No Change
Respiratory: No Change
Genitourinary: No Change
Endocrine: No Change
Neurological: No Change
Musculoskeletal: No Change
Skin: No Change
Eyes: No Change
Ears: No Change
Nose: No Change
Throat: No Change
Teeth: No Change
Salivary: No Change
Immune: No Change
Integumentary: No Change
Reproductive: No Change
Other: No Change

Physical Exam:

HEENT:

Head: No Change, Eyes: No Change, Ears: No Change, Nose: No Change, Throat: No Change, Teeth: No Change, Salivary: No Change, Immune: No Change, Integumentary: No Change, Reproductive: No Change, Other: No Change

HEENT:

Head: No Change, Eyes: No Change, Ears: No Change, Nose: No Change, Throat: No Change, Teeth: No Change, Salivary: No Change, Immune: No Change, Integumentary: No Change, Reproductive: No Change, Other: No Change

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Medication:

Description	Status	Start Date	End Date
Amoxicillin ,500 MG TABS, TAKE 1 TABLET TWICE DAILY UNTIL GONE, Quantity: 60, Refill Quantity: 0	Active	2016-08-15	
Unknown or N/A			
by Jones, Derrick - MJ3217331			
Texas Physician House Calls			

Plan Note:

Plan Note Status:Finalized

Continue same treatment plan as previous. Reviewed and 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 those so, low-fat, low cholesterol diet with current medical conditions. To go to the 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 as tolerated. Full set of labs of the following ordered: CBC, CMP, UA, TSH, A1C, VIT D , LIPID LDL/HDL. Patient verbalized understanding of the above planning was given the office in the front to questions or concerns. 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. Hypertension with vascular complications, continue current plan.
3. Anxiety, continue current plan.
4. Chronic pain syndrome, continue current plan.
5. Depression, continue current plan.
6. Abnormal gait, continue to monitor.

Medication refills are as follows:

Norco 10/325 mg t.i.d.
Amoxicillin 500 mg b.i.d.
Amlodipine 10 mg q.d.
HCTZ 25 mg q.d.
Xanax 0.5 mg t.i.d.

Medical Problem:

Description	Status	Start Date	End Date
Primary generalized (osteo)arthritis (ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2016-08-10	
Polyosteoarthritis, unspecified (ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2016-08-10	
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	2016-08-10	
Anxiety disorder, unspecified (ICD10:F41.9 Anxiety disorder, unspecified) Unknown or N/A	Active	2016-08-10	
Chronic pain syndrome (ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-08-10	

Allergies:

Description	Status	Start Date	End Date
Sulfar & Bactrim Unknown or N/A	Active		

Surgeries:

Description	Status	Start Date	End Date
Ankle fracture in 2011. Unknown or N/A	Active		
Screws/Elbow surgery in 1998. 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): 31

Primary Justification Medical Conditions: Depression,HTN,Mobility_Impairments,Rheumatoid Arthritis_Osteoarthritis

Additional Medical Conditions: Anxiety, Abnormal Gait, Chronic Pain Syndrome

Nursing Required: YES

Physical Therapy: NO

Occupational Therapy Required: NO

Speech-language Pathology Required: NO

Clinical Findings To Justify Home Health: Patient is homebound due to an Abnormal Gait and Chronic Pain that is not controlled.

Certification Statement: Skilled nursing is needed due to chronic pain that is uncontrolled and the inability to self medicate correctly.

Signed by (NP): 16

Signed On (NP): 2016-08-10 07:52

Signed By (Physician): 18

Signed on (Physician): 2016-08-16 07:53

Form_status: finalized

Procedure Order:

Patient ID	6204	Order ID	815
Patient Name	Foxall, Rodney	Ordered By	Love-Jones, Derrick
Order Date	2016-09-18	Print Date	2016-09-18
Order Status	complete	Encounter Date	2016-09-18
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2016-09-18		Final ✓		0097	Pulse Oximetry	No	97%	97% to 100%		



Electronically Signed by **Sumana Ketha, MD** on **2016-08-17**.

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