

Adrian Taylor: Patient Information
Patient Record Number:1298

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: Adrian Taylor
External ID: 1298
DOB: 1982-09-26
Sex: Male
S.S.: 457-65-6231
Marital Status: Single

Address: 7310 Marvin D love fwy #814
City: Dallas
State: Texas
Postal Code: 75237
Country: USA
Guardian's Name: nephew
Emergency Contact: Nephew
Home Phone: 214-927-3700
Work Phone: 214-414-5740
Street Address: 7310 Marvin D love fwy
Apt/Suite/Other: 814

Past Medical History:

Last Recorded On: 01-21-2017.
Risk Factors: Seizures.

Family History:

Last Recorded On: 01-21-2017.
Father: Unknown..
Mother: Mother had congestive heart failure..
Siblings: Unknown..
Offspring: Unknown..

Social History:

Last Recorded On: 01-21-2017.
Tobacco: Current every day smoker 1/2 packet per day. **Status:** Current
Coffee: **Status:** N/A
Alcohol: No alcohol. **Status:** Never
Recreational Drugs: No drug use. **Status:** Never
Nutrition History: Regular diet..
Developmental History: Education level is technical education..

Tests and Exams:

Last Recorded On: 01-21-2017.
Sigmoid/Colonoscopy N/A Done 5 years ago.
Prostate Exam N/A Done 5 years ago.

Insurance:

Superior Health Plan Texas (39188)

Priority : Primary
Start Date : 1983-11-01
Relationship to Insured : Self
Type : N/A
Payer : Superior Health Plan Texas (39188)
Priority : Primary
Start Date : 2011-03-01
Relationship to Insured : Self
Type : N/A
Payer : Superior Health Plan Texas (39188)

Copay :
Insured ID Number : 506870536
Group Number :
Employer Name : Adrian Taylor
Copay :
Insured ID Number : 506870536
Group Number :
Employer Name : Adrian Taylor

Immunizations:

Adrian Taylor: Chief Complaint
Patient Record Number:1298

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Seen by Sumana Ketha MD
Seen on 08-December-2016

Chief Complaint Status:finalized

Followup home visit for management of hyperlipidemia, hypertension, rheumatoid arthritis/osteoarthritis, stroke, transient ischemic heart attack, epilepsy, anxiety, tobacco use, gastroesophageal reflux disease, cerebrovascular accident, and abnormality of gait.

History of Present illness:

HPI Status:Finalized

Patient is a 34-year-old African-American male in no acute distress with multiple chronic conditions of hyperlipidemia, hypertension, rheumatoid arthritis or osteoarthritis, stroke, transient ischemic heart attack, epilepsy, anxiety, tobacco use, gastroesophageal reflux disease, cerebrovascular accident, and abnormality of gait. Patient denies any chest pain, headache, or nausea or vomiting.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-12-08	152	115	222.00	64.00	98.20	18.00	~	38.1	0.00

Review of Systems:

Constitutional:

Weight 222.00 lbs
Appetite No Change
Energy No Change
Thirst No Change
Diets No Change
Stomach No Change
Stools No Change
Urine No Change
Neurology No Change
Endocrine No Change
Reproductive No Change
Other No Change

Physical Exam:

GENRO:

Body Mass Index (BMI) 38.1, Waist Circumference 48.0, Blood Pressure 152/115 mmHg, Heart Rate 115 bpm, Respiratory Rate 18 bpm, Temperature 98.20 F, Oxygen Saturation 98%.

ENT:

Supple, Thyromegaly, Carotid of the Nasal Septum, JVD, lymphadenopathy-Within Normal Limits .

ENT:

Supple, Thyromegaly, Carotid of the Nasal Septum, JVD, lymphadenopathy-Within Normal Limits .

NECK:

Supple, Thyromegaly, Carotid of the Nasal Septum, JVD, lymphadenopathy-Within Normal Limits .

BACK:

Normal Curvature, Tenderness-Within Normal Limits .

RESP:

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

GI:

Organoomegaly-Within Normal Limits .

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

Medication:

Description	Status	Start Date	End Date
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Coreg ,6.25 MG TABS, TAKE 1 TABLET BY MOUTH TWICE A DAY, Quantity: 60, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-05-22
ALPRAZolam ,0.25 MG TABS, Take 1 Tablet By Mouth Thtee Times Daily As Needed For Anxiety, Quantity: 45, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-05-03
LevETIRAcetam ,500 MG TABS, TAKE ONE TABLET BY MOUTH TWICE DAILY, Quantity: 60, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2015-03-31
Lisinopril ,40 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	2015-03-31
Lisinopril ,40 MG TABS, TAKE 1 TABLET BY MOUTH EVERY DAY, Quantity: 30, Refill Quantity: 3 Unknown or N/A by ketha, Dr sumana - BK6230281 Sumana Ketha MDPA	Active	2015-03-20

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 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 come excessive headache, blurry vision or systolic blood pressure greater than 200. No labs need at this visit. The patient verbalized understanding of the above plan was given the office number for any questions or concerns. Prognosis is fair and patient is stable. Reviewed old records of the patient. Follow up appointment in 4-6 weeks.

1. Generalized anxiety disorder, continue current plan.
2. Hypertension with vascular complications, continue current plan.
3. Epilepsy, continue current plan.
4. Gastroesophageal reflux disease, continue current plan.
5. Insomnia, continue current plan
6. Osteoarthritis with chronic pain, continue current plan.
7. Cerebrovascular accident effects, continue to monitor.
8. Hyperlipidemia, continue current plan.

Medication refills as follows,
Alprazolm 0.5mg tid
Clonidine 0.3/24 hr patch

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	2016-09-29	
Epilepsy, unspecified, not intractable, without status epilepticus (ICD10:G40.909 Epilepsy, unspecified, not intractable, without status epilepticus) Unknown or N/A	Active	2016-06-07	
Chronic ischemic heart disease, unspecified (ICD10:I25.9 Chronic ischemic heart disease, unspecified) Unknown or N/A	Active	2016-05-04	
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-10-01	

Generalized anxiety disorder (ICD10:F41.1 Generalized anxiety disorder) Unknown or N/A	Active	2015-10-01
Insomnia, unspecified (ICD10:G47.00 Insomnia, unspecified) 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
Osteoarthritis, generalized, site unspecified (ICD10:M15.0 Primary generalized (osteo)arthritis) (ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2015-10-01
Epilepsy, unspecified, with intractable epilepsy (ICD10:G40.911 Epilepsy, unspecified, intractable, with status epilepticus) (ICD10:G40.919 Epilepsy, unspecified, intractable, without status epilepticus) 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
Mixed hyperlipidemia (ICD10:E78.2 Mixed hyperlipidemia) Unknown or N/A	Active	2015-10-01
Late effects of cerebrovascular disease, cognitive deficits (ICD10:I69.30 Unspecified sequelae of cerebral infarction) Unknown or N/A	Active	2015-10-01
Tobacco use disorder (ICD10:F17.200 Nicotine dependence, unspecified, uncomplicated) Unknown or N/A	Active	2015-10-01
Other and unspecified hyperlipidemia (ICD10:E78.4 Other hyperlipidemia) (ICD10:E78.5 Hyperlipidemia, unspecified) Unknown or N/A	Active	2015-10-01
Generalized nonconvulsive epilepsy, without mention of intractable epilepsy (ICD10:G40.A01 Absence epileptic syndrome, not intractable, with status epilepticus) 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
Acute, but ill-defined, cerebrovascular disease (ICD10:I67.89 Other cerebrovascular disease) Unknown or N/A	Active	2015-10-01

Allergies:

Description	Status	Start Date	End Date
Heparin Unknown or N/A	Active		

Surgeries:

Description	Status	Start Date	End Date
CVA to left hernia Unknown or N/A	Active	2015-02-26	

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

Current home health agency:

Primary Justification Medical Conditions: hyperlipidemia,HTN,Epilepsy

Additional Medical Conditions:

Nursing Required: YES

Physical Therapy: YES

Occupational Therapy Required: NO

Speech-language Pathology Required: NO

Requested Care/Treatments Required: Please provide physical therapy for patient.

Clinical Findings To Justify Home Health: Skilled nursing needed due to late effects of CVA, wheel chair bound and inability to self medicate correctly.

Certification Statement: Patient is home bound due to CVA and wheelchair bound. Patient has unsteady poor balance and has increased risk for falls and also needs assistance of another person at all times.

Signed by (NP): 302

Signed On (NP): 2016-12-08 03:37

Signed By (Physician): 18

Signed on (Physician): 2016-12-15 03:37

Form_status: finalized

Printed:

DME:

Description	Status	Start Date	End Date
Osteoarthritis, generalized, site unspecified sent order for power wheelchair repairs. (ICD9:715.00 Osteoarthritis, generalized, site unspecified) Unknown or N/A	Active		



Electronically Signed by **Darolyn Perkins** on **2016-12-15**.

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