

Katrina Johnson: Patient Information
Patient Record Number:6305

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: Katrina Johnson
External ID: 6305
DOB: 1968-12-07
Sex: Female
Marital Status: Single
Patient Drive Folder: 0B0x_tbqdBPhMDhyVVZ0RFFxODA

Address: 2331 Kathleen Ave
City: Dallas
State: Texas
Postal Code: 75216
Country: USA
Emergency Contact: 214-405-8107
Emergency Phone: 469-650-6832
Home Phone: 214-448-4576
Mobile Phone: 214-462-0186
Street Address: 2331 Kathleen Ave

Family History:

Last Recorded On: 02-11-2017.
Father: Unknown..
Mother: Mother is alive..
Offspring: Two boys and one girl which are alive..

Social History:

Last Recorded On: 02-11-2017.
Tobacco: Never smoker **Status:** Never
Alcohol: Drinks socially. **Status:**
Recreational Drugs: No drug abuse. **Status:** Never
Nutrition History: Regular. .
Developmental History: Education level is 12th grade. .

Insurance:

Superior Health Plan Texas (39188)

Priority : Primary
Start Date : 2016-11-01
Relationship to Insured : Self
Type : N/A
Payer : Superior Health Plan Texas (39188)

Copay :
Insured ID Number : 529194932
Group Number :
Employer Name : Katrina Johnson

Immunizations:

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Follow-up home visit to prevent further decline of the following chronic medical conditions of gout, hyperlipidemia, diabetes mellitus type 2, hypertension, osteoarthritis, depression, epilepsy, chronic pain syndrome, and anxiety. Patient complains of knee, shoulder pain, and a cough and congestion.

A 48-year-old African-American female in NAD with multiple chronic conditions of the following of gout, hyperlipidemia, diabetes mellitus type 2, hypertension, osteoarthritis, depression, epilepsy, chronic pain syndrome, and anxiety. Patient complains today of a cough and congestion for 1 week and chronic pain in her knees, shoulders. Patient denies any other issues upon examination. Patient denies any hypoglycemic episodes recently and a foot check revealed no major issues. Patient denies any chest pain, headache, nausea/vomiting recently.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-11-17	172	91	241.00	66.00	97.40	16.00	~	38.9	0.00

[illegible]

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

Description	Status	Start Date	End Date
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Proventil HFA ,108 (90 Base) MCG/ACT AERS, INHALE 1 TO 2 PUFFS EVERY 4 TO 6 HOURS AS NEEDED, Quantity: 6.7, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2017-01-09
Allopurinol ,100 MG TABS, TAKE 1 TABLET DAILY AS DIRECTED, Quantity: 30, Refill Quantity: 3 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2017-01-03
HumuLIN 70/30 ,(70-30) 100 UNIT/ML SUSP, USE AS DIRECTED, Quantity: 30, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2017-01-03
Penicillin V Potassium ,250 MG TABS, TID, Quantity: 42, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-12-15
Amoxicillin-Pot Clavulanate ,875-125 MG TABS, TAKE 1 TABLET TWICE DAILY UNTIL FINISHED, Quantity: 28, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-11-03
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	2016-11-03
Phenytoin Sodium Extended ,100 MG CAPS, ONE TAB THREE TIMES A DAY, Quantity: 90, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-11-03
Sertraline HCl ,100 MG TABS, Take 1 tablet daily, Quantity: 30, Refill Quantity: 2 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-11-03
Bactrim DS ,800-160 MG TABS, TAKE 1 TABLET BY MOUTH TWICE A DAY, Quantity: 14, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-10-11
Cipro ,250 MG TABS, TAKE 1 TABLET EVERY 12 HOURS DAILY, Quantity: 10, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-10-11

Plan Note:

Plan Note Status:Finalized

Continue same treatment plan his previous provider. 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, excessive headache, blurry vision or systolic blood pressure greater than 200. Patient encouraged exercise daily as tolerated. Full set of labs ordered. Patient verbalize understanding of the above plan I was given the office number for any questions or concerns. Prognosis is fair and patient is stable.

Patient diagnoses are,

1. Common cold, continue to monitor.
2. Hypertension with vascular complications, continue current plan.
3. Anxiety, continue current plan.
4. Gout, continue current plan.
5. Epilepsy, continue current plan.
6. Chronic pain syndrome, continue current pain medication.
7. Depression, continue current plan.

8. Osteoarthritis with chronic pain, continue current plan.
9. Diabetes mellitus type 2 with neuropathy, continue current plan.

Medication refills as follows:

Allopurinol 100 mg q.d.
 Atorvastatin 40 mg q.h.s.
 Metformin 500 mg q.d.
 Lisinopril 40 mg q.d.
 Sertraline 100 mg q.d.
 Phenylin 100 mg t.i.d.
 Xanax 0.5 mg t.i.d.
 HCTZ 25 mg q.d.
 Norco 10/325 mg t.i.d.

Medical Problem:

Description	Status	Start Date	End Date
Anxiety disorder, unspecified (ICD10:F41.9 Anxiety disorder, unspecified) Unknown or N/A	Active	2016-11-17	
Acute nasopharyngitis [common cold] (ICD10:J00 Acute nasopharyngitis [common cold]) Unknown or N/A	Active	2016-11-17	
Type 2 diabetes mellitus with diabetic neuropathy, unspecified (ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2016-11-01	
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	2016-11-01	
Idiopathic gout, unspecified site (ICD10:M10.00 Idiopathic gout, unspecified site) Unknown or N/A	Active	2016-11-01	
Epilepsy, unspecified, not intractable, without status epilepticus (ICD10:G40.909 Epilepsy, unspecified, not intractable, without status epilepticus) Unknown or N/A	Active	2016-11-01	

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: NO

Is House Visit Needed: YES

Next Visit Duration (in days): 31

Current home health agency:

Primary Justification Medical Conditions: hyperlipidemia,Rheumatoid Arthritis_Osteoarthr,HTN,Epilepsy,diabetes,Depression

Additional Medical Conditions: Anxiety, Chronic Pain Syndrome

Nursing Required: NO

Physical Therapy:

Occupational Therapy Required:

Speech-language Pathology Required:

Requested Care/Treatments Required:

Clinical Findings To Justify Home Health: Patient is homebound due to severe chronic pain.

Certification Statement: No skilled nurse she needed at this time

Signed by (NP): 16

Signed On (NP): 2016-11-17 03:16

Signed By (Physician): 18

Signed on (Physician): 2016-11-24 03:16

Form_status: finalized

Procedure Order:

Patient ID	6305	Order ID	1186
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Patient Name	Johnson, Katrina	Ordered By	Love-Jones, Derrick
Order Date	2016-11-17 00:00:00	Print Date	2017-02-12
Order Status	complete	Encounter Date	2017-02-12
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2016-11-17 00:00:00		Final ✓		0097	Pulse Oximetry	No	98%	97% to 100%		



Electronically Signed by **Sumana Ketha, MD** on **2016-11-24**.

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