William Darden: Patient Information

Patient Record Number:5977

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: William Darden External ID: 5977 DOB: 1925-07-14 Sex: Male

User Defined: Pt will be available only on Friday at 11 to 11 30 genericval1: 214-770-9660 please reach patient on this #

Patient Drive Folder:

https://drive.google.com/drive/u/0/folders/0B1v8FHBd_SfCfkxXZHFWYnhUbEVpejFGOW5WLW1DMmg0YmNCX1FkQjdZci1BM

XVydmJkS1k

Address: 5516 Kiwanis Rd

City: Dallas State: Texas Postal Code: 75236 Country: USA

Guardian's Name: call one hour before we go to patient house

Emergency Phone: 972-768-2244 Work Phone: 214-376-3551 Mobile Phone: 214-770-9660 Street Address: 5516 Kiwanis Rd

Apt/Suite/Other: House

Family History:

Last Recorded On: 10-16-2016.

Father: Unknown.. Mother: Unknown.. Siblings: Unknown... Offspring: Unknown...

Social History:

Last Recorded On: 10-16-2016. Tobacco: No smoking Status: Never Alcohol: No alcohol Status: Never

Recreational Drugs: No drugs Status: Never

Nutrition History: Regular... Developmental History: Well..

Other History: Influenza November 2015...

Insurance:

Humana (61101)

Priority: Primary Start Date: 2015-01-01

Relationship to Insured: Self **Group Number:**

Type: N/A

Payer: Humana (61101)

Copay:

Insured ID Number: H46534108

Employer Name: William Darden

Immunizations:		

William Darden: Chief Complaint Patient Record Number:5977

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

Seen by Sumana Ketha MD Seen on 05-August-2016

Chief Complaint Status: finalized

Follow up home visit for management of hypertension, benign prostatic hyperplasia, hyperlipidemia, congestive heart failure, gout, urinary incontinence, mobility impairment and bradycardia. Patient complain of toe pain.

History of Present illness:

HPI Status:Finalized

Patient is a 90-year-old African American male in NAD with multiple chronic conditions of hypertension, hyperlipidemia, urinary incontinence, benign prostatic hyperplasia, congestive heart failure, and gout. Patient complains of toe pain that has presisted for several days. Patient denies CP, HA, N/V recently.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	ВМІ	Head circ
2016-08-05	190	66	219.00	74.00	97.40	18.00	~	0.0	0.00

Review of Systems:

Constitutional:

Maistin@liainget:

No. 4 Telephone de la companya della companya de la companya della companya della

HANGE CONTROL CONTROL Note

Neal the Committee of the second

No Cremstipsation

No Changes In Mentation

Physical Exam:

EMITIES:

The Company of the Co

REBRO:

மிழ் நிக்கு சிக்கி இருக்கி இருக்கு கிகியின் அல்லாற் laterets Nasal Turbinates-Within Normal Limits .

BEIRFRIE AT Eacht In an ithiam With and Million in the demite both feet.

Medication:

Description	Status	Start Date	End Date
Potassium Chloride ER ,20 MEQ TBCR, TAKE 1 TABLET DAILY AS DIRECTED, Quantity: 30, Refill Quantity: 2			
Unknown or N/A	Active	2016-05-13	
by Jones, Derrick - MJ3217331			
Texas Physician House Calls			
Senna-Docusate Sodium ,8.6-50 MG TABS, TAKE 1 TABLET DAILY AS NEEDED, Quantity: 30, Refill Quantity: 2			
Unknown or N/A	Active	2016-03-21	
by Jones, Derrick - MJ3217331			
Texas Physician House Calls			

Terbinafine HCI ,1 % CREA, APPLY 2-3 TIMES DAILY TO AFFECTED AREA(S), Quantity: 150, Refill Quantity: 3 Unknown or N/A Active 2016-03-21 by Jones, Derrick - MJ3217331 Texas Physician House Calls Allopurinol ,300 MG TABS, TAKE 1 TABLET DAILY, Quantity: 90, Refill Quantity: 0 Active 2016-01-27 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls Furosemide ,40 MG TABS, TAKE 1 TABLET DAILY, Quantity: 90, Refill Quantity: 0 Active 2016-01-27 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls Claritin ,10 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 2 Active 2016-01-13 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls Atorvastatin Calcium ,20 MG TABS, TAKE 1 TABLET DAILY AT BEDTIME, Quantity: 90, Refill Quantity: 1 Active 2015-10-30 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 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. Patient encouraged to exercise daily. No new labs needed this visit. Patient verbalize 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. Gout, continue current plan.
- 2. Chronic kidney disease stage-3, continue current plan.
- 3. Hypertension with vascular complications, continue current plan.
- 4. Coronary artery disease, continue current plan.
- 5. Congestive heart failure with systolic, complications continue current plan.
- 6. Bradycardia, continue current plan.
- 7. Macular degeneration, continue current plan.
- 8. Hyperlipidemia, continue current plan.
- 9. Peripheral vascular disease, continue current plan.
- 10. Lumbago with chronic pain, continue current plan.

No medication refills needed at this visit discontinue Diovan and start Torasemida.

Medical Problem:

Description	Status	Start Date	End Date
Unspecified systolic (congestive) heart failure (ICD10:I50.20 Unspecified systolic (congestive) heart failure) Unknown or N/A	Active	2016-06-29	
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	2016-06-29	
Other specified peripheral vascular diseases (ICD10:I73.89 Other specified peripheral vascular diseases) Unknown or N/A	Active	2016-05-11	
Low back pain (ICD10:M54.5 Low back pain) Unknown or N/A	Active	2016-05-11	

Atherosclerotic heart disease of native coronary artery without angina pectoris (ICD10:I25.10 Atherosclerotic heart disease of native coronary artery without angina pectoris) Unknown or N/A	Active	2016-03-18
Bradycardia, unspecified (ICD10:R00.1 Bradycardia, unspecified) Unknown or N/A	Active	2016-01-26
Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease (ICD10:I13.0 Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease) Unknown or N/A	Active	2016-01-26
Heart failure, unspecified (ICD10:I50.9 Heart failure, unspecified) Unknown or N/A	Active	2016-01-26
Chronic kidney disease, stage 3 (moderate) (ICD10:N18.3 Chronic kidney disease, stage 3 (moderate)) Unknown or N/A	Active	2016-01-26
Presence of cardiac pacemaker (ICD10:Z95.0 Presence of cardiac pacemaker) Unknown or N/A	Active	2016-01-26
Old myocardial infarction (ICD10:125.2 Old myocardial infarction) Unknown or N/A	Active	2016-01-26
Spinal stenosis, site unspecified (ICD10:M48.00 Spinal stenosis, site unspecified) Unknown or N/A	Active	2016-01-26
Radiculopathy, thoracolumbar region (ICD10:M54.15 Radiculopathy, thoracolumbar region) Unknown or N/A	Active	2016-01-26
Other acquired deformities of right foot (ICD10:M21.6X1 Other acquired deformities of right foot) Unknown or N/A	Active	2016-01-26
Unspecified macular degeneration (ICD10:H35.30 Unspecified macular degeneration) Unknown or N/A	Active	2016-01-26
Unspecified urinary incontinence (ICD10:R32 Unspecified urinary incontinence) Unknown or N/A	Active	2015-11-25
Benign essential hypertension (ICD10:I10 Essential (primary) hypertension) 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
Gout, unspecified (ICD10:M10.9 Gout, unspecified) Unknown or N/A	Active	2015-10-01
Other specified cardiac dysrhythmias (ICD10:I49.8 Other specified cardiac arrhythmias) Unknown or N/A	Active	2015-10-01
Cardiac dysrhythmia, unspecified (ICD10:I49.9 Cardiac arrhythmia, unspecified) Unknown or N/A	Active	2015-10-01
Need for prophylactic vaccination and inoculation against influenza (ICD10:Z23 Encounter for immunization) Unknown or N/A	Active	2015-10-01

Allergies:

	Description	Status	Start Date	End Date
Morphine.		Active	2016-02-17	
Unknown or N/A		Active	2010-02-17	

Surgeries:

	Description	Status	Start Date	End Date
Knee Surgery. Unknown or N/A		Active	2016-02-17	
Stents in carotid arteries. Unknown or N/A		Active	2016-02-17	
Laser Eye Surgery Unknown or N/A		Active		
Pacemaker. 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

Current home health agency: VCP Home Health

Primary Justification Medical Conditions: Mobility_Impairments, Hyperplasia, hyperlipidemia, HTN, Heart_Failure, Heart_Disease

Additional Medical Conditions:

Nursing Required: YES Physical Therapy: YES

Occupational Therapy Required: NO Speech-language Pathology Required: NO Requested Care/Treatments Required:

Clinical Findings To Justify Home Health: Skilled nursing needed due to mobility impairment and cardiac dysrhythmias and

inability to self medicate.

Certification Statement: Patient is home bound due to mobility impairment and cardiac dysrhythmias. Patient is weak with poor

balance and at risk for fall. **Signed by (NP):** 16

Signed On (NP): 2016-08-05 06:48

Signed By (Physician): 18

Signed on (Physician): 2016-08-12 06:48

Form_status: finalized

Printed:

Procedure Order:

Patient ID	5977	Order ID	805
Patient Name	Darden, William	Ordered By	Love-Jones, Derrick
Order Date	2016-10-16	Print Date	2016-10-16
Order Status	complete	Encounter Date	2016-10-16
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2016-10-16		Final ✓		0097	Pulse Oximetry	No	98%	97% to 100%		



Electronically Signed by Sumana Ketha, MD on 2016-08-12.

Printed on 16-Oct-2016 20:46:44 pm.