

Juanita Dawson: Patient Information
Patient Record Number:6209

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: Juanita Dawson
External ID: 6209
DOB: 1955-10-28
Sex: Female
S.S.: 437960444
Marital Status: Divorced

Address: 109 Main Park Ln
City: Duncanville
State: Texas
Postal Code: 75137
Country: USA
Mobile Phone: 972-217-0222
Street Address: 109 Main Park Ln
Apt/Suite/Other: Colonial Viallge ,Bulding#1,Apt#109,

Family History:

Last Recorded On: 12-04-2016.
Father: Father deceased of unknown disease..
Mother: Mother deceased of unknown disease..
Siblings: Two brother and one sister..
Offspring: No children..

Social History:

Last Recorded On: 12-04-2016.
Tobacco: Never smoker No smoking. **Status:** Never
Alcohol: No alcohol. **Status:** Never
Recreational Drugs: No drug abuse. **Status:** Never
Nutrition History: Regular.
Developmental History: Well.
Other History: Immunizations, none..

Insurance:

Medicare B Texas (SMTX0)

Priority : Primary
Start Date : 2015-07-01
Relationship to Insured : Self
Type : N/A
Payer : Medicare B Texas (SMTX0)

Copay :
Insured ID Number : 437960444A
Group Number :
Employer Name : Juanita Dawson

Immunizations:

Juanita Dawson: Chief Complaint
Patient Record Number:6209

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Seen by Derrick Love-Jones
Seen on 26-October-2016

Chief Complaint Status:finalized

Follow up home visit to prevent further decline of the following chronic medical conditions of memory issues, gastroesophageal reflux disease, chronic pain syndrome, coronary artery disease, hypertension with vascular complications, urinary incontinence, osteoarthritis with chronic pain, lumbago with sciatica, depression, anxiety, and bipolar. Patient complains of pain in her tailbone, hips and lower back.

History of Present illness:

HPI Status:Finalized

A 61-year-old African-American female in NAD with multiple chronic conditions of the following memory issues, gastroesophageal reflux disease, chronic pain syndrome, coronary artery disease, hypertension with vascular complications, urinary incontinence, osteoarthritis with chronic pain, lumbago with sciatica, depression, anxiety, and bipolar. Patient has a history of knee surgery that has left her with chronic pain. Patient also states she is having pain in both hips and tailbone that starts in her lower back. Patient states her pain is relieved with current pain medication. Patient denies any other issues upon examination. Patient denies any chest pain, headache or nausea vomiting recently.

Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-10-26	116	76	150.00	68.00	97.80	16.00	~	22.8	0.00

Review of Systems:

Constitutional:

Systemic/Endocrine/Metabolic:

No Weight Loss

No Weight Gain

No Change in Appetite

No Change in Energy

No Change in Sleep

No Change in Mood

No Change in Bowel Habits

No Change in Urine

No Change in Vision

Physical Exam:

HEENT:

HEENT: Within Normal Limits .

HEENT:

HEENT: Within Normal Limits .

CYMPH:

CYMPH: Within Normal Limits .

MUSC:

MUSC: Within Normal Limits .

ROM-Within Normal Limits .

Medication:

Description	Status	Start Date	End Date
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Atorvastatin Calcium ,10 MG TABS, TAKE 1 TABLET DAILY AT BEDTIME, Quantity: 90, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-09-15
Montelukast Sodium ,10 MG TABS, TAKE 1 TABLET AT BEDTIME, Quantity: 30, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-09-15
ALPRAZolam ,0.5 MG TABS, Take 1 Tablet By Mouth Twice Daily As Needed For Anxiety, Quantity: 60, Refill Quantity: 0 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls	Active	2016-09-14
ALPRAZolam ,1 MG TABS, TAKE ONE TABLET BY MOUTH THREE TIMES A DAY WITH FOOD, Quantity: 90, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-07-27
Tradjenta ,5 MG TABS, TAKE 1 TABLET DAILY, Quantity: 30, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-07-27
VESicare ,5 MG TABS, TAKE 1 TABLET BY MOUTH DAILY, Quantity: 30, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-07-27
Atorvastatin Calcium ,10 MG TABS, TAKE 1 TABLET DAILY AT BEDTIME, Quantity: 90, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-07-27
Montelukast Sodium ,10 MG TABS, TAKE 1 TABLET AT BEDTIME, Quantity: 30, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-07-27
Lisinopril ,5 MG TABS, TAKE 1 TABLET DAILY, Quantity: 90, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-06-24

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 was given to the patient. Educated the patient to have low-salt, low-fat, and low-cholesterol diet and exercise as tolerated. Patient was given card with number to the office for any questions or concerns. Patient was instructed to go to emergency room for any life threatening emergency. Patient verbalized understanding of the above plan. Reviewed old records of the patient. Follow up appointment in 4-6 weeks.

1. Osteoarthritis with chronic pain, continue current medication.
2. Lumbago with sciatica, continue current plan.
3. Anxiety, continue current plan.
4. Depression, continue current plan.
5. Chronic pain syndrome, continue current pain medication.
6. Bipolar, continue current plan.
7. Coronary artery disease, continue current plan.
8. Gastroesophageal reflux disease, continue current plan.
9. Memory loss, continue to monitor.
10. Urinary incontinence, continue current plan.

Medication refills of the following;

Norco 10/325 mg t.i.d.

Metroprolol 25 mg q.d.
Lisinopril 5 mg q.d.
Alprozalam 1 mg t.i.d.
Carisoprodol 350 mg b.i.d.
Lipitor 10 mg q.h.s.
Singular 10 mg q.d.

Medical Problem:

Description	Status	Start Date	End Date
Anxiety disorder, unspecified (ICD10:F41.9 Anxiety disorder, unspecified) Unknown or N/A	Active	2016-10-26	
Major depressive disorder, single episode, unspecified (ICD10:F32.9 Major depressive disorder, single episode, unspecified) Unknown or N/A	Active	2016-10-26	
Low back pain (ICD10:M54.5 Low back pain) Unknown or N/A	Active	2016-09-13	
Chronic ischemic heart disease, unspecified (ICD10:I25.9 Chronic ischemic heart disease, unspecified) Unknown or N/A	Active	2016-09-13	
Type 2 diabetes mellitus with diabetic neuropathy, unspecified (ICD10:E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified) Unknown or N/A	Active	2016-07-26	
Chronic pain syndrome (ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-07-26	
Primary generalized (osteo)arthritis (ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2016-06-21	
Polyosteoarthritis, unspecified (ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2016-06-21	
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-06-21	
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	2016-06-21	
Unspecified urinary incontinence (ICD10:R32 Unspecified urinary incontinence) Unknown or N/A	Active	2016-06-21	
Bipolar disorder, unspecified (ICD10:F31.9 Bipolar disorder, unspecified) Unknown or N/A	Active	2016-06-21	

Allergies:

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

Surgeries:

Description	Status	Start Date	End Date
Knee surgery in 2016. Unknown or N/A	Active		
Breast Reduction in 2000. Unknown or N/A	Active		
Hysterectomy in 1997 Unknown or N/A	Active		

Hospitalized for chest pain.
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:

Primary Justification Medical Conditions: bipolar, Depression, HTN

Additional Medical Conditions: Memory Issues, Anxiety, CAD, GERD, Lumbago and Urinary Incontinence

Nursing Required: YES

Physical Therapy: NO

Occupational Therapy Required: NO

Speech-language Pathology Required: NO

Requested Care/Treatments Required:

Clinical Findings To Justify Home Health: Patient is homebound due to memory issues chronic depression in the inability to self medicate correctly.

Certification Statement: Skilled nursing is needed due to memory issues and the inability to self medicate correctly.

Signed by (NP): 16

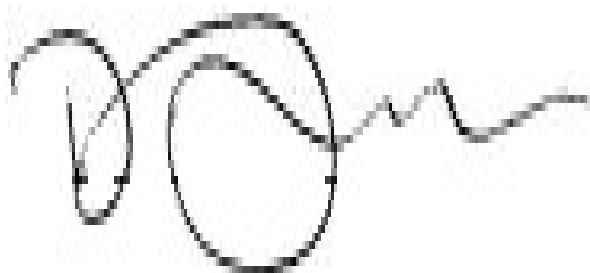
Signed By (Physician): 18

Form_status: finalized

Procedure Order:

Patient ID	6209	Order ID	1052
Patient Name	Dawson, Juanita	Ordered By	Love-Jones, Derrick
Order Date	2016-12-04	Print Date	2016-12-04
Order Status	complete	Encounter Date	2016-12-04
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry											



Electronically Signed by **Derrick Love-Jones** on **2016-11-02**.

Printed on 04-Dec-2016 19:31:42 pm.