

Donnie Miller: Patient Information
Patient Record Number:6283

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: Donnie Miller
External ID: 6283
DOB: 1960-04-07
Sex: Male
S.S.: 452237077
Marital Status: Divorced

Address: 3200 S Lancaster Rd
City: Dallas
State: Texas
Postal Code: 75216
Country: USA
Street Address: 3200 S Lancaster Rd

Family History:

Last Recorded On: 12-04-2016.
Father: Father died of coronary artery disease and colon cancer..
Mother: Mother died of coronary artery disease..
Siblings: One sister is alive..
Offspring: Denies..

Social History:

Last Recorded On: 12-04-2016.
Tobacco: No smoking. **Status:** Never
Alcohol: No alcohol. **Status:** Never
Recreational Drugs: No drug abuse. **Status:** Never
Developmental History: Education level is 12th grade..
Other History: Influenza, tetanus, pneumovax and PPD done on 2015. .

Tests and Exams:

Last Recorded On: 12-04-2016.
Sigmoid/Colonoscopy N/A Done in 2016.
Prostate Exam N/A Done in 2016.

Insurance:

Medicare B Texas (SMTX0)

Priority : Primary
Start Date : 1995-06-01
Relationship to Insured : Self
Type : N/A
Payer : Medicare B Texas (SMTX0)

Copay :
Insured ID Number : 452237077A
Group Number :
Employer Name : Donnie Miller

Immunizations:

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Chief Complaint Status:finalized

History of Present illness:

Patient is a 56-year-old African-American male in NAD multiple chronic conditions of the following schizophrenia, manic depression, coronary artery disease, hyperlipidemia, gastroesophageal reflux disease, hypertension, benign prostatic hyperplasia, epilepsy, insomnia, and osteoarthritis. Patient complains of knee pain and low back pain that is chronic and has been for several years. Patient rates his current pain at 7/10. Patient denies any other issues upon examination. Patient denies any chest pain, headache, nausea/vomiting.

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-10-28	105	78	200.00	67.00	97.80	16.00	~	31.3	0.00

No Constipation

Description	Status	Start Date	End Date
Dicyclomine HCl ,20 MG TABS, TAKE 1 TABLET EVERY MORNING AND 1 TABLET EVERY EVENING, Quantity: 60, Refill Quantity: 1			
Unknown or N/A	Active	2016-09-30	
by Jones, Derrick - MJ3217331			
Texas Physician House Calls			

Keppra ,750 MG TABS, TAKE 1 TABLET TWICE DAILY, Quantity: 180, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-09-30
Topiramate ,50 MG TABS, TAKE 1 TABLET 3 TIMES DAILY, Quantity: 90, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-09-30
Ranitidine HCl ,150 MG TABS, TAKE 1 TABLET TWICE DAILY, Quantity: 60, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-09-25
Atorvastatin Calcium ,10 MG TABS, TAKE ONE (1) TABLET BY MOUTH EVERY NIGHT AT BEDTIME, Quantity: 30, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-08-27
Dicyclomine HCl ,20 MG TABS, TAKE 1 TABLET EVERY MORNING AND 1 TABLET EVERY EVENING, Quantity: 60, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-08-27
Keppra ,750 MG TABS, TAKE 1 TABLET TWICE DAILY, Quantity: 180, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-08-27
Nitrostat ,0.4 MG SUBL, PLACE 1 TABLET UNDER THE TONGUE EVERY 5 MINUTES UP TO 3 DOSES AS NEEDED FOR CHEST PAIN, Quantity: 30, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-08-27
Tamsulosin HCl ,0.4 MG CAPS, TAKE 1 CAPSULE AT BEDTIME NIGHTLY, Quantity: 30, Refill Quantity: 1 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-08-27
TraZODone HCl ,100 MG TABS, TAKE 1 TABLET TWICE DAILY AS DIRECTED, Quantity: 60, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-08-27
Lisinopril ,10 MG TABS, Take 1 Tablet By Mouth Twice Daily, Quantity: 60, Refill Quantity: 0 Unknown or N/A by Jones, Derrick - MJ3217331 Texas Physician House Calls	Active	2016-08-27

Plan Note:

Plan Note Status:Finalized

Continue same treatment plan his previous provider. Reviewed and continue same medications, maybe 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 the air for symptoms of chest pain, shortness of breath, excessive headache, blurry vision or systolic blood pressure greater than 200. Patient encouraged to exercise daily as tolerated. No labs needed this visit. Patient verbalized understanding of the above plan and was given the office number for any questions or concerns. Prognosis is fair and patient is stable.

OA w/chronic pain continue current medication
 HTN w/vascular complications continue current plan
 GERD continue current plan
 Epilepsy continue current plan
 Chronic Pain Syndrome continue current pain medication
 Lumbago w/chronic pain continue current medication
 BPH continue current plan
 CAD continue current plan

HLD continue current plan
Insomnia continue current plan
Schizophrenia continue current plan
Abnormal Gait continue to monitor

Medication refills as follows:

Seriquel 200 mg b.i.d.
ASA 81mg q.d.
Atrovastatin 10 mg q.h.s.
Dicyctonine 20 mg b.i.d.
Keppra 750 mg b.i.d.
Lisinopril 10 mg b.i.d.
Nitro 0.4 mg sq p.r.n.
Tamsulosin 0.4 mg q.d.
Trazodone 100 mg b.i.d.
Norco 10/325 mg t.i.d.

Medical Problem:

Description	Status	Start Date	End Date
Epilepsy, unspecified, not intractable, without status epilepticus (ICD10:G40.909 Epilepsy, unspecified, not intractable, without status epilepticus) Unknown or N/A	Active	2016-10-28	
Gastro-esophageal reflux disease without esophagitis (ICD10:K21.9 Gastro-esophageal reflux disease without esophagitis) Unknown or N/A	Active	2016-09-23	
Low back pain (ICD10:M54.5 Low back pain) Unknown or N/A	Active	2016-08-26	
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-08-26	
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	2016-08-26	
Enlarged prostate with lower urinary tract symptoms (ICD10:N40.1 Enlarged prostate with lower urinary tract symptoms) Unknown or N/A	Active	2016-08-26	
Primary generalized (osteo)arthritis (ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2016-08-26	
Polyosteoarthritis, unspecified (ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2016-08-26	

Allergies:

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

Surgeries:

Description	Status	Start Date	End Date
Partial colon removal 10 years ago. Unknown or N/A	Active		
Hospitalized for TIA. 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: Hyperplasia, Depression, hyperlipidemia, HTN, Rheumatoid Arthritis, Osteoarthritis, Schizophrenia

Additional Medical Conditions: CAD, Epilepsy, Lumbago

Nursing Required: YES

Clinical Findings To Justify Home Health: Patient is homebound due to mental illness.

Certification Statement: Skilled nursing needed due to mental illness in the inability to self medicate correctly.

Signed by (NP): 16

Signed On (NP): 2016-10-28 03:03

Signed By (Physician): 18

Signed on (Physician): 2016-11-04 03:04

Form_status: finalized

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