#### **Raul Garza: Patient Information**

Patient Record Number:6089

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: Raul Garza External ID: 6089 **DOB**: 1945-02-06 Sex: Male **S.S.**: 451744661

User Defined: 214-254-1604 genericval1: 214-730-8757

Address: 1222 Stafford St

City: Dallas State: Texas Postal Code: 75208 Country: USA

Mother's Name: Micheal(son) **Guardian's Name:** 214-254-1604 **Emergency Phone:** 972-345-7718 Home Phone: 214-264-7421 Mobile Phone: 214-730-8757 Street Address: 1222 Stafford St Apt/Suite/Other: House

## **Family History:**

Last Recorded On: 11-05-2016. Father: Father had diabetes. . Mother: Father had diabetes.. Offspring: Son has heart attack..

## **Social History:**

Last Recorded On: 11-05-2016.

Tobacco: Never smoker No smoking. Status: Never

Alcohol: No alcohol use. Status: Never

Recreational Drugs: No drug abuse. Status: Never

Exercise Patterns: Status: Never Sleep Patterns: Daily eight hours..

Seatbelt Use: Yes..

Pets: Yes..

#### Insurance:

### **Medicare B Texas (SMTX0)**

**Priority**: Primary Start Date: 2010-02-01 Relationship to Insured: Self

Type: N/A

Payer: Medicare B Texas (SMTX0)

Insured ID Number: 451744661A

**Group Number:** 

Employer Name: Raul Garza

Immunizations:		

Raul Garza: Chief Complaint Patient Record Number:6089 Texas Physician House Calls (H)

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Seen by Derrick Love-Jones Seen on 11-August-2016

#### Chief Complaint Status: finalized

Follow up home visit to prevent further decline of the following medical conditions of hyperlipidemia, hypertension, chronic obstructive pulmonary disease/asthma, chronic kidney disease stage-3, osteoarthritis, coronary artery disease, congestive heart failure, atrial fibrillation, abnormal gait and lumbago. Patient complains of shortness of breath.

## **History of Present illness:**

#### **HPI Status:**Finalized

A 71-year-old African-American male in NAD with multiple chronic conditions of the following hyperlipidemia, hypertension, chronic obstructive pulmonary disease/asthma, chronic kidney disease stage-3, osteoarthritis, coronary artery disease, congestive heart failure, atrial fibrillation, abnormal gait and lumbago. Patient complains of shortness of breath while sitting and laying down. Patient denies any CP, NV or HA recently.

#### Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	BMI	Head circ
2016-08-11	130	52	163.00	71.00	97.40	22.00	~	0.0	0.00

## **Review of Systems:**

#### Constitutional:

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No Edema

No Leg Pain/Cramping

No History Murmur

Heart Problem YES

## **Physical Exam:**

#### **BENC**E:

**Torbákti SAMáshin þijalnjálaljálnjálkálaltója a skatetskálála hitátálakti Micharal** Normás Limits .

#### **ETIKLESI**C:

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#### ENIT:

RION/ENVISIFEINO Exallos ets Vithin Normal Limits.

#### NECK:

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

#### CV.

RRR-Within Normal Limits .

#### RESP:

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

#### GI:

Ogrganomegoly-Within Normal Limits .

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

#### 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 so, low-fat, low cholesterol diet with current medical conditions. Patient was instructed go to ER for symptoms of chest pain, shortness of breath, excessive headache, blurry vision or systolic blood pressure greater than 200. Patient refused lab work previously. The patient verbalize understanding of the above plan and 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. Chronic obstructive pulmonary disease/asthma, continue current plan and get a nebulizer for home treatments.
- 2. Congestive heart failure with systolic complications, continue current plan.
- 3. Chronic kidney disease stage-3, continue current plan.
- 4. Hypertension with vascular complications, continue current plan.
- 5. Osteoarthritis with chronic pain, continue current plan.
- 6. Coronary artery disease, continue current plan.
- 7. Atrial fibrillation, continue current plan.
- 8. Abnormal gait, continue to monitor.
- 9. Lumbago, continue current plan.

No medication refills needed this visit. Patient does need an Aerosol Chamber to use with his INH.

### **Medical Problem:**

Description	Status	Start Date	End Date
Encounter for general adult medical examination without abnormal findings ( ICD10:Z00.00 Encounter for general adult medical examination without abnormal findings) Unknown or N/A	Active	2016-08-12	
Chronic obstructive pulmonary disease, unspecified (ICD10:J44.9 Chronic obstructive pulmonary disease, unspecified) Unknown or N/A	Active	2016-08-11	
Chronic kidney disease, stage 3 (moderate) (ICD10:N18.3 Chronic kidney disease, stage 3 (moderate)) Unknown or N/A	Active	2016-08-11	
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	2016-08-11	
Chronic kidney disease, unspecified (ICD10:N18.9 Chronic kidney disease, unspecified) Unknown or N/A	Active	2016-06-02	
Polyosteoarthritis, unspecified (ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2016-04-27	
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	2016-04-27	
Unspecified asthma, uncomplicated (ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2016-03-16	
Chronic obstructive pulmonary disease with (acute) exacerbation (ICD10:J44.1 Chronic obstructive pulmonary disease with (acute) exacerbation) Unknown or N/A	Active	2016-03-15	
Chronic systolic (congestive) heart failure ( ICD10:I50.22 Chronic systolic (congestive) heart failure) Unknown or N/A	Active	2016-03-15	
Atherosclerotic heart disease of native coronary artery with unspecified angina pectoris (ICD10:I25.119 Atherosclerotic heart disease of native coronary artery with unspecified angina pectoris) Unknown or N/A	Active	2016-03-15	

Essential (primary) hypertension ( ICD10:l10 Essential (primary) hypertension) Unknown or N/A	Active	2016-01-28
Other hyperlipidemia ( ICD10:E78.4 Other hyperlipidemia) Unknown or N/A	Active	2016-01-28
Hyperlipidemia, unspecified ( ICD10:E78.5 Hyperlipidemia, unspecified) Unknown or N/A	Active	2016-01-28
Chronic ischemic heart disease, unspecified (ICD10:l25.9 Chronic ischemic heart disease, unspecified) Unknown or N/A	Active	2016-01-28
Other chronic pain (ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2016-01-28
Heart failure, unspecified ( ICD10:I50.9 Heart failure, unspecified) Unknown or N/A	Active	2016-01-16
Unspecified atrial fibrillation (ICD10:l48.91 Unspecified atrial fibrillation) Unknown or N/A	Active	2016-01-16
Primary generalized (osteo)arthritis (ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2016-01-16
Other abnormalities of gait and mobility ( ICD10:R26.89 Other abnormalities of gait and mobility) Unknown or N/A	Active	2016-01-16

## **Allergies:**

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

## **Surgeries:**

Description	Status	Start Date	End Date	
Hospitalized in March 2016 for 4 days with complaint of COPD.	Active			
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: Bonyl Home healthcare

Primary Justification Medical Conditions: hyperlipidemia,HTN,Heart\_Disease

Additional Medical Conditions: Chronic pain

Nursing Required: YES Physical Therapy: NO

Occupational Therapy Required: NO Speech-language Pathology Required: NO

Clinical Findings To Justify Home Health: Skilled nursing needed due to chronic pain and inability to self medicate.

Certification Statement: Patient is home bound due to chronic pain. Patient is weak with poor balance and at risk for fall.

Signed by (NP): 16

**Signed On (NP):** 2016-08-11 08:12 **Signed By (Physician):** 18

**Signed on (Physician):** 2016-08-16 08:12

Form\_status: finalized

# **Procedure Order:**

Patient ID	6089	Order ID	820
Patient Name	Garza, Raul	Ordered By	Love-Jones, Derrick
Order Date	2016-11-06	Print Date	2016-11-06
Order Status	complete	Encounter Date	2016-11-06
Lab	.HH Agency	Specimen Type>	

Ordered Procedure	Report				Results						
	Reported	Specimen	Status	Note	Code	Name	Abn	Value	Range	Units	Note
026: Pulse Oximetry	2016-11-06		Final ✓		0097	Pulse Oximetry	No	97%	97% to 100%		



Electronically Signed by **Derrick Love-Jones** on **2016-08-18**.

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