#### Theodore Jones JR: Patient Information

Patient Record Number:6010

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: Theodore Jones JR

External ID: 6010 **DOB**: 1948-02-22 Sex: Male

Marital Status: Single

Patient Drive Folder: https://drive.google.com/drive/u/0/folders/0B1v8FHBd\_SfCMjFJUG9LR0JRdG8

Address: 3200 S Lancaster Rd

City: Dallas State: Texas Postal Code: 75216 Country: USA

Mobile Phone: 214-228-9120 Street Address: 3200 S Lancaster Rd

# **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: Current every day smoker Smokes one packet per day. Status: Current

Alcohol: No alcohol. Status: Never

Recreational Drugs: No drugs. Status: Never

Nutrition History: Regular. Developmental History: Well..

Other History: Influenza November 2015..

## Insurance:

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

**Priority**: Primary Start Date: 2013-02-01 Relationship to Insured: Self

Type: N/A

Payer: Medicare B Texas (SMTX0)

**Priority**: Secondary Start Date: 2016-01-01 Relationship to Insured: Self

Type: N/A

Payer: Molina Healthcare of Texas (Z1161)

Insured ID Number: 459746385M

**Group Number:** 

Employer Name: Theodore Jones JR

Copay:

Insured ID Number: 528300467

Group Number:

Employer Name: Theodore Jonesir

Immunizations:			

## Theodore Jones JR: Chief Complaint

Patient Record Number:6010

## Texas Physician House Calls (H)

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> Seen by Derrick Love-Jones Seen on 09-September-2016

#### Chief Complaint Status: finalized

Follow-up home visit to prevent further decline of chronic medical conditions hypertension, rheumatoid arthritis, chronic pain, debility, asthma and cellulitis. Patient complains of back pain and knee pain.

## **History of Present illness:**

### **HPI Status:**Finalized

A 68-year-old African American male with multiple chronic conditions of hypertension, rheumatoid arthritis, chronic pain, asthma, and debility in no acute distress. Patient complains of pain in back and knees with relief from current pain medication. Patient denies any other issues upon examination. Patient denies any chest pain, headache, nausea vomiting at this time.

## Vitals:

Service Date	BPS	BPD	Wt	Ht	Temperature	RR	Note	ВМІ	Head circ
2016-09-09	150	72	150.00	70.00	98.40	18.00	~	0.0	0.00

# **Review of Systems:**

#### Constitutional:

#### **Main Calingan** tunologic:

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## **Physical Exam:**

## **GEND**EMITIES:

**Explaination of the control of the** 

## WYUSC:

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## NNURO:

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## NSCEH:

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Ratierat Appreatus re, other der Gesst-Withhirth Within a Normital Limits.

#### CV:

RRR-Within Normal Limits .

### RESP:

Lungs CTAB-Within Normal Limits .

Respirator Effort Unlabored-Within Normal Limits .

## **Medication:**

Description	Status	Start Date	End Date

Lisinopril, 20 MG TABS, TAKE 1 TABLET DAILY FOR BLOOD PRESSURE, Quantity: 30, Refill Quantity: 0 Unknown or N/A Active 2016-03-08 by ketha, Dr sumana - BK6230281 Texas Physician House Calls Hydrocodone-Acetaminophen ,10-325 MG TABS, TAKE 1 TABLET EVERY 8 HOURS AS NEEDED FOR PAIN, Quantity: 90, Refill Active 2016-03-08 Unknown or N/A by ketha, Dr sumana - BK6230281 Texas Physician House Calls ProAir HFA ,108 (90 Base) MCG/ACT AERS, INHALE 1 TO 2 PUFFS EVERY 4 TO 6 HOURS AS NEEDED, Quantity: 8.5, Refill Quantity: 3 Active 2015-11-22 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 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 a systolic blood pressure greater than 200. Patient encouraged to exercise daily as tolerated. No labs needed this visit. The 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. Reviewed old records of the patient. Follow up appointment in 4-6 weeks.

HTN w/vascular complications continue current plan RA/OA w/chronic pain continue current plan Asthma continue current plan Lumbago w/chronic pain continue current plan Chronic Pain Syndrome continue current pain medication Hx of Cellulitis continue to monitor

No medication refill at this visit

## **Medical Problem:**

Description	Status	Start Date	End Date
Polyosteoarthritis, unspecified (ICD10:M15.9 Polyosteoarthritis, unspecified) Unknown or N/A	Active	2016-09-09	
Epilepsy, unspecified, not intractable, without status epilepticus ( ICD10:G40.909 Epilepsy, unspecified, not intractable, without status epilepticus) Unknown or N/A	Active	2016-08-12	
Hypothyroidism, unspecified (ICD10:E03.9 Hypothyroidism, unspecified) Unknown or N/A	Active	2016-08-12	
Atherosclerotic heart disease of native coronary artery without angina pectoris ( ICD10:125.10 Atherosclerotic heart disease of native coronary artery without angina pectoris) Unknown or N/A	Active	2016-08-12	
Cellulitis, unspecified (ICD10:L03.90 Cellulitis, unspecified) Unknown or N/A	Active	2016-08-12	
Acute nasopharyngitis [common cold] ( ICD10:J00 Acute nasopharyngitis [common cold]) Unknown or N/A	Active	2016-07-15	
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	2016-07-15	

Other malaise ( ICD10:R53.81 Other malaise) Unknown or N/A	Active	2016-07-15
Unspecified asthma, uncomplicated (ICD10:J45.909 Unspecified asthma, uncomplicated) Unknown or N/A	Active	2016-06-10
Low back pain ( ICD10:M54.5 Low back pain) Unknown or N/A	Active	2016-06-10
Chronic pain syndrome ( ICD10:G89.4 Chronic pain syndrome) Unknown or N/A	Active	2016-06-10
Nicotine dependence, unspecified, uncomplicated (ICD10:F17.200 Nicotine dependence, unspecified, uncomplicated) Unknown or N/A	Active	2016-02-12
Primary generalized (osteo)arthritis (ICD10:M15.0 Primary generalized (osteo)arthritis) Unknown or N/A	Active	2016-02-12
Essential (primary) hypertension ( ICD10:I10 Essential (primary) hypertension) Unknown or N/A	Active	2015-11-20
Unspecified asthma with status asthmaticus (ICD10:J45.902 Unspecified asthma with status asthmaticus) Unknown or N/A	Active	2015-11-20
Rheumatoid arthritis, unspecified (ICD10:M06.9 Rheumatoid arthritis, unspecified) Unknown or N/A	Active	2015-11-20
Other chronic pain ( ICD10:G89.29 Other chronic pain) Unknown or N/A	Active	2015-11-20
Benign essential hypertension ( ICD9:401.1 Benign essential hypertension) Unknown or N/A	Active	2015-10-06
Rheumatoid arthritis ( ICD9:714.0 Rheumatoid arthritis) Unknown or N/A	Active	2015-10-06
Other chronic pain (ICD9:338.29 Other chronic pain) Unknown or N/A	Active	2015-10-06
Debility, unspecified (ICD9:799.3 Debility, unspecified) Unknown or N/A	Active	2015-10-06

# **Allergies:**

	Description	Status	Start Date	End Date
Naproxen Unknown or N/A		Active	2015-09-25	

# **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: We care daycare

Primary Justification Medical Conditions: Asthma,hyperlipidemia,HTN

Additional Medical Conditions: Debility, Cellulitis

Nursing Required: YES Physical Therapy: NO

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

Clinical Findings To Justify Home Health: SN needed due to debility and inability to self medicate currently.

Certification Statement: SN needed due to debility and inability to self medicate currently.

Signed by (NP): 16 Signed On (NP): 2016-09-09 03:19 Signed By (Physician): 18 Signed on (Physician): 2016-09-16 03:19 Form\_status: finalized

Printed on 16-Oct-2016 21:55:31 pm.