

CONFIDENTIAL INFORMATION

From :

c/o Focus Care
500 West Cummings Park
Suite 2700
Woburn, MA 01801

To :

SAADAT, SEYED H
140 Christiansburg Pike NE
240913742

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c/o Focus Care
500 West Cummings Park
Suite 2700
Woburn, MA 01801

SAADAT, SEYED H
140 Christiansburg Pike NE
Floyd

SAADAT, SEYED H

Through our partnership with Focus Care, your patient, covered through Virginia Premier Health, recently received a health visit by one of Focus Care's clinicians. Enclosed is a summary of the visit results for:

GARY REED
1951-12-31
11000982

This summary contains an environmental assessment, a summary of existing diagnoses, a list of current medications that may help you gain additional insight into your patient's health, as well as preventive and chronic care recommendations. Please discuss the findings with your patient at their next appointment or reach out to them for urgent concern.

Sincerely,

Thomas Lundquist, M.D.
Chief Medical Officer
Virginia Premier Health

Patient Assessment Summary

Name	: GARY REED	Age	: 70
Date of Birth	: 1951-12-31	Member ID	: 11000982
Evaluator Name	: undefined	Date	: undefined
Gender	: Male	Address	: 145 BLUE RIDGE CIRCLE NE,FLOYD,VA
Lob	: DSNP	Marital Status	: Single
Email	:	Phno	: 5402306354,

Your Vital Signs

Blood Pressure		Pulse	bpm	Respiratory Rate	
Temp		Pulse Oximetry		Pain Scale /10	
Age	70	Patients Height		Patients Weight	
BMI					

Your Screenings

Screening Name	Screening Completed	Exam Date	Screening Result	Diagnosis	Comments
DIGITAL_RETINAL_EXAM	Select				
HBA1C	Select				
MICROALBUMIN	Select				
FOBT	Select				
DEXA	Select				
PAD	Select				
Peak Flow Meter	Select				

Allergies

Answer:

Your Medications

Diagnoses	Label Name	Dose / Units	Route	Frequency	Prescribing Physician	Status
	OMEPRAZOLE	CAP 20MG	Select	Select		Taking
	FENOFIBRATE	TAB 145MG	Select	Select		Taking
	GABAPENTIN	CAP 100MG	Select	Select		Taking
	COLCHICINE	TAB 0.6MG	Select	Select		Taking
	FEBUXOSTAT	TAB 40MG	Select	Select		Taking
	PRAVASTATIN	TAB 80MG	Select	Select		Taking
	AMLOD/BENAZP	CAP 5-40MG	Select	Select		Taking
	CARVEDILOL	TAB 25MG	Select	Select		Taking
	FAMOTIDINE	TAB 20MG	Select	Select		Taking
	ULORIC	TAB 80MG	Select	Select		Taking
	ULORIC	TAB 80MG	Select	Select		Taking
	GABAPENTIN	CAP 100MG	Select	Select		Taking
	FENOFIBRATE	TAB 145MG	Select	Select		Taking
	FEBUXOSTAT	TAB 40MG	Select	Select		Taking

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	AMLOD/BENAZP	CAP 5-40MG	Select	Select		Taking
	OMEPRAZOLE	CAP 20MG	Select	Select		Taking
	PRAVASTATIN	TAB 80MG	Select	Select		Taking
	FAMOTIDINE	TAB 20MG	Select	Select		Taking
	COLCHICINE	TAB 0.6MG	Select	Select		Taking
	CARVEDILOL	TAB 25MG	Select	Select		Taking

Over the Counter Medications / Supplements

Answer:

Race

Answer: **Caucasian**

Preferred language

Answer:

Diagnoses under Chronic Care Management

None

Care management related to self - assessment and psychosocial behaviors

Further assessment and questioning should be done to determine if patient's literacy level is adequate, limited or poor to determine the best method to communicate instructions and information to the patient.

How much school have you completed?**Less than 3rd grade**

Comment :

When you read the instructions on a prescription bottle would you say that it is?**Somewhat difficult**

Comment :

Social service referral to further assess social support infrastructure.

During past 3 months has physical or emotional health limited social activities with family, friends, neighbors or groups?**Sometimes**

Comment :

Social service referral to further assess social support infrastructure

Do you have someone who can help if you are sick or have problems?**No**

Comment :

Counsel patient on the need for a Healthcare Proxy.

Do you have a Healthcare Proxy?**No**

Comment :

Counsel patient on the need for a Durable Power of Attorney.

Do you have a Durable Power of Attorney?**No**

Comment :

Care management related to patient's activity levels

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If no activities are checked as need some help or total help

Care management related to past medical history

Do you use any assistive devices? (Check device or none if no devices used)

Answer:

Are you currently seeing any specialists?

If no activities are checked as need some help or total help

Have you ever been hospitalized prior to the last 12 months?

Answer:

- In the past year how many times have you Fallen?

Answer:

Social service referral to evaluate history of potential abuse

- Have you ever physically or felt emotionally abused by someone

Answer:

Have you lost weight in the past 6 months?

Answer:

Care management related to preventive care

Counsel patient on screening guidelines with relation to type of screens that are age and gender appropriate and timelines for those screens going forward.

Screen	Answer
Colonoscopy	
Breast Exam/Mammography	
Cervical Screening	
Bone Density	
Prostate Exam/PSA	
If Diabetic Eye Exam	
If Diabetic Foot Exam	
If Diabetic Hgb A1c screen	
Lipid Panel	

Care management related to diagnoses and symptoms

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Family History

- In the past year how many times have you Fallen?
Answer:

Assessors Comments :