

# CONFIDENTIAL INFORMATION

**From :**

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

**To :**

SHAH, AMAR RAJENDRA  
4700 Puddledock Rd Ste 300  
238751268

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

SHAH, AMAR RAJENDRA  
4700 Puddledock Rd Ste 300  
Prince George

SHAH, AMAR RAJENDRA

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:

CHRISTINA TAYLOR  
1964-07-16  
11001251

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	: CHRISTINA TAYLOR	Age	: 57
Date of Birth	: 1964-07-16	Member ID	: 11001251
Evaluator Name	: undefined	Date	: undefined
Gender	: Female	Address	: 607 E BROADWAY AVE,HOPEWELL,VA
Lob	: DSNP	Marital Status	: Single
Email	:	Phno	: 4343286283,8049267801

## Your Vital Signs

Blood Pressure		Pulse	bpm	Respiratory Rate	
Temp		Pulse Oximetry		Pain Scale /10	
Age	57	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
	TRULICITY	INJ 0.75/0.5	Select	Select		Taking
	FLUCONAZOLE	TAB 150MG	Select	Select		Taking
	LISINAPRIL	TAB 10MG	Select	Select		Taking
	LANTUS SOLOS	INJ 100/ML	Select	Select		Taking
	DULOXETINE	CAP 60MG	Select	Select		Taking
	TRAZODONE	TAB 50MG	Select	Select		Taking
	VALACYCLOVIR	TAB 500MG	Select	Select		Taking
	ELIQUIS	TAB 2.5MG	Select	Select		Taking
	TERCONAZOLE	CRE 0.004	Select	Select		Taking
	PEN NEEDLES	MIS 29GX12.7	Select	Select		Taking
	FREESTYLE	MIS LANCETS	Select	Select		Taking
	GABAPENTIN	TAB 800MG	Select	Select		Taking
	FUROSEMIDE	TAB 40MG	Select	Select		Taking
	TOLTERODINE	TAB 2MG	Select	Select		Taking

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	ULTICARE PEN	MIS 31GX6MM	Select	Select		Taking
	ALCOHOL PREP	PAD 0.7	Select	Select		Taking
	IBUPROFEN	TAB 800MG	Select	Select		Taking
	ATORVASTATIN	TAB 10MG	Select	Select		Taking
	LANTUS	INJ 100/ML	Select	Select		Taking
	CEPHALEXIN	CAP 500MG	Select	Select		Taking
	INSULIN ASPA	INJ 100/ML	Select	Select		Taking
	INSULIN SYRG	MIS 1ML/31G	Select	Select		Taking
	ZOLPIDEM	TAB 5MG	Select	Select		Taking
	NOVOLOG	INJ 100/ML	Select	Select		Taking
	LEVOFLOXACIN	TAB 500MG	Select	Select		Taking
	SMZ/TMP DS	TAB 800-160	Select	Select		Taking
	PANTOPRAZOLE	TAB 40MG	Select	Select		Taking
	SMZ-TMP DS	TAB 800-160	Select	Select		Taking
	SSD	CRE 0.01	Select	Select		Taking
	ZOLPIDEM	TAB 5MG	Select	Select		Taking
	TRULICITY	INJ 0.75/0.5	Select	Select		Taking
	ELIQUIS	TAB 2.5MG	Select	Select		Taking
	VALACYCLOVIR	TAB 500MG	Select	Select		Taking
	ALCOHOL	PAD 0.7	Select	Select		Taking
	LANTUS	INJ 100/ML	Select	Select		Taking
	DULOXETINE	CAP 30MG	Select	Select		Taking
	LISINAPRIL	TAB 10MG	Select	Select		Taking
	TRAZODONE	TAB 50MG	Select	Select		Taking
	FLUCONAZOLE	TAB 150MG	Select	Select		Taking
	IBUPROFEN	TAB 800MG	Select	Select		Taking
	PEN NEEDLES	MIS 29GX12.7	Select	Select		Taking
	TOLTERODINE	TAB 2MG	Select	Select		Taking
	ULTICARE	MIS 31GX6MM	Select	Select		Taking
	TERCONAZOLE	CRE 0.004	Select	Select		Taking
	FREESTYLE MIS LANCETS	MIS LANCETS	Select	Select		Taking
	FREESTYLE TES LITE	TES LITE	Select	Select		Taking
	FUROSEMIDE	TAB 40MG	Select	Select		Taking
	GABAPENTIN	TAB 800MG	Select	Select		Taking
	ATORVASTATIN	TAB 10MG	Select	Select		Taking
	FREESTYLE MIS LITE	MIS LITE	Select	Select		Taking
	INSULIN	MIS 1ML/31G	Select	Select		Taking
	CEPHALEXIN	CAP 500MG	Select	Select		Taking

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	SMZ/TMP	TAB 800-160	Select	Select		Taking
	NOVOLOG	INJ 100/ML	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

None

## Care management related to patient's activity levels

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:

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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:

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## 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	

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## Care management related to diagnoses and symptoms

Family History

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

Answer:

Assessors Comments :