

CONFIDENTIAL INFORMATION

From :

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

To :

Dr. PEEBLES, RICHARD C
110 N Robinson St
Richmond, VA, 232204462

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

PEEBLES, RICHARD C
110 N Robinson St
Richmond, VA, 23220-4462

Dear Dr. PEEBLES, RICHARD C

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:

MARY L SMITHERS
1953-04-28
11004261

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.

If you have any questions or if you want to set up an In-Home Health Review, please call us at <1-800-318-6023 (TTY/TDD 711), Monday through Friday, 8:30 am to 9:00 pm>.

Sincerely,

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

Patient Assessment Summary

Name	: MARY L SMITHERS	Age	: 68
Date of Birth	: 1953-04-28	Member ID	: 11004261
Evaluator Name	: undefined	Date	: undefined
Gender	: Female	Address	: 1510 DREWRY STREET,RICHMOND,VA
Lob	: DSNP	Marital Status	: Single
Email	:	Phno	: 8043216412,8047144123

Your Vital Signs

Blood Pressure		Pulse	bpm	Respiratory Rate	
Temp		Pulse Oximetry		Pain Scale /10	
Age	68	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
	MIRTAZAPINE	TAB 15MG	Select	Select		Taking
	METOPROL TAR	TAB 25MG	Select	Select		Taking
	LANTUS	INJ 100/ML	Select	Select		Taking
	HYDRALAZINE	TAB 25MG	Select	Select		Taking
	ONETOUCH	TES ULTRA BL	Select	Select		Taking
	ONDANSETRON	TAB 4MG	Select	Select		Taking
	METOCLOPRAM	TAB 5MG	Select	Select		Taking
	NOVOLIN N	INJ U-100	Select	Select		Taking
	CLOTRIM/BETA	CRE 1-0.05%	Select	Select		Taking
	GABAPENTIN	CAP 100MG	Select	Select		Taking
	FLUCONAZOLE	TAB 100MG	Select	Select		Taking
	SUCRALFATE	TAB 1GM	Select	Select		Taking
	LANTUS SOLOS	INJ 100/ML	Select	Select		Taking
	NOVOLOG	INJ FLEXPEN	Select	Select		Taking

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	SEVELAMER	TAB 800MG	Select	Select		Taking
	CLOPIDOGREL	TAB 75MG	Select	Select		Taking
	LOSARTAN POT	TAB 50MG	Select	Select		Taking
	BD PEN NEEDL	MIS 31GX8MM	Select	Select		Taking
	ATORVASTATIN	TAB 10MG	Select	Select		Taking
	FAMOTIDINE	TAB 20MG	Select	Select		Taking
	FREESTYLE	KIT SENSOR	Select	Select		Taking
	LOPERAMIDE	CAP 2MG	Select	Select		Taking
	INSULIN ASPA	INJ FLEXPEN	Select	Select		Taking
	CEFDINIR	CAP 300MG	Select	Select		Taking
	HYDROCO/APAP	TAB 5-325MG	Select	Select		Taking
	CEPHALEXIN	CAP 500MG	Select	Select		Taking
	FUROSEMIDE	TAB 40MG	Select	Select		Taking
	NITROFUR MAC	CAP 100MG	Select	Select		Taking
	INSULIN SYRG	MIS 0.5/29G	Select	Select		Taking
	AMLODIPINE	TAB 5MG	Select	Select		Taking
	LEVOFLOXACIN	TAB 750MG	Select	Select		Taking
	ALCOHOL PREP	PAD MED 70%	Select	Select		Taking
	LACTULOSE	SOL 10GM/15	Select	Select		Taking
	GLUCAGON	KIT 1MG	Select	Select		Taking
	MONUROL	PAK GRANULES	Select	Select		Taking
	BAQSIMI TWO	POW 3MG/DOSE	Select	Select		Taking
	POT CHLORIDE	CAP 10MEQ ER	Select	Select		Taking
	CYCLOBENZAPR	TAB 10MG	Select	Select		Taking
	ONETOUCH DEL	MIS PLUS 33G	Select	Select		Taking
	MUPIROCIN	OIN 0.02	Select	Select		Taking
	LANTUS	INJ 100/ML	Select	Select		Taking
	ONDANSETRON	TAB 4MG	Select	Select		Taking
	CLOPIDOGREL	TAB 75MG	Select	Select		Taking
	METOPROL	TAB 25MG	Select	Select		Taking
	MIRTAZAPINE	TAB 15MG	Select	Select		Taking
	METOCLOPRAM	TAB 5MG	Select	Select		Taking
	HYDRALAZINE	TAB 25MG	Select	Select		Taking
	CLOTTRIM/BETA	CRE DIPROP	Select	Select		Taking
	SEVELAMER	TAB 800MG	Select	Select		Taking
	CYCLOBENZAPR	TAB 10MG	Select	Select		Taking
	GABAPENTIN	CAP 100MG	Select	Select		Taking

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	SUCRALFATE	TAB 1GM	Select	Select		Taking
	FLUCONAZOLE	TAB 100MG	Select	Select		Taking
	NOVOLIN	INJ U-100	Select	Select		Taking
	HYDROCO/APAP	TAB 7.5-325	Select	Select		Taking
	ONETOUCH	TES ULTRA	Select	Select		Taking
	BD PEN NEEDL	MIS 32GX5/32	Select	Select		Taking
	NOVOLOG	INJ FLEXPEN	Select	Select		Taking
	ATORVASTATIN	TAB 10MG	Select	Select		Taking
	LOSARTAN	TAB 50MG	Select	Select		Taking
	INSULIN	INJ FLEXPEN	Select	Select		Taking
	FAMOTIDINE	TAB 20MG	Select	Select		Taking
	LEVOFLOXACIN	TAB 250MG	Select	Select		Taking
	CEFDINIR	CAP 300MG	Select	Select		Taking
	FREESTYLE KIT SENSOR	KIT SENSOR	Select	Select		Taking
	LOPERAMIDE	CAP 2MG	Select	Select		Taking
	CEPHALEXIN	CAP 500MG	Select	Select		Taking
	POT CHLORIDE	CAP 10MEQ ER	Select	Select		Taking
	AMLODIPINE	TAB 5MG	Select	Select		Taking
	FUROSEMIDE	TAB 40MG	Select	Select		Taking
	NITROFUR	CAP 100MG	Select	Select		Taking
	GLUCAGON	KIT 1MG	Select	Select		Taking
	ALCOHOL	PAD MED 70%	Select	Select		Taking
	LACTULOSE	SOL 10GM/15	Select	Select		Taking

Over the Counter Medications / Supplements

Answer:

- Race

Answer: African American

- Preferred language

Answer: English

Diagnoses under Chronic Care Management

None

Care management related to self - assessment and psychosocial behaviors

None

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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:

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	

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Lipid Panel	
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Care management related to diagnoses and symptoms

Family History

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

Assessors Comments :