



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

VANGANI, VEENA N
4604 Spotsylvania Pkwy
Fredericksburg, VA, 224087763

Dear Dr. VANGANI, VEENA N

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:

VADA J WARF
1939-06-05
11013154

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	: VADA J WARF	Age	: 82
Date of Birth	: 1939-06-05	Member ID	: 11013154
Evaluator Name	: test	Date	:
Gender	: Female	Address	: 3404 DANBURY CIRCLE,SPOTSYLVANIA,VA
Lob	: DSNP	Marital Status	: Single
Email	:	Phno	: 5404248638,5405822574

Your Vital Signs

Blood Pressure		Pulse	bpm	Respiratory Rate	
Temp		Pulse Oximetry		Pain Scale /10	
Age	82	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
gdgdgdgdgdfgdfgdf	PANTOPRAZOLE	TAB 40MG	SQ = Subcutaneous	PRN	dsfdfsdfsdfsdff	Taking
fgdfgdfgrthtfgwkeufhkewfhhfjks	SPIRIVA	AER 1.25MCG	E = Eye	AC & HS	sdfsdffsfgdfsfugskfgksfjs	Taking
	ADVAIR HFA	AER 115/21	Select	Select		Not Taking
	LANTUS SOLOS	INJ 100/ML	Select	Select		Not Taking
	BD PEN NEEDL	MIS 31GX8MM	Select	Select		Taking
	ALBUTEROL	NEB 0.00083	Select	Select		Taking
	INSULIN ASPA	INJ FLEXPEN	Select	Select		Taking
	FREESTYLE	KIT SENSOR	Select	Select		Taking
	FUROSEMIDE	TAB 40MG	Select	Select		Taking
	ESCITALOPRAM	TAB 20MG	Select	Select		Taking

Patient Assessment Summary

Name	: VADA J WARF	Age	: 82
Date of Birth	: 1939-06-05	Member ID	: 11013154
Evaluator Name	: test	Date	:
Gender	: Female	Address	: 3404 DANBURY CIRCLE,SPOTSYLVANIA,VA
Lob	: DSNP	Marital Status	: Single
Email	:	Phno	: 5404248638,5405822574

	ELIQUIS	TAB 2.5MG	Select	Select		Taking
	HYDROXYZ HCL	TAB 25MG	Select	Select		Taking
	NOVOLOG	INJ FLEXPEN	Select	Select		Taking
	LOSARTAN POT	TAB 25MG	Select	Select		Taking
	TRAMADOL HCL	TAB 50MG	Select	Select		Taking
	FLUAD QUADRI	INJ 0.5ML	Select	Select		Taking
	BUSPIRONE	TAB 10MG	Select	Select		Taking
	BUMETANIDE	TAB 2MG	Select	Select		Taking
	ATORVASTATIN	TAB 10MG	Select	Select		Taking
	METOPROL SUC	TAB 25MG ER	Select	Select		Taking
	CARVEDILOL	TAB 6.25MG	Select	Select		Taking
	VENTOLIN HFA	AER	Select	Select		Taking
	ONETOUCH	TES VERIO	Select	Select		Taking
	ALBUTEROL SUL	FAT E	Select	Select		Taking
	PREDNISONE	TAB 20MG	Select	Select		Taking
	MECLIZINE	TAB 25MG	Select	Select		Taking
	ADVAIR	AER 115/21	Select	Select		Taking
	SPIRIVA	AER 1.25MCG	Select	Select		Taking
	PANTOPRAZOLE	TAB 40MG	Select	Select		Taking
	INSULIN	INJ FLEXPEN	Select	Select		Taking
	ALBUTEROL	FAT E	Select	Select		Taking
	FREESTYLE KIT SENSOR	KIT SENSOR	Select	Select		Taking
	LANTUS	INJ 100/ML	Select	Select		Taking
	BD PEN NEEDL	MIS 31GX8MM	Select	Select		Taking
	ESCITALOPRAM	TAB 20MG	Select	Select		Taking
	BUMETANIDE	TAB 1MG	Select	Select		Taking
	NOVOLOG	INJ FLEXPEN	Select	Select		Taking
	FUROSEMIDE	TAB 40MG	Select	Select		Taking
	ELIQUIS	TAB 2.5MG	Select	Select		Taking
	PREDNISONE	TAB 20MG	Select	Select		Taking
	HYDROXYZ	TAB 25MG	Select	Select		Taking
	LOSARTAN	TAB 25MG	Select	Select		Taking
	BUSPIRONE	TAB 10MG	Select	Select		Taking
	FREESTYLE MIS READER	MIS READER	Select	Select		Taking
	TRAMADOL	TAB 50MG	Select	Select		Taking
	FLUAD	INJ 0.5ML	Select	Select		Taking
	METOPROL	TAB 25MG ER	Select	Select		Taking
	CARVEDILOL	TAB 6.25MG	Select	Select		Taking

Patient Assessment Summary

Name	: VADA J WARF	Age	: 82
Date of Birth	: 1939-06-05	Member ID	: 11013154
Evaluator Name	: test	Date	:
Gender	: Female	Address	: 3404 DANBURY CIRCLE,SPOTSYLVANIA,VA
Lob	: DSNP	Marital Status	: Single
Email	:	Phno	: 5404248638,5405822574

	ATORVASTATIN	TAB 10MG	Select	Select		Taking
	VENTOLIN	AER	Select	Select		Taking
	MECLIZINE	TAB 25MG	Select	Select		Taking
	ONETOUCH	TES VERIO	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:

Patient Assessment Summary

Name	: VADA J WARF	Age	: 82
Date of Birth	: 1939-06-05	Member ID	: 11013154
Evaluator Name	: test	Date	:
Gender	: Female	Address	: 3404 DANBURY CIRCLE,SPOTSYLVANIA,VA
Lob	: DSNP	Marital Status	: Single
Email	:	Phno	: 5404248638,5405822574

- 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

Family History

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

Answer:

Assessors Comments :