



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

WADDELL, NIKKI RAI
5901 Kingstowne Village Pkwy Ste 300
Kingstowne, VA, 223155883

Dear Dr. WADDELL, NIKKI RAI

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:

HASSAN BENADADA
1992-01-13
11013916

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	: HASSAN BENADADA	Age	: 29
Date of Birth	: 1992-01-13	Member ID	: 11013916
Evaluator Name	: test	Date	:
Gender	: Male	Address	: 6520 TELEGRAPH ROAD,ALEXANDRIA,VA
Lob	: DSNP	Marital Status	: Single
Email	:	Phno	: 7039228967,

Your Vital Signs

Blood Pressure		Pulse	bpm	Respiratory Rate	
Temp		Pulse Oximetry		Pain Scale /10	
Age	29	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
	ARIPIRAZOLE	TAB 10MG	Select	Select		Taking
	LITHIUM CARB	CAP 150MG	Select	Select		Taking
	FENOFIBRATE	TAB 48MG	Select	Select		Taking
	AUSTEDO	TAB 6MG	Select	Select		Taking
	ZOLPIDEM	TAB 5MG	Select	Select		Taking
	IBUPROFEN	TAB 600MG	Select	Select		Taking
	LORAZEPAM	TAB 1MG	Select	Select		Taking
	INGREZZA	CAP 40-80MG	Select	Select		Taking
	TRETINOIN	CRE 0.00025	Select	Select		Taking
	BACLOFEN	TAB 10MG	Select	Select		Taking
	METFORMIN	TAB 1000MG	Select	Select		Taking
	ZOLPIDEM ER	TAB 12.5MG	Select	Select		Taking
	FLUTICASONE	SPR 50MCG	Select	Select		Taking
	DIVALPROEX	TAB 500MG	Select	Select		Taking

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		DR				
	TRIAMCINOLON	CRE 0.001	Select	Select		Taking
	LOSARTAN POT	TAB 25MG	Select	Select		Taking
	PIMECROLIMUS	CRE 0.01	Select	Select		Taking
	CLINDAMYCIN	SOL 0.01	Select	Select		Taking
	ARIPIRAZOLE	TAB 10MG	Select	Select		Taking
	FENOFIBRATE	TAB 48MG	Select	Select		Taking
	LITHIUM	CAP 300MG	Select	Select		Taking
	AUSTEDO	TAB 6MG	Select	Select		Taking
	ZOLPIDEM	TAB 5MG	Select	Select		Taking
	INGREZZA	CAP 80MG	Select	Select		Taking
	IBUPROFEN	TAB 600MG	Select	Select		Taking
	LORAZEPAM	TAB 1MG	Select	Select		Taking
	DIVALPROEX	TAB 500MG DR	Select	Select		Taking
	LOSARTAN	TAB 25MG	Select	Select		Taking
	METFORMIN	TAB 1000MG	Select	Select		Taking

Over the Counter Medications / Supplements

Answer:

- Race

Answer: **Caucasian**

- Preferred language

Answer: **Other**

If other,

Answer: French

Comment: french

Diagnoses under Chronic Care Management

None

Care management related to self - assessment and psychosocial behaviors

- Limited English proficiency, may require the use of a translator and or written information provided in preferred language.

Preferred Language : **Other**

Comment :

If other, : French

Comment : **french**

- Based on score of initial screen, cognitive function is questionable, refer to Neurology for further assessment.

Mini cog : 3

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Comment :

- 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 get written information at a doctor's office would you say it is? : **Somewhat difficult**

Comment :

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	

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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 :