

CONFIDENTIAL INFORMATION

From :

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

To :

Dr. GRANT, THOMAS R
825 Fairfax Ave Hofheimer Hall 1st Floor Suite 118
Norfolk, VA, 235071914

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GRANT, THOMAS R
825 Fairfax Ave Hofheimer Hall 1st Floor Suite 118
Norfolk, VA, 235071914

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

07/14/2022

Dear GRANT,

Re: Patient RACHEL TAYLOR, DOB: 11/03/1945

Recently, one of your patients had a health visit with Focus Care. The visit was authorized by Virginia Premier Health, your patient's health insurance plan.

The attached document is a copy of the laboratory test results from their visit with Focus Care. We hope the information from these test results will be valuable and support you in your role as a primary care provider.

If you have any questions, please call 1-800-318-6023 (TTY/TDD 711), Monday through Friday, 8:30 am to 9:00 pm.

Sincerely,

A handwritten signature in black ink, appearing to read "Mark Mattingly", followed by the letters "MD" in a smaller, handwritten font.

Mark Mattingly, M.D.
Vice President, Medical Affairs

Patient Assessment Summary

Name	: RACHEL C TAYLOR	Age	: 76
Date of Birth	: 1945-11-03	Member ID	: 11000068
Evaluator Name	: test clinicianFE, FNP	Date	: 2022-2-17 02:24 PM
Gender	: Female	Address	: SAMUELS, GARFIELD HUE MD,NORFOLK,VA
Lob	: DSNP	Marital Status	: Single
Email	: qwe@gmail.com	Phone	: 7574612312, 5847236914
Primary Language	: Greek	Race	: African American

Vital Signs

Blood Pressure	25/25 mmHG	Pulse	65 bpm	Respiratory Rate	25
Temp	37	Pulse Oximetry	65	Pain Scale /10	5
Age	76	Patients Height	4 feet 23 inch	Patients Weight	52 lbs
BMI	7.3 (Obesity)				

Allergies

Substance	Reaction
asd	ref

Current Medications

Diagnoses	Label Name	Dose / Units	Route	Frequency	Prescribing Physician	Status
asd	Ranitidine	25	PO = By Mouth	Select	hg	Not Taking

Over the Counter Medications / Supplements

Date	Description	Dose/Units	Route	Frequency
2022-03-03	all	2	PO = By Mouth	2

Diagnoses under Chronic Care Management

Active

1. Difficulty Chewing
2. Other - ss
3. Chronic Pulmonary Embolism
4. Celiac Disease, Gall Bladder Disease
5. BPH
6. Osteoarthritis

History of

1. Retinal Disease

Care management related to patient's activity levels

Assistive Devices and DME

Prosthesis

Falls during the past year

Once

Do you worry about falling or feeling unsteady when standing or walking

Yes

Worries about falling or feeling unsteady when standing or walking?

No

Did you have a fracture in past 6 months?

Yes

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Was it due to fall?
Yes
Are you on osteoporosis med?
No

Care management related to past medical history

Number of times in the past 12 months seen PCP : None
Number of times in past 12 months been to the Emergency Room : 1
kjh
Number of times in past 12 months stayed overnight in hospital : 2
okn
Number of times in past 12 months been in a nursing home : 1
okl
Had Surgery in the last 12 months : 5
hjj
Ever been hospitalized prior to the past 12 months: No

Providers:

Medical Specialty	Specialist	For
Primary Care Physician	GRANT, THOMAS R	

Family History:

None

Care management related to preventive care

Screenings completed during today's visit:

Screening Name	Screening Completed	Exam Date	Screening Result	Diagnosis	Comments
MICROALBUMIN	Yes	2022-04-28	yes	yes	yes
FOBT	No				
A1C	No				
LDL	Yes	2022-04-28	sss	afa	ggd
RETINAL EYE EXAM	No				
DEXA	No				
PAD	Yes	2022-04-27	L: Hi(Mild) R: hello(Moderate).	dd	ss

PHQ 2 Score: 2

Preventative Follow up needed

Screenings

Breast Cancer Screening	
Influenza Vaccine	
Diabetes Screening	
Abdominal Aneurysm Screening	
Nutrition/ weight management	

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Social

Smoking/Tobacco	
Durable Power of attorney	
Food Disparity	
Social support evaluation	

Disease Management

Discuss options with your Doctor and/or pharmacist to improve medication adherence	
Discuss medication side effects with your Doctor	
Hearing evaluation	
Dental exam	
Swallowing evaluation	
Heart Healthy Diet	
Discuss PT/OT evaluation with PCP	
Check Blood sugar	
Take medications as prescribed	
Other	

Assessor Comments	ye
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