

CONFIDENTIAL INFORMATION

From :

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

To :

Dr. KON, RACHEL H
1222 Jefferson Park Ave Fl 3
Charlottesville, VA, 229033410

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KON, RACHEL H
1222 Jefferson Park Ave Fl 3
Charlottesville, VA, 229033410

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

05/17/2022

Dear KON,

Re: Patient undefined undefined, DOB:

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".

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

Patient Assessment Summary

Name	: MARY F ANDREWS	Age	: 84
Date of Birth	: 1938-01-05	Member ID	: 11000382
Evaluator Name	: test clinicianFE, FNP	Date	: 2022-5-18 02:49 PM
Gender	: Female	Address	: 335 WOOD DR,RUCKERSVILLE,VA
Lob	: DSNP	Marital Status	:
Email	:	Phone	: 4342604033,
Primary Language	: English	Race	: Caucasian

Vital Signs

Blood Pressure	/undefined mmHG	Pulse	bpm	Respiratory Rate	
Temp		Pulse Oximetry		Pain Scale /10	
Age	84	Patients Height		Patients Weight	
BMI					

Allergies

None

Current Medications

None

Over the Counter Medications / Supplements

None

Diagnoses under Chronic Care Management

None

Care management related to patient's activity levels

Assisitive Devices and DME
Cane, Prosthesis, Bedside Commode, Bed Pan
Falls during the past year
None

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 : None
Number of times in past 12 months stayed overnight in hospital : None
Number of times in past 12 months been in a nursing home : None
Had Surgery in the last 12 months : None
Ever been hospitalized prior to the past 12 months: No

Providers:

Medical Specialty	Specialist	For
Primary Care Physician	KON, RACHEL H	

Family History:

None

Care management related to preventive care

Screenings completed during today's visit:

Screening Name	Screening	Exam Date	Screening Result	Diagnosis	Comments
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	Completed				
MICROALBUMIN	No				
FOBT	No				
A1C	No				
LDL	No				
RETINAL EYE EXAM	No				
DEXA	No				
PAD	No				

PHQ 2 Score:

Preventative Follow up needed

Screenings

Abdominal Aneurysm Screening	
Hepatitis C Screening	
Nutrition/ weight management	
Other	

Social

Smoking/Tobacco	
Durable Power of attorney	
Advanced Directive	
Literacy	
Social support evaluation	

Disease Management

Discuss options with your Doctor and/or pharmacist to improve medication adherence	
Discuss medication side effects with your Doctor	
Dental exam	
Eye exam	
Swallowing evaluation	
Heart Healthy Diet	
Exercise 30 min a day	
Take medications as prescribed	
Other	

Assessor Comments	
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