

CONFIDENTIAL INFORMATION

From :

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

To :

Dr. BONEY, ARON RHODES
150 Kingsley Ln Ste 4000
Norfolk, VA, 235054602

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BONEY, ARON RHODES
150 Kingsley Ln Ste 4000
Norfolk, VA, 235054602

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

05/25/2022

Dear BONEY, ARON RHODES,

Virginia Premier, in partnership with Focus Care, provided a comprehensive health visit for your patient. The visit was conducted by a Focus Care clinician. Find attached a summary of the visit for:

DAVID F ROMAINE
02/11/2009
11000457

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 concerns.

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,

A handwritten signature in black ink, appearing to read "Mark Mattingly" followed by a stylized "mo".

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

Patient Assessment Summary

Name	: DAVID F ROMAINE	Age	: 13
Date of Birth	: 2009-02-11	Member ID	: 11000457
Evaluator Name	: test clinicianFE, FNP	Date	: 2022-7-20 07:00 PM
Gender	: Male	Address	: 1025 W GRACE ST,RICHMOND,VA
Lob	: MLTSS	Marital Status	: Single
Email	:	Phone	: 80435315851, 80435315851
Primary Language	: Portuguese	Race	:

Vital Signs

Blood Pressure	/undefined mmHG	Pulse	bpm	Respiratory Rate	
Temp		Pulse Oximetry		Pain Scale /10	
Age	13	Patients Height		Patients Weight	
BMI	(Moderate Obesity)				

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, Urinal, CPAP

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	BONEY, ARON RHODES	

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: 0

Preventative Follow up needed

Screenings

Breast Cancer Screening	
Influenza Vaccine	
Pneumococcal Vaccine	
Diabetic Foot Exam	
STIs/HIV Screening	
Osteoporosis Screening	
Fall Risk Screening	
Abdominal Aneurysm Screening	
Hepatitis C Screening	
Nutrition/ weight management	
Other	

Social

Smoking/Tobacco	
Substance Abuse	
Healthcare Proxy	
Food Disparity	
Literacy	

Disease Management

Discuss options with your Doctor and/or pharmacist to improve medication adherence	
Hearing evaluation	
Eye exam	
Blood Pressure checks	
Heart Healthy Diet	
Exercise 30 min a day	
Take medications as prescribed	

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Other	
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Assessor Comments	
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