

# CONFIDENTIAL INFORMATION

**From :**

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

**To :**

Dr. BRADLEY, THOMAS  
20280 Market St,  
Onancock, VA, 234171331

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BRADLEY, THOMAS  
20280 Market St,  
Onancock, VA, 234171331

Virginia Premier Elite Plus  
Attn: Medical Management  
PO Box 4280  
Richmond, VA 23220-0307  
1-800-318-6023

2022-02-09

Dear BRADLEY, THOMAS

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:

KESHONDA L SAMPLE  
1988-07-30  
10027662

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,

Dr. Mark Mattingly, MD  
[Medical Director]

10027662



# Patient Assessment Summary

Name	: KESHONDA L SAMPLE	Age	: 33
Date of Birth	: 1988-07-30	Member ID	: 10027662
Evaluator Name	: undefined	Date	: undefined
Gender	: Female	Address	: PO BOX 361, MELFA, VA
Lob	: MLTSS	Marital Status	: Single
Email	:	Phno	: 7577094846, 7577094846,

## Your Vital Signs

Blood Pressure		Pulse	bpm	Respiratory Rate	
Temp		Pulse Oximetry		Pain Scale /10	
Age	33	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
	METHOCARBAM	TAB 750MG	Select	Select		Taking
	HYDROCHLOROT	CAP 12.5MG	Select	Select		Taking
	IBUPROFEN	TAB 600MG	Select	Select		Taking
	FLUCONAZOLE	TAB 150MG	Select	Select		Taking
	CETIRIZINE	TAB 10MG	Select	Select		Taking
	CVS	POW	Select	Select		Taking
	LANSOPRAZOLE	CAP 30MG DR	Select	Select		Taking
	TOPIRAMATE	TAB 25MG	Select	Select		Taking
	FLUTICASONE	SPR 50MCG	Select	Select		Taking
	CLONIDINE	TAB 0.1MG	Select	Select		Taking
	ESCITALOPRAM	TAB 10MG	Select	Select		Taking
	SELENIUM	SHA 0.0225	Select	Select		Taking
	DOCUSATE	CAP 100MG	Select	Select		Taking
	SMZ/TMP	TAB 800-160	Select	Select		Taking

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	AMITRIPTYLIN	TAB 25MG	Select	Select		Taking
	METRONIDAZOL	TAB 500MG	Select	Select		Taking
	CEPHALEXIN	CAP 500MG	Select	Select		Taking
	DEXILANT	CAP 60MG DR	Select	Select		Taking
	STOOL	CAP 100MG	Select	Select		Taking
	PANTOPRAZOLE	TAB 40MG	Select	Select		Taking
	RANITIDINE	TAB 150MG	Select	Select		Taking
	RABEPRAZOLE	TAB 20MG	Select	Select		Taking
	FAMOTIDINE	TAB 40MG	Select	Select		Taking
	EPIPEN	INJ 0.3MG	Select	Select		Taking
	PREDNISONE	TAB 20MG	Select	Select		Taking
	LACTULOSE	SOL 10GM/15	Select	Select		Taking
	EPINEPHRINE	INJ 0.3MG	Select	Select		Taking

## Over the Counter Medications / Supplements

Answer:

### - Race

Answer: Other

Describe

Answer: No Ethnicity

### - Preferred language

Answer:

## Diagnoses under Chronic Care Management

None

## Care management related to self - assessment and psychosocial behaviors

- 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.

When you read the instructions on a prescription bottle would you say that it is? : Somewhat difficult

Comment :

- Social service referral to further assess social support infrastructure.

During past 3 months has physical or emotional health limited social activities with family, friends, neighbors or groups? : Sometimes

Comment :

- Social service referral to further assess current living conditions.

Where do you currently live? : Nursing Home

Comment :

- Social service referral to further assess social support infrastructure

Do you have someone who can help if you are sick or have problems? : No

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Comment :

## Care management related to patient's activity levels

- Patient should be referred for a physical therapy evaluation related to ADL's.

Refer patient for a physical therapy evaluation

A. Getting in or out of bed : No

Refer patient for a physical therapy evaluation related to ADL's

B. Getting in or out of chairs : No

C. Toileting : No

D. Bathing : No

E. Dressing : No

F. Eating : No

G. Walking : No

H. Going up or down stairs : No

## Care management related to past medical history

Do you use any assistive devices? (Check device or none if no devices used)

Answer: Wheel Chair

Are you currently seeing any specialists?

- Patient should be referred for a physical therapy evaluation related to ADL's.

Refer patient for a physical therapy evaluation

A. Seen your PCP : 2

Refer patient for a physical therapy evaluation related to ADL's

B. Visited the Emergency Room : 2

If one or more, describe

C. Stayed in the hospital overnight : 2

If one or more, describe

D. Been in a nursing home : 2

If one or more, describe

E. Had Surgery : 2

If one or more, describe

- Have you ever been hospitalized prior to the last 12 months?

Answer:

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

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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 :