

# CONFIDENTIAL INFORMATION

**From :**

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

**To :**

Dr. KNICK, TAMMY S NP  
Ghent Family Medicine  
versile, va, 3333

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# Patient Assessment Summary

Name	: EDMONDSON R THOMAS	Age	: 18
Date of Birth	: 2003-09-10	Member ID	: 10000205
Evaluator Name	: test clinicianFE, FNP	Date	: 2022-7-8 04:19 PM
Gender	: Male	Address	: Ghent Family Medicine,versile,va
Lob	: DSNP	Marital Status	: Single
Email	: edmonson@gmail.com	Phone	: 1122223333, 22333333
Primary Language	: Korean	Race	: Caucasian

## Vital Signs

Blood Pressure	/undefined mmHG	Pulse	bpm	Respiratory Rate	
Temp		Pulse Oximetry		Pain Scale /10	
Age	18	Patients Height		Patients Weight	
BMI	(Moderate Obesity)				

## Allergies

None

## Current Medications

None

## Over the Counter Medications / Supplements

None

## Diagnoses under Chronic Care Management

### Active

1. Carotid Stenosis

## History of

1. Parotid Disease, Other - undefined

## Care management related to patient's activity levels

Assisitive Devices and DME

Cane, Prosthesis, Oxygen, 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	KNICK, TAMMY S NP	

## Family History:

None

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## Care management related to preventive care

Screenings completed during today's visit:

Screening Name	Screening Completed	Exam Date	Screening Result	Diagnosis	Comments
MICROALBUMIN					
FOBT					
A1C					
LDL					
RETINAL EYE EXAM					
DEXA					
PAD					

PHQ 2 Score: 0

## Preventative Follow up needed

### Screenings

Abdominal Aneurysm Screening	
Hepatitis C Screening	
Nutrition/ weight management	
Other	

### Social

Member educated on advance care planning	
Declines discussion at this time	
Smoking/Tobacco	
Durable Power of attorney	
Advanced Directive	
Food Disparity	
Literacy	

## Disease Management

Discuss medication side effects with your Doctor	
Hearing evaluation	
Dental exam	
Eye exam	
Swallowing evaluation	
Heart Healthy Diet	
Exercise 30 min a day	
Take medications as prescribed	

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Other	
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Assessor Comments	understand that the services performed by the evaluator are limited to the evaluation performed today; the evaluator has no further duties to me once the evaluation performed today is completed ; the evaluator is not liable for abandonment my refusing to provide me treatment or continuing care to me beyond this evaluation; and I should contact my primary care or treating physician for all questions and concerns regarding medical care and treatment or, in the event of an emergency, call 911
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