

# CONFIDENTIAL INFORMATION

**From :**

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

**To :**

Dr. CHINNERY, LIND MD  
SUITE B 2100 EXECUTIVE DRIVE  
HAMPTON, VA, 23666

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

Dr. LIND CHINNERY  
SUITE B 2100 EXECUTIVE DRIVE  
HAMPTON, VA, 23666

06/01/2022

Dear Dr. CHINNERY, LIND MD,

Through our partnership with Focus Care, your patient, covered through Optima Health, recently received a health visit by one of Focus Care's clinicians. Enclosed is a summary of the visit results for:

NICHELLE D NICHOLS-KNIGHT  
900036941\*01

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, please contact Focus Care at 1-800-371-3338 (TTY: 711) Monday through Friday, 8:30 a.m. to 9:00 p.m.

Sincerely,

A handwritten signature in black ink, appearing to read "Jay Schukman".

Jay Schukman, M.D.  
Chief Medical Officer

# Patient Assessment Summary

Name : NICHELLE D NICHOLS-KNIGHT  
Date of Birth : 1969-09-05  
Evaluator Name : test clinicianFE, FNP  
Gender : Female  
Lob : DSNP  
Email :  
Primary Language :

Age : 52  
Member ID : 900036941\*01  
Date : 2022-6-17 10:21 AM  
Address : 3822 TOWNE POINT ROAD,PORTSMOUTH,VA  
Marital Status :  
Phone : 757/610-5487,  
Race : No Ethnicity

## Vital Signs

Blood Pressure	23/26 mmHG	Pulse	55 bpm	Respiratory Rate	77
Temp	98	Pulse Oximetry	78	Pain Scale /10	9
Age	52	Patients Height	5 feet 98 inch	Patients Weight	76 lbs
BMI	2.1 (Moderate Obesity)				

## Allergies

None

## Current Medications

None

## Over the Counter Medications / Supplements

None

## Diagnoses under Chronic Care Management

### Active

None

## History of

1. Macular Degeneration
2. Difficulty Swallowing

## Care management related to patient's activity levels

Assisstive Devices and DME

Cane, Other - ooo

Falls during the past year

None

## Care management related to past medical history

Number of times in the past 12 months seen PCP : 1

Number of times in past 12 months been to the Emergency Room : None

Number of times in past 12 months stayed overnight in hospital : 5

7

Number of times in past 12 months been in a nursing home : 1

Had Surgery in the last 12 months :

## Providers:

Medical Specialty	Specialist	For
Primary Care Physician	CHINNERY, LIND MD	

## Family History:

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None

## Care management related to preventive care

Screenings completed during today's visit:

Screening Name	Screening Completed	Exam Date	Screening Result	Diagnosis	Comments
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	
Healthcare Proxy	
Advanced Directive	
Food Disparity	
Literacy	

### Disease Management

Discuss medication side effects with your Doctor	
Dental exam	
Take medications as prescribed	

Assessor Comments	
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