

CONFIDENTIAL INFORMATION

From :

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

To :

Dr. FETCHO, STEVE NP
1204 W MAIN ST
CHARLOTTESVILLE, VA, 22903

IMPORTANT WARNING: This facsimile is a confidential communication and is transmitted for the exclusive use of the person or entity to which it is addressed. If you are not the intended recipient you are hereby notified that any disclosure, copying or distribution of this information is **STRICTLY** prohibited. If you have received this facsimile communication in error, please notify us immediately by telephone and mail the communication to us at our address printed in the top left-hand corner of this form or destroy this facsimile.

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

THOMAS JOHNSON

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

Dr. FETCHO, STEVE NP
1204 W MAIN ST
CHARLOTTESVILLE, VA, 22903

2022-04-08

Dear Dr. FETCHO, STEVE NP,

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:

THOMAS JOHNSON
900037130*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 concern.

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 grey ink, appearing to read 'Thomas Lundquist'.

Dr. Thomas Lundquist, M.D.
Chief Medical Officer
Optima Health

Patient Assessment Summary

Name	: THOMAS JOHNSON	Age	: 72
Date of Birth	: 1949-07-10	Member ID	: 900037130*01
Evaluator Name	: test clinicianFE, FNP	Date	: 2022-4-8 06:05 PM
Gender	: Male	Address	: 102 N BAKER ST,CHARLOTTESVILLE,VA
Lob	: DSNP	Marital Status	: Married
Email	:	Phone	: 434/806-2834,
Primary Language	: English	Race	: No Ethnicity

Vital Signs

Blood Pressure	/undefined mmHG	Pulse	bpm	Respiratory Rate	
Temp		Pulse Oximetry		Pain Scale /10	
Age	72	Patients Height		Patients Weight	
BMI					

Allergies

None

Current Medications

Diagnoses	Label Name	Dose / Units	Route	Frequency	Prescribing Physician	Status
diag	Ranitidine	100 MG	N = Nasal	AC	Don	Taking
diag 2	Esomeprazole	20 MG	PO = By Mouth	QD	Thoma	Not Taking

Over the Counter Medications / Supplements

None

Diagnoses under Chronic Care Management

Active

1. Aneurysm
2. Cachexia, Gall Bladder Disease

History of

1. Retinal Disease
2. Chronic Post Nasal Drip
3. GI Bleed

Care management related to patient's activity levels

Assistive Devices and DME

None

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

Patient Assessment Summary

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Date of Birth : 1949-07-10
Evaluator Name : test clinicianFE, FNP
Gender : Male
Lob : DSNP
Email :
Primary Language : English

Age : 72
Member ID : 900037130*01
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Address : 102 N BAKER ST,CHARLOTTESVILLE,VA
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Providers:

Medical Specialty	Specialist	For
Primary Care Physician	FETCHO, STEVE NP	

Family History:

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: 0

Preventative Follow up needed

Screenings

Breast Cancer Screening	
Influenza Vaccine	
Pneumococcal Vaccine	
Diabetic Foot Exam	
Glaucoma Screening	
Cervical Cancer Screening	
Prostate Screening	
Abdominal Aneurysm Screening	
Nutrition/ weight management	

Social

Smoking/Tobacco	
Substance Abuse	
Healthcare Proxy	
Food Disparity	
Social support evaluation	

Disease Management

Patient Assessment Summary

Name

Date of Birth

Evaluator Name

Gender

Lob

Email

Primary Language

: THOMAS JOHNSON

: 1949-07-10

: test clinicianFE, FNP

: Male

: DSNP

:

: English

Age

Member ID

Date

Address

Marital Status

Phone

Race

: 72

: 900037130*01

: 2022-4-8 06:05 PM

: 102 N BAKER ST,CHARLOTTESVILLE,VA

: Married

: 434/806-2834,

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Discuss options with your Doctor and/or pharmacist to improve medication adherence	
Hearing evaluation	
Eye exam	
Blood Pressure checks	
Exercise 30 min a day	
Discuss PT/OT evaluation with PCP	
Report abnormal bruising or bleeding	
Follow up with doctor for lab work	
Take medications as prescribed	
Other	

Assessor Comments	
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