

CONFIDENTIAL INFORMATION

From :

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

To :

Dr. BALA, FARIN K PA
1250 E MARSHALL ST
RICHMOND, VA, 23298

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

JOE C HARRIS

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

Dr. BALA, FARIN K PA
1250 E MARSHALL ST
RICHMOND, VA, 23298

2022-04-21

Dear Dr. BALA, FARIN K PA,

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:

JOE C HARRIS
900041677*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 "Dr. Lundquist".

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

Patient Assessment Summary

Name	: JOE C HARRIS	Age	: 73
Date of Birth	: 1948-12-06	Member ID	: 900041677*01
Evaluator Name	: test clinicianFE, FNP	Date	: 2022-4-22 02:43 PM
Gender	: Male	Address	: 300 UNION STREET APT C3,LAWRENCEVILLE,VA
Lob	: DSNP	Marital Status	:
Email	:	Phone	: 434/321-9202,
Primary Language	:	Race	: No Ethnicity

Vital Signs

Blood Pressure	/undefined mmHG	Pulse	bpm	Respiratory Rate	
Temp		Pulse Oximetry		Pain Scale /10	
Age	73	Patients Height		Patients Weight	
BMI					

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

Assisstive 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 :

Number of times in past 12 months been to the Emergency Room :

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

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

Had Surgery in the last 12 months :

Providers:

Medical Specialty	Specialist	For
Primary Care Physician	BALA, FARIN K PA	

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
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Patient Assessment Summary

Name : JOE C HARRIS

Date of Birth : 1948-12-06

Evaluator Name : test clinicianFE, FNP

Gender : Male

Lob : DSNP

Email :

Primary Language :

Age : 73

Member ID : 900041677*01

Date : 2022-4-22 02:43 PM

Address : 300 UNION STREET APT C3,LAWRENCEVILLE,VA

Marital Status :

Phone : 434/321-9202,

Race : No Ethnicity

MICROALBUMIN	No				
FOBT	No				
A1C	No				
LDL	No				
RETINAL EYE EXAM	No				
DEXA	No				
PAD	No				

PHQ 2 Score:

Preventative Follow up needed
Screenings

None

Social

None

Disease Management

None

Assessor Comments	
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