

# CONFIDENTIAL INFORMATION

**From :**

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

**To :**

Dr. MOHAMMAD A AZAD  
60 E MCDERMOTT DR, Ste A  
ALLEN, TX, 75002

**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.

**To the extent that** Protected Health Information (PHI) is enclosed, please be advised that it is being faxed to you after appropriate authorization from the individual or under circumstances that do not require authorization. It has been disclosed to you from a designated record set whose confidentiality is protected by state and federal law. You, the recipient, are expected to maintain this information in a safe, secure and confidential manner. In addition, federal regulations (42 CFR part 2) prohibit any further disclosure of drug and alcohol abuse treatment information except with specific written consent of the person to whom the information pertains or the parent or legal guardian of a minor child to whom it pertains, unless otherwise permitted by federal law. A general authorization for the release of information is NOT sufficient for this purpose. State law prohibits any further disclosure of this sexually transmitted disease information, including HIV/AIDS, without specific written consent of the person to whom the information pertains, or the parent or legal guardian of a minor child to whom it pertains, unless otherwise permitted by state law. A general authorization to release information is NOT sufficient for this purpose.

# Southwestern Health Resources



**Texas Health**  
Resources

**UT Southwestern**  
Medical Center

MOHAMMAD A AZAD  
60 E MCDERMOTT DR, Ste A  
ALLEN, TX, 75002

Dear Dr. AZAD,

Your patient was recently offered a convenient in-home assessment and health screening, not to replace his or her scheduled appointments with you. Our goal is to help patients take charge of their health by encouraging regular check-ups and follow-up care. Through our partnership with Focus Care, a licensed medical professional conducted the patient visit. Southwestern Health Resources has provided you with the enclosed summary and results for:

Tahia Rahman  
07/14/1988  
018126201

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. Only your patient, you and Southwestern Health Resources received this summary, and we recommend discussing the findings with your patient at their next appointment or reach out to them with any urgent concern.

If you have any questions about the in-home health review, please call us at 1-855-977-8820 Monday through Friday, 8:30 a.m. to 9:00 p.m. CT.

Sincerely,

A handwritten signature in black ink, appearing to read 'J. Fish'.

Jason Fish, MD  
Chief Medical Officer  
Southwestern Health Resources

# Patient Assessment Summary

Name	: Tahia Rahman	Age	: 34
Date of Birth	: 1988-07-14	Member ID	: 018126201
Evaluator Name	: test clinicianFE, FNP	Date	: 2022-10-27 01:09 PM
Gender	: Female	Address	: 2500 Coolwater Dr,Plano,TX
Lob	:	Marital Status	:
Email	:	Phone	: 2147145666,
Primary Language	:	Race	: No Ethnicity

## Vital Signs

Blood Pressure	/undefined mmHG	Pulse	bpm	Respiratory Rate	
Temp		Pulse Oximetry		Pain Scale /10	
Age	34	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

Assisitive 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	MOHAMMAD A AZAD	

## 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
----------------	---------------------	-----------	------------------	-----------	----------

# Patient Assessment Summary

Name	: Tahia Rahman	Age	: 34
Date of Birth	: 1988-07-14	Member ID	: 018126201
Evaluator Name	: test clinicianFE, FNP	Date	: 2022-10-27 01:09 PM
Gender	: Female	Address	: 2500 Coolwater Dr,Plano,TX
Lob	:	Marital Status	:
Email	:	Phone	: 2147145666,
Primary Language	:	Race	: No Ethnicity

MICROALBUMIN					
FOBT					
A1C					
LDL					
RETINAL EYE EXAM					
DEXA					
PAD					

PHQ 2 Score:

Preventative Follow up needed  
Screenings

None

Social

None

Disease Management

None

Assessor Comments	
-------------------	--