

CONFIDENTIAL INFORMATION

From :

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

To :

Dr. CHAD NYLAND
3500 OAK LAWN AVE, Ste 600
DALLAS, TX, 752199998

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

CHAD NYLAND
3500 OAK LAWN AVE, Ste 600
DALLAS, TX, 752199998

Dear Dr. NYLAND,

Through our partnership with Focus Care, your patient, covered through Care N' Care (HMO/PPO) health plan, recently received a health visit by one of Focus Care's clinicians. Enclosed is a summary of the visit results for:

Jerry W Marlatt
07/19/1951
CC0021029

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 or if you want to set up an In-Home Health Review, please call Focus Care at 1-855-977-8820, Monday through Friday, 8:30 am to 9:00 pm CT.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Fish", with a stylized flourish at the end.

Jason Fish, MD
Chief Medical Officer
Care N' Care Insurance Co., Inc.

Y0107_21_749_C

Patient Assessment Summary

Name	: Jerry W Marlatt	Age	: 70
Date of Birth	: 1951-07-19	Member ID	: CC0021029
Evaluator Name	: test clinicianFE, FNP	Date	: 2022-6-1 07:33 PM
Gender	: Male	Address	: 1908 Cloisters Dr Apt 522,Arlington,TX
Lob	:	Marital Status	: Separated
Email	: jergay@hotmail.com	Phone	: 9728021746, 9728021746
Primary Language	: Persian	Race	: No Ethnicity

Vital Signs

Blood Pressure	/undefined mmHG	Pulse	bpm	Respiratory Rate	
Temp		Pulse Oximetry		Pain Scale /10	
Age	70	Patients Height		Patients Weight	
BMI	(Moderate Obesity)				

Allergies

None

Current Medications

None

Over the Counter Medications / Supplements

None

Diagnoses under Chronic Care Management

Active

None

History of

1. Carotid Stenosis

Care management related to patient's activity levels

Assisitive Devices and DME

Cane, Prosthesis, Bedside Commode, Bed Pan, CPAP

Falls during the past year

Once

Do you worry about falling or feeling unsteady when standing or walking

No

Worries about falling or feeling unsteady when standing or walking?

Yes

Did you have a fracture in past 6 months?

No

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

Providers:

Medical Specialty	Specialist	For
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Primary Care Physician	CHAD NYLAND	
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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					
FOBT					
A1C					
LDL					
RETINAL EYE EXAM					
DEXA					
PAD					

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	
Advanced Directive	
Literacy	
Social support evaluation	

Disease Management

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

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Assessor Comments	
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