



Health Passport

Clinical Training Guide

FosterCareTX.com

SHP_20206436



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Health Passport Overview

Superior HealthPlan's Health Passport is a web-based, secure health information tool built using core clinical and claims information to deliver relevant health-care information when and where it is needed for the foster children in the state of Texas.

REMINDER: The data in the Health Passport is not a member's complete medical record, but it does contain information on member demographics, including doctor visits for which claims have been submitted, allergies, lab test results, immunizations and filled medications. Health Passport features include, but are not limited to:

-  **Face Sheet** - An easy-to-read summary that includes member demographics, care gaps, Texas Health Steps and Dental last visit dates, active allergies, active medications and more.
-  **Contacts** - Easily find a foster child's Primary Care Physician (PCP), Medical Consenter, Caregiver, Caseworker, Service Coordinator and other important contact information in one place.
-  **Allergies** - Providers can use interactive fields to add or modify allergies at the point-of-care. Once an allergy is charted, it's instantly checked for medication interactions.
-  **Assessments** - Providers can document Texas Health Steps, Dental and Behavioral Health forms directly online. Mailing or faxing in documents critical to patient care for display is also available.
-  **Growth Chart** - Providers can chart weight, height, length and head circumference at the point-of-care to track growth of infants and children. An on-demand graph is available to visually plot where the foster child is on the development curve for their gender and age group.
-  **Immunizations** - A comprehensive list of a person's immunizations collected from ImmTrac.
-  **Labs** - All lab results are made available, where providers typically only have access to the lab results they've requested.
-  **Medical History** - A summary of medications filled and access to more detail, including name of the prescription, the prescribing clinician, date filled, and dosage. Indicators representing drug-drug, drug-allergy, and drug-food interactions appear when applicable as soon as new medications or allergies are added to the member record.
-  **Patient History** - Past visits with details that include the description of service, treating provider, diagnosis and the service date.
-  **Appointments** - All users can review and add appointments for members.

Provider Access

Providers can access the Health Passport secure web application by following the instructions below:

- Open FosterCareTX.com using Google Chrome or Microsoft Edge.
- To log in, enter the **User Name** (email) and **Password** you created during registration, then click **Login**. If you need to create an account, click the **Create an Account** button to register.
- To access Health Passport, click the **Launch Health Passport** button from your account homepage.

The screenshot displays the FosterCareTX.com provider access interface. The top section, titled "The Tools You Need Now!", lists three main functions: "Check Eligibility" (with a thumbs-up icon), "Authorize Services" (with a checkmark icon), and "Manage Claims" (with a dollar sign icon). To the right, a "Login" form is visible, featuring input fields for "User Name (Email)" (containing "name@domain.com") and "Password", a green "Login" button, and a link for "Forgot Password / Unlock Account". Below the login form, a "Need To Create An Account?" section includes a registration description and a prominent orange "Create An Account" button. Further down, there are links for "How to Register", "Provider Registration Video", and "Provider Registration PDF". The bottom section of the interface is divided into two main areas. On the left, a "Quick Eligibility Check for Medicaid / CHIP" form allows users to enter a "Member ID or Last Name" (e.g., "123456789 or Smith") and a "Birthdate" (e.g., "mm/dd/yyyy") before clicking a green "Check Eligibility" button. Below this is a "Recent Claims" table with columns for "RECEIVED", "STATUS", "DATE", "MEMBER NAME", and "CLAIM NO.". On the right, a "Welcome" sidebar contains a list of account management options: "Add a TIN to My ACCOUNT", "Manage Accounts", "Reports", and "Provider Analytics", each with a right-pointing arrow. Below these is a "Recent Activity" section with columns for "Date" and "Activity". At the bottom of the sidebar, a "Health Passport" section features a highlighted "Launch Health Passport" button with a right-pointing arrow. Below this button, there is a link for "Health Passport online training" and a section titled "STAR Health Trainings & Behavioral Health Resources" which provides information about webinar recordings accessible to DFPS staff.

Provider Access

- The User Agreement and Disclaimer will appear. Once you have read the agreement, click **I have read and agree to these terms** to continue.

User Agreement for Persons Other than Health Care Providers

Authorized users who are not health care providers (such as Medical Consenters, authorized DFPS and HHSC employees, and designated residential provider staff) agree to treat all information contained within a Health Passport record as confidential.

Terms of the Agreement

If you access, view, copy, download or otherwise use a Health Passport record, you agree:

- Not to share information from the Health Passport with anyone without a direct need to know the information for purposes of providing health care services, including behavioral health care services, to the Foster Child.
- To share only the minimum amount of information from the Health Passport as is necessary to aid in the provision of health care services, including behavioral health care services, to the Foster Child.
- To be responsible for maintaining the physical security and confidentiality of Health Passport information that you may view on a computer, print to paper, or copy or download to other formats. People who do not need the information should not have physical access to it. You must not leave the Health Passport site open on your computer screen when you walk away from your computer. Information on the Health Passport should be treated with the same concern for security and privacy as you give your financial papers or other private, personal information.
- To be responsible for complying with all applicable state and federal laws, including privacy laws, and to report any non-compliance that you may notice on the part of others within your organization. Passwords must not be shared. All users must create and manage their own accounts.
- To limit your access to Health Passport records to those Foster Children who are served by your organization or with whom you have a relationship for which Health Passport access is authorized. Not to share your password. If you are aware that a password has been shared, you are required to notify Superior HealthPlan Network within 24 hours so that a new password can be assigned.

Superior HealthPlan Network reserve the right to monitor all activity on the website.

By using the services provided by this website, you agree to the above terms. If you do not agree to be bound by this agreement, you are not authorized to enter this website and may not use any of the services available through this website.

Disclaimer

All Users

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As long as a patient has active coverage in Superior HealthPlan's STAR Health Foster Care Program, the patient's information will remain available through the Health Passport. If a patient's enrollment in the program terminates, the patient's Health Passport record will be archived and will be unavailable for viewing.

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I have read and agree to these terms.

Member Search

To search a member, enter the first few letters of the first and last name and one of the three ID numbers (Medicaid ID, Social Security Number [SSN] or Texas Department of Family and Protective Services [DFPS] ID) and click **Go**.

Health Passport - Member Search

First Name*

Last Name*

Medicaid ID

OR

SSN

OR

DFPS ID

Go!

Clear

- The search results will display the full name of the member and other demographic information.
- Click the member's name to access the member's health record.

Health Passport - Member Search

First Name*

Last Name*

Medicaid ID

OR

SSN

OR

DFPS ID

Go!

Clear

ELIGIBLE	NAME	AGE	DOB	GENDER	MEDICAID ID	DFPS ID
	HUEY DUCK	25	03/17/1995	M	55555555	11111111

Face Sheet

The **Face Sheet** module provides a quick overview of the member's health record including common diagnoses and procedures, active medications, active allergies, care gaps and member demographics.

Health Passport: LUCY DUCK

[CCD Export](#)
[Patients](#)
[Member Search](#)
[Print All](#)

Face Sheet

[Print](#)

Contacts

Allergies

Assessments

Growth Chart

Immunizations

Labs

Medication History

Patient History

Appointments

Age

DOB

Gender

Marital Status

Race/Ethnicity

Primary Language

Primary Address

10 Y

01/25/2010

Female

Single

White/Hispanic

Spanish

1234 W DISNEY AVE
ORLANDO, FL 32789

Phone

DFPS ID

Medicaid ID

HP ID - for SUPERIOR use

Authorized Level of Care

Forensic Assessment Indicator

Transitioning Youth Program

IDD Member

(123) 456-7890

88888888

210

N

N

N

Care Gaps

Nothing found to display.

Active Allergies

Amoxicillin

Benzotropine

Ibuprofen

peanut

Peanut Oil

Penicillin

Prazosin

Salicylates

Active Medication

Nothing found to display.

Texas Health Steps Last Visit Date

Last Dental Visit Date

2/13/2014

3-Day Exam Date*

Last CANS Date

9/29/2014

Top 5 Diagnoses

K21.9

Gastro-esophageal reflux disease without esophagitis

R13.12

Dysphagia; oropharyngeal phase

V57.89

CARE INVOLVING OTHER SPECIFIED REHABILITATION PROCEDURE

G82.50

Quadriplegia; unspecified

R55

Syncope and collapse

Top 5 Procedures

T1019

Personal care ser per 15 min

99214

OFFICE OUTPATIENT VISIT 25 MINUTES

A7002

TUBING USED WITH SUCTION PUMP EACH

E0565

COMPRS AIR PWR EQP NOT SLF-CONTAINED/CYL DRVN

A4628

OROPHARYNGEAL SUCTION CATHETER EACH

*Medical exam must be completed within 3 business days of entering foster care for a date to be displayed.

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Contacts

The **Contacts** module displays a member's medical and personal contacts.

Health Passport: LUCY DUCK

CCD Export

Patients

Member Search

Print All

Face Sheet

Print

Contacts

Allergies

Assessments

Growth Chart

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Appointments

Name	Address	Phone	Type
DONOVAN, LINDA	601 E Whitestone Blvd Cedar Park, TX Williamson (County)		Primary Care Provider
DISNEY, WALT	500 Town Sq Orlando, FL 32789 Orange (County)		Medical Consenter 1 (Primary)
DUCK, DAFNEY Aunt	16 Cinderella Dr Orlando, FL 32789 Orange (County)		Medical Consenter 2 (Secondary)
DUCK, DEWEY	111 Minnie Loop Orlando, FL 32789 Orange (County)		Medical Consenter 3 (Primary Backup)
DUCK, LOUIE DFPS Staff	111 Castle Ln Orlando, FL 32789 Orange (County)		Medical Consenter 4 (Secondary Backup)
DISNEY, WALT Unrelated	724 Disney Rd Orlando, FL 32789 Orange (County)		Caregiver
MOUSE, MINNIE	219 S Disney Ln Orlando, FL 32789 Orange (County)		Caseworker
DUCK, DONALD	217 S Disney Ln Orlando, FL 32789 Orange (County)		Service Coordinator
DUCK, DAISY	219 S Disney Ln Orlando, FL 32789 Orange (County)		Service Manager
DUCK, HUEY	219 S Disney Ln Orlando, FL 32789 Orange (County)		Discharge Planner

NOTE: Caregivers are not necessarily considered Medical Consenters.

Allergies

The **Allergies** module contains all allergies for a member entered by providers. Click the **allergy name** to view the allergy history.

- A prescribed medication is indicated by a **M**. If an allergy has a comment associated with it, an asterisk (*) appears next to the allergy name.
- The strikethroughs indicate:
 - **Resolved status** — an allergy the member no longer experiences.
 - **Canceled status** — an allergy that could be mistakenly entered.

Health Passport: LUCY DUCK

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[Allergy Profile](#)
[Add Allergy](#)

M - Medication Interaction

[Print](#)

Substance	Reaction	Status ↑	Type
Amoxicillin	Seizure	Active	Allergy
Benztropine	Headache	Active	Allergy
Ibuprofen	Anxiety	Active	Sensitivity
peanut	Abdominal Pain	Active	Allergy
Peanut Oil	Confusion	Active	Allergy
Penicillin	Hives	Active	Allergy
Prazosin	Anxiety	Active	Allergy
Salicylates	Lightheadedness	Active	Allergy
		Cancelled	Sensitivity
		Cancelled	Sensitivity
		Cancelled	Allergy
		Cancelled	Allergy
		Resolved	Allergy

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[Allergy Profile](#)
[View / Modify Allergy](#)
[Add Allergy](#)

Allergy
Amoxicillin

Type
Allergy

First Occurrence Date (MM/DD/YYYY)
07/01/2017

Reaction
Seizure

Status
Active

Comments

[Modify](#)
[Cancel](#)

Allergy History

STATUS	FIRST OCCURENCE DATE	REACTION	COMMENT	RECORDED BY	RECORDED DATE
Active	07/01/2017	Seizure			01/28/2020
Active	07/01/2017	Seizure			02/07/2018
Active	07/01/2017	Seizure			01/27/2020

Allergies

Providers have the ability to modify allergies.

- Click **Modify**.
- Modify allergy name, type, occurrence date, reaction, status or comments.
- Click **Update** to save changes.

Health Passport: LUCY DUCK CCD Export Patients Member Search Print All

Face Sheet [Allergy Profile](#) [View / Modify Allergy](#) [Add Allergy](#)

Contacts

Allergies

Assessments

Growth Chart

Immunizations

Labs

Medication History

Patient History

Appointments

Allergy: Amoxicillin

Type: Allergy

First Occurrence Date (MM/DD/YYYY): 07/01/2017

Reaction: Seizure

Status: Active

Comments:

Modify **Cancel**

Allergy History

STATUS	FIRST OCC
Active	07/01/2017
Active	07/01/2017
Active	07/01/2017

Health Passport: LUCY DUCK CCD Export Patients Member Search Print All

Face Sheet [Allergy Profile](#) [View / Modify Allergy](#) [Add Allergy](#)

Contacts

Allergies

Assessments

Growth Chart

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Labs

Medication History

Patient History

Appointments

Allergy: Amoxicillin

Type: Allergy

First Occurrence Date (MM/DD/YYYY): 07/01/2017

Reaction: Seizure

Status: Active

Comments:

Update **Cancel**

Allergies

Providers have the ability to add an allergy.

- Search for an allergen and click **Go**. If not found, use the **Add Free Text Allergen** box.
- Select allergy name, type, occurrence date, reaction and status, and include comments, as applicable.
- Click **Add** to save changes.

The screenshot displays the 'Health Passport: LUCY DUCK' interface. On the left is a sidebar with navigation links: Face Sheet, Contacts, Allergies (highlighted), Assessments, Growth Chart, Immunizations, Labs, Medication History, Patient History, and Appointments. The main content area shows the 'Add Allergy' form. It includes a text input for 'Allergy' (containing 'Ibuprofen'), a dropdown for 'Type' (set to 'Sensitivity'), a date input for 'First Occurrence Date (MM/DD/YYYY)' (set to '09/29/2020'), a dropdown for 'Reaction' (set to 'Anxiety'), a dropdown for 'Status' (set to 'Active'), and a text area for 'Comments'. At the bottom of the form are 'Add' and 'Cancel' buttons. A red box highlights the 'Add' button, with a callout showing a 'Search Allergen to Add' dialog. This dialog has a search input field and a green 'Go' button. The top of the interface features a header with 'Health Passport: LUCY DUCK' and navigation links: 'CCD Export', 'Patients', 'Member Search', and 'Print All'.

Assessments

The **Assessments** module allows providers to document Texas Health Steps, Dental and Behavioral Health forms directly online. Providers may also mail or fax in documents critical to patient care to display within Health Passport.

- Click on the form name to open the document.
- Expand or collapse all forms by clicking the **Expand All** and **Collapse All** buttons.

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Face Sheet

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Appointments

[View Forms](#)
[Submit Forms](#)

Last:

☒ 3 months
 ☐ 6 months
 ☐ 12 months

From Date:

06/25/2019

To Date:

06/25/2020

Previous Assessments

[COVID-19 Lab Results \(Supplemental Information\) \(2\)](#)

Assessment Name

[COVID-19 Screening Results](#)

[COVID-19 Screening Results](#)

[Child Adolescent Needs and Strengths \(1\)](#)

Assessment Name

[CANS Scoring Sheet](#)

TEXAS CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS) 2.0

CLIENT INFORMATION

Client's Name (First)

Lucy

Client's Name (Last)

Duck

Date of Assessment

06/25/2019

Age

21

Case ID

N/A

Medicaid ID

88888888

Person ID

88888888

Provider ID

170302790

CHILD STRENGTHS (pages 8 to 17)

8-10: Identified strengths

11-17: Not identified as a strength

Item	NA	0	1	2	3
Family	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interpersonal Skills	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Optimism (Age 3+)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Educational (Age 3+)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vocational (Age 3+)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Talents/Interests (Age 3+)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spiritual/Religious (Age 3+)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community Involvement (Age 3+)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Natural Supports	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relationship Performance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth Involvement with Care (Age 3+)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coping & Survival Skills (Age 3+)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resilience (Age 3+)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SUICIDE RISK: C-0055 SCREENING (Pages 4 to 17)

Ask questions SR1 and SR2. If the answer to SR2 is YES then ask questions SR3-SR6. If the answer to SR2 is NO, skip and go directly to question SR6.

SR1: Wish to be Dead

How often do you wish you were dead or wished you could go to sleep and not wake up?

YES

NO

Lifetime

History

Month

SR2: Non-Specific Active Suicidal Thoughts

Have you actually had any thoughts of killing yourself? (If answer is NO, skip to question SR6)

YES

NO

SR3: Suicidal Thoughts with Method (without specific plan or intent to act)

Have you thought about how you might do this?

YES

NO

SR4: Suicidal Intent without Plan

Have you had these thoughts and had some intention of acting on them?

YES

NO

SR5: Suicidal Intent with Plan

Have you started to work out or worked out the details of how to kill yourself? Do you intend to carry out this plan?

YES

NO

SR6: Suicidal Behaviors

YES

NO

Lifetime

History

Month

NOTE: If you choose to fax or mail these documents, please submit using the information listed below:

Fax: 1-866-274-5952

Mail: Superior HealthPlan

P.O. Box 3003

Farmington, MO 63640-3803

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Assessments

To complete and submit forms, click on the **Submit Forms** tab.

- Open a form by selecting the **Form Title**.
- Fill in all relevant information.
- Click the **Submit** button.
- Click **Click here for PDF versions** to be directed to the Health Passport Forms section of the Foster Care Texas website, where a blank form can be printed.

Health Passport: LUCY DUCK

CCD Export Patients Member Search Print All

Face Sheet
Contacts
Allergies
Assessments
Growth Chart
Immunizations
Labs
Medication History
Patient History
Appointments

[View Forms](#) **Submit Forms**

+ Expand All - Collapse All [Click here for PDF versions](#)

[Behavioral Health \(2\)](#)

Form Title	Description
Initial Behavioral Health Assessment	This form collects mental health information to best track and monitor diagnosis and treatment. It is a contractual requirement that all participating IMHS providers complete this form upon a STARHealth Foster Care patients first visit. This form can be completed online and printed for your records or can be mail/faxed in. You may copy and paste inside the online form to populate it with data you already have available where applicable. Your participation and efforts will greatly help in the assurance of optimal care for your patients.
Monthly Behavioral Health Assessment	This form collects mental health information to best track and monitor diagnosis and treatment. It is a contractual requirement that all participating IMHS providers complete this form monthly for STARHealth Foster Care patients. This form can be completed online and printed for your records or can be mail/faxed in. You may copy and paste inside the online form to populate it with data you already have available where applicable. Your participation and efforts will greatly help in the assurance of optimal care for your patients.

[Dental \(1\)](#)

Health Passport: LUCY DUCK

CCD Export Patients Member Search Print All

Face Sheet
Contacts
Allergies
Assessments
Growth Chart
Immunizations
Labs
Medication History
Patient History
Appointments

[View Forms](#) [Submit Forms](#)

Initial Behavioral Health Assessment

Provider Information

TIN#

NPI ID or Medicaid ID

Provider name

Provider phone number

Provider fax number

Service Date

Member Information

DPPS ID or Medicaid

Date of Birth

Behavioral Health-General

Name of placement and/or Residential Facility

Placement date

Diagnosis

Axis I

Axis II

Axis III

Axis IV

Axis V: Current GAF

Behavioral health status

Strengths

Presenting problems

Treatment plan/Goals

Treatment modalities

Individual therapy ☐

Individual therapy type and frequency

Family therapy ☐

Family therapy type and frequency

Group therapy ☐

Group therapy type and frequency

Rehabilitation therapy ☐

Rehabilitation therapy type and frequency

Medication management ☐

Medication management type and frequency

Other therapy ☐

Other therapy type and frequency

Referrals given

Submit Cancel

Growth Chart

The **Growth Chart** module contains height, weight, length and head circumference entered by providers. This module also calculates a member's Body Mass Index (BMI), when applicable.

- Click a **date** to view details for that date. Click on **View as Chart** to view, print and download plotted growth charts. An asterisk (*) indicates there is a comment associated with the entry.
- Modify a chart by clicking the box **Select to cancel**, select a reason to cancel and then click **Cancel**. A strikethrough will appear on cancelled, duplicative or incorrectly charted entries.

Health Passport: LUCY DUCK CCD Export Patients Member Search Print All

Face Sheet | **Growth Charts** | [Add Growth Chart](#)

Last: 10 years From Date: 04/23/2019 To Date: 04/23/2020 Go

Growth Data and Percentiles (PCTL) [View as Chart](#) [Print](#)

* - Comment associated with Growth Chart

Percentile not available

Date	Age	Weight lbs oz / kg lbs oz / kg PCTL	Height in / cm in / cm PCTL	Weight / Height PCTL	Head Circumference in / cm in / cm PCTL	BMI
01/26/2019	9.00	61 lbs 15.2 oz 28.1 kg 43.09 %	52.5 in 133.3 cm 52.35 %	40.28 %		15.6
01/26/18	8.00	56 lbs 14.1 oz 25.8 kg 51.48 %	50.5 in 128.2 cm 54.02 %	47.57 %		15.7
01/26/17	7.00	49 lbs 6.1 oz 22.4 kg 45.94 %	47.7 in 121.1 cm 47.05 %	46.45 %		15.3
01/26/16	6.00	43 lbs 15.0 oz 19.9 kg 45.38 %	45.5 in 115.5 cm 55.88 %	40.94 %		14.9
01/26/15	5.00	39 lbs 7.4 oz 17.8 kg 49.40 %	42.5 in 107.9 cm 51.83 %	57.42 %		15.4
01/26/14	4.00	33 lbs 15.2 oz 15.4 kg 42.15 %	39.5 in 100.3 cm 45.70 %	49.68 %		15.3
01/26/13	3.00	31 lbs 4.9 oz 14.2 kg 57.73 %	37.0 in 94 cm 50.60 %	61.60 %		16.1

Health Passport: LUCY DUCK CCD Export Patients Member Search Print All

Face Sheet | [Growth Charts](#) | [View / Modify Growth Chart](#) | [Add Growth Chart](#)

Details for 01/26/2019

Weight

Result	Recorded By	Comment	Select to Cancel
61 lbs 15.2 oz 28.1 kg			<input type="checkbox"/>

Height

Result	Recorded By	Comment	Select to Cancel
52.5 in 133.3 cm			<input type="checkbox"/>

Select a reason to Cancel: Cancel

Growth Chart

- Click on **View as Chart** to view, print and download plotted growth charts.

Health Passport: LUCY DUCK CCD Export Patients Member Search Print All

Face Sheet

Contacts

Allergies

Assessments

Growth Chart

Immunizations

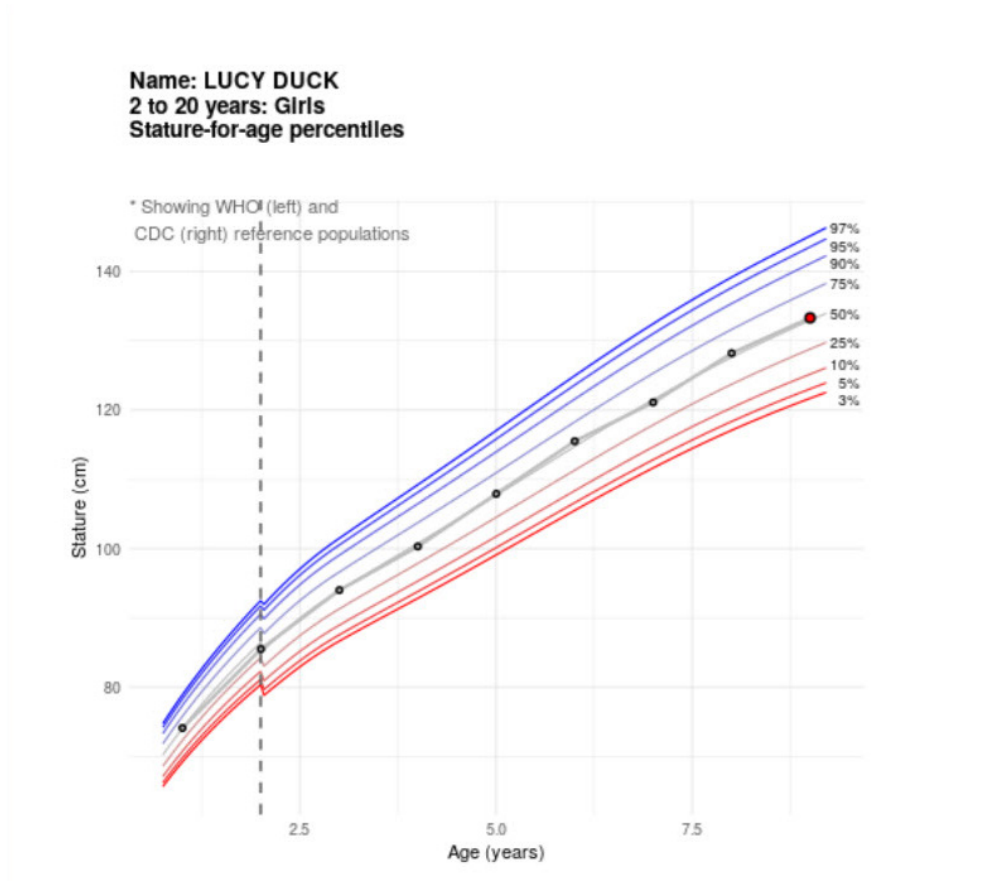
Growth Charts [Add Growth Chart](#)

Last: From Date: To Date: Go

Growth Data and Percentiles (PCTL)
* - Comment associated with Growth Chart

[View as Chart](#) [Print](#)

Percentile not available



Growth Chart

- Click the **Add Growth Chart** tab to add new growth measurements.
- Fill in weight, height, length and head circumference, and add comments, if applicable.
- Click **Add**.

Health Passport: LUCY DUCK

CCD ExportPatientsMember SearchPrint All

Face Sheet

Contacts

Allergies

Assessments

Growth Chart

Immunizations

Labs

Medication History

Patient History

Appointments

[Growth Charts](#)

Add Growth Chart

Visit Date

06/23/2020

Weight

lbs oz

lbs/oz

Comment

Height

in

Comment

Head Circumference

in

Comment

Add

Cancel

Immunizations

The **Immunizations** module presents a comprehensive list of a member's immunizations that have been reported to ImmTrac, the Texas Immunization Registry. Additionally, there is a tab that displays immunization schedules for the Centers for Disease Control and Prevention (CDC). The Care Gaps tab shows any gaps in care, including missing immunizations.

Health Passport: LUCY DUCK

CCD ExportPatientsMember SearchPrint All

Face Sheet

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Growth Chart

Immunizations

Labs

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Patient History

Appointments

ImmunizationsScheduleCare Gaps

Last:
☒ 5 years

From Date:

To Date:

Go

VACCINE ↑

Flu vaccine 4 valent nasal

Diphtheria, tetanus toxoids, and acellular pertussis vaccine

Lyme disease vaccine adult dosage im

Typhoid vaccine-live-oral

Dtap-ipv vacc 4-6 yr im

Rabies vaccine intramuscular

Japanese encephalitis virus vaccine, inactivated, for intramuscular use

Hepatitis a vaccine adult for intramuscular use

Pneumococcal polysaccharide vaccine, 23-valent, adult or imm

Tetanus, diphtheria toxoids and acellular pertussis vaccine

DATE ADMINISTERED ↑

02/18/2019

01/20/2018

01/20/2018

01/20/2018

01/20/2018

01/20/2018

01/20/2018

01/12/2018

01/10/2018

08/18/2017

ADMIN AGE

17Y 5M

16Y 5M

16Y 5M

16Y 5M

16Y 5M

16Y 5M

16Y 5M

16Y 4M

16Y 4M

15Y 11M

Print

15 items found, displaying 1 to 10. Page 1/2 1.2 Next Last

15

Immunizations

- The **Schedule** tab offers child, adolescent, adult and catch-up immunization schedules. Click the **respective schedule** to open the document.

Health Passport: LUCY DUCK

CCD Export Patients Member Search Print All

Face Sheet
Contacts
Allergies
Assessments
Growth Chart
Immunizations
Labs
Medication History
Patient History
Appointments

Immunizations Schedule Care Gaps

View Child Immunization Schedule View Adolescent Immunization Schedule View Adult Immunization Schedule

View Catch-up Immunization Schedule

2020 Recommended Immunizations for Children from Birth Through 6 Years Old

Notes:

- Two doses of HepB are recommended for children ages 1 through 6 years who are getting an influenza (flu) vaccine for the first time and for some other children in the age group.
- Two doses of HepB are recommended for children ages 1 through 6 years who are getting an influenza (flu) vaccine for the first time and for some other children in the age group.
- Two doses of HepB are recommended for children ages 1 through 6 years who are getting an influenza (flu) vaccine for the first time and for some other children in the age group.

For more information, call toll free 1-800-CDC-INFO (1-800-232-4636) or visit www.cdc.gov/vaccines/imzparents

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

AAFP
AMERICAN ACADEMY OF FAMILY PHYSICIANS

American Academy of Pediatrics
ADVOCATES FOR THE HEALTH OF ALL CHILDREN

- Click the **Care Gaps** tab to view gaps in care, including missing immunizations.

Health Passport: [REDACTED]

CCD Export Patients Member Search Print All

Face Sheet
Contacts
Allergies
Assessments
Growth Chart
Immunizations
Labs
Medication History
Patient History

Immunizations Schedule **Care Gaps**

Care Gaps

No flu vaccine in past 12 months.

Print

Labs

The Labs module contains a list of a member's lab results. Click on a **date** to view details of labs.

- By selecting the **Filter Category** drop-down, you can filter by lab type.

Health Passport: LUCY DUCK

CCD Export

Patients

Member Search

Print All

Face Sheet

Contacts

Allergies

Assessments

Growth Chart

Immunizations

Labs

Medication History

Patient History

Appointments

Overview

Last:

3 months

From Date:

06/23/2019

To Date:

06/23/2020

Go

Filter Category:

All Labs

All Labs

Allergy

Chemistry

Hematology

Microbiology

StateLab

Serology

Texas Health Steps

Toxicology

Uncategorized

Print

* - Comment associated with lab

Red text - Abnormal lab result

Date	Item	Value	Ordering Physician	Category
1/5/2019	TSH	10.420 UIU/ML	WALTER DISNEY	Chemistry
1/5/2019	CARBON DIOXIDE, TOTAL	22 MMOL/L	WALTER DISNEY	Chemistry
1/5/2019	ALBUMIN, SERUM	4.0 G/DL	WALTER DISNEY	Chemistry
1/5/2019	ALKALINE PHOSPHATASE, S	67 IU/L	WALTER DISNEY	Chemistry
1/5/2019	TSH	10.420 UIU/ML	WALTER DISNEY	Chemistry
1/5/2019	CREATININE, SERUM	0.73 MG/DL	WALTER DISNEY	Chemistry
1/5/2019	EGFR IF AFRICN AM	UNABL1 ML/MIN/1.73	WALTER DISNEY	Chemistry
1/5/2019	POTASSIUM, SERUM	4.6 MMOL/L	WALTER DISNEY	Chemistry
1/5/2019	CARBON DIOXIDE, TOTAL	22 MMOL/L	WALTER DISNEY	Chemistry
1/5/2019	PROTEIN, TOTAL, SERUM	7.1 G/DL	WALTER DISNEY	Chemistry

63 items found, displaying 1 to 10. Page 1/7 [1](#)[2](#)[3](#)[4](#)[5](#)[6](#)[7](#) [Next](#) [Last](#)

Health Passport: LUCY DUCK

CCD Export

Patients

Member Search

Print All

Face Sheet

Contacts

Allergies

Assessments

Growth Chart

Immunizations

Labs

Medication History

Patient History

Appointments

Overview

Details

TSH 1/5/2019

Value	Ordering Physician	Comment	Source
10.420 UIU/ML	WALTER DISNEY		QUEST

17

Medication History

The **Medication History** module contains a detailed list of medications. Click a **Medication name** to view more details.

- Click on a **Prescriber** or **Pharmacy name** to view contact information.
- The legend of icons (A M ! ! ! ?) denote different medication interactions. Major interactions, indicated by a (!), are potentially life threatening.

Health Passport: LUCY DUCK

PatientsMember SearchPrint All

Face Sheet

Contacts

Allergies

Assessments

Growth Chart

Immunizations

Labs

Medication History

Patient History

Appointments

Overview

Last: 5 yearsFrom Date: 06/30/2019To Date: 06/30/2020Go

! - Major Interaction

! - Moderate Interaction

! - Minor Interaction

A - Allergy Interaction

? - Interaction not supported

	FILL DATE ↑	MEDICATION	QTY	Days Supply	PRESCRIBER	PHARMACY
!	05/15/2019	TRAZODONE TAB 50MG	15.500	31.00000		
!	04/15/2019	TRAZODONE TAB 50MG	15.500	31.00000		
!	03/15/2019	TRAZODONE TAB 50MG	15.500	31.00000		
!	02/15/2019	TRAZODONE TAB 50MG	15.500	31.00000		
!	01/15/2019	TRAZODONE TAB 50MG	15.500	31.00000		
?	03/12/2018	VITAMIN D CAP 50000UNT	4.000	28.00000		
?	03/12/2018	GUANFACINE TAB 3MG ER	30.000	30.00000		
!	01/29/2018	BUPROPION TAB 150MG SR	31.000	31.00000		
A	01/24/2018	PRAZOSIN HCL CAP 1MG	28.000	28.00000		
!	01/24/2018	TRAZODONE TAB 50MG	14.000	28.00000		

242 items found, displaying 1 to 10. Page 1/251,2,3,4,5,6,7,8NextLast

Medication History

- Select **English** or **Spanish** to open a reference document for the given medication.

Health Passport: **JOSEY DELACROIX**

CCD Export Patients Member Search Print All

Face Sheet

Contacts

Allergies

Assessments

Growth Chart

Immunizations

Labs

Medication History

Patient History

Appointments

Overview Details

MUPIROCIN OIN 2%

FILL DATE : 10/18/2017

DISPENSE : 66.000

REFILL : 0

PHARMACY :

PREScriBER :

Reference Document : **English Spanish**

- No Data Found -

Integrated Patient Education – Medication Leaflets

Read this medicine information sheet carefully each time you get this medicine filled. You must carefully read the "Consumer Information Use and Disclaimer" below in order to understand and correctly use this information.

Mupirocin Cream and Ointment

Pronunciation (myoo PEER oh sin)

Brand Names: US Bactroban.

What is this drug used for?

- It is used to treat skin infections.

What do I need to tell my doctor BEFORE I take this drug?

- If you have an allergy to mupirocin or any other part of this drug.
- If you are allergic to any drugs like this one, any other drugs, foods, or other substances. Tell your doctor about the allergy and what signs you had, like rash; hives; itching; shortness of breath; wheezing; cough; swelling of face, lips, tongue, or throat; or any other signs.
- If a large area needs to be treated.
- If your skin is damaged or has open wounds. Do not put on damaged skin or open wounds.

This drug may interact with other drugs or health problems.

Tell your doctor and pharmacist about all of your drugs (prescription or OTC, natural products, vitamins) and health problems. You must check to make sure that it is safe for you to take this drug with all of your drugs and health problems. Do not start, stop, or change the dose of any drug without checking with your doctor.

What are some things I need to know or do while I take this drug?

- Tell all of your health care providers that you take this drug. This includes your doctors, nurses, pharmacists, and dentists.
- Do not use longer than you have been told. A second infection may happen.
- Talk with your doctor before you use other drugs or products on your skin.
- Do not use this drug near an area where drugs are given into a vein. Talk with the doctor.

- Tell your doctor if you are pregnant or plan on getting pregnant. You will need to talk about the benefits and risks of using this drug while you are pregnant.
- Tell your doctor if you are breast-feeding. You will need to talk about any risks to your baby.
- If you are breast-feeding and use this drug on your breast or nipple, wash the area before breast-feeding your child.

What are some side effects that I need to call my doctor about right away?

WARNING/CAUTION: Even though it may be rare, some people may have very bad and sometimes deadly side effects when taking a drug. Tell your doctor or get medical help right away if you have any of the following signs or symptoms that may be related to a very bad side effect:

- Signs of an allergic reaction, like rash; hives; itching; red, swollen, blistered, or peeling skin with or without fever; wheezing; tightness in the chest or throat; trouble breathing or talking; unusual hoarseness; or swelling of the mouth, face, lips, tongue, or throat.
- Irritation where this drug is used.
- Very bad itching.
- Dizziness.
- A fast heartbeat.
- A heartbeat that does not feel normal.
- A very bad and sometimes deadly form of diarrhea called Clostridium difficile (C diff)-associated diarrhea has happened with most antibiotics. This may happen while using the antibiotic or within a few months after you stop using it. Call your doctor right away if you have stomach pain or cramps, very loose or watery stools, or bloody stools. Do not try to treat loose stools without first checking with your doctor.

Wolters Kluwer Clinical Drug Information Page 1

19

Patient History

The **Patient History** module contains visit information from claims data on all services rendered, whether paid or denied. Claims come from all provider types and providers do not need to do anything extra for this data to load.

- Click the **date** to view more visit details.

Health Passport: LUCY DUCK

[CCD Export](#)
[Patients](#)
[Member Search](#)
[Print All](#)

[Face Sheet](#)
[Contacts](#)
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[Assessments](#)
[Growth Chart](#)
[Immunizations](#)
[Labs](#)
[Medication History](#)
[Patient History](#)
[Appointments](#)

[Visits](#)
[Diagnoses](#)
[Procedures](#)

Last: ☐ 5 years ☐ 10 years ☐ 15 years ☐ 20 years
From Date:
To Date:
[Go](#)

Filter Category: [Print](#)

Click on dates for more details

DATE ↓	LOS	DIAGNOSIS	Dx CODE	VISIT TYPE ↑	BILLING ENTITY ↑	SOURCE ↑
02/12/2019		Syncope and collapse	R55	ON CAMPUS-OUTPATIENT HOSPITAL		SUPERIOR
02/12/2018		Syncope and collapse	R55	ON CAMPUS-OUTPATIENT HOSPITAL		SUPERIOR
01/10/2018		Gastro-esophageal reflux disease without esophagitis Obstructive sleep apnea (adult) (pediatric) Congenital myopathies Bronchitis; not specified as acute or chronic	K21.9 G47.33 G71.2 J40	HOME		TMHP
01/10/2018		Gastro-esophageal reflux disease without esophagitis Obstructive sleep apnea (adult) (pediatric) Congenital myopathies Bronchitis; not specified as acute or chronic	K21.9 G47.33 G71.2 J40	HOME		TMHP
01/10/2018		Gastro-esophageal reflux disease without esophagitis Obstructive sleep apnea (adult) (pediatric) Congenital myopathies Bronchitis; not specified as acute or chronic	K21.9 G47.33 G71.2 J40	HOME		TMHP
			J95.09	OUTPATIENT HOSPITAL		TMHP
			I11.0 I50.20 J96.10 F32.9 K21.9	OFFICE		TMHP

Visit Details

CLAIM:
END OF SERVICE: 02/12/2019
ADMITTING PROVIDER:

PROCEDURES	CPT Code	Dx Code	DATE
OFFICE OUTPATIENT VISIT 25 MINUTES	99214	R55	02/12/2019

NOTE: This module should not be used as a tool for claims payments. There is lag time before data is loaded as providers have 95 days to bill, and Superior has 30 days to process.

Patient History

- Click the **Diagnoses** tab to view visits by diagnoses.
- Click the **date** to view Visit Details.

Health Passport: LUCY DUCK

CCD Export

Patients

Member Search

Print All

Face Sheet

Contacts

Allergies

Assessments

Growth Chart

Immunizations

Labs

Medication History

Patient History

Appointments

Visits

Diagnoses

Procedures

Filter Category: All Patient History

Print

Click on dates for more details

DATE ↓	DIAGNOSIS ↑	Dx CODE ↑	BILLING ENTITY ↑	SOURCE ↑
02/12/2016	Syncope and collapse	R55		SUPERIOR
02/09/2017	Syncope and collapse	R55		SUPERIOR
02/09/2017	Syncope and collapse	R55		SUPERIOR
02/09/2017	Syncope and collapse	R55		SUPERIOR
02/11/2017	Atherosclerotic heart disease of native coronary artery with other forms of angina pectoris	I25.118		SUPERIOR
02/11/2017	Other chest pain	R07.89		SUPERIOR
02/11/2017	Other chest pain	R07.89		SUPERIOR
02/11/2017	Other chest pain	R07.89		SUPERIOR
02/12/2017	Syncope and collapse	R55		SUPERIOR
02/14/2017	Unspecified systolic (congestive) heart failure	I50.20		TMHP
02/14/2017	Dilated cardiomyopathy	I42.0		TMHP
03/14/2017	Unspecified systolic (congestive) heart failure	I50.20		TMHP
03/14/2017	Dilated cardiomyopathy	I42.0		TMHP

Visit Details				✕
CLAIM				
END OF SERVICE	02/12/2016			
ADMITTING PROVIDER				
PROCEDURES	CPT Code	Dx Code	DATE	
OFFICE OUTPATIENT VISIT 25 MINUTES	99214	R55	02/12/2016	

Patient History

- Click the **Procedures** tab to view visits by procedures.
- Click the **date** to view Visit Details.

Health Passport: LUCY DUCK

CCD Export

Patients

Member Search

Print All

Face Sheet

Contacts

Allergies

Assessments

Growth Chart

Immunizations

Labs

Medication History

Patient History

Appointments

Visits

Diagnoses

Procedures

Filter Category: All Patient History

Print

Click on dates for more details

DATE ↑	PROCEDURE ↑	CPT Code ↑	BILLING ENTITY ↑	SOURCE ↑
02/12/2016	OFFICE OUTPATIENT VISIT 25 MINUTES	99214		SUPERIOR
02/09/2017	CT ANGIO ABD&PLVIS CNTRST MTRL W/VO CNTRST IMG	74174		SUPERIOR
02/09/2017	CT ANGIOGRAPHY CHEST W/CONTRAST/NONCONTRAST	71275		SUPERIOR
02/09/2017	CT HEAD/BRAIN W/O CONTRAST MATERIAL	70450		SUPERIOR
02/11/2017	OFFICE OUTPATIENT VISIT 25 MINUTES	99214		SUPERIOR
02/11/2017	CV STRS TST XERS&/OR RX CONT ECG I&R ONLY	93018		SUPERIOR
02/11/2017	CV STRS TST XERS&/OR RX CONT ECG W/O I&R	93016		SUPERIOR
02/11/2017	MYOCARDIAL SPECT MULTIPLE STUDIES	78452		SUPERIOR
02/12/2017	OFFICE OUTPATIENT VISIT 25 MINUTES	99214		SUPERIOR
02/14/2017	HI FREQ CHST WALL OSCILLAT AIR-PULSE GEN SYS EA	E0483		TMHP
02/14/2017	HI FREQ CHST WALL OSCILLAT AIR-PULSE GEN SYS EA	E0483		TMHP
03/14/2017	HI FREQ CHST WALL OSCILLAT AIR-PULSE GEN SYS EA	E0483		TMHP
03/14/2017	HI FREQ CHST WALL OSCILLAT AIR-PULSE GEN SYS EA	E0483		TMHP
				SUPERIOR

Visit Details

CLAIMQ067TX890762

END OF SERVICE02/12/2016

ADMITTING PROVIDER

PROCEDURES	CPT Code	Dx Code	DATE
OFFICE OUTPATIENT VISIT 25 MINUTES	99214	R55	02/12/2016

Appointments

The **Appointments** module allows providers to review and add appointments for members.

- Click the **date** and **time** to view appointment details for existing appointments.

Health Passport: HUEY DUCK

CCD ExportPatientsMember SearchPrint All

Face Sheet

Contacts

Allergies

Assessments

Growth Chart

Immunizations

Labs

Medication History

Patient History

Appointments

AppointmentsAdd Appointment

Last:

From Date:

To Date:

Go

5 years

06/25/2019

06/25/2020

Date&Time(CT)	Duration	Description
04/24/2019 03:00 PM	30	Adding new appointment for Huey Moving appointment
06/16/2017 10:22 AM	30	test test
04/09/2018 11:30 AM	15	High Cholesterol Screening/Lipid Panel Test
04/02/2018 10:30 AM	45	Audiological Hearing Evaluation
03/05/2018 10:30 AM	45	Type 2 Diabetes Screening
03/01/2018 10:30 AM	45	Hearing evaluation
02/05/2018 10:30 AM	60	Carotid Artery Disease Screening
02/01/2018 12:30 PM	15	Labs
02/01/2018 11:30 AM	60	Annual Physical
02/01/2018 10:30 AM	45	Hearing evaluation

Health Passport: HUEY DUCK

CCD ExportPatientsMember SearchPrint All

Face Sheet

Contacts

Allergies

Assessments

Growth Chart

Immunizations

Labs

Medication History

Patient History

Appointments

AppointmentsView/Modify AppointmentsAdd Appointment

*Date(MM/DD/YYYY)

04/09/2018

*Time(HH:MM)

11:30

AM

*Duration

15

Description

High Cholesterol Screening/Lipid Panel Test

ModifyCancel AppointmentCancel

Appointment History

Date&Time(CT)	Duration	Description	Recorded By	Recorded Date	Action
04/09/2018 11:30 AM	15Min	High Cholesterol Screening/Lipid Panel Test		02/01/2018	Created

Appointments

Click the **Add Appointment** tab to add a new appointment.

- Fill in Date, Time, Duration and add a description, if applicable.
- Click **Add**.

The screenshot shows a web application titled "Health Passport: HUEY DUCK". On the right side of the header, there are buttons for "CCD Export", "Patients", "Member Search", and "Print All". On the left side, there is a vertical menu with the following items: "Face Sheet", "Contacts", "Allergies", "Assessments", "Growth Chart", "Immunizations", "Labs", "Medication History", "Patient History", and "Appointments". The "Appointments" item is highlighted in blue. The main content area has two tabs: "Appointments" and "Add Appointment", with the latter being highlighted with a red box. Below the tabs, there are four input fields: a date field labeled "*Date(MM/DD/YYYY)" with a placeholder "MM/DD/YYYY", a time field labeled "*Time(HH:MM)" with a placeholder "HH:MM" and a dropdown for "AM", a duration field labeled "*Duration" with a placeholder "Select Duration" and a dropdown arrow, and a text area labeled "Description". At the bottom of the form, there are two buttons: a green "Add" button and a red "Cancel" button.

NOTE: Appointments can only be modified or removed by the appointment initiator. Appointment information should be used only as a reference and may be tentative. For more information or to confirm appointments, please contact the member’s Medical Consenter or provider.

Other Tools and Features

The following tools can be found on the **Assessments, Growth Chart, Immunizations, Labs, Medication History, Patient History** and **Appointments** modules:

- **Member Search** – Return to the search screen.
- **Print All** – Print a complete health record by either:
 - Selecting a time frame.
 - Selecting a date range and clicking **Go**.
- **Print** – Print a single module.



Health Passport: **LUCY DUCK**

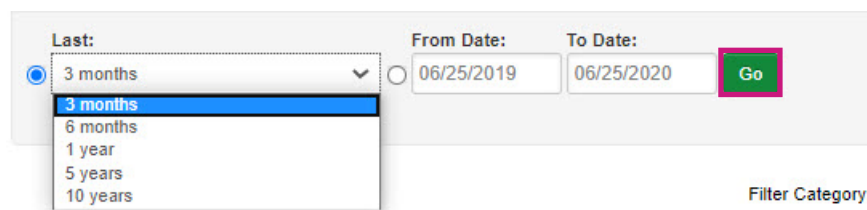
Face Sheet

CCD Export Patients Member Search Print All

Print

- To filter, select the time frame and date range and click **Go**.

The following feature can be found on the **Assessments, Growth Chart, Immunizations, Labs, Medication History** and **Patient History** modules:



Last: 3 months 6 months 1 year 5 years 10 years

From Date: 06/25/2019 To Date: 06/25/2020 Go

Filter Category

- View more by clicking the **Page number** or the **Next** and **Last** buttons.

21 items found, displaying 1 to 10. Page 1/3 1 2 3 Next Last

Other Tools and Features

The following feature can be found on the **Allergies, Growth Chart, Immunizations, Labs, Medication History** and **Patient History** modules:

- Sort information by clicking on the titles labeled with arrows.

Health Passport: LUCY DUCK

CCD ExportPatientsMember SearchPrint All

Face Sheet

Contacts

Allergies

Assessments

Growth Chart

Immunizations

Labs

Medication History

Patient History

Appointments

VisitsDiagnosesProcedures

Last:10 years

From Date:09/29/2019

To Date:09/29/2020

Go

Filter Category: All Patient HistoryPrint

Click on dates for more details

DATE ↑	LOS	DIAGNOSIS	Dx CODE	VISIT TYPE ↓	BILLING ENTITY ↑	SOURCE ↑
01/21/2014		Bipolar I disorder, most recent episode (or current) depressed, severe, specified as with psychotic behavior	296.54	OUTPATIENT HOSPITAL		TMHP
01/21/2014		Bipolar I disorder, most recent episode (or current) depressed, severe, specified as with psychotic behavior	296.54	OUTPATIENT HOSPITAL		SUPERIOR
09/29/2017		Chronic respiratory failure with hypercapnia Muscular dystrophy	J96.12 G71.0	OUTPATIENT HOSPITAL		TMHP
09/29/2017		Encounter for adjustment and management of vascular access device	Z45.2	OUTPATIENT HOSPITAL		TMHP
09/30/2017		Chronic respiratory failure with hypercapnia Muscular dystrophy	J96.12 G71.0	OUTPATIENT HOSPITAL		TMHP
12/29/2017		Other tracheostomy complication	J95.09	OUTPATIENT HOSPITAL		TMHP

Other Tools and Features

The following feature can be found on the **Patient History** module:

- Hover over **Billing Entity** to view contact information for providers.

Health Passport: LUCY DUCK				
<div>CCD ExportPatientsMember SearchPrint All</div>				
Face Sheet	<div>VisitsDiagnosesProcedures</div>			
Contacts				
Allergies				
Assessments				
Growth Chart				
Immunizations				
Labs				
Medication History				
Patient History				
Appointments				

Filter Category: All Patient HistoryPrint

Click on dates for more details

DATE	PROCEDURE	CPT Code	BILLING ENTITY	SOURCE
02/12/2016	OFFICE OUTPATIENT VISIT 25 MINUTES	99214		SUPERIOR
02/09/2017	CT ANGIO ABD&PLVIS CNTRST MTRL W/O CNTRST IMG	74174		SUPERIOR
02/09/2017	CT ANGIOGRAPHY CHEST W/CONTRAST/NONCONTRAST	71275		SUPERIOR
02/09/2017	CT HEAD/BRAIN W/O CONTRAST MATERIAL	70450		SUPERIOR
02/11/2017	OFFICE OUTPATIENT VISIT 25 MINUTES	99214		SUPERIOR
02/11/2017	CV STRS TST XERS&OR RX CONT ECG I&R ONLY	93018		SUPERIOR
02/11/2017	CV STRS TST XERS&OR RX CONT ECG W/O I&R	93016		SUPERIOR
02/11/2017	MYOCARDIAL SPECT MULTIPLE STUDIES	78452		SUPERIOR
02/12/2017	OFFICE OUTPATIENT VISIT 25 MINUTES	99214		SUPERIOR
02/14/2017	HI FREQ CHST WALL OSCILLAT AIR-PULSE GEN SYS EA	E0483		TMHP
02/14/2017	HI FREQ CHST WALL OSCILLAT AIR-PULSE GEN SYS EA	E0483		TMHP
03/14/2017	HI FREQ CHST WALL OSCILLAT AIR-PULSE GEN SYS EA	E0483		TMHP
03/14/2017	HI FREQ CHST WALL OSCILLAT AIR-PULSE GEN SYS EA	E0483		TMHP
03/20/2017	OFFICE OUTPATIENT VISIT 25 MINUTES	99214		SUPERIOR

Health Passport: LUCY DUCK				
<div>CCD ExportPatientsMember SearchPrint All</div>				
Face Sheet	<div>VisitsDiagnosesProcedures</div>			
Contacts				
Allergies				
Assessments				
Growth Chart				
Immunizations				
Labs				
Medication History				
Patient History				
Appointments				

Filter Category: All Patient HistoryPrint

Click on dates for more details

DATE	PROCEDURE	CPT Code	BILLING ENTITY	SOURCE
02/12/2016	OFFICE OUTPATIENT VISIT 25 MINUTES	99214		SUPERIOR
02/09/2017	CT ANGIO ABD&PLVIS CNTRST MTRL W/O CNTRST IMG	74174		SUPERIOR
02/09/2017	CT ANGIOGRAPHY CHEST W/CONTRAST/NONCONTRAST	71275		SUPERIOR
02/09/2017	CT HEAD/BRAIN W/O CONTRAST MATERIAL	70450		SUPERIOR
02/11/2017	OFFICE OUTPATIENT VISIT 25 MINUTES	99214		SUPERIOR
02/11/2017	CV STRS TST XERS&OR RX CONT ECG I&R ONLY	93018		SUPERIOR
02/11/2017	CV STRS TST XERS&OR RX CONT ECG W/O I&R	93016		SUPERIOR
02/11/2017	MYOCARDIAL SPECT MULTIPLE STUDIES	78452		SUPERIOR
02/12/2017	OFFICE OUTPATIENT VISIT 25 MINUTES	99214		SUPERIOR
02/14/2017	HI FREQ CHST WALL OSCILLAT AIR-PULSE GEN SYS EA	E0483		TMHP

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