Home Health Certification and Plan of Care

Order ID: 1184/77

1. Patient s HI claim No.	2. Start Of Care Date	3. Certification Period	4. Medical Record No.	5. Provider No.
A28860474	08/11/2025	From: 08/11/2025 To: 10/09/2025	1378	037804

6. Patient's Name and Address

JOSE MARTINEZ
907 E 7TH DR,
MESA, AZ 85204
817-770-6660

7. Provider's Name, Address and Telephone Number

Devotion Home Health Care, LLC
11201 N Tatum Blvd, Suite 300,
Phoenix, AZ 85028-6039
480-415-4423
1457998957

8. DOB 12/28/1974 | **9.Sex** Male

11. ICD	Principal Diagnosis	Date
Z48.3	Aftercare following surgery for neoplasm	08/11/25

13. ICD	Other Pertinent Diagnoses	Date
C79.51	Secondary malignant neoplasm of bone	08/11/25
C64.9	Malignant neoplasm of unsp kidney except renal pelvis	08/11/25
C79.70	Secondary malignant neoplasm of unspecified adrenal gland	08/11/25
D63.0	Anemia in neoplastic disease	08/11/25
G82.20	Paraplegia unspecified	08/11/25
K59.2	Neurogenic bowel not elsewhere classified	08/11/25
N31.9	Neuromuscular dysfunction of bladder unspecified	08/11/25
L89.159	Pressure ulcer of sacral region unspecified stage	08/11/25
S22.061D	Stable burst fx T7-T8 vertebra subs for fx w routn heal	08/11/25
G93.41	Metabolic encephalopathy	08/11/25
F41.9	Anxiety disorder unspecified	08/11/25
K59.03	Drug induced constipation	08/11/25
T40.2X5D	Adverse effect of other opioids subsequent encounter	08/11/25
E43.	Unspecified severe protein-calorie malnutrition	08/11/25
R13.10	Dysphagia unspecified	08/11/25
R33.9	Retention of urine unspecified	08/11/25
Z79.891	Long term (current) use of opiate analgesic	08/11/25

10. Medications: Dose/Frequency/Route (N)ew (C)hanged

Baclofen - Baclofen 10 mg by mouth three times a day baclofen 10 mg Tab 10 mg 1 tab, Oral, TID
Biscodyl - Bisacodyl: Polyethylene Glycol 3350: Potassium Chloride: Sodium Bicarbonate: Sodium Chloride 10mg rectal at bedtime bisacodyl 10 mg Supp 10 mg 1 supp, Per rectum, QHS
Docusate - Docusate Sodium 50mg-0.6mg by mouth twice a day docusate-senna 50 mg-0.6 mg Tab 3 tab, Oral, BID
Miconazole 2% Topical cream topical twice a day Miconazole 2% Topical Cream (119mL Bulk) 1 app, Topical, BID
Oxycodone - Ibuprofen: Oxycodone Hydrochloride 20mg by mouth every 12 hours Oxycodone 20 mg ER Tab 20 mg 1 tab, Oral, q12hr
Pregabalin - Pregabalin 150mg by mouth three times a day Pregabalin 150 mg oral capsule 150 mg 1 cap, Oral, TID
Ropinirole Hydrochloride - Ropinirole Hydrochloride eq 0.25 mg base by mouth twice a day Ropinirole 0.25 mg Tab 0.25 mg 1 tab, Oral, BID
Ondansetron - Ondansetron 4 mg by mouth every 4 hours ondansetron 4 mg Tab ODT 4 mg 1 tab, Oral, q4hr
Polyethylene Glycol 3350 - Polyethylene Glycol 3350 17gm by mouth twice a day Polyethylene Glycol 3350 Oral Pwdr-Reconstit {17gm} (1EA UD) 17 gm 1 EA, Oral, BID
Simethicone - Simethicone 180mg by mouth four times a day Simethicone 80 mg Chew Tab 80 mg 1 tab, Oral, q8hr
Alprazolam - Alprazolam 0.25 mg 1 by mouth as necessary Alprazolam 0.25 mg Tab 0.25 mg 1 tab, Oral, TID
Remeron - Mirtazapine 15 mg 1 by mouth at bedtime
Cymbalta - Duloxetine Hydrochloride 30 mg 2 by mouth once a day

14. DME and Supplies:

wheelchair, urinary/catheter supplies, bath bench, walker, hoyer lift, grab bars, commode, wound care supplies, sliding board

15. Safety Measures:

fall precautions, transfer with assist, ambulates with assistance, standard precautions, activity supervision

16. Nutrition:

high protein, high calorie

17. Allergies:

Hydromorphone

18.A. Functional Limitations

Endurance, Bowel/Bladder Incontinence, Ambulation

18.B. Activities Permitted

Wheelchair, Walker, Exercises Prescribed

19. Mental & Pyschosocial Status: COGNITION: 0. Alert/ oriented, able to focus and shift attention, comprehends and recalls task directions independently., ANXIETY: 0. Never, SOCIAL ISOLATION: 1. Rarely, BEHAVIORAL ISSUES: 7. None of the above behaviors demonstrated, HISTORY OF DEPRESSION: Yes

20. Prognosis: fair

22. A Rehabilitation Potential:

SELF-CARE: 2. Needed Some Help - Patient needed partial assistance from another person to complete any activities., MOBILITY: 2. Needed Some Help - Patient needed partial assistance from another person to complete any activities.

22.B.Discharge Plans

family/caregiver will be responsible for managing treatment.

Homebound status: Taxing effort to leave home, dependence on assistive devices, requires assistance of another person to leave home

Clinical Condition Requiring Homecare: Patient with metastatic cancer of kidney, spine, bones and new unstageable pressure injury requires SN assessment of Cardiopulmonary, Musculoskeletal, GI/GU, Neuro and Integumentary systems, safety with ADLs and fall precautions, medication and diagnoses management and education, wound care for sacral pressure injury twice weekly and as needed for complications. PT to evaluate and develop plan of care.

SN Careplans

SN FREQUENCY: 2W8 + PRN for complications. PT to evaluate and treat with appropriate plan of care.

CLINICAL SUMMARY: Patient seen today for new SOC following inpatient and rehab admissions. Patient had chemotherapy earlier today. Patient with history of metastatic renal carcinoma with Mets to spine, bones and adrenal glands, neurogenic bowel and bladder related to spinal involvement, now requiring straight catheterization and briefs. Patient also developed a sacral pressure injury that is unstageable at this time. Patient will require wound care twice weekly. Currently non-ambulatory without significant assist. Vital signs within normal limits with BP on lower side of normal. Patient reports 2 bowel movements today and PO intake slowly improving. Patient to have evaluation with PT and SN twice weekly and as needed for complications. CG and patient instructed on how and when to contact agency for questions or concerns and voiced understanding of instructions provided.

PARAMETERS FOR PHYSICIAN NOTIFICATION: temperature < 95 > 101, heart rate < 50 > 110, respiratory rate < 12 > 29, blood pressure systolic < 85 > 170, blood pressure diastolic < 50 > 90, O2 saturation < 88 > 100, pain < 0 > 7

CAREGIVER: 1. Non-agency caregiver(s) currently provide assistance

HOSPITALIZATION RISKS: 2. Unintentional weight loss of a total of 10 pounds or more in the past

SN Goals

PATIENT-STATED GOAL: I want to walk again and get stronger

GOALS

patient/caregiver recalls
* how to achieve wound healing including cleaning and dressing wound
* position changes
* skin care
* diet modification
* record wound measurements
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* how to minimize chemotherapy and radiation side-effects including management of nausea or vomiting
* diarrhea
* appetite loss
* hair loss
* fatigue
* insomnia
* recalls related medication(s) purpose, schedule

23. Signature and Date of Verbal SOC Where Applicable:

Electronically Signed by HUTTO, MARIA SN on 08/11/2025

25. Date HHA Received Signed POT

24. Physician's Name and Address

CASSANDRA MOORE
5777 E MAYO BLVD
PHOENIX, AZ 85054
PHONE: (480) 342-4800 FAX: 14803014675 NPI: 1114966298

26. I certify/recertify that this patient is confined to his/her home and needs intermittent skilled nursing care, physical therapy and/or speech therapy or continues to need occupational therapy. The patient is under my care, and I have authorized the services on this plan of care and will periodically review the plan.

F2F date : 08/05/2025

27. Attending Physician's Signature and Date Signed **08/14/2025**: Date of physician last face-to-face

28. Anyone who misrepresents, falsifies, or conceals essential information required for payment of Federal funds may be subject to fine, imprisonment, or civil penalty under applicable Federal laws.

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12 months, 3. Multiple hospitalizations (2 or more) in the past 6 months, 4. Multiple emergency department visits (2 or more) in the past 6 months, 7. Currently taking 5 or more medications, 8. Currently reports exhaustion

STANDING ORDERS: Infection control: hygiene, proper hand washing.

Fall precautions: wear appropriate foot ware, remove home hazards, living space adequately lit, assistive devices prn.

Emergency preparedness: plan for prn evacuation, resumption of home health visits.

ADVANCED DIRECTIVE: Durable power of attorney for health care/Medical power of attorney.

PROBLEMS IDENTIFIED ON ASSESSMENT: D0160 - Depression, M2020 - Oral Med Management, A1250 - Lack of Necessary Transportation, M1033 - Unintentional Weight Loss, M1033 - Exhaustion, M1400 - Dyspnea, M1620 - Bowel Incontinence, constipation, M1600 - UTI, M1610 - Urinary Catheter, urine retention, extremity burn/tingle/numb, pain radiating to arms/legs, loss of appetite, pallor, skin breakdown r/t incontinence, #1 - 6 - Unstageable due to coverage of wound bed by slough and/or eschar. - Posterior Sacrum - Unstageable, partial thickness, red/pink and black wound bed, minimal serosanguineous drainage

PROCEDURES: physician-ordered wound care: Cleanse sacral area with wound cleanser or warm soapy water, pat dry with gauze, apply medi-honey or similar product to open areas, cover with bordered foam dressing (sacral pad) and change 2-3 times weekly and as needed for soiling or dislodgement., home exercise program

TEACH PATIENT/CAREGIVER: * lifestyle modifications to manage respiratory condition including diet changes and regular exercise strategies to control shortness of breath home remedies to keep lungs healthy, related medication(s) purpose, schedule, * lifestyle modification to manage blood condition including dietary changes bleeding precautions, related medication(s) purpose, schedule, * how to optimize mental status with cognition therapy home safety optimize mobility with active and passive range of motion therapeutic exercises diet and fluids to optimize peripheral circulation, related medication(s) purpose, schedule, * prevention exacerbation of anxiety condition including coping patterns improved concentration strategies to reduce anxiety identification of anxiety precipitants, conflicts, and threats, related medication(s) purpose, schedule, * how to incorporate lifestyle modifications to optimize renal condition including renal-specific diet exercise monitoring of blood pressure blood sugar home, related medication(s) purpose, schedule remedies, * depression-prevention strategies including avoidance of isolation healthy eating sleeping habits identification of activities that bring pleasure preventive care, related medication(s) purpose, schedule, * how to achieve wound healing including cleaning and dressing wound position changes skin care diet modification record wound measurements, related medication(s) purpose, schedule, * strategies to increase caloric intake, related medication(s) purpose, schedule, * how to minimize chemotherapy and radiation side-effects including management of nausea or vomiting diarrhea appetite loss hair loss fatigue insomnia, related medication(s) purpose, schedule, * bowel incontinence management including dietary changes bowel training skin care, related medication(s) purpose, schedule, * diet and fluids to control side effects exercise healthy sleep patterns to encourage withdrawal, related medication(s) purpose, schedule, * lifestyle modifications low-residue dietary guidelines alternative medicine options for ulcerative colitis, related medication(s) purpose, schedule, * urinary catheter management including how to flush catheter change and wash drainage bags prevent infection including proper handwashing positioning of catheter, related medication(s) purpose, schedule, * dietary guidelines for managing nutritional deficit, related medication(s) purpose, schedule, * prevention including increase fluid intake increase Vitamin C intake to promote acidic bladder environment (cranberry juice) perineal hygiene, related medication(s) purpose, schedule, * pain control therapeutic exercises to optimize range of motion of affected area diet and fluids to promote healing, related medication(s) purpose, schedule, * strategies to minimize fatigue and exhaustion including work simplification energy conservation lifestyle changes diet, related medication(s) purpose, schedule, patient self-administers medications as prescribed, related medication(s) purpose, schedule, patient's transportation needs are met

patient/caregiver recalls
* lifestyle modification to manage blood condition including dietary changes
* bleeding precautions
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* how to optimize mental status with cognition therapy
* home safety
* optimize mobility with active and passive range of motion therapeutic exercises
* diet and fluids to optimize peripheral circulation
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* lifestyle modifications
* low-residue dietary guidelines
* alternative medicine options for ulcerative colitis
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* how to incorporate lifestyle modifications to optimize renal condition including renal-specific diet
* exercise
* monitoring of blood pressure
* blood sugar
* home
* recalls related medication(s) purpose, schedule remedies

patient/caregiver recalls
* pain control
* therapeutic exercises to optimize range of motion of affected area
* diet and fluids to promote healing
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* prevention exacerbation of anxiety condition including coping patterns
* improved concentration
* strategies to reduce anxiety
* identification of anxiety precipitants, conflicts, and threats
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* diet and fluids to control side effects
* exercise
* healthy sleep patterns to encourage withdrawal
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* dietary guidelines for managing nutritional deficit
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* lifestyle modifications to manage respiratory condition including
* diet changes and regular exercise
* strategies to control shortness of breath
* home remedies to keep lungs healthy
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* depression-prevention strategies including avoidance of isolation
* healthy eating
* sleeping habits
* identification of activities that bring pleasure
* preventive care
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* strategies to increase caloric intake
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* bowel incontinence management including dietary changes
* bowel training
* skin care
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* urinary catheter management including how to flush catheter
* change and wash drainage bags
* prevent infection including proper handwashing
* positioning of catheter

Signature of Physician:	Date
	PAGE 2 of 3
Optional Name/Signature of Nurse/Therapist:	Date
Electronically Signed by HUTTO, MARIA SN	08/11/2025

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* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* prevention including increase fluid intake
* increase Vitamin C intake to promote acidic bladder environment (cranberry juice)
* perineal hygiene
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* strategies to minimize fatigue and exhaustion including work simplification
* energy conservation
* lifestyle changes
* diet
* recalls related medication(s) purpose, schedule

patient self-administers medications as prescribed
* recalls related medication(s) purpose, schedule

patient's transportation needs are met

PT Careplans

PT 1W1, pending additional scheduling based on evaluation.

PROBLEMS IDENTIFIED ON ASSESSMENT: limited strength, limited range of motion, limited endurance, muscle weakness, muscle spasms, poor muscle tone, Pain Effect on Sleep, Pain Interference with Therapy activities, Pain Interference with ADLs, Pain Effect on Sleep, Pain Interference with Therapy activities, Pain Interference with ADLs, balance deficit

TEACH PATIENT/CAREGIVER: * how to maintain a diary to monitor effective and non-effective pain relief including documenting time of pain, rating, precipitating events, medications, treatments, and what works best to relieve pain teach relaxation skills and diversional activities, related medication(s) purpose, schedule

PT Goals

PATIENT-STATED GOAL: Walk again, get stronger.

GOALS

Additional goals to follow with physical therapy evaluation and creation of separate care plan.

patient/caregiver recalls
* how to maintain a diary to monitor effective and non-effective pain relief including documenting time of pain, rating, precipitating events, medications, treatments, and what works best to relieve pain
* teach relaxation skills and diversional activities
* recalls related medication(s) purpose, schedule

Signature of Physician:

Date

Optional Name/Signature of Nurse/Therapist:

Electronically Signed by HUTTO, MARIA SN

Date

08/11/2025