

Medical Update for Angel Fuentes DOB: 11/28/1952

Date Order Created: 09/17/2025

Order ID: 1150/12105

Agency Assigned Id: 14925

Certification Period: 08/27/2025 to 10/25/2025

*HomeCentris Healthcare LLC 217058
10 Crossroads Drive, Suite 102
Owings Mills, MD 21117-8284
PHONE 410-321-8448 FAX*

Orders:

*Authorization changes of OT skill Total Visits: 10 and Visit Freq: CUSTOM
Authorization changes of SN skill Total Visits: 12 and Visit Freq: CUSTOM
Authorization changes of PT skill Total Visits: 1 and Visit Freq: CUSTOM*

09/17/2025 Medications: Zosyn - Piperacillin Sodium: Tazobactam Sodium 4.5mg iv intravenous every 8 hours

*Tracy Gutierrez
7070 Samuel Morse Dr*

*7070 Samuel Morse Dr, MD 21046
Tele: FAX:*

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

Staff Signature: Electronically Signed by Messick, Charles Date 09/17/2025