Medical Update for Michael Vincent DOB: 04/05/1959

Date Order Created: 09/17/2025

Order ID: 1150/12146

Agency Assigned Id: 16700

Certification Period: 09/07/2025 to 11/04/2025

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

Orders:
09/08/2025 Problems : GG0130B1 - Oral Hygiene
GG0130F1 - Upper Body Dressing
GG0130G1 - Lower Body Dressing
GG0130H1 - Don/Doff Footwear
GG0130E1 - Shower/Bathe Self
GG0130C1 - Toileting Hygiene
GG0130A1 - Eating

09/17/2025 Medications: Meloxicam - Meloxicam 7.5 mg 7.5MG 1 TABLET by mouth every 12 hours
Cyclobenzaprine - Cyclobenzaprine Hydrochloride 5MG 1 TABLET by mouth as necessary TAKE AT BEDTIME FOR 14 DAYS
Oxycodone - Ibuprofen: Oxycodone Hydrochloride 5MG 1 TABLET by mouth every 6 hours AS NEEDED FOR PAIN
Furosemide - Furosemide 40 mg by mouth twice a day

Shirley Lee
7141 Security Blvd

7141 Security Blvd, MD 21244
Tele:(443) 663-6000 FAX: 14436636295

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

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