

Medical Update for Kristina Test DOB: 01/01/1980

Date Order Created: 09/17/2025

Order ID: 179/12061

Agency Assigned Id: 7121

Certification Period: 08/05/2025 to 10/03/2025

*Home Health Cares 368102
579# EAST MARKET@STREETS
HARRISONBURG, VA 22801-1234
PHONE 540-433-7146 FAX*

Orders:

Authorization changes of SN skill Total Visits: 40 and Visit Freq: CUSTOM

*09/15/2025 Medications: Synthroid - Levothyroxine Sodium 0.075 mg **see current annual edition,
1.8 description of special situations, levothyroxine sodium transdermal every 4 hours a*

*Jane Doe
310, NATARAJAPURAM 4TH EAST STREET*

*310, NATARAJAPURAM 4TH EAST STREET, HI 628502
Tele:999-999-9999 FAX: 12077802774*

Physician Signature_____ Date _____

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