Home Health Certification and Plan of Care

Order ID: 1150/12172

1. Patient s HI claim No.	2. Start Of Care Date	3. Certification Period	4. Medical Record No.	5. Provider No.
40204388800	07/10/2025	From: 09/08/2025 To: 11/05/2025	12914	217058

6. Patient's Name and Address

Kathleen Johnson
7429 Rigby Place,
Elkridge, MD 21075-
301-247-8599

7. Provider's Name, Address and Telephone Number

HomeCentris Healthcare LLC
10 Crossroads Drive, Suite 102
Owings Mills, MD 21117-8284
410-321-8448
1487113239

8. DOB 01/03/1945 | **9.Sex** Female

11. ICD	Principal Diagnosis	Date
T81.49XA	Infection following a procedure other surgical site init	07/10/25

13. ICD	Other Pertinent Diagnoses	Date
T81.89XA	Oth complications of procedures NEC init	07/10/25
E11.69	Type 2 diabetes mellitus with other specified complication	07/10/25
M86.9	Osteomyelitis unspecified	07/10/25
E11.65	Type 2 diabetes mellitus with hyperglycemia	07/10/25
I13.0	Hyp hrt & chr kdny dis w hrt fail and stg 1-4/unsp chr kdny	07/10/25
I50.23	Acute on chronic systolic (congestive) heart failure	07/10/25
E11.22	Type 2 diabetes mellitus w diabetic chronic kidney disease	07/10/25
N18.31	Chronic kidney disease stage 3a	07/10/25
D63.1	Anemia in chronic kidney disease	07/10/25
I27.20	Pulmonary hypertension unspecified	07/10/25
I35.0	Nonrheumatic aortic (valve) stenosis	07/10/25
J45.909	Unspecified asthma uncomplicated	07/10/25
F03.93	Unsp dementia unspecified severity with mood disturb	07/10/25
F20.9	Schizophrenia unspecified	07/10/25
F32.9	Major depressive disorder single episode unspecified	07/10/25
M15.0	Primary generalized (osteo)arthritis	07/10/25
E78.49	Other hyperlipidemia	07/10/25
M54.16	Radiculopathy lumbar region	07/10/25
E66.9	Obesity unspecified	07/10/25
Z68.31	Body mass index [BMI] 31.0-31.9 adult	07/10/25
Z85.3	Personal history of malignant neoplasm of breast	07/10/25
Z79.2	Long term (current) use of antibiotics	07/10/25
Z79.02	Long term (current) use of antithrombotics/antiplatelets	07/10/25
Z79.4	Long term (current) use of insulin	07/10/25
Z86.73	Prsnl hx of TIA (TIA) and cereb infrc w/o resid deficits	07/10/25
Z90.12	Acquired absence of left breast and nipple	07/10/25

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

Atorvastatin Calcium - Atorvastatin Calcium 80 mg, take 1 tablet by mouth in the evening Give 1 tablet by mouth in the evening for Hyperlipidemia

Bimatoprost - Bimatoprost 0.01, Instill 1 drop in both eyes both eyes at bedtime Instill 1 drop in both eyes at bedtime for Glaucoma

Clopidogrel Bisulfate - Clopidogrel Bisulfate 75mg, give 1 tablet by mouth once a day for CVA

Metoprolol Succinate - Metoprolol Succinate 25 mg, Take 1 tablet by mouth once a day Give 1 tablet by mouth one time a day for Congestive Heart Failure

Polyethylene Glycol 3350 - Polyethylene Glycol 3350 Glycol 3350, Give 17 gram, oral solution by mouth once a day Give 17 gram by mouth one time a day for Bowel Regimen in 4 to 8 ounces of water

Pantoprazole Sodium - Pantoprazole Sodium 40 mg, Take 1 tablet by mouth once a day for GERD

Sennosides - Senna 8.6 MG, Give 2 tablet by mouth at bedtime Give 2 tablet by mouth at bedtime for bowel regimen

Tramadol Hcl - Tramadol Hydrochloride 50 mg, Take 1 tablet by mouth every 8 hours as needed for Moderate to Severe Pain 6-10

Acetaminophen - Acetaminophen 500 MG., Give 2 tablet by mouth every 8 hours Give 2 tablet by mouth every 8 hours as needed for Mild to Moderate Pain 1-5. Wound pain.

Novolog Mix 70/30 - Insulin Aspart Protamine Recombinant: Insulin Aspart Recombinant 70 units/ml;30 units/ml 16 units subcutaneous once a day Before dinner

Novolog Mix 70/30 - Insulin Aspart Protamine Recombinant: Insulin Aspart Recombinant 70 units/ml;30 units/ml 24 units subcutaneous once a day Before breakfast

Xiidra - Lifitegrast 5 %, Instill 1 drop in both eyes both eyes twice a day nstill 1 drop in both eyes two times a day for Dry Eyes

Akten - Lidocaine Hydrochloride 15% transdermal once a day Pain

Lactulose - Lactulose 10gm/15ml by mouth twice a day

Gentamicin - Gentamicin Sulfate 0.1% topical once a day Wound infection

Maxipime - Cefepime Hydrochloride 1 gram iv intravenous twice a day

Saline Flush - Normal Saline 10 ML intravenous twice a day IV patency. Flush IV Pre and Post IV antibiotic administration and blood draw.

Heparin Flush - Heparin Sodium 3ml intravenous twice a day IV patency. Post IV antibiotic administration and blood draw, after saline flush.

14. DME and Supplies:

walker, hand held shower, bath bench, diabetic supplies, commode, cane

15. Safety Measures:

bathroom safety, walker precautions, , sharps precautions, fall precautions, diabetic precautions, medication safety, infectious material management, avoid temperature extremes, ambulates with device,

16. Nutrition:

high protein, NG feeding, low sodium, low cholesterol, diabetic

17. Allergies:

aspirin mobic

18.A. Functional Limitations

Bowel/Bladder Incontinence, Endurance, Dyspnea With Minimal Exertion, Ambulation

18.B. Activities Permitted

Up As Tolerated, Walker, Cane

19. Mental & Pyschosocial Status: COGNITION: 2. Unable to get to and from the toilet but is able to use a bedside commode (with or without assistance)., ANXIETY: 1. In new or complex situations only, SOCIAL ISOLATION: , BEHAVIORAL ISSUES: , HISTORY OF DEPRESSION:

20. Prognosis: good

22. A Rehabilitation Potential:

SELF-CARE: , MOBILITY:

22.B.Discharge Plans

patient will be responsible for managing treatment
family/caregiver will be responsible for managing treatment

Homebound status: Due to diagnosis of Infection following a procedure, other surgical site, initial encounter, the patient is experiencing decreased endurance and mobility, increasing the likelihood of falls. To safely leave their home, the patient needs assistance from another person and an assistive mobility device.

23. Signature and Date of Verbal SOC Where Applicable:

Electronically Signed by Messick, Charles SN RN on 09/05/2025

25. Date HHA Received Signed POT

24. Physician's Name and Address

Santhia Mathew
5500 Knoll North Dr
Columbia, MD 21045
PHONE: 4108372050 FAX: 14107153734 NPI: 1851509012

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 : 07/02/2025

27. Attending Physician's Signature and Date Signed : 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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Clinical Condition Requiring Homecare:

Patient is an 80-year-old female with a medical history significant for arthritis, congestive heart failure, left breast cancer status post-mastectomy and chemotherapy, type 2 diabetes mellitus, hyperlipidemia, and hypertension. She is receiving home health services following recent hospital discharge and is being recertified due to an open wound on the left chest, which remains present. The patient lives with her daughter, Sharon, and receives occasional assistance from a home health aide. She demonstrates significant limitations in strength, balance, endurance, and functional mobility, requiring human assistance and a rolling walker for ambulation outside the home. Strength deficits are noted in bilateral triceps, bilateral hip flexors, left hamstring, and bilateral dorsiflexors. Transfers and sit-to-stand are performed with supervision, and gait is supported with close guarding. The Timed Up and Go (TUG) test was completed in 1 minute and 26 seconds, indicating a high risk for falls. A seated therapeutic exercise home exercise program (HEP) was reviewed with both the patient and daughter, who demonstrated good understanding. During the skilled nursing visit, the patient was alert and oriented to person, place, time, and situation. All medications, doses, and frequencies were reviewed, and both the patient and caregiver were educated on signs and symptoms of infection and the proper use of compression stockings. Stockings were applied by skilled nursing. The patient denied pain and shortness of breath at rest; lung sounds were clear with diminished bases and unlabored breathing. She voids without complications and wears adult briefs. Last bowel movement was yesterday, and active bowel sounds were present. Wound care was completed due to a saturated dressing, with photo and measurements taken. Drainage was moderate, clear, and odor-free, and pedal pulses were present with no edema noted. Hyperbaric oxygen therapy was skipped today due to the holiday. The patient and caregiver were receptive to all education, and recertification has been completed based on ongoing wound care needs.

 Date of Order
 09/05/2025 Order
 Physician Face-to-Face Date: 07/02/2025 Clinical Condition Requiring Home Care per Certifying Physician: sn-disease management pt-eval & treat due to Infection Following A Procedure, Other Surgical Site, Initial Encounter Homebound Status per Certifying Physician: patient requires another person or medical equipment such as crutches, a walker, or a wheelchair to leave home

 4 - Recertification Notes: -due to open wound on left chest PT Eval Notes:
 Physician: Mathew, Santhia

SN Careplans

SN

PARAMETERS FOR PHYSICIAN NOTIFICATION: temperature < 95 > 100.5, heart rate < 50 > 110, respiratory rate < 8 > 22, blood pressure systolic < 90 > 169, blood pressure diastolic < 60 > 90, O2 saturation < 88 > 100, pain < 0 > 5

CAREGIVER: 2. Non-agency caregiver(s) need training/supportive services to provide assistance

HOSPITALIZATION RISKS: 10. None of the above

STANDING ORDERS: infection control: hygiene, proper hand washing; advance directive: plan if patient is unable to make healthcare decisions ; fall precautions: wear sensible shoes, remove home hazards, living space adequately lit, assistive devices prn; emergency preparedness: plan for prn evacuation, resumption of home health visits; Skin Preservation: Measures to prevent skin breakdown; pressure relief, incontinence care, nutrition, hydration ; Pain: Pain management measures; pain medication, rest, body alignment, ROM, meditation, massage ; Medications: Medication actions, uses, frequency, dose, interactions of all new/change meds
Advance Directive:POLST (Physician Orders for Life-Sustaining Treatment)

PROBLEMS IDENTIFIED ON ASSESSMENT: limited endurance, discolored patches of skin, #2 - IV Access - Central - Anterior Right Upper Arm -

PROCEDURES: Medication Review- Medications reviewed with patient/caregiver., cough/deep breathing exercises, apply anti-embolitic stockings, train caregiver(s) to perform medical/rehabilitation treatments, coordinate/arrange caregiver support to prevent caregiver physical, emotional and mental exhaustion, physician-ordered wound care: wound care orders. As of 8/25/2025- to left chest wound- Clean wound with saline, apply Silver Gel (sent with patient from wound center). And cover with dry gauze and tape. Change Daily. If green drainage or odor noticed then call wound center., glucose testing via monitor, monitor intake & output, coordinate/arrange for adequate patient supervision, coordinate/arrange resources for vision-impaired

TEACH PATIENT/CAREGIVER: * lifestyle modifications to manage cardiac condition including symptom management diet changes regular exercise getting enough sleep, related medication(s) purpose, schedule, * how to take the patient's blood pressure record the reading, related medication(s) purpose, schedule, * 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 modifications to manage peripheral vascular condition including how to apply compression stockings physical exercise plan diet, related medication(s) purpose, schedule, * lifestyle modification to manage blood condition including dietary changes bleeding precautions, related medication(s) purpose, schedule, * low cholesterol dietary guidelines, related medication(s) purpose, schedule, * 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, * management of mental health condition including joining a peer group maintaining regular contact with mental health professional avoiding known stressors controlling impulses, related medication(s) purpose, schedule, * how to keep home safe for patient with dementia coping strategies for the caregiver*, 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, * how to achieve wound healing including cleaning and dressing wound position changes skin care diet modification record wound measurements, related medication(s) purpose, schedule, * diabetic medication management blood sugar testing diabetic foot care exercise diabetic diet, 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, * diet weight-bearing exercises to promote bone healing and strengthening fluids to prevent constipation home safety pain control, related medication(s) purpose, schedule, * how to help resolve infection including hygiene proper hand washing food-safety techniques travel precautions vaccinations animal-control cough etiquette, related medication(s) purpose, schedule, * how to manage inflammatory process optimize mobility with active and passive range of motion exercises fluid and diet intake to promote healing prevent constipation home safety, related medication(s) purpose, schedule, * how to keep home safe for

SN Goals

PATIENT-STATED GOAL: Wound to heal

GOALS
patient/caregiver recalls
* lifestyle modifications to manage cardiac condition including symptom management
* diet changes
* regular exercise
* getting enough sleep
* recalls related medication(s) purpose, schedule

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

patient/caregiver recalls
* how to keep home safe for patient with vision loss including eliminating hazards
* enhancing lighting
* using mechanical aids

patient/caregiver recalls
* how to manage inflammatory process
* optimize mobility with active and passive range of motion exercises
* fluid and diet intake to promote healing
* prevent constipation
* home safety
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* how to help resolve infection including hygiene
* proper hand washing
* food-safety techniques
* travel precautions
* vaccinations
* animal-control
* cough etiquette
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* diet
* weight-bearing exercises to promote bone healing and strengthening
* fluids to prevent constipation
* home safety
* pain control
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* diabetic medication management
* blood sugar testing
* diabetic foot care
* exercise
* diabetic diet
* 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

Signature of Physician:	Date
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Optional Name/Signature of Nurse/Therapist:	Date
Electronically Signed by Messick, Charles SN RN	09/05/2025

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patient with vision loss including eliminating hazards enhancing lighting using mechanical aids, patient self-administers medications as prescribed, related medication(s) purpose, schedule, patient is adequately supervised, caregiver performs medical/rehabilitation treatments with adequate competence

* recalls related medication(s) purpose, schedule remedies

patient/caregiver recalls
* how to keep home safe for patient with dementia
* coping strategies for the caregiver* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* management of mental health condition including joining a peer group
* maintaining regular contact with mental health professional
* avoiding known stressors
* controlling impulses
* recalls related medication(s) purpose, schedule

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

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

patient/caregiver recalls
* lifestyle modifications to manage peripheral vascular condition including how to apply compression stockings
* physical exercise plan
* diet
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* how to take the patient's blood pressure
* record the reading
* recalls related medication(s) purpose, schedule

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
* 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

caregiver performs medical/rehabilitation treatments with adequate competence

patient/caregiver recalls
* low cholesterol dietary guidelines
* 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

patient is adequately supervised

PT Careplans

PT WK1: 1 (09/08/25-09/13/25)

PROBLEMS IDENTIFIED ON ASSESSMENT: Pain Interference with ADLs, M1400 Dyspnea, GG0170F1 - Toilet Transfer, GG0170D1 - Sit to Stand, GG0170E1 - Chair to Bed to Chair, GG0170G1 - Car Transfer, GG0170I1 - Walk 10 Feet, GG0170J1 - Walk 50 ft with 2 Turns, GG0170K1 - Walk 150 Feet, GG0170L1 - Walk 10 ft on Uneven Surface, GG0170M1 - 1 - Step (curb), GG0170N1 - 4 Steps, GG0170O1 - 12 Steps, GG0170P1 - Picking Up Object

08/19/2025

PT Goals

PATIENT-STATED GOAL: To improve balance and independence

GOALS
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

Signature of Physician:	Date
	PAGE 3 of 4
Optional Name/Signature of Nurse/Therapist:	Date
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09/15/2025

GG0130B1 - Oral Hygiene

GG0130F1 - Upper Body Dressing

GG0130G1 - Lower Body Dressing

GG0130H1 - Don/Doff Footwear

GG0130E1 - Shower/Bathe Self

GG0130C1 - Toileting Hygiene

GG0130A1 - Eating

PROCEDURES: Therapeutic exercise , Dynamic standing balance , Medication Review- Medications reviewed with patient/caregiver., gait training on uneven surfaces, gait training/stair training, transfers training

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, * 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, Toilet Transfer - 05. Setup or clean-up assistance, Car Transfer - 04. Supervision or touching assistance, Walk 10 Feet - 03. Partial/moderate assistance, Walk 50 ft with 2 Turns - 03. Partial/moderate assistance, Walk 150 Feet - 03. Partial/moderate assistance, 1 - Step (curb) - 03. Partial/moderate assistance, Picking Up Object - 03. Partial/moderate assistance, Medication Review- Patient/caregiver, related purpose and schedule of medications.

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

Toilet Transfer - 05. Setup or clean-up assistance

Car Transfer - 04. Supervision or touching assistance

Walk 10 Feet - 03. Partial/moderate assistance

Walk 50 ft with 2 Turns - 03. Partial/moderate assistance

Walk 150 Feet - 03. Partial/moderate assistance

1 - Step (curb) - 03. Partial/moderate assistance

Picking Up Object - 03. Partial/moderate assistance

Medication Review- Patient/caregiver recalls related purpose and schedule of medications.

Signature of Physician:

Date

Optional Name/Signature of Nurse/Therapist:
Electronically Signed by Messick, Charles SN RN

Date
09/05/2025