

Medical Update for Mary Norris DOB: 10/06/1948

Date Order Created: 09/22/2025

Order ID: 1184/191

Agency Assigned Id: 1393

Certification Period: 09/12/2025 to 11/10/2025

*Devotion Home Health Care, LLC MED8891
11201 N Tatum Blvd, Suite 300
Phoenix, AZ 85028-6039
PHONE 480-415-4423 FAX*

Orders:

*Wound care to Left Lower Leg wound: cleanse with wound cleanser, aquacel ag to wound bed, cover with gauze, wrap with kerlix and ace wrap;
Frequency: daily; SN to change on M,W,Fs as well as prn for dislodgement*

*BRIAN BURT
4212 N 16TH ST*

*4212 N 16TH ST, AZ 85016
Tele:(602) 263-1511 FAX: 16022005387*

Physician Signature _____ Date _____

Staff Signature: Electronically Signed by JOHNSON, LAURA Date 09/22/2025