Home Health Certification and Plan of Care

Order ID: 1150/11097

1. Patient s HI claim No.	2. Start Of Care Date	3. Certification Period	4. Medical Record No.	5. Provider No.
44180353	07/30/2025	From: 07/30/2025 To: 09/27/2025	14924	217058

6. Patient's Name and Address

Janet Cover
2 somerville Ct Apt G,
PARKVILLE, MD 21234-
410-661-1079

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 05/01/1948 | **9.Sex** Female

11. ICD	Principal Diagnosis	Date
Z47.1	Aftercare following joint replacement surgery	07/30/25

13. ICD	Other Pertinent Diagnoses	Date
I10.	Essential (primary) hypertension	07/30/25
E78.5	Hyperlipidemia unspecified	07/30/25
E03.9	Hypothyroidism unspecified	07/30/25
M47.26	Other spondylosis with radiculopathy lumbar region	07/30/25
E53.8	Deficiency of other specified B group vitamins	07/30/25
M54.41	Lumbago with sciatica right side	07/30/25
M54.42	Lumbago with sciatica left side	07/30/25
M81.0	Age-related osteoporosis w/o current pathological fracture	07/30/25
K21.9	Gastro-esophageal reflux disease without esophagitis	07/30/25
G47.00	Insomnia unspecified	07/30/25
R73.03	Prediabetes	07/30/25
R32.	Unspecified urinary incontinence	07/30/25
E66.9	Obesity unspecified	07/30/25
Z68.27	Body mass index [BMI] 27.0-27.9 adult	07/30/25
Z85.118	Personal history of malignant neoplasm of bronchus and lung	07/30/25
Z96.653	Presence of artificial knee joint bilateral	07/30/25

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

Asprin - Aspirin 81 mg, Take 1 tablet by mouth twice a day Blood clot
Oxycodone - Ibuprofen: Oxycodone Hydrochloride 5mg, take 1 tablet by mouth every 4 hours as needed for pain
Colace - Docusate Sodium 100mg, take 1 capsule by mouth twice a day stool softner
Extra Strength Tylenol - Acetaminophen 500mg, take 2 tablets by mouth every 6 hours as needed for pain
Lipitor - Atorvastatin Calcium 40 mg, Take 1 tablet by mouth once a day cholesterol
Biotin - Alpha-Tocopherol Acetate: Ascorbic Acid: Biotin: Cholecalciferol: Cyanocobalamin: Dexpanthenol: Folic Acid: Niacinamide: Pyridox 1000mcg, take 1 Tablet by mouth once a day supplement
Vitamin D3 - Alpha-Tocopherol Acetate: Ascorbic Acid: Biotin: Cholecalciferol: Cyanocobalamin: Dexpanthenol: Folic Acid: Niacinamide: Pyridox 50 mcg(2,000 unit), Take 2,000 units capsule by mouth once a day supplement
Pepcid - Famotidine 40 Mg, Take 1 tablet by mouth at bedtime GERD
Neurontin - Gabapentin 300 mg, Take 1 capsule by mouth at bedtime Neuropathic pain
Levothroid - Levothyroxine Sodium 112 MCG, Take 1 tablet by mouth in the morning thyroid
sodium chloride hypertonic (MURO 128) 2% Instill 1 drop both eyes twice a day eye drop
Ditropan Xl - Oxybutynin Chloride 10 Mg, Take 1 tablet by mouth once a day urinary incontinence
Topamax - Topiramate 25 Mg, Take 1 tablet by mouth at bedtime migraine headache
Fosamax - Alendronate Sodium eq 70 mg base 70 Mg, Take 1 tablet by mouth once a day Take in the morning with 8 ounces of water at least 30 minutes before the first food ,drink or other medication of the day.Do not lie down for at least 30 minutes after swallowing this medication.
Hydrea - Hydroxyurea 500 mg, Take 1 Capsule by mouth three times per week Monday, Wednesday, Friday. malignant neoplasm
Cyanocobalamin - Cyanocobalamin 1,000 Mcg, Take 1 tablet by mouth once a day supplement

14. DME and Supplies:

walker, cane

15. Safety Measures:

infectious material management, walker precautions, medication safety, fall precautions, bleeding precautions, ambulates with device, standard precautions, knee precautions, bathroom safety, cardiac precautions, anticoagulant precautions

16. Nutrition:

low sodium

17. Allergies:

no known allergies

18.A. Functional Limitations

Ambulation

18.B. Activities Permitted

Up As Tolerated

19. Mental & Pyschosocial Status: COGNITION: 0. Alert/ oriented, able to focus and shift attention, comprehends and recalls task directions independently., ANXIETY: 0. Never, SOCIAL ISOLATION: 0. Never, BEHAVIORAL ISSUES: 7. None of the above behaviors demonstrated, HISTORY OF DEPRESSION: No

20. Prognosis: fair

22. A Rehabilitation Potential:

SELF-CARE: 3. Independent - Patient completed all the activities by him/herself, with or without an assistive device, with no assistance from a helper., MOBILITY: 3. Independent - Patient completed all the activities by him/herself, with or without an assistive device, with no assistance from a helper.

22.B.Discharge Plans

patient will be responsible for managing treatment
another facility/provider will be responsible for managing treatment

Homebound status: After undergoing left knee replacement surgery, 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.

Clinical Condition Requiring Homecare: The patient is a 77-year-old female with a past medical history of carcinoid tumor of the lung, hyperlipidemia (HLD), hypertension (HTN), and hypothyroidism, who is status post left total knee replacement (TKR). The surgical site is covered with a Mepilex dressing, which is to be removed on post-operative day seven per the surgeon's orders. She currently wears compression socks and reports a pain level of 6/10, which is being managed with prescribed medications. Swelling is noted around the surgical site, and knee precautions are in place. The patient uses ice therapy to help reduce swelling and pain. Vital signs are within normal limits, bowel sounds are active, and breath sounds are clear. Family is actively involved in her care, and the patient ambulates with a cane. Postoperatively, the patient demonstrated participation in physical therapy exercises including ankle pumps, heel slides (both assisted and unassisted), straight leg raises, long arc quads while seated, and standing exercises such as marching and heel raises (10 repetitions, 2 sets). She was trained in the safe use of a rolling walker and educated on using ice therapy to control pain and edema. The patient is progressing with mobility and rehabilitation activities as planned. Date of Order 07/30/2025 Order Physician Face-to-Face Date: 07/14/2025 Clinical Condition Requiring Home Care per Certifying Physician: SN-pain control PT-eval & treat due to Aftercare following joint replacement surgery Homebound Status per Certifying Physician: patient requires another person or medical equipment such as crutches, a walker, or a wheelchair to leave home 1 - SOC - SN Notes: PT Eval Notes: Physician: Narcisse, Patrick

23. Signature and Date of Verbal SOC Where Applicable:

Electronically Signed by Messick, Charles SN RN on 07/30/2025

25. Date HHA Received Signed POT

24. Physician's Name and Address

Patrick Narcisse
2391 Greenspring Dr
Timonium , MD 21093
PHONE: 410-847-3000 FAX: NPI: 1508397092

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 : 07/14/2025

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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SN Careplans

SN WK1: 1 (07/30/25-08/02/25) ,WK2: 1 (08/03/25-08/09/25)

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: 1. Non-agency caregiver(s) currently provide assistance

HOSPITALIZATION RISKS: 7. Currently taking 5 or more medications, 8. Currently reports exhaustion, 9. Other risk(s) not listed in 1- 8

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; Assess the patient's incision on post op day 7 and the nurse or physical therapist will remove aquacel dressing leaving OTA; if incision is draining educate pt/pcg on cleaning with normal saline and covering with dry gauze daily and as needed.
Assess the pt's incision and on post op day 12-14 the nurse or physical therapist will remove the patient's staples and leave OTA., Assess/Instruct Pt/Pcg: Ice to ____ x 20 minutes each hour while awake. If cold machine ordered apply 20 minutes on and 20 minutes off for 3-4 times a day.
Assess/Instruct all body systems/vital signs/complications, Blood Pressure; systolic is greater than 169 mm Hg or less than 90 mm Hg; diastolic is greater than 100 mm Hg or less than 55 mm Hg, Clinician to assess comorbidities and report changes in condition to the patient's physician, Pain Rating is greater than 6 on 0-10 scale, Pulse is greater than 110 or less than 50, Respirations are greater than 22 or less than 8, SPO2: is less than 90 % at rest /with exertion, Temperature is greater than 100.5 F or less than 95.0 F, Pain Rating is greater than 6 on 0-10 scale
Implement Fall Prevention Program, Instruct and educate the patient/PCG on wearing compression stockings for the next 4 weeks per discharge instructions.
Instruct the pt/PCG on using the incentive spirometer 10 times every 2 hour while awake.
Provide education content at patient's level of health literacy.
Assess/Instruct Pt/Pcg: Safety measures to prevent injury.
Assess: Musculoskeletal status.
Teach Pt/Pcg to maintain appropriate wt bearing status as ordered by MD, total joint replacement precautions as applicable, Safe stair climbing skills, Safe, effective use of adaptive/assist device
Assess/Instruct Pt/Pcg: Pain management measures; assess pain level, pain medication, rest, body alignment, ROM, meditation, massage.
Pt/Pcg educated in pain management techniques including positioning and relaxation techniques
Instruct Pt/Pcg: Medication actions, uses, frequency, dose, side effects, interactions of all new/change meds, Provide medication education,.
Assess/Instruct Pt/Pcg: Safety measures to prevent injury, Therapeutic Exercise, Transfer Training
Monitor surgical wound for s/s of infection, educate on s/s of concern and infection prevention to promote wound healing.

; 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:Durable power of attorney for health care/Medical power of attorney

PROBLEMS IDENTIFIED ON ASSESSMENT: M2020 - Oral Med Management, M1033 - Exhaustion, M1400 - Dyspnea, coughing, abnormal blood pressure, heartburn/indigestion, M1610 - Urinary Incontinence, frequent urination, limited strength, Pain Interference with ADLs, balance deficit, loss of appetite, swell/redness surround. skin, #1 - Non-Observable Surgical Wound - Anterior Left Knee - Left knee replacement surgery

PROCEDURES: Medication Review- : Medications reviewed with patient/caregiver., cough/deep breathing exercises, incentive spirometer, physician-ordered wound care: Left knee surgical site: remove Mepilex dressing in 7 days post op care. Leave open to air if no drainage occurs otherwise, cover with a dry gauze.

TEACH PATIENT/CAREGIVER: * 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, * how to promote optimized mobility with strength balance dexterity range-of-motion therapeutic exercises promotion of peripheral circulation fluid and diet intake to promote healing prevent constipation, related medication(s) purpose, schedule, * strategies to minimize fatigue and exhaustion including work simplification energy conservation lifestyle changes diet, related medication(s) purpose, schedule

SN Goals

PATIENT-STATED GOAL: To walk without pain.

GOALS
patient/caregiver recalls
* how to promote optimized mobility with strength
* balance
* dexterity
* range-of-motion therapeutic exercises
* promotion of peripheral circulation
* fluid and diet intake to promote healing
* prevent constipation
* 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
* strategies to minimize fatigue and exhaustion including work simplification
* energy conservation
* lifestyle changes
* diet
* recalls related medication(s) purpose, schedule

PT Careplans

PT WK1: 2 (07/30/25-08/02/25) ,WK2: 3 (08/03/25-08/09/25) ,WK3: 1 (08/10/25-08/16/25)

PROBLEMS IDENTIFIED ON ASSESSMENT: M1400, Pain Interference with ADLs, Pain Effect on Sleep, GG0170J1 - Walk 50 ft with 2 Turns, GG0130A1 - Eating, GG0170P1 - Picking Up Object, GG0170O1 - 12 Steps, GG0170N1 - 4 Steps, GG0170M1 - 1 - Step (curb), GG0170L1 - Walk 10 ft on Uneven Surface, GG0170K1 - Walk 150 Feet, GG0130B1 - Oral Hygiene, GG0170I1 - Walk 10 Feet, GG0170G1 - Car Transfer, GG0170E1 - Chair to Bed to Chair, GG0170D1 - Sit to Stand, GG0130C1 - Toileting Hygiene, GG0170F1 - Toilet Transfer, GG0130E1 - Shower/Bathe Self, GG0130H1 - Don/Doff Footwear, GG0130G1 - Lower Body Dressing, GG0130F1 - Upper Body Dressing

PT Goals

PATIENT-STATED GOAL: To walk straight with out pain

GOALS
Shower/Bathe Self - 05. Setup or clean-up assistance

Walk 10 ft on Uneven Surface - 05. Setup or clean-up assist

1 - Step (curb) - 05. Setup or clean-up assistance

Chair to Bed to Chair - 06. Independent

Signature of Physician:	Date

Optional Name/Signature of Nurse/Therapist:	Date
Electronically Signed by Messick, Charles SN RN	07/30/2025

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PROCEDURES: Medication review: The medication was reviewed with patient , cough/deep breathing exercises, incentive spirometer, equipment training, work simplification/energy conservation, 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, Oral Hygiene - 06. Independent, Lower Body Dressing - 06. Independent, Shower/Bathe Self - 05. Setup or clean-up assistance, Toileting Hygiene - 06. Independent, Don/Doff Footwear - 06. Independent, Eating - 06. Independent, Sit to Stand - 06. Independent, Chair to Bed to Chair - 06. Independent, Toilet Transfer - 06. Independent, Car Transfer - 06. Independent, Walk 10 Feet - 05. Setup or clean-up assistance, Walk 50 ft with 2 Turns - 05. Setup or clean-up assistance, Walk 150 Feet - 05. Setup or clean-up assistance, Walk 10 ft on Uneven Surface - 05. Setup or clean-up assist, 1 - Step (curb) - 05. Setup or clean-up assistance, 4 Steps - 05. Setup or clean-up assistance, 12 Steps - 05. Setup or clean-up assistance, Picking Up Object - 05. Setup or clean-up assistance, Medication Review

Toilet Transfer - 06. Independent

Car Transfer - 06. Independent

Picking Up Object - 05. Setup or clean-up assistance

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

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

Walk 50 ft with 2 Turns - 05. Setup or clean-up assistance

Walk 150 Feet - 05. Setup or clean-up assistance

Medication Review

Sit to Stand - 06. Independent

Walk 10 Feet - 05. Setup or clean-up assistance

Oral Hygiene - 06. Independent

Lower Body Dressing - 06. Independent

Toileting Hygiene - 06. Independent

Don/Doff Footwear - 06. Independent

Eating - 06. Independent

4 Steps - 05. Setup or clean-up assistance

12 Steps - 05. Setup or clean-up assistance

Signature of Physician:	Date
	PAGE 3 of 3
Optional Name/Signature of Nurse/Therapist:	Date
Electronically Signed by Messick, Charles SN RN	07/30/2025