Home Health Certification and Plan of Care

Order ID: 1150/12245

1. Patient s HI claim No.	2. Start Of Care Date	3. Certification Period	4. Medical Record No.	5. Provider No.
5D53YG6ND16	09/16/2025	From: 09/16/2025 To: 11/14/2025	5425	217058

6. Patient's Name and Address

Charles Walker
9044 WALTHAM WOODS APT D,
PARKVILLE, MD 21234-
443-255-9724

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 04/20/1965 | **9.Sex** Male

11. ICD	Principal Diagnosis	Date
E86.0	Dehydration	09/16/25

13. ICD	Other Pertinent Diagnoses	Date
I95.9	Hypotension unspecified	09/16/25
F10.97	Alcohol use unsp with alcohol-induced persisting dementia	09/16/25
E11.42	Type 2 diabetes mellitus with diabetic polyneuropathy	09/16/25
I11.0	Hypertensive heart disease with heart failure	09/16/25
I50.32	Chronic diastolic (congestive) heart failure	09/16/25
J45.20	Mild intermittent asthma uncomplicated	09/16/25
E11.51	Type 2 diabetes w diabetic peripheral angiopath w/o gangrene	09/16/25
G47.33	Obstructive sleep apnea (adult) (pediatric)	09/16/25
I70.0	Atherosclerosis of aorta	09/16/25
K70.30	Alcoholic cirrhosis of liver without ascites	09/16/25
M10.9	Gout unspecified	09/16/25
M54.16	Radiculopathy lumbar region	09/16/25
F41.9	Anxiety disorder unspecified	09/16/25
F33.9	Major depressive disorder recurrent unspecified	09/16/25
E78.00	Pure hypercholesterolemia unspecified	09/16/25
K21.9	Gastro-esophageal reflux disease without esophagitis	09/16/25
E66.01	Morbid (severe) obesity due to excess calories	09/16/25
N31.9	Neuromuscular dysfunction of bladder unspecified	09/16/25
N40.1	Benign prostatic hyperplasia with lower urinary tract symp	09/16/25
N39.498	Other specified urinary incontinence	09/16/25
Z43.5	Encounter for attention to cystostomy	09/16/25
Z87.440	Personal history of urinary (tract) infections	09/16/25
Z68.41	Body mass index [BMI] 40.0-44.9 adult	09/16/25
Z79.4	Long term (current) use of insulin	09/16/25
Z87.891	Personal history of nicotine dependence	09/16/25

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

Vit D - Alpha-Tocopherol Acetate: Ascorbic Acid: Biotin: Cholecalciferol: Cyanocobalamin: Dexpanthenol: Folic Acid: Niacinamide: Pyridox 5000 iu; 1 tab by mouth twice a day supplement
Lipitor - Atorvastatin Calcium eq 20 mg base 20 mg, Take 20 mg tablet by mouth at bedtime cholesterol
Biscodyl - Bisacodyl: Polyethylene Glycol 3350: Potassium Chloride: Sodium Bicarbonate: Sodium Chloride 5mg by mouth once a day bowel regimen
Tramadol - Tramadol Hydrochloride 50mg, 1 Tablet by mouth every 6 hours as needed for pain
Flomax - Tamsulosin Hydrochloride 0.4 mg 0.4 mg, Take 0.8 mg 2 capsules by mouth once a day BPH
Zyloprim - Allopurinol 100 mg 100 mg, Take 1 tablet by mouth once a day GOUT
Folic Acid - Folic Acid 1 mg 1mg, Take 1 mg tablet by mouth in the morning SUPPLEMENT
Basaglar - Insulin Glargine 16 units subcutaneous once a day Am for diabets
Magnesium Oxide - Simethicone 500MG; 1 TAB by mouth twice a day SUPPLEMENT
Trazadone - Trazodone Hydrochloride 100MG; 1 TAB by mouth once a day Assist with sleep
Furosemide - Furosemide 40 mg 40MG; 1 TAB by mouth once a day FLUID PILL
Jardiance - Empagliflozin 25MG; ONE-HALF TAB by mouth once a day HEART FAILURE/DM
Famotidine - Famotidine 40 mg 40MG; 1 TAB by mouth once a day STOMACH
Alpha-lipoic acid (ALA) 600MG; 1 TAB by mouth twice a day SUPPLEMENT
Vesicare - Solifenacin Succinate 10 mg 10MG; 1 TAB by mouth once a day BLADDER SPASMS

14. DME and Supplies:

diabetic supplies, bath bench, walker, cane, wheelchair

15. Safety Measures:

infectious material management, standard precautions, fall precautions, diabetic precautions, ambulates with device, walker precautions, medication safety, sharps precautions, activity supervision

16. Nutrition:

cardiac diet, diabetic, consistent carbs

17. Allergies:

ciprodloxacin oxycodone

18.A. Functional Limitations

Ambulation, Endurance

18.B. Activities Permitted

Cane, Exercises Prescribed, Walker, Up As Tolerated

19. Mental & Pyschosocial Status: COGNITION: 0. Alert/ oriented, able to focus and shift attention, comprehends and recalls task directions independently., ANXIETY: 1. In new or complex situations only, SOCIAL ISOLATION: 0. Never, BEHAVIORAL ISSUES: 2. Impaired decision-making: failure to perform usual ADLs or IADLs, inability to appropriately stop activities, jeopardizes safety through actions!6. Delusional, hallucinatory, or paranoid behavior, HISTORY OF DEPRESSION: Yes

20. Prognosis: fair

22. A Rehabilitation Potential:

SELF-CARE: 2. Needed Some Help - Patient needed partial assistance from another person to complete any activities., MOBILITY: 2. Needed Some Help - Patient needed partial assistance from another person to complete any activities.

22.B.Discharge Plans

patient will be responsible for managing treatment

Homebound status: Due to diagnosis of Dehydration, 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: <p class="MsoNoSpacing">The patient was recently admitted to the hospital due to acute confusion and hallucinations lasting two days. A urinalysis was positive for nitrites and leukocyte esterase, and the patient was treated with IV saline and ceftriaxone. The patient also has failure to thrive (FTT) and depression. Past medical history is significant for type 2 diabetes mellitus, diabetic neuropathy, obstructive sleep apnea (OSA) on CPAP, benign prostatic hyperplasia (BPH) with a suprapubic catheter, alcohol-related liver cirrhosis, and heart failure with preserved ejection fraction (HFpEF). Skilled nursing is scheduled at a frequency of 2w21w6, and PT/OT evaluations have been completed. The patient refused home health aide (HHA) services. Family provides full assistance with all activities of daily living (ADLs) and instrumental activities of daily living (IADLs). The suprapubic catheter is managed by a urologist and was last changed during the recent hospitalization. Currently, the patient is alert and oriented to person, place, and time. Fingerstick glucose is 148 mg/dL. The patient denies pain and shortness of breath at rest but reports dyspnea with ambulation. Lung sounds are diminished in the bilateral lower lobes. Appetite is reduced, and a low bowel movement (LBM) was noted today. The suprapubic catheter (18Fr, 10cc balloon) is draining clear, yellow urine. Trace bilateral lower extremity edema was observed. The patient uses a walker for safe ambulation. Skilled nursing reviewed all medications with the physician during visits and provided education on when to alert the physician for changes in mental status. Recent medication changes were made in response to the prior confusion and hallucinations, and the patient verbalized understanding.

23. Signature and Date of Verbal SOC Where Applicable:

Electronically Signed by Messick, Charles SN RN on 09/16/2025

25. Date HHA Received Signed POT

24. Physician's Name and Address

Laura Emmanuel-Allen
7141 Security Blvd
Woodlawn, MD 21044
PHONE: FAX: NPI: 1114312352

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 : 09/14/2025

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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Despite improved mental clarity, the patient remains frail, fatigues easily, and requires assistance with transfers and ambulation.<o:p></o:p> <o:p> </o:p> Date of Order<o:p></o:p> 09/16/2025
 Order<o:p></o:p> Physician Face-to-Face Date: 09/14/2025
 Clinical Condition Requiring Home Care per Certifying Physician: sn-disease management pt-eval & treat ot-eval & treat dx: Dehydration
 Homebound Status per Certifying Physician: patient requires another person or medical equipment such as crutches, a walker, or a wheelchair to leave home<o:p></o:p>
 1 - SOC - SN Notes:
 PT Eval Notes:<o:p></o:p> Physician: Emmanuel-Allen, Laura

SN Careplans

SN WK1: 2 (09/16/25-09/20/25) ,WK2: 1 (09/21/25-09/27/25) ,WK3: 1 (09/28/25-10/04/25) ,WK4: 1 (10/05/25-10/11/25) ,WK5: 1 (10/12/25-10/18/25) ,WK6: 1 (10/19/25-10/25/25)

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: 5. Decline in mental, emotional, or behavioral status in the past 3 months, 6. Reported or observed history of difficulty complying with any medical instructions (for example, medications, diet, exercise) in the past 3 months, 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; 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:Do not resuscitate (DNR) orders

PROBLEMS IDENTIFIED ON ASSESSMENT: M1745 - Behavioral Issues, D0160 - Depression, M2020 - Oral Med Management, meal preparation, M1033 - Exhaustion, M1400 - Dyspnea, lung sounds not clear, dependent edema, M1610 - Urinary Catheter, urine retention, limited strength, limited endurance, Pain Effect on Sleep, balance deficit, obesity

PROCEDURES: Medication Review- : Medications reviewed with patient/caregiver. , cough/deep breathing exercises, catheter change, care & irrigation: Physician manages urostomy, coordinate/arrange preparation of missing meals

TEACH PATIENT/CAREGIVER: * lifestyle modifications to manage cardiac condition including symptom management diet changes regular exercise getting enough sleep, 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, * 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, * prevention exacerbation of anxiety condition including coping patterns improved concentration strategies to reduce anxiety identification of anxiety precipitants, conflicts, and threats, related medication(s) purpose, schedule, * how to manage sleep disorder including changes to daytime habits and bedtime routine maintaining a journal to track sleep patterns, 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, * depression-prevention strategies including avoidance of isolation healthy eating sleeping habits identification of activities that bring pleasure preventive care, 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, * prescribed dietary modifications monitoring intake and output monitoring weight loss or weight gain monitor changes in neurological status, related medication(s) purpose, schedule, * ostomy management including how to clean stoma change drainage pouch diet restrictions, related medication(s) purpose, schedule, * urinary catheter management including how to flush catheter change and wash drainage bags prevent infection including proper handwashing positioning of catheter, related medication(s) purpose, schedule, * how to incorporate lifestyle modifications to optimize genito-urinary condition including diet exercise home remedies, related medication(s) purpose, schedule, * dietary modifications for liver disorder, related medication(s) purpose, schedule, * strategies to minimize fatigue and exhaustion including work simplification energy conservation lifestyle changes diet, related medication(s) purpose, schedule, * how to keep journal of food and fluid intake healthy meal plan tips exercise program nutritional knowledge, related medication(s) purpose, schedule, patient self-administers medications as prescribed, related medication(s) purpose, schedule, meal preparation is available to patient for all meals

SN Goals

PATIENT-STATED GOAL: to feel better

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/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 manage sleep disorder including changes to daytime habits and bedtime routine
* maintaining a journal to track sleep patterns
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* dietary modifications for liver disorder
* 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
* prevention exacerbation of anxiety condition including coping patterns
* improved concentration
* strategies to reduce anxiety
* identification of anxiety precipitants, conflicts, and threats
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* depression-prevention strategies including avoidance of isolation
* healthy eating
* sleeping habits
* identification of activities that bring pleasure
* preventive care
* 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
* recalls related medication(s) purpose, schedule remedies

patient/caregiver recalls
* how to incorporate lifestyle modifications to optimize genito-urinary condition including diet
* exercise
* home remedies
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* ostomy management including how to clean stoma
* change drainage pouch
* diet restrictions
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* urinary catheter management including how to flush catheter

Signature of Physician:	Date
	PAGE 2 of 3
Optional Name/Signature of Nurse/Therapist:	Date
Electronically Signed by Messick, Charles SN RN	09/16/2025

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* change and wash drainage bags
* prevent infection including proper handwashing
* positioning of catheter
* 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

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

meal preparation is available to patient for all meals

patient/caregiver recalls
* prescribed dietary modifications
* monitoring intake and output
* monitoring weight loss or weight gain
* monitor changes in neurological status
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* how to keep journal of food and fluid intake
* healthy meal plan tips
* exercise program
* nutritional knowledge
* 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

PT Careplans

PT WK1: 1 (09/16/25-09/20/25) ,WK2: 1 (09/21/25-09/27/25) ,WK3: 1 (09/28/25-10/04/25) ,WK4: 1 (10/05/25-10/11/25) ,WK5: 1 (10/12/25-10/18/25) ,WK6: 1 (10/19/25-10/25/25) ,WK7: 1 (10/26/25-11/01/25) ,WK8: 1 (11/02/25-11/08/25)

PROBLEMS IDENTIFIED ON ASSESSMENT: Pain Effect on Sleep, 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

PROCEDURES: Medication Review: The medication was reviewed with the patient , Home exercises: SLR, LE ABD/ADD, LONG RC , MARCHING AND MINI SQIATS --ALL WITH 5IBS ==all at 10x3 reps , cough/deep breathing exercises, incentive spirometer, 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, 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 assistance, 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

PT Goals

PATIENT-STATED GOAL: To get stronger and wa;lk with xane

GOALS
Chair to Bed to Chair - 06. Independent

Toilet Transfer - 06. Independent

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

1 - Step (curb) - 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

Sit to Stand - 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

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

Signature of Physician:

Date

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

Date
09/16/2025