

Medical Update for Frima Shapsay DOB: 08/20/1925

Date Order Created: 09/26/2025

Order ID: 1150/12438

Agency Assigned Id: 8466

Certification Period: 07/24/2025 to 09/21/2025

*HomeCentris Healthcare LLC 217058
10 Crossroads Drive, Suite 102
Owings Mills, MD 21117-8284
PHONE 410-321-8448 FAX*

Orders:

09/19/2025 Problems : lethargy (NR)

*09/25/2025 procedure: Wound care left wrist laceration , Notes: Left wrist laceration
Teach caregiver to wash with normal saline, and pat dry with dry gauze.
Apply sterile dressing.
Change daily
Wound healed****: DISCONTINUED, incentive spirometer, Notes: : DISCONTINUED,*

*Roza Liss
941 Russell Avenue Suite B*

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Tele:240-848-7692 FAX: 240-608-2456*

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

Staff Signature: Electronically Signed by Messick, Charles Date 09/30/2025