

Home Health Certification and Plan of Care				Order ID: 1150/12779		
1. Patient s HI claim No.		2. Start Of Care Date	3. Certification Period		4. Medical Record No.	5. Provider No.
77197165		09/30/2025	From: 09/30/2025 To: 11/28/2025		17244	217058
6. Patient's Name and Address Robert Crandell 7603 Meadow Way, DUNDALK, MD 21222- 410-409-8194			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 10/14/1946 9.Sex Male			10. Medications: Dose/Frequency/Route (N)ew (C)hanged			
11. ICD	Principal Diagnosis		Date	Tylenol - Acetaminophen 500 mg , Take 2 tablets by mouth every 6 hours		
Z47.1	Aftercare following joint replacement surgery		09/30/25	Take 2 tablets by mouth every 6 hours for 72 hours		
13. ICD	Other Pertinent Diagnoses		Date	Lipitor - Atorvastatin Calcium 40 mg , Take 1 tablet by mouth once a day		
Z96.651	Presence of right artificial knee joint		09/30/25	Take 1 tablet by mouth daily		
M17.12	Unilateral primary osteoarthritis left knee		09/30/25	Protonix - Pantoprazole Sodium 20 mg , Take 1 tablet by mouth once a day		
I70.0	Atherosclerosis of aorta		09/30/25	Taken 1x daily 30- 60 mins before eating		
E78.00	Pure hypercholesterolemia unspecified		09/30/25	Vitamin B1 - Alpha-Tocopherol Acetate: Ascorbic Acid: Biotin:		
K21.9	Gastro-esophageal reflux disease without esophagitis		09/30/25	Cholecalciferol: Cyanocobalamin: Dexpantenol: Folic Acid: Niacinamide:		
E51.9	Thiamine deficiency unspecified		09/30/25	Pyridox 100mg by mouth once a day Supplement		
F17.210	Nicotine dependence cigarettes uncomplicated		09/30/25	Vitamin D3 - Alpha-Tocopherol Acetate: Ascorbic Acid: Biotin:		
E66.9	Obesity unspecified		09/30/25	Cholecalciferol: Cyanocobalamin: Dexpantenol: Folic Acid: Niacinamide:		
Z68.30	Body mass index [BMI] 30.0-30.9 adult		09/30/25	Pyridox 25mcg by mouth once a day Supplement		
Z87.442	Personal history of urinary calculi		09/30/25	Tylenol - Acetaminophen 500 mg , Take one tablet by mouth every 6 hours		
Z96.1	Presence of intraocular lens		09/30/25	Take one tablet every 6 hours as needed for dental pain.		
14. DME and Supplies: sock aid, 4 wheeled walker			15. Safety Measures: ambulates with device, remove environmental barriers, , knee precautions, bathroom safety, , activity supervision, no stair use, restricted ROM, walker precautions, ambulates with assistance			
16. Nutrition: Z. NO PHYSICIAN-ORDERED DIET			17. Allergies: no known allergies			
18.A. Functional Limitations Endurance, Ambulation			18.B. Activities Permitted Transfer bed/Chair, Exercises Prescribed, Walker, Partial Weight Bearing, Up As Tolerated			
19. Mental & Pyschosocial Status: COGNITION: 1. Requires prompting (cuing, repetition, reminders) only under stressful or unfamiliar conditions., ANXIETY: 1. In new or complex situations only, SOCIAL ISOLATION: 1. Rarely, BEHAVIORAL ISSUES: 7. None of the above behaviors demonstrated, HISTORY OF DEPRESSION: No						
20. Prognosis: good						
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 family/caregiver will be responsible for managing treatment another facility/provider will be responsible for managing treatment			
Homebound status: After undergoing Right Total Knee Replacement, 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: <div>The patient is a 79-year-old male who resides in a single-family home with his partner and primary caregiver, Carol Farmer. He is currently status post right total knee replacement performed yesterday. On <mh class="chrome-extension-FindManyStrings chrome-extension-FindManyStrings-style-8 CE-FMS-assessment">assessment</mh> this morning, the patient was alert and oriented 3 and reported right knee pain rated at 7/10. His caregiver, Carol, stated that he had received acetaminophen earlier but had not yet been given oxycodone, as she prefers to administer it approximately one hour prior to physical therapy sessions to optimize pain control. The patient is ambulating with the use of a rolling walker inside the home and to the bathroom as needed. Due to his recent surgery, he remains at high risk for falls. <mh class="chrome-extension-FindManyStrings chrome-extension-FindManyStrings-style-2 CE-FMS-fall%20precautions">Fall precautions</mh> and safety measures were reinforced during the visit. Carol continues to manage all aspects of his medication administration, including preparation and organization of daily doses. She demonstrates strong knowledge of his prescribed medications, including their indications and dosing schedules, while the patient himself relies entirely on her for medication management. Examination of the surgical site revealed the dressing to be intact with no evidence of excessive drainage. Carol verbalized understanding of the surgeon's discharge instructions to keep the dressing in place for seven days postoperatively, after which it may be removed, cleansed with soap and water, and left open to air, unless significant drainage occurs earlier. The couple is aware of the scheduled follow-up appointment with Dr. Hwang on October 15th for postoperative wound evaluation. During the physical therapy session, the patient was positioned supine and assisted in performing heel slides, lower extremity abduction and adduction exercises, and assisted straight leg raises. In the seated						
23. Signature and Date of Verbal SOC Where Applicable: Electronically Signed by Messick, Charles SN RN on 09/30/2025					25. Date HHA Received Signed POT	
24. Physician's Name and Address James Huang 8028 Ritchie Hwy Pasadena, MD 21122 PHONE: 410-737-5600 FAX: 14107375391 NPI: 1154567709			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 : 08/20/2025			
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. PAGE 1 of 3			

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position, joint mobilization and long arc quadriceps exercises were completed, followed by standing marching and heel raises, each performed for two sets of ten repetitions. The patient was instructed in the safe use of the rolling walker and proper application of ice to manage postoperative pain and edema. The care plan was reviewed with both the patient and caregiver, including continued emphasis on pain control, fall prevention, mobility exercises, and wound care management. Home health services will provide two skilled nursing <mh class="chrome-extension-FindManyStrings chrome-extension-FindManyStrings-style-1 CE-FMS-visits">visits</mh> for wound monitoring and care. Both the patient and caregiver verbalized understanding of the plan of care and were instructed to contact the home health agency or physician if any complications arise.</div><div>
</div><div></div><div>Date of Order</div><div>09/30/2025</div><div>Orders</div><div>Physician Face-to-Face Date: 08/20/2025</div><div>Clinical Condition Requiring Home Care per Certifying Physician: SN-pain control PT-eval & treat due to Right Total Knee Replacement</div><div>Homebound Status per Certifying Physician: patient requires another person or medical equipment such as crutches, a walker, or a wheelchair to leave home</div><div>
</div><div></div><div>1 - SOC - SN Notes: soc</div><div>PT Eval Notes: eval</div><div>
</div><div>Physician</div><div>Huang , James</div>

SN Careplans

SN WK1: 1 (09/30/25-10/04/25) ,WK2: 1 (10/05/25-10/11/25)

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

HOSPITALIZATION RISKS: 7. Currently taking 5 or more medications

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/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:Living Will

PROBLEMS IDENTIFIED ON ASSESSMENT: M2020 - Oral Med Management, meal preparation, M2102c - Med Admin, M2102f - Patient Supervision, M2102d - Caregiver Performs Treatment, M1400 - Dyspnea, limited endurance, muscle weakness, limited range of motion, limited strength, Pain Interference with Therapy activities, Pain Interference with ADLs, B1000 - Vision Deficit, #1 - Non-Observable Surgical Wound - Anterior Right Knee -

PROCEDURES: Medication Review- : Medications reviewed with patient/caregiver. , Discharge Summary- Complete Discharge Summary SN communication note. , cough/deep breathing exercises, incentive spirometer, train caregiver(s) to perform medical/rehabilitation treatments, physician-ordered wound care: To right knee surgical site- 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.

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, * how to achieve wound healing including cleaning and dressing wound position changes skin care diet modification record wound measurements, related medication(s) purpose, schedule, * how to manage inflammatory process

SN Goals

PATIENT-STATED GOAL: "I want to start traveling again."

GOALS

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

- * 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

- * 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

patient/caregiver recalls

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

patient self-administers medications as prescribed

- * recalls related medication(s) purpose, schedule

patient is adequately supervised

meal preparation is available to patient for all meals

caregiver administers and/or packages medications appropriately

caregiver performs medical/rehabilitation treatments with adequate competence

Signature of Physician:	Date
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Optional Name/Signature of Nurse/Therapist:	Date
Electronically Signed by Messick, Charles SN RN	09/30/2025

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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 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, meal preparation is available to patient for all meals, caregiver administers and/or packages medications appropriately, caregiver performs medical/rehabilitation treatments with adequate competence					
PT Careplans			PT Goals		
PT WK1: 2 (09/30/25-10/04/25) ,WK2: 3 (10/05/25-10/11/25) ,WK3: 1 (10/12/25-10/18/25)			PATIENT-STATED GOAL: The patient wants to be pain free and ambulate again;The patient wants to be pain free and ambulate with out device again		
PROBLEMS IDENTIFIED ON ASSESSMENT: M1400 Dyspnea, 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			GOALS		
PROCEDURES: Medication review: The medication was reviewed with the patient , TKR exercises : Ankle pumps, heel slides, slr, long arc , marching , heel raises --10x2 reps , cough/deep breathing exercises, equipment training, gait training on uneven surfaces, gait training/stair training, transfers training			Chair to Bed to Chair - 06. Independent		
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 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			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		
			Shower/Bathe Self - 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		
			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		
			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		

Signature of Physician:	Date
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Optional Name/Signature of Nurse/Therapist:	Date
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