Home Health Certification and Plan of Care

Order ID: 1150/12914

1. Patient s HI claim No.	2. Start Of Care Date	3. Certification Period	4. Medical Record No.	5. Provider No.
6EQ8CH8WE64	06/22/2025	From: 08/21/2025 To: 10/19/2025	13935	217058

6. Patient's Name and Address

Terry Ray
1818 RIDGE RD,
WHITEFORD, MD 21160-
443-752-0973

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 06/30/1960 | **9.Sex** Female

11. ICD	Principal Diagnosis	Date
Z48.01	Encounter for change or removal of surgical wound dressing	06/22/25

13. ICD	Other Pertinent Diagnoses	Date
Z47.81	Encounter for orthopedic aftercare following surgical amp	06/22/25
I70.263	Athscl native arteries of extrm w gangrene bilateral legs	06/22/25
I70.245	Athscl native arteries of left leg w ulceration oth prt foot	06/22/25
L97.426	Non-prs chr ulc of l heel/midft w bne invl w/o evd of necr	06/22/25
M86.9	Osteomyelitis unspecified	06/22/25
B96.5	Pseudomonas (mallei) causing diseases classd elswhr	06/22/25
I73.9	Peripheral vascular disease unspecified	06/22/25
I10.	Essential (primary) hypertension	06/22/25
E78.2	Mixed hyperlipidemia	06/22/25
E53.8	Deficiency of other specified B group vitamins	06/22/25
M06.9	Rheumatoid arthritis unspecified	06/22/25
I34.1	Nonrheumatic mitral (valve) prolapse	06/22/25
E03.9	Hypothyroidism unspecified	06/22/25
G62.9	Polyneuropathy unspecified	06/22/25
D51.0	Vitamin B12 defic anemia due to intrinsic factor deficiency	06/22/25
Z45.2	Encounter for adjustment and management of VAD	06/22/25
Z79.2	Long term (current) use of antibiotics	06/22/25
Z79.01	Long term (current) use of anticoagulants	06/22/25
Z79.891	Long term (current) use of opiate analgesic	06/22/25
Z86.711	Personal history of pulmonary embolism	06/22/25
Z86.718	Personal history of other venous thrombosis and embolism	06/22/25
Z87.891	Personal history of nicotine dependence	06/22/25
Z89.421	Acquired absence of other right toe(s)	06/22/25
Z89.422	Acquired absence of other left toe(s)	06/22/25

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

Lipitor - Atorvastatin Calcium 80 mg, Take 1 tablet by mouth at bedtime
Take 1 tablet by mouth nightly.
Aspirin 81Mg - Aspirin 81 mg, Take 1 tablet by mouth once a day
Xarelto - Rivaroxaban 2.5 mg, Take 1 tablet by mouth twice a day Take 1 tablet by mouth 2 times daily with meals.
Suboxone - Buprenorphine Hydrochloride: Naloxone Hydrochloride 8-2 mg SL Film\, Dissolve 4 films under the tongue sublingual once a day Dissolve 4 films under the tongue daily Med Mart treatment center in Riverside
Neurontin - Gabapentin 800 mg, Take 1 tablet by mouth three times a day Take 1 tablet by mouth 3 times a day
Cozaar - Losartan Potassium 100 mg, Take 0.5 tablets by mouth once a day Take 0.5 tablets by mouth daily (Patient taking differently: Take 50 mg by mouth daily Reduce to 50mg daily due to near syncope)
Santyl - Collagenase 250 unit/gram Top Oint, Apply to affected area(s) topical once a day
Oxycodone Hydrochloride - Oxycodone Hydrochloride 5 mg by mouth every 4 hours 1-2 tablets as needed for incision pain

14. DME and Supplies:
walker, wound care supplies

15. Safety Measures:
, , ambulates with device, , walker precautions, bathroom safety,

16. Nutrition:
low sodium

17. Allergies:
no known allergies

18.A. Functional Limitations
Ambulation

18.B. Activities Permitted
No Restrictions

19. Mental & Pyschosocial Status: COGNITION: 0. Able to get to and from the toilet and transfer independently with or without a device., ANXIETY: 0. Never, SOCIAL ISOLATION: , BEHAVIORAL ISSUES: , HISTORY OF DEPRESSION:

20. Prognosis: fair

22. A Rehabilitation Potential:
SELF-CARE: , MOBILITY:

22.B.Discharge Plans
family/caregiver will be responsible for managing treatment
family/caregiver will be responsible for managing treatment
add discharge plan
patient will be responsible for managing treatment

Homebound status: Due to diagnosis of Encounter For Change Or Removal Of Surgical Wound Dressing, 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.

23. Signature and Date of Verbal SOC Where Applicable:
Electronically Signed by Messick, Charles SN RN on 08/20/2025

25. Date HHA Received Signed POT

24. Physician's Name and Address
Apurva Desai
3400 Box Hill Corp Ctr Dr St 100-200
Abingdon, MD 21009
PHONE: 4436431500 FAX: 14436431505 NPI: 1346396348

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 : 06/13/2025

27. Attending Physician's Signature and Date Signed **10/08/2025**: 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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Terry Ray 1818 RIDGE RD, WHITEFORD, MD 21160- 443-752-0973	HomeCentris Healthcare LLC 10 Crossroads Drive, Suite 102 Owings Mills, MD 21117-8284 410-321-8448 1487113239

Clinical Condition Requiring Homecare:

The patient is a 64-year-old Caucasian female with a complex medical history including peripheral vascular disease in both lower extremities, a new diagnosis of gangrene to the left toe, hypertension, and a history of deep vein thrombosis/pulmonary embolism (DVT/PE) currently managed with anticoagulation. She is also undergoing long-term opioid therapy, now transitioned to Suboxone. She was recently discharged from the hospital following a two-toe amputation and now has surgical wounds on both forefeet and the left heel. Dressings to both feet were changed prior to discharge and remain clean, dry, and intact. A right upper arm single-lumen PICC line is in place and functioning properly. The patient is on IV antibiotics, and both she and her family have been educated on infusion setup and administration. On <mh class="chrome-extension-FindManyStrings chrome-extension-FindManyStrings-style-8 CE-FMS-assessment">assessment</mh>, she is alert and oriented 4, reports pain at 4/10, and is able to reposition with assistance while seated in a recliner. Postoperatively, the patient presents as significantly deconditioned and is currently chair-bound. She resides in a structurally unsafe trailer on a farm with her spouse. Her mobility is severely limited due to generalized weakness and surgical wounds, and she is awaiting the delivery of a wheelchair and bedside commode. She demonstrates poor standing balance, low standing tolerance, and reduced bilateral upper extremity strength, all of which impact her ability to perform self-care and functional mobility tasks. Skilled physical and occupational therapy services have been initiated to improve strength, endurance, and safety with transfers and mobility. She was educated on a supine and seated home exercise program and instructed to perform standing tasks every two hours to prevent skin breakdown. Follow-up services will resume once the patient's wounds heal and she is able to bear weight safely.
 Date of Order 08/20/2025 Orders Physician Face-to-Face Date: 06/13/2025 Clinical Condition Requiring Home Care per Certifying Physician: sn-infusion management pt-eval & treat ot-eval & treat hha:adl's dx: Encounter for change or removal of surgical wound dressing 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: OT Eval Notes: 4 - Recertification Notes: The patient is being recertified due to unhealed left buttock wound with a tunnel and a right plantar big toe wound.
 Physician Desai, Apurva

SN Careplans

SN WK2: 2 (08/24/25-08/30/25) ,WK3: 1 (08/31/25-09/06/25) ,WK4: 2 (09/07/25-09/13/25) ,WK5: 2 (09/14/25-09/20/25) ,WK6: 2 (09/21/25-09/27/25) ,WK7: 1 (09/28/25-10/04/25) ,WK8: 2 (10/05/25-10/11/25) ,WK9: 2 (10/12/25-10/18/25)

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: 10. None of the above

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:No Advance Directive

PROBLEMS IDENTIFIED ON ASSESSMENT: #7 - Open Wound - Other - Right plantar big toe - no drainage

PROCEDURES: Blood Draw: Obtain labs via PICC/Venipuncture- Perform the following labs weekly: CBC W/Differential CHEM 7, NON-FASTING (NA, K, CL, CO2, BUN, GLUC, CR) CRP (C-REACTIVE PROTEIN) ERYTHROCYTE SEDIMENTATION RATE, AUTOMATED LFT's/HEPATIC FUNCTION PANEL (ALB, TBILI, DBILI, ALKP, TPROT, ALT, AST). Specimens to be taken to a Kaiser lab., Discontinue PICC line: Written order: Nurse to pull PICC line on next visit , cough/deep breathing exercises, incentive spirometer, apply anti-embolitic stockings, train caregiver(s) to perform medical/rehabilitation treatments, apply compression bandage, physician-ordered wound care: Change dressings 3 times a week: Hydrogel Adaptic nonadherent gauze to left heel Adaptic/nonadherent gauze to incision sites with sutures to the left 3rd and 4th amputation sites and right second digit amputation site all covered with 4x4's kerlex and an ace bandage bilateral, teach/coordinate/arrange medication packaging and/or administration, coordinate/arrange repair of inadequate floor/roof/windows, coordinate/arrange for adequate patient supervision, infusion therapy: Cefepime (MAXIPIME) 2g/NS 100ml IVPB every 12 hours over 30 minutes for infection times 45 days to right single lumen PICC line and flush with Normal Saline and Heparin 10U/ml using SASH method. Change PICC dressing weekly using sterile technique.

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, * lifestyle modifications to manage peripheral vascular condition including how to apply compression stockings physical exercise plan diet, 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 optimize mental status with cognition therapy home safety optimize mobility with active and passive range of motion therapeutic exercises diet and fluids to optimize peripheral circulation, 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, * diet weight-bearing exercises to promote bone healing and strengthening fluids to prevent constipation home safety pain control, related medication(s) purpose, schedule, * how to help resolve infection including hygiene proper hand washing food-safety techniques travel precautions vaccinations animal-control cough etiquette, related medication(s) purpose, schedule, * 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, related medication(s) purpose, schedule, patient self-administers

SN Goals

PATIENT-STATED GOAL: "I want to walk again!";For wounds to heal

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 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
* 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 peripheral vascular condition including how to apply compression stockings
* physical exercise plan
* diet
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* how to optimize mental status with cognition therapy
* home safety
* optimize mobility with active and passive range of motion therapeutic exercises
* diet and fluids to optimize peripheral circulation
* 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 self-administers medications as prescribed
* recalls related medication(s) purpose, schedule

patient has adequate floor/roof/windows

patient is adequately supervised

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	08/20/2025

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medications as prescribed, related medication(s) purpose, schedule, patient has adequate floor/roof/windows, patient is adequately supervised, caregiver administers and/or packages medications appropriately, caregiver performs medical/rehabilitation treatments with adequate competence

patient/caregiver recalls
* diet
* weight-bearing exercises to promote bone healing and strengthening
* fluids to prevent constipation
* home safety
* pain control
* 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 help resolve infection including hygiene
* proper hand washing
* food-safety techniques
* travel precautions
* vaccinations
* animal-control
* cough etiquette
* recalls related medication(s) purpose, schedule

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