

Medical Update for Leo Moran DOB: 05/16/1949

Date Order Created: 10/10/2025

Order ID: 1150/13002

Agency Assigned Id: 17878

Certification Period: 09/27/2025 to 11/25/2025

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

Orders:

10/10/2025 Medications: Furosemide - Furosemide 40 mg by mouth in the morning Fluid retention

*Abigail Hamilton
1701 Twin Springs Rd*

*1701 Twin Springs Rd, MD 21227
Tele:410-737-5000 FAX: 14107375401*

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

Staff Signature: Electronically Signed by Messick, Charles Date 10/10/2025