

Medical Update for Sharon Rocel DOB: 04/09/1980

Date Order Created: 10/27/2025

Order ID: 1184/265

Agency Assigned Id: 1397

Certification Period: 10/10/2025 to 12/08/2025

Devotion Home Health Care, LLC 037804
11201 N Tatum Blvd, Suite 300
Phoenix, AZ 85028-6039
PHONE 480-415-4423 FAX

Orders:

Authorization changes of OT skill Total Visits: 5 and Visit Freq: 1w5

10/27/2025 patient_goal: , Target Date: 12/08/2025,

10/27/2025 procedure: wheelchair training, Notes: , equipment training, Notes: , work simplification/energy conservation, Notes: , transfers training, Notes: ,

10/24/2025 teach: lifestyle modifications to manage cardio-respiratory condition including diet changes and regular exercise; strategies to control shortness of breath and home remedies to keep lungs healthy, Target Date: 12/08/2025, therapeutic exercises, Target Date: 12/08/2025, therapeutic modalities, Target Date: 12/08/2025, wheelchair training, Target Date: 12/08/2025, balance training, Target Date: 12/08/2025, equipment training, Target Date: 12/08/2025, work simplification/energy conservation, Target Date: 12/08/2025, transfer training, Target Date: 12/08/2025,

10/24/2025 goal: 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, Target Date: 12/08/2025, 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, Target Date: 12/08/2025, Oral Hygiene - 05. Setup or clean-up assistance, Target Date: 12/08/2025, Upper Body Dressing - 05. Setup or clean-up assistance, Target Date: 12/08/2025, Lower Body Dressing - 03. Partial/moderate assistance, Target Date: 12/08/2025, Shower/Bathe Self - 04. Supervision or touching assistance, Target Date: 12/08/2025, Toileting Hygiene - 03. Partial/moderate assistance, Target Date: 12/08/2025, Don/Doff Footwear - 03. Partial/moderate assistance, Target Date: 12/08/2025, Eating - 06. Independent, Target Date: 12/08/2025, Sit to Stand - 03. Partial/moderate assistance, Target Date: 12/08/2025, Chair to Bed to Chair - 03. Partial/moderate assistance, Target Date: 12/08/2025, Toilet Transfer - 04. Supervision or touching assistance, Target Date: 12/08/2025, Car Transfer - 03. Partial/moderate assistance, Target Date: 12/08/2025, Wheel 50 ft w 2 Turns - 06. Independent, Target Date: 12/08/2025, Wheel 150 feet - 06. Independent, Target Date: 12/08/2025,

10/27/2025 discharge_plan: patient will be responsible for managing treatment, Target Date: 12/08/2025,

DEBORAH TSINGINE
1441 N 12TH ST

1441 N 12TH ST, AZ 850062837
Tele:602-263-1200 FAX: 16022631665

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

Staff Signature: Electronically Signed by DELGADO, MELISSA Date 10/27/2025