Home Health Certification and Plan of Care

Order ID: 1150/13259

1. Patient s HI claim No.	2. Start Of Care Date	3. Certification Period	4. Medical Record No.	5. Provider No.
76194498	10/15/2025	From: 10/15/2025 To: 12/13/2025	18225	217058

6. Patient's Name and Address

Beatrice Grinage
705 Compass Rd Apt 215,
MIDDLE RIVER, MD 21220-
757-709-2812

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 05/29/1951 | **9.Sex** Female

11. ICD	Principal Diagnosis	Date
Z47.1	Aftercare following joint replacement surgery	10/15/25

13. ICD	Other Pertinent Diagnoses	Date
I10.	Essential (primary) hypertension	10/15/25
M47.816	Spondylosis w/o myelopathy or radiculopathy lumbar region	10/15/25
E05.00	Thyrotoxicosis w diffuse goiter w/o thyrotoxic crisis	10/15/25
E04.2	Nontoxic multinodular goiter	10/15/25
M85.80	Oth disrd of bone density and structure unspecified site	10/15/25
J45.909	Unspecified asthma uncomplicated	10/15/25
K22.70	Barrett's esophagus without dysplasia	10/15/25
M79.7	Fibromyalgia	10/15/25
R91.1	Solitary pulmonary nodule	10/15/25
M21.612	Bunion of left foot	10/15/25
N28.1	Cyst of kidney acquired	10/15/25
J30.9	Allergic rhinitis unspecified	10/15/25
K21.9	Gastro-esophageal reflux disease without esophagitis	10/15/25
E55.9	Vitamin D deficiency unspecified	10/15/25
E66.01	Morbid (severe) obesity due to excess calories	10/15/25
Z68.36	Body mass index [BMI] 36.0-36.9 adult	10/15/25
Z79.51	Long term (current) use of inhaled steroids	10/15/25
Z90.710	Acquired absence of both cervix and uterus	10/15/25
Z96.653	Presence of artificial knee joint bilateral	10/15/25

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

Amoxicillin - Amoxicillin 500 mg, Take 4 capsules by mouth once a day Take 4 capsules by mouth one time One hour prior to dental procedure (Patient not taeking: Reported on 9/29/2025)
hydroCHLOROthiazide (ESIDRIX/HYDRODIURIL) 25 mg, Take 1 tablet by mouth in the morning Fluid pill
Pepcid - Famotidine 40 mg, Take 1 tablet by mouth once a day GERD
Ultram - Tramadol Hydrochloride 100 mg 100 mg, Take 1 tablet by mouth every 4 hours As needed for pain
Tapazole - Methimazole 5 mg, Take one half tablet by mouth as necessary Take onehalf tablet by mouth 3 days a week (Mondays, Wednesdays and Fridays only) for thyroid
Ditropan Xl - Oxybutynin Chloride 5 mg, Take 1 tablet by mouth once a day overactive bladder
Pataday - Olopatadine Hydrochloride 0.1 %, Instill 1 Drop in both eyes both eyes twice a day eye drop
Albuterol - Albuterol 90 mcg, Inhale 2 puffs inhalant every 4 hours SOB
Fluticasone - Fluticasone Furoate 50 mcg, Use 2 sprays Nasal once a day Use 2 sprays in each nostril once daily
Alvesco - Ciclesonide 160 mcg, Inhale 1 Puff inhalant twice a day Inhale 1 Puff by mouth 2 times a day
Vitamin D3 - Alpha-Tocopherol Acetate: Ascorbic Acid: Biotin: Cholecalciferol: Cyanocobalamin: Dexpanthenol: Folic Acid: Niacinamide: Pyridox 5,000 unit, by mouth once a day 1 by mouth daily OTC for vitamin D deficiency
Senakot - Senna 8.6mg, take 1 tablet by mouth twice a day stool softner
Colace - Docusate Sodium 100mg, take 1 capsule by mouth twice a day stool softner
Pradaxa - Dabigatran Etexilate Mesylate 110mg, take 1 capsule by mouth every 12 hours For 30 days to prevent blood clot

14. DME and Supplies:

bath bench, walker, cane

15. Safety Measures:

infectious material management, walker precautions, non-slip surface in tub, medication safety, fall precautions, bleeding precautions, ambulates with device, standard precautions, knee precautions, bathroom safety, anticoagulant precautions

16. Nutrition:

Z. NO PHYSICIAN-ORDERED DIET

17. Allergies:

trimcinolone acetonide oxycodone asa celebrex eggs latex sulfa antibiotics shel

18.A. Functional Limitations

Ambulation

18.B. Activities Permitted

Up As Tolerated

19. Mental & Pyschosocial Status: COGNITION: 0. Alert/ oriented, able to focus and shift attention, comprehends and recalls task directions independently., ANXIETY: 0. Never, SOCIAL ISOLATION: 0. Never, BEHAVIORAL ISSUES: 7. None of the above behaviors demonstrated, HISTORY OF DEPRESSION: No

20. Prognosis: fair

22. A Rehabilitation Potential:

SELF-CARE: 3. Independent - Patient completed all the activities by

22.B.Discharge Plans

patient will be responsible for managing treatment

23. Signature and Date of Verbal SOC Where Applicable:

Electronically Signed by Messick, Charles RN on 10/15/2025

25. Date HHA Received Signed POT

24. Physician's Name and Address

Patrick Narcisse
2391 Greenspring Dr
Timonium , MD 21093
PHONE: 410-847-3000 FAX: NPI: 1508397092

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 : 10/06/2025

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.

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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.

Homebound status: After undergoing Right Total Knee Replacement surgery, 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: The patient is a 74-year-old female with a past medical history of Graves' disease, a pulmonary nodule, and a substernal thyroid goiter. She is status post right total knee replacement, with the surgical site covered by a Mepilex dressing. Vital signs were within normal limits. Patient education was provided on infection prevention, medication compliance and side effects, constipation prevention, and the use of ice and elevation for swelling control. Lung sounds were clear to auscultation, and bowel sounds were active. The patient denied shortness of breath, nausea, vomiting, or headache but reported occasional lightheadedness and fatigue. She ambulates with a walker, and her family remains actively involved in her care. The patient is status post right total knee replacement and presents with severe postoperative pain and swelling. She participated in therapeutic exercises including heel slides, ankle rolls, and leg abduction/adduction in the supine position; heel slides, joint mobilization, and long arc quadriceps exercises while seated; and marching and heel raises in standing (10 repetitions 2 sets). The patient was instructed in the safe use of a rolling walker with emphasis on proper heel-to-toe gait mechanics. Education was reinforced on the use of ice to manage pain and edema effectively.<o:p></o:p> <o:p> </o:p> Date of Order<o:p></o:p> 10/15/2025
 Order<o:p></o:p> Physician Face-to-Face Date: 10/06/2025
 Clinical Condition Requiring Home Care per Certifying Physician: SN-pain control PT-eval & treat due to Right Total Knee Replacement surgery
 Homebound Status per Certifying Physician: patient requires another person or medical equipment such as crutches, a walker, or a wheelchair to leave home<o:p></o:p>
 1 - SOC - SN Notes:
 PT Eval Notes:<o:p></o:p> Physician: Narcisse, Patrick

SN Careplans

SN WK1: 1 (10/15/25-10/18/25) ,WK2: 1 (10/19/25-10/25/25)

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: 7. Currently taking 5 or more medications, 8. Currently reports exhaustion

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:Durable power of attorney for health care/Medical power of attorney

PROBLEMS IDENTIFIED ON ASSESSMENT: M2020 - Oral Med Management, M1033 - Exhaustion, M1400 - Dyspnea, limited strength, Pain Interference with ADLs, balance deficit, swell/redness surround. skin, #1 - Non-Observable Surgical Wound - Anterior Right Knee -

PROCEDURES: Medication Review- : Medications reviewed with patient/caregiver. , cough/deep breathing exercises, incentive spirometer, physician-ordered wound care: Right knee surgical site: Remove Mepilex dressing after 7 days post op and LOTA, otherwise, cover with a gauze dressing if drainage occurs.

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

SN Goals

PATIENT-STATED GOAL: To walk without pain and an assistive device

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
* 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
* strategies to minimize fatigue and exhaustion including work simplification
* energy conservation
* lifestyle changes
* diet
* recalls related medication(s) purpose, schedule

patient self-administers medications as prescribed
* recalls related medication(s) purpose, schedule

Signature of Physician:	Date
	PAGE 2 of 3
Optional Name/Signature of Nurse/Therapist:	Date
Electronically Signed by Messick, Charles RN	10/15/2025

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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, * strategies to minimize fatigue and exhaustion including work simplification energy conservation lifestyle changes diet, related medication(s) purpose, schedule, patient self-administers medications as prescribed, related medication(s) purpose, schedule

PT Careplans

PT WK1: 2 (10/15/25-10/18/25) ,WK2: 3 (10/19/25-10/25/25) ,WK3: 1 (10/26/25-11/01/25)

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

PROCEDURES: Medication review: The medication was reviewed with the patient, TKR EXERCISES: Ankle pumps, heel slides, le abd/add, slr, long arc and heel raises 10x2 reps , cough/deep breathing exercises, equipment training, gait training on uneven surfaces, gait training/stair training, transfers training

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

PT Goals

PATIENT-STATED GOAL: The patient wants to walk pain free

GOALS
Chair to Bed to Chair - 06. Independent

Toilet Transfer - 06. Independent

Walk 10 ft on Uneven Surface - 05. Setup or clean-up assistance

Shower/Bathe Self - 05. Setup or clean-up assistance

1 - Step (curb) - 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

Sit to Stand - 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

Oral Hygiene - 06. Independent

Toileting Hygiene - 06. Independent

Eating - 06. Independent

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

Lower Body Dressing - 06. Independent

Don/Doff Footwear - 06. Independent

Car Transfer - 06. Independent

Signature of Physician:	Date
	PAGE 3 of 3
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