

Medical Update for Ida Khazina DOB: 01/12/1939

Date Order Created: 10/28/2025

Order ID: 1150/13317

Agency Assigned Id: 17568

Certification Period: 09/18/2025 to 11/15/2025

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

Orders:

10/28/2025 procedure: catheter change, care & irrigation, Notes: Skilled nurse to change 16fr 10 cc foley catheter change every 6 weeks and as needed. , catheter change, care & irrigation, Notes: 16fr 10 cc foley cath change every 6 weeks.: DISCONTINUED,

*Slava Kreynovich NP
2005 Jolly Road*

*2005 Jolly Road, MD 21209
Tele:4109419040 FAX: 14109410027*

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

Staff Signature: Electronically Signed by Messick, Charles Date 10/28/2025