

Medical Update for Nabil Armaniouss DOB: 07/20/1949

Date Order Created: 10/29/2025

Order ID: 1163/415

Agency Assigned Id: 404

Certification Period: 09/16/2025 to 11/13/2025

*Grace Home Healthcare, LLC 497754
9735 Main Street Suite 200 Fairfax,
Fairfax, VA 22031-3736
PHONE 703-865-7370 FAX*

Orders:

*10/27/2025 Medications: Glipizide - Glipizide 5 mg by mouth twice a day
Furosemide - Furosemide 40 mg 40mg by mouth once a day for edema
Vitamin D (Ergocalciferol) Oral Capsule 1.25 MG (50000 UT) (Ergocalciferol) 1.25 MG , Give 1 capsule
by mouth once a day Give 1 capsule by mouth
one time a day every Tue for Vitamin D defficiency
Tamsulosin Hydrochloride - Tamsulosin Hydrochloride 0.4 MG , Give 1 capsule by mouth once a day
Give 1 capsule by mouth one time a day for BPH*

*Christie Youssef
12255 Fair Lakes Pkwy*

*12255 Fair Lakes Pkwy, VA 22033
Tele:7039345700 FAX:*

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

Staff Signature: Electronically Signed by Messick, Charles Date 10/29/2025