Home Health Certification and Plan of Care

Order ID: 1150/14303

1. Patient s HI claim No.	2. Start Of Care Date	3. Certification Period	4. Medical Record No.	5. Provider No.
69134734	09/25/2025	From: 11/23/2025 To: 01/21/2026	17750	217058

6. Patient's Name and Address

Janet Schlegl
403 Denton Way,
ABINGDON, MD 21009-
410-776-7526

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 03/30/1942 **9.Sex** Female

11. ICD	Principal Diagnosis	Date
T81.31XA	Disruption of external operation (surgical) wound NEC init	09/25/25

13. ICD	Other Pertinent Diagnoses	Date
I25.10	Athscl heart disease of native coronary artery w/o ang pctrs	09/25/25
I21.4	Non-ST elevation (NSTEMI) myocardial infarction	09/25/25
I82.C11	Acute embolism and thrombosis of right internal jugular vein	09/25/25
E11.65	Type 2 diabetes mellitus with hyperglycemia	09/25/25
I12.9	Hypertensive chronic kidney disease w stg 1-4/unsp chr kdny	09/25/25
E11.22	Type 2 diabetes mellitus w diabetic chronic kidney disease	09/25/25
N18.32	Chronic kidney disease stage 3b	09/25/25
D63.1	Anemia in chronic kidney disease	09/25/25
E11.51	Type 2 diabetes w diabetic peripheral angiopath w/o gangrene	09/25/25
E78.5	Hyperlipidemia unspecified	09/25/25
I87.2	Venous insufficiency (chronic) (peripheral)	09/25/25
M10.9	Gout unspecified	09/25/25
H40.9	Unspecified glaucoma	09/25/25
K21.9	Gastro-esophageal reflux disease without esophagitis	09/25/25
F41.9	Anxiety disorder unspecified	09/25/25
Z79.82	Long term (current) use of aspirin	09/25/25
Z79.02	Long term (current) use of antithrombotics/antiplatelets	09/25/25
Z79.84	Long term (current) use of oral hypoglycemic drugs	09/25/25
Z79.01	Long term (current) use of anticoagulants	09/25/25
Z95.1	Presence of aortocoronary bypass graft	09/25/25
Z85.3	Personal history of malignant neoplasm of breast	09/25/25
Z90.13	Acquired absence of bilateral breasts and nipples	09/25/25
Z86.73	Prsnl hx of TIA (TIA) and cereb infrc w/o resid deficits	09/25/25

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

Colchicine - Colchicine take 0.6 mg tablet by mouth once a day 0.6 mg, Oral, 1 time daily PRN
Glucotrol - Glipizide take 5 mg tablet by mouth twice a day 5 mg, 2 times daily before meals
Lumigan - Bimatoprost 0.01 % , eye drops drops at bedtime 1 drop, nightly
polyvinyl alcohol-povidone PF (REFRESH) 1.4-0.6 % , eye drops drops twice a day 1 drop, 2 times daily PRN
Allopurinol - Allopurinol 300 by mouth once a day
Epinephrine - Epinephrine 0.3mg intramuscular as necessary
Clopidogrel - Clopidogrel 75 by mouth once a day
Tylenol - Acetaminophen 325mg , take 2 tablet by mouth every 6 hours Pain
Pravachol - Pravastatin Sodium take 20 mg tablet by mouth once a day 20 mg, 1 time daily
Hydralazine - Hydralazine Hydrochloride 25 MG, Take 1 tablet by mouth three times a day HTN
Trazodone - Trazodone Hydrochloride 50 mg, Take 0.5mg tablet by mouth at bedtime 50 mg, Oral, nightly
Eliquis - Apixaban 2.5MG, TAKE 1 TABLET by mouth twice a day Blood thinner

14. DME and Supplies:

diabetic supplies, bath bench, walker, wound care supplies

15. Safety Measures:

diabetic precautions, ambulates with device, , hip precautions, walker precautions, cardiac precautions, bathroom safety

16. Nutrition:

cardiac diet, diabetic

17. Allergies:

atorvastatin codeine entex t indomethacin oxycodone pneumococcal vaccine sh

18.A. Functional Limitations

Ambulation

18.B. Activities Permitted

No Restrictions

19. Mental & Pyschosocial Status: COGNITION: 0. Able to get to and from the toilet and transfer independently with or without a device., ANXIETY: 0. Never, SOCIAL ISOLATION: , BEHAVIORAL ISSUES: , HISTORY OF DEPRESSION:

20. Prognosis: fair

22. A Rehabilitation Potential:

SELF-CARE: , MOBILITY:

22.B.Discharge Plans

patient will be responsible for managing treatment
family/caregiver will be responsible for managing treatment

Homebound status: Due to diagnosis of Disruption Of A Surgical Wound, Not Elsewhere Classified, For A Subsequent Encounter, 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 an 83-year-old female with a recent history of acute respiratory distress following her annual CT scan, during which she was immediately transferred to the hospital and underwent triple coronary artery bypass surgery. On <mh class="chrome-extension-FindManyStrings chrome-extension-FindManyStrings-style-8 CE-FMS-assessment">assessment</mh>, she is alert and oriented 4, and currently denies chest pain, palpitations, or dizziness. Lung sounds are clear but diminished at the bases. She reports her last bowel movement occurred this morning, with normoactive bowel sounds noted, and she is voiding without difficulty. Physical examination revealed bilateral lower extremity edema (+2) with palpable pedal pulses. The patient and her caregiver were provided education regarding her prescribed medications, including their actions and potential side effects, as well as signs and symptoms of infection to monitor. Instruction was also given on the proper use of compression stockings to assist with circulation and edema management. Both the patient and caregiver verbalized understanding of the teaching provided. The current plan of care includes continued monitoring of cardiovascular and respiratory status, ongoing patient and caregiver education, adherence to medication regimen, edema management, and reinforcement of infection prevention strategies to promote recovery and maintain stability post-surgery.
 Date of Order 11/21/2025 Orders Physician Face-to-Face Date: 09/22/2025 Clinical Condition Requiring Home Care per Certifying Physician: SN disease management pt-eval & treat ot-eval & treat hha-adl's due to Disruption Of External Operation Wound Not Elsewhere Classified, In A Subsequent Encounter Homebound Status per Certifying Physician: patient requires another person or medical equipment such as crutches, a walker, or a wheelchair to leave home
 4 -

23. Signature and Date of Verbal SOC Where Applicable:

Electronically Signed by Messick, Charles RN on 11/21/2025

25. Date HHA Received Signed POT

24. Physician's Name and Address

Jenaro Hernandez
1001 Pine Heights Ave
Abingdon, MD 21229
PHONE: 410-515-5440 FAX: NPI: 1386935724

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 : 09/22/2025

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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Recertification Notes: The patient is being recertified due to an unhealed right leg wound and small ankle wounds.
 Physician Hernandez, Jenaro

SN Careplans

SN WK1: 1 (11/23/25-11/29/25) ,WK2: 1 (11/30/25-12/06/25) ,WK3: 1 (12/07/25-12/13/25) ,WK4: 1 (12/14/25-12/20/25) ,WK5: 1 (12/21/25-12/27/25) ,WK6: 1 (12/28/25-01/03/26) ,WK7: 1 (01/04/26-01/10/26) ,WK8: 1 (01/11/26-01/17/26), WK9: 1 (01/18/26-01/21/26)

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, blood sugar < 60 > 300

CAREGIVER: 1. Non-agency caregiver(s) currently provide assistance

HOSPITALIZATION RISKS: 1. History of falls (2 or more falls- or any fall with an injury- in the past 12 months), 7. Currently taking 5 or more medications, 8. Currently reports exhaustion, 9. Other risk(s) not listed in 1- 8

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; 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:POLST (Physician Orders for Life-Sustaining Treatment)

PROBLEMS IDENTIFIED ON ASSESSMENT: open sores/lesions, #3 - Blister - Anterior Right Ankle - Cleanse wound with wound cleanser Acetic Acid 0.25%, pat dry apply Allevyn gentle border lite

PROCEDURES: Medication Review- : Medications reviewed with patient/caregiver. , train caregiver(s) to perform medical/rehabilitation treatments, physician-ordered wound care: Burst blister on the left medial leg: Clean with NSS, Cover site with silicone bordered foam dressing. Change dressing every 3 days. Keep covered until healed., physician-ordered wound care: Burst blister on the left medial leg: Clean with NSS, Cover site with silicone bordered foam dressing. Change dressing every 3 days. Keep covered until healed., physician-ordered wound care: Burst blister on the right and left ankles: Clean with NSS, Cover site with silicone bordered foam dressing. Change dressing every 3 days. Right leg wound: Clean with acetic acid, apply Aquacel alginate, and secure with rolled gauze. change daily., glucose testing via monitor, teach/coordinate/arrange medication packaging and/or administration

TEACH PATIENT/CAREGIVER: * lifestyle modifications to manage cardiac condition including symptom management diet changes regular exercise getting enough sleep, related medication(s) purpose, schedule, * how to take the patient's blood pressure record the reading, related medication(s) purpose, schedule, * 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, * lifestyle modifications to manage peripheral vascular condition including how to apply compression stockings physical exercise plan diet, related medication(s) purpose, schedule, * lifestyle modification to manage blood condition including dietary changes bleeding precautions, related medication(s) purpose, schedule, * low cholesterol dietary guidelines, 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, * prevention exacerbation of anxiety condition including coping patterns improved concentration strategies to reduce anxiety identification of anxiety precipitants, conflicts, and threats, related medication(s) purpose, schedule, * how to incorporate lifestyle modifications to optimize renal condition including renal-specific diet exercise monitoring of blood pressure blood sugar home, related medication(s) purpose, schedule remedies, * how to achieve wound healing including cleaning and dressing wound position changes skin care diet modification record wound measurements, related medication(s) purpose, schedule, * diabetic medication management blood sugar testing diabetic foot care exercise diabetic diet, related medication(s) purpose, schedule, * how to manage gout flare-ups including non-medical pain relief dietary modifications, related medication(s) purpose, schedule, * how to keep home safe for patient with vision loss including eliminating hazards enhancing lighting using mechanical aids, patient self-administers medications as prescribed, related medication(s) purpose, schedule, patient is adequately supervised, caregiver administers and/or packages medications appropriately, caregiver performs medical/rehabilitation treatments with adequate competence

SN Goals

PATIENT-STATED GOAL: To get rid of walker and walk on my own

GOALS
caregiver performs medical/rehabilitation treatments with adequate competence

caregiver administers and/or packages medications appropriately

patient is adequately supervised

patient/caregiver recalls
* how to manage gout flare-ups including non-medical pain relief
* dietary modifications
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* diabetic medication management
* blood sugar testing
* diabetic foot care
* exercise
* diabetic diet
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* lifestyle modifications to manage cardiac condition including symptom management
* diet changes
* regular exercise
* getting enough sleep
* 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 keep home safe for patient with vision loss including eliminating hazards
* enhancing lighting
* using mechanical aids

patient/caregiver recalls
* lifestyle modifications to manage peripheral vascular condition including how to apply compression stockings
* physical exercise plan
* diet
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* prevention exacerbation of anxiety condition including coping patterns
* improved concentration
* strategies to reduce anxiety
* identification of anxiety precipitants, conflicts, and threats
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* lifestyle modification to manage blood condition including dietary changes
* bleeding precautions
* recalls related medication(s) purpose, schedule

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

patient/caregiver recalls
* how to take the patient's blood pressure
* record the reading
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* low cholesterol dietary guidelines
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* how to incorporate lifestyle modifications to optimize renal condition including renal-specific diet

Signature of Physician:	Date
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Optional Name/Signature of Nurse/Therapist:	Date
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* exercise
* monitoring of blood pressure
* blood sugar
* home
* recalls related medication(s) purpose, schedule remedies

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
* 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

PT Careplans

PT WK2: 5 (11/30/25-12/06/25)

PROCEDURES: Medication Review : The medication was reviewed with patient , Home exercises: Long arc , marching , hip abd/add 10x2 reps, cough/deep breathing exercises, incentive spirometer, 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, 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 be pain free and walk better

GOALS
Chair to Bed to Chair - 06. Independent

Toilet Transfer - 06. Independent

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

1 - Step (curb) - 05. Setup or clean-up assistance

Sit to Stand - 06. Independent

Car Transfer - 06. Independent

Walk 150 Feet - 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

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

Walk 10 Feet - 05. Setup or clean-up assistance

Walk 50 ft with 2 Turns - 05. Setup or clean-up assistance

OT Careplans

OT WK2: 1 (11/30/25-12/06/25)

PROCEDURES: cough/deep breathing exercises, incentive spirometer, equipment training, work simplification/energy conservation

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

OT Goals

PATIENT-STATED GOAL: ReturnPLOF

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

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

Eating - 06. Independent

patient/caregiver recalls

Signature of Physician:	Date

Optional Name/Signature of Nurse/Therapist:	Date
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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

Oral Hygiene - 06. Independent

Lower Body Dressing - 06. Independent

Toileting Hygiene - 06. Independent

Don/Doff Footwear - 06. Independent

Signature of Physician:	Date
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