

Home Health Certification and Plan of Care				Order ID: 1150/14336	
1. Patient s HI claim No.		2. Start Of Care Date		3. Certification Period	
261278954		11/26/2025		From: 11/26/2025 To: 01/24/2026	
4. Medical Record No.		5. Provider No.			
19150		217058			
6. Patient's Name and Address			7. Provider's Name, Address and Telephone Number		
Patrick Letts 4011 Jacinth Way, Baltimore, MD 21236- 410-336-5565			HomeCentris Healthcare LLC 10 Crossroads Drive, Suite 102 Owings Mills, MD 21117-8284 410-321-8448 1487113239		
8. DOB			9. Sex		
12/17/1954			Male		
11. ICD		Principal Diagnosis		Date	
Z47.1		Aftercare following joint replacement surgery		11/26/25	
13. ICD		Other Pertinent Diagnoses		Date	
Z96.652		Presence of left artificial knee joint		11/26/25	
I48.91		Unspecified atrial fibrillation		11/26/25	
D68.69		Other thrombophilia		11/26/25	
G47.33		Obstructive sleep apnea (adult) (pediatric)		11/26/25	
M16.0		Bilateral primary osteoarthritis of hip		11/26/25	
F41.9		Anxiety disorder unspecified		11/26/25	
I70.0		Atherosclerosis of aorta		11/26/25	
E78.00		Pure hypercholesterolemia unspecified		11/26/25	
I83.93		Asymptomatic varicose veins of bilateral lower extremities		11/26/25	
N52.8		Other male erectile dysfunction		11/26/25	
E53.9		Vitamin B deficiency unspecified		11/26/25	
E66.01		Morbid (severe) obesity due to excess calories		11/26/25	
Z68.32		Body mass index [BMI] 32.0-32.9 adult		11/26/25	
Z79.01		Long term (current) use of anticoagulants		11/26/25	
Z96.89		Presence of other specified functional implants		11/26/25	
Z87.891		Personal history of nicotine dependence		11/26/25	
Z96.1		Presence of intraocular lens		11/26/25	
14. DME and Supplies:			15. Medications: Dose/Frequency/Route (N)ew (C)hanged		
walker, cane			Lopressor - Metoprolol Tartrate 25 mg Oral Tab,Take 1 tablet by mouth twice a day Heart Pradaxa - Dabigatran Etexilate Mesylate 150 mg Oral Cap,Take 1 capsule by mouth every 12 hours Blood thinner Vitamin D3 - Alpha-Tocopherol Acetate: Ascorbic Acid: Biotin: Cholecalciferol: Cyanocobalamin: Dexpanthenol: Folic Acid: Niacinamide: Pyridox 25 mcg (1,000 unit) Oral Tab,Take 1 tablet by mouth once a day Supplement Vitamin - Alpha-Tocopherol Acetate: Ascorbic Acid: Biotin: Cholecalciferol: Cyanocobalamin: Dexpanthenol: Folic Acid: Niacinamide: Pyridox K2 100 mcg Oral Cap by mouth as necessary Take with vitamin D3. Supplements Vitamin B Complex - Alpha-Tocopherol Acetate: Ascorbic Acid: Biotin: Cholecalciferol: Cyanocobalamin: Dexpanthenol: Folic Acid: Niacinamide: Pyridox Take 1 capsule by mouth once a day Supplement Extra Strength Tylenol - Acetaminophen 500mg, 2 tablets by mouth every 6 hours As needed for pain Oxycodone - Ibuprofen: Oxycodone Hydrochloride 5mg, 1 tablet by mouth every 4 hours As needed for pain Colace - Docusate Sodium 100 mg , Take 1 capsule by mouth twice a day Stool softener		
16. Nutrition:			17. Safety Measures:		
regular			walker precautions, , , , ambulates with device, , knee precautions, bathroom safety,		
18.A. Functional Limitations			17. Allergies:		
Ambulation			no known allergies		
18.B. Activities Permitted			18.A. Functional Limitations		
Up As Tolerated			Ambulation		
19. Mental & Psychosocial 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:			22.B.Discharge Plans		
SELF-CARE: 3. Independent - Patient completed all the activities by 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.			patient will be responsible for managing treatment another facility/provider will be responsible for managing treatment		
Homebound status: After undergoing Left Total Knee Replacement, 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 <div>The patient is a 70-year-old male with a past medical history significant for bilateral primary osteoarthritis of the hips, obstructive sleep apnea, and unspecified atrial fibrillation, who recently underwent left total knee replacement surgery. The surgical site is covered with a Mepilex dressing, scheduled for removal seven days postoperatively per surgeon orders, with a minor blood stain noted on the dressing. The patient is alert and oriented 4, with vital signs within normal limits, respirations even and unlabored, and clear lungs on auscultation. He denies shortness of breath, nausea, vomiting, or headache but reports severe pain rated 8/10. Postoperative edema is present, and the patient is weak and largely bedbound, having not left his bed today. He reported a fall the previous day while attempting to walk to the bathroom. He was unable to tolerate standard total knee replacement exercises but was assisted in performing short-arc exercises, and he could not transfer out of bed even with assistance. Ambulation is limited to use of a walker with support, and the patient's social support network is minimal. Medication reconciliation was completed, and education was provided regarding hand hygiene, medication compliance, ice therapy, gentle exercises, constipation prevention, and signs and symptoms of deep vein thrombosis. The patient would benefit from skilled nursing and physical therapy interventions focused on pain management, edema control, safe transfers, gradual strengthening, fall prevention, and enhanced functional mobility to facilitate recovery and prevent further complications.</div><div></div><div> </div><div>Date of Order</div><div>11/26/2025</div><div>Orders</div><div>Physician Face-to-Face Date: 11/07/2025</div><div>Clinical Condition Requiring Home Care per Certifying Physician: SN-pain control PT-eval & treat due to Left Total Knee Replacement</div><div>Homebound Status per Certifying Physician: patient requires another person or medical equipment such as crutches, a walker, or a wheelchair to leave home</div><div></div><div> </div><div>1 - SOC - SN Notes: soc</div><div>PT Eval Notes: eval</div><div>14px;">Physician</div><div>Huang , James</div></div>					
SN Careplans			SN Goals		
23. Signature and Date of Verbal SOC Where Applicable:				25. Date HHA Received Signed POTS	
Electronically Signed by Messick, Charles RN on 11/26/2025					
24. Physician's Name and Address			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.		
James Huang 8028 Ritchie Hwy Pasadena, MD 21122 PHONE: 410-737-5600 FAX: 14107375391 NPI: 1154567709			F2F date : 11/07/2025		
27. Attending Physician's Signature and Date Signed			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.		
Date of physician last face-to-face			PAGE 1 of 3		

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410-336-5565			410-321-8448		
			1487113239		
SN WK1: 1 (11/26/25-11/29/25) ,WK2: 1 (11/30/25-12/06/25)			PATIENT-STATED GOAL: To walk without pain.		
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			GOALS		
CAREGIVER: 1. Non-agency caregiver(s) currently provide assistance			patient/caregiver recalls		
HOSPITALIZATION RISKS: 7. Currently taking 5 or more medications, 8. Currently reports exhaustion, 9. Other risk(s) not listed in 1- 8			* how to achieve wound healing including cleaning and dressing wound		
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.			* position changes		
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.			* skin care		
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 2: 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			* diet modification		
Implement Fall Prevention Program, Instruct and educate the patient/PCG on wearing compression stockings for the next 4 weeks per discharge instructions.			* record wound measurements		
Instruct the pt/PCG on using the incentive spirometer 10 times every 2 hour while awake.			* recalls related medication(s) purpose, schedule		
Provide education content at patient's level of health literacy.			patient/caregiver recalls		
Assess/Instruct Pt/Pcg: Safety measures to prevent injury.			* lifestyle modifications to manage respiratory condition including		
Assess: Musculoskeletal status.			* diet changes and regular exercise		
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			* strategies to control shortness of breath		
Assess/Instruct Pt/Pcg: Pain management measures; assess pain level, pain medication, rest, body alignment, ROM, meditation, massage.			* home remedies to keep lungs healthy		
Pt/Pcg educated in pain management techniques including positioning and relaxation techniques			* recalls related medication(s) purpose, schedule		
Instruct Pt/Pcg: Medication actions, uses, frequency, dose, side effects, interactions of all new/change meds, Provide medication education.,			patient/caregiver recalls		
Assess/Instruct Pt/Pcg: Safety measures to prevent injury, Therapeutic Exercise, Transfer Training			* how to maintain a diary to monitor effective and non-effective pain relief		
Monitor surgical wound for s/s of infection, educate on s/s of concern and infection prevention to promote wound healing.			including documenting time of pain, rating, precipitating events, medications, treatments, and what works best to relieve pain		
; 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			* teach relaxation skills and diversional activities		
Advance Directive:Durable power of attorney for health care/Medical power of attorney			* recalls related medication(s) purpose, schedule		
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 - Left knee replacement surgical site			patient/caregiver recalls		
PROCEDURES: Medication review: Medication reviewed with patient/caregiver., cough/deep breathing exercises, incentive spirometer, physician-ordered wound care: Left knee surgical site: Remove mepilex dressing on the 7th day post op and LOTA. Otherwise, cover with a dry gauze dressing if drainage occurs.			* strategies to minimize fatigue and exhaustion including work simplification		
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, * 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			* energy conservation		
PT Careplans			patient/caregiver recalls		
PT WK1: 2 (11/26/25-11/29/25) ,WK2: 3 (11/30/25-12/06/25) ,WK3: 1 (12/07/25-12/13/25)			* diet		
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			* recalls related medication(s) purpose, schedule		
PT Goals			patient self-administers medications as prescribed		
PATIENT-STATED GOAL: To walk pain free			* recalls related medication(s) purpose, schedule		
GOALS					
Shower/Bathe Self - 05. Setup or clean-up assistance					
Chair to Bed to Chair - 06. Independent					
Toilet Transfer - 06. Independent					
Walk 10 ft on Uneven Surface - 05. Setup or clean-up assistance					
Signature of Physician:			Date		
			PAGE 2 of 3		
Optional Name/Signature of Nurse/Therapist:			Date		
Electronically Signed by Messick, Charles RN			11/26/2025		

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PROCEDURES: Medication review: Medication was reviewed with the patient , TKR exercises: Ankle pumps heel slides, le abd/add, slr , long arc , marching and heel raises--10x2 reps , cough/deep breathing exercises, incentive spirometer, 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		1 - Step (curb) - 05. Setup or clean-up assistance Oral Hygiene - 06. Independent Lower Body Dressing - 06. Independent Toileting Hygiene - 06. Independent Don/Doff Footwear - 06. Independent Eating - 06. Independent Sit to Stand - 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 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		

Signature of Physician:	Date
	PAGE 3 of 3
Optional Name/Signature of Nurse/Therapist:	Date
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