

Home Health Certification and Plan of Care				Order ID: 1150/14600	
1. Patient s HI claim No.		2. Start Of Care Date		3. Certification Period	
9CA6X38AJ85		12/02/2025		From: 12/02/2025 To: 01/30/2026	
				4. Medical Record No.	
				20136	
				5. Provider No.	
				217058	
6. Patient's Name and Address			7. Provider's Name, Address and Telephone Number		
Sharon Petryszak			HomeCentris Healthcare LLC		
14407 Maple Ridge Ct,			10 Crossroads Drive, Suite 102		
BALDWIN, MD 21013-			Owings Mills, MD 21117-8284		
443-299-6515			410-321-8448		
			1487113239		
8. DOB			9. Sex		
07/22/1942			Female		
11. ICD			Date		
Z48.812			12/02/25		
Principal Diagnosis			Encntr for surgical afctr following surgery on the circ sys		
13. ICD			Date		
I48.11			12/02/25		
Other Pertinent Diagnoses			Longstanding persistent atrial fibrillation		
I25.10			12/02/25		
AthscI heart disease of native coronary artery w/o ang pctrs			12/02/25		
E78.5			12/02/25		
Hyperlipidemia unspecified			12/02/25		
E03.9			12/02/25		
Hypothyroidism unspecified			12/02/25		
G62.9			12/02/25		
Polyneuropathy unspecified			12/02/25		
M91.90			12/02/25		
Juvenile osteochondrosis of hip and pelvis unsp unsp leg			12/02/25		
H35.30			12/02/25		
Unspecified macular degeneration			12/02/25		
Z95.2			12/02/25		
Presence of prosthetic heart valve			12/02/25		
Z79.01			12/02/25		
Long term (current) use of anticoagulants			12/02/25		
Z85.048			12/02/25		
PrsnI hx of malig neoplM of rectum rectosig junct and anus			12/02/25		
Z87.891			12/02/25		
Personal history of nicotine dependence					
			10. Medications: Dose/Frequency/Route (N)ew (C)hanged		
			Metoprolol Succinate - Metoprolol Succinate 25 MG tablet, Take 1 tablet by mouth once a day HTN		
			Potassium Chloride - Potassium Chloride 20 MEQ tablet extended release,Take 1 tablet by mouth twice a day Take 1 tablet by mouth 2 times daily for 7 days,		
			THEN 1 tablet daily for 14 days. Take with lasix		
			Preservision - Normal Saline Caps Take by mouth by mouth twice a day * PreserVision AREDS Caps		
			Take by mouth 2 times daily.		
			Vitamin B 12 - Alpha-Tocopherol Acetate: Ascorbic Acid: Biotin: Cholecalciferol: Cyanocobalamin: Dexpanthenol: Folic Acid: Niacinamide: Pyridox 50 MCG Tabs Take 50 mcg by mouth once a day SUPPLEMENT		
			Warfarin - Warfarin Sodium 1 mg tablet, Take 1 tablet by mouth at bedtime Take 1 tablet by mouth every evening. No		
			Coumadin today 11/29/2025. Begin 1 mg tomorrow 11/30/2025. And as instructed for goal INR 2-3 Do not start before November 30, 2025.		
			Acetaminophen - Acetaminophen 500 MG tablet Take 2 tablets by mouth every 6 hours Take 2 tablets by mouth every 6 hours for 7 days. And then may take as needed for pain		
			Amiodarone - Amiodarone Hydrochloride 200 MG tablet Take 1 tablet by mouth twice a day 200 MG tablet		
			Take 1 tablet by mouth 2 times daily for 5 days, THEN 1 tablet daily FOR AFIB		
			Atorvastatin - Atorvastatin Calcium 10 MG tablet Take 10 mg by mouth at bedtime 10 MG tablet		
			Take 10 mg by mouth nightly. CHOLESTEROL		
			Levothyroxine - Levothyroxine Sodium 100 MCG tablet Take 100 mcg by mouth once a day 100 MCG tablet		
			Take 100 mcg by mouth daily before breakfast.		
			Calcium - Calcium Acetate 600 MG Tabs Take 600 mg by mouth once a day 600 MG Tabs		
			Take 600 mg by mouth daily. On admit 11/24/25 for mitral valve replacement, last dose 11/19/25.		
			Vitamin D3 - Alpha-Tocopherol Acetate: Ascorbic Acid: Biotin: Cholecalciferol: Cyanocobalamin: Dexpanthenol: Folic Acid: Niacinamide: Pyridox 50 MCG (2000 UT) Caps Take 1 capsule by mouth once a day 50 MCG (2000 UT) Caps		
			Take 1 capsule by mouth daily. On admit 11/24/25 for mirtal valve replacement, last dose 11/19/25.		
			Furosemide - Furosemide 40 MG tablet Take 1 tablet by mouth twice a day 40 MG tablet		
			Take 1 tablet by mouth twice a day for 7 days, THEN 1 tablet daily for 14 days.		
14. DME and Supplies:			15. Safety Measures:		
rolling walker, hand held shower, bath bench, wound care supplies			ambulates with device, walker precautions, , cardiac precautions, bathroom safety,		
16. Nutrition:			17. Allergies:		
cardiac diet, low cholesterol			amoxicillin		
18.A. Functional Limitations			18.B. Activities Permitted		
Dyspnea With Minimal Exertion, Ambulation			Up As Tolerated		
19. Mental & COGNITION: 0. Alert/ oriented, able to focus and shift attention, comprehends and recalls task directions independently., ANXIETY: 0. Never, SOCIAL ISOLATION: 0. Pyschosocial Status: 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		
23. Signature and Date of Verbal SOC Where Applicable:				25. Date HHA Received Signed POT	
Electronically Signed by Messick, Charles RN on 12/02/2025					
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.		
Rawn Salenger			F2F date : 11/28/2025		
7505 Olser Dr					
Towson, MD 21204					
PHONE: 4103371783 FAX: 14104272063 NPI: 1568465516					
27. Attending Physician's Signature and Date Signed 12/10/2025 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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Homebound status: After undergoing Cardiac 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: <div>The patient is an 83-year-old female with a past medical history significant for atrial fibrillation, hyperlipidemia, hypothyroidism, and rectal cancer, who is status post recent cardiac surgery. The surgical site is left open to air (LOTA) per provider orders, and the patient was instructed to cleanse the area with wound cleanser after showering and to gently pat dry with a clean towel; the incision was observed to be managed according to these instructions. The patient is alert and oriented to person, place, time, and situation. She was recently initiated on warfarin 1 mg daily for anticoagulation management, and a blood sample for INR monitoring was obtained and sent to LabCorp on York Road. The patient reports shortness of breath with exertion, generalized weakness, and ambulates with the assistance of a rollator. She reports a pain level of 2 on a 0-10 scale. The patient additionally reports experiencing loose stools. Comprehensive patient education was provided, including instruction on the use of a chest pillow to splint the incision during coughing, reinforcement of a heart-healthy cardiac diet, and guidance on following a BRAT diet to assist with management of loose stools. The patient resides with her spouse, and her daughter is actively involved and present during the visit. The patient and family verbalized understanding of the education provided. Ongoing skilled nursing services are planned to continue monitoring anticoagulation therapy, cardiopulmonary status, functional mobility, wound care, and overall recovery following cardiac surgery.</div><div> </div><div>Date of Order</div><div>12/02/2025</div><div>Orders</div><div>Physician Face-to-Face Date: 11/28/2025</div><div>Clinical Condition Requiring Home Care per Certifying Physician: SN-disease management PT-eval & treat due to Cardiac Surgery</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>Physician</div><div>Salenger,</div><div>Rawn</div>

SN Careplans	SN Goals
SN WK1: 1 (12/02/25-12/06/25) ,WK2: 1 (12/07/25-12/13/25) ,WK3: 1 (12/14/25-12/20/25) ,WK4: 1 (12/21/25-12/27/25)	PATIENT-STATED GOAL: to walk without assistive devices
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 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
CAREGIVER: 1. Non-agency caregiver(s) currently provide assistance	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
HOSPITALIZATION RISKS: 7. Currently taking 5 or more medications, 8. Currently reports exhaustion, 9. Other risk(s) not listed in 1- 8	patient/caregiver recalls * prescribed dietary modifications * monitoring intake and output * monitoring weight loss or weight gain * monitor changes in neurological status * recalls related medication(s) purpose, schedule
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:No Advance Directive	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
PROBLEMS IDENTIFIED ON ASSESSMENT: M2020 - Oral Med Management, M1033 - Exhaustion, M1400 - Dyspnea, abnormal thyroid < > 0.40 - 4.50 mIU/mL, limited strength, Pain Interference with ADLs, balance deficit, loss of appetite, bruising/dyscoloration, #1 - Observable Surgical Wound - Anterior Left Upper Chest - Mid chest cardiac surgical site.	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
PROCEDURES: Medication Review: Medication reviewed by patient/caregiver, cough/deep breathing exercises, incentive spirometer, physician-ordered wound care: Mid chest surgical site: After showering, spray the surgical site with the wound cleanser and pat dry with a dry towel and LOTA., venipuncture: At SOC Visit- needs lab drawn for INR. fax results to Kate Knott NP 410-337-1783 cell phone:410-428-5788	patient/caregiver recalls * strategies to minimize fatigue and exhaustion including work simplification * energy conservation * lifestyle changes * diet * recalls related medication(s) purpose, schedule
TEACH PATIENT/CAREGIVER: * lifestyle modifications to manage cardiac condition including symptom management diet changes regular exercise getting enough sleep, 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, * 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, * prescribed dietary modifications monitoring intake and output monitoring weight loss or weight gain monitor changes in neurological status, 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	patient self-administers medications as prescribed * recalls related medication(s) purpose, schedule

Signature of Physician:	Date
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Optional Name/Signature of Nurse/Therapist:	Date
Electronically Signed by Messick, Charles RN	12/02/2025