

Medical Update for James Woodard DOB: 03/13/1930

Date Order Created: 12/19/2025

Order ID: 1150/14991

Agency Assigned Id: 18995

Certification Period: 11/03/2025 to 01/01/2026

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

Orders:

12/19/2025 Medications: Immodium - Loperamide Hydrochloride 2mg, 1 capsule 4 times daily by mouth as necessary

Tramadol - Tramadol Hydrochloride 50mg Tablet take 1/2 tablet by mouth once a day Nightly

Aldactone - Spironolactone 25 mg 1/2 tablet by mouth once a day

*Jill Crank
2700 Remington Ave*

*2700 Remington Ave, MD 21211
Tele:6673122400 FAX: 14434539908*

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

Staff Signature: Electronically Signed by Messick, Charles Date 12/19/2025