

Medical Update for James Ruth DOB: 06/19/1960

Date Order Created: 01/27/2026

Order ID: 1150/15646

Agency Assigned Id: 20167

Certification Period: 12/04/2025 to 02/01/2026

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

Orders:

*Authorization changes of MSW skill Total Visits: 1 and Visit Freq: 1
Authorization changes of OT skill Total Visits: 2 and Visit Freq: 1w3
Authorization changes of PT skill Total Visits: 11 and Visit Freq: 11*

01/13/2026 Problems : Financial

Financial

Financial

Financial

Financial

B1000 - Vision Deficit

A1250 - Lack of Necessary Transportation

B1300

01/23/2026 Medications: Lidocaine - Lidocaine 4% topical once a day Remove at bedtime

Albuterol Sulfate - Albuterol Sulfate 108 MCG/ACT by mouth as necessary 2 puffs by mouth 4 hours as needed

Lawanda Rollins Mrs.

8831 Satyr Hill Rd Ste 100

8831 Satyr Hill Rd Ste 100, MD 21234

Tele:443-946-1896 FAX: 14434952902

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

Staff Signature: Electronically Signed by Messick, Charles

Date 01/27/2026