Medical Update for Omilee Stricklin DOB: 02/22/1975

Date Order Created: 01/30/2026

Order ID: 1189/9

Agency Assigned Id: 1

Certification Period: 01/26/2026 to 03/26/2026

Superior Home Health 630017955
320 E. Walnut
Lompoc, CA 93436-6835
PHONE 805-742-4514 FAX

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Orders:
Physician Face-to-Face Date:
Clinical Condition Requiring Home Care per Certifying Physician: Wound
Homebound Status per Certifying Physician: PLACEHOLDER
1 - SOC - PT Notes:
9 - Discharge from agency Notes:

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Noor Al-Saud
1300 W Ocean Ave

1300 W Ocean Ave, CA 93436
Tele:805-737-1169 FAX: 18057371772

Physician Signature_____ Date _____

Staff Signature: Electronically Signed by Stradley, Kara Date 01/30/2026