

Medical Update for Rona Howe DOB: 12/16/1946

Date Order Created: 02/13/2026

Order ID: 1150/16138

Agency Assigned Id: 20835

Certification Period: 12/27/2025 to 02/24/2026

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

Orders:

*Authorization changes of PT skill Total Visits: 10 and Visit Freq: CUSTOM
Authorization changes of OT skill Total Visits: 6 and Visit Freq: CUSTOM
Authorization changes of SN skill Total Visits: 8 and Visit Freq: CUSTOM*

*02/11/2026 Problems : Hyp hrt & chr kdny dis w hrt fail and stg 1-4/unsp chr kdny (I13.0)
Heart failure, unspecified (I50.9)
Chronic kidney disease, stage 4 (severe) (N18.4)
Secondary hyperparathyroidism of renal origin (N25.81)
Immunodeficiency, unspecified (D84.9)
Type 2 diabetes w unsp diabetic retinopathy w macular edema (E11.311)
Type 2 diabetes mellitus with diabetic polyneuropathy (E11.42)
Hyperlipidemia, unspecified (E78.5)
Major depressive disorder, recurrent, mild (F33.0)
Stress incontinence (female) (male) (N39.3)
Long term (current) use of aspirin (Z79.82)
Long term (current) use of oral hypoglycemic drugs (Z79.84)
Personal history of nicotine dependence (Z87.891)*

02/12/2026 Medications: Hydralazine - Hydralazine Hydrochloride 50mg, Oral tablet by mouth twice a day HTN

*Laura Emmanuel-Allen
7141 Security Blvd*

*7141 Security Blvd, MD 21044
Tele: FAX:*

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

Staff Signature: Electronically Signed by Messick, Charles Date 03/04/2026