Medical Update for Lazelle Mullings DOB: 12/21/1948

Date Order Created: 03/05/2026

Order ID: 1150/16668

Agency Assigned Id: 21855

Certification Period: 02/07/2026 to 04/07/2026

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

Orders:
02/16/2026 procedure: cough/deep breathing exercises, Notes: , equipment training, Notes: , work simplification/energy conservation, Notes: , therapeutic exercises, Notes: , transfers training, Notes: , cough/deep breathing exercises, Notes: , incentive spirometer, Notes: , Gait training on level surface and steps, Notes: , Outside gait training, Notes: , Transfer training, Notes: , Bed mobility training , Notes: , Gait, Notes: , Transfer training , Notes: ,

02/16/2026 goal: Oral Hygiene - 06. Independent, Target Date: 04/07/2026, Toileting Hygiene - 06. Independent, Target Date: 04/07/2026, Shower/Bathe Self - 06. Independent, Target Date: 04/07/2026, Lower Body Dressing - 06. Independent, Target Date: 04/07/2026, Don/Doff Footwear - 06. Independent, Target Date: 04/07/2026, Eating - 06. Independent, Target Date: 04/07/2026, Upper Body Dressing - 06. Independent, Target Date: 04/07/2026, 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 relaxatio, Target Date: 04/07/2026,*

03/04/2026 Medications: Oxycodone - Ibuprofen: Oxycodone Hydrochloride 5mg by mouth every 4 hours Prn for pain

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Gail Berkenblit
601 N. Caroline Street

601 N. Caroline Street, MD 21287
Tele:4109552834 FAX: 14109551545

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

Staff Signature: Electronically Signed by Messick, Charles Date 03/05/2026