

Medical Update for Jerome Watson DOB: 08/25/1949

Date Order Created: 03/10/2026

Order ID: 1150/16830

Agency Assigned Id: 21315

Certification Period: 01/13/2026 to 03/13/2026

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

Orders:

*03/04/2026 Medications: Butrans - Buprenorphine 5mcg/hr 1 patch 5mcg transdermal once a week 1 patch 5 mcg, change patch once a week
Tylenol - Acetaminophen 1000mg by mouth every 8 hours For pain level 6 or less as needed.*

*Jasmin Hans
1701 Twin Springs Rd*

*1701 Twin Springs Rd, MD 21227
Tele:410-933-79616 FAX: 14109337666*

Physician Signature_____ Date _____

Staff Signature: Electronically Signed by Messick, Charles Date 03/13/2026