

Medical Update for Anna Hartman DOB: 09/16/1942

Date Order Created: 03/13/2026

Order ID: 1150/16909

Agency Assigned Id: 21649

Certification Period: 01/20/2026 to 03/20/2026

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

Orders:

01/28/2026 procedure: incentive spirometer, Notes: , coordinate/arrange caregiver support to prevent caregiver physical, emotional and mental exhaustion, Notes: , teach/coordinate/arrange medication packaging and/or administration, Notes: , coordinate/arrange for adequate patient supervision, Notes: , coordinate/arrange home modifications for hearing impaired, i.e. alarms, Notes: , physician-ordered wound care: #1 - Contusion - Other - Face - Multiple contusions all over right and left side 9f fac3 from mechanical fall., Notes: , physician-ordered wound care: #2 - Contusion - Other - Left forearm - Right forearm bruising from mechanical fall., Notes: , cough/deep breathing exercises, Notes: , incentive spirometer, Notes: , gait training/stair training, Notes: , transfers training, Notes: ,

01/28/2026 goal: patient/caregiver recalls

- * depression-prevention strategies including avoidance of isolation
- * healthy eating
- * sleeping habits
- * identification of activities that bring pleasure
- * preventive care
- * recalls related medication(s) purpos, Target Date: 03/20/2026, patient/caregiver recalls
- * how to keep home safe for hearing-impaired including installing special fire-detector/CO2 alarms
- * recalls related medication(s) purpose, schedule, Target Date: 03/20/2026: DISCONTINUED, patient self-administers medications as prescribed
- * recalls related medication(s) purpose, schedule, Target Date: 03/20/2026, 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: 03/20/2026: DISCONTINUED, Sit to Stand - 06. Independent, Target Date: 03/20/2026, Chair to Bed to Chair - 06. Independent, Target Date: 03/20/2026, Toilet Transfer - 06. Independent, Target Date: 03/20/2026, Car Transfer - 06. Independent, Target Date: 03/20/2026, Walk 10 Feet - 04. Supervision or touching assistance, Target Date: 03/20/2026: DISCONTINUED, Walk 50 ft with 2 Turns - 04. Supervision or touching assistance, Target Date: 03/20/2026: DISCONTINUED, Walk 150 Feet - 04. Supervision or touching assistance, Target Date: 03/20/2026: DISCONTINUED, 1 - Step (curb) - 04. Supervision or touching assistance, Target Date: 03/20/2026, 4 Steps - 04. Supervision or touching assistance, Target Date: 03/20/2026, 12 Steps - 04. Supervision or touching assistance, Target Date: 03/20/2026, Picking Up Object - 04. Supervision or touching assistance, Target Date: 03/20/2026: DISCONTINUED, Walk 10 ft on Uneven Surface - 04. Supervision or touching assistance, Target Date: 03/20/2026,

Sonia Sharma
3400 Box Hill Center Dr

3400 Box Hill Center Dr, 0 21009
Tele:410-515-5440 FAX:

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

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