

Medical Update for Samuel Stamper DOB: 11/30/1971

Date Order Created: 03/13/2026

Order ID: 1150/16941

Agency Assigned Id: 1467

Certification Period: 02/08/2026 to 04/08/2026

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

Orders:

Authorization changes of OT skill Total Visits: 3 and Visit Freq: CUSTOM

03/12/2026 procedure: gait training/stair training, Notes: ,

03/12/2026 Medications: Apresoline - Hydralazine Hydrochloride 50 mg 1 by mouth twice a day

*Robert Levine
2391 Greenspring Drive*

*2391 Greenspring Drive, MD 21093
Tele:410-847-3000 FAX: 18554160980*

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

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