Home Health Certification and Plan of Care

Order ID: 1163/900

1. Patient s HI claim No.	2. Start Of Care Date	3. Certification Period	4. Medical Record No.	5. Provider No.
761034584	01/15/2026	From: 03/16/2026 To: 05/14/2026	950	497754

6. Patient's Name and Address

Clifford Paris Sr
10024 Lake Occoquan Drive,
MANASSAS, VA 20111-
571-220-7503

7. Provider's Name, Address and Telephone Number

Grace Home Healthcare, LLC
9735 Main Street Suite 200 Fairfax,
Fairfax, VA 22031-3736
703-865-7370
1073904009

8. DOB 02/20/1963 | 9.Sex Male

11. ICD	Principal Diagnosis	Date
G93.41	Metabolic encephalopathy	01/15/26

13. ICD	Other Pertinent Diagnoses	Date
M62.82	Rhabdomyolysis	01/15/26
E03.9	Hypothyroidism unspecified	01/15/26
G31.81	Alpers disease	01/15/26
G20.A1	Parkinson's dis w/o dyskinesia w/o mention of fluctuations	01/15/26
E78.5	Hyperlipidemia unspecified	01/15/26
B00.9	Herpesviral infection unspecified	01/15/26
K21.9	Gastro-esophageal reflux disease without esophagitis	01/15/26
I95.1	Orthostatic hypotension	01/15/26
F90.9	Attention-deficit hyperactivity disorder unspecified type	01/15/26
G47.00	Insomnia unspecified	01/15/26
K59.00	Constipation unspecified	01/15/26
G43.009	Migraine w/o aura not intractable w/o status migrainosus	01/15/26
N39.41	Urge incontinence	01/15/26
L85.3	Xerosis cutis	01/15/26
F33.42	Major depressive disorder recurrent in full remission	01/15/26
Z79.899	Other long term (current) drug therapy	01/15/26
G25.81	Restless legs syndrome	01/15/26
E66.3	Overweight	01/15/26
Z68.27	Body mass index [BMI] 27.0-27.9 adult	01/15/26
Z87.440	Personal history of urinary (tract) infections	01/15/26

10. Medications: Dose/Frequency/Route (N)ew (C)hanged

Atorvastatin - Atorvastatin Calcium 20 mg 1 tab by mouth in the morning HLD
Trazodone - Trazodone Hydrochloride 50 mg 1 tab by mouth at bedtime Insomnia
Fluoxetine - Fluoxetine Hydrochloride eq 10 mg base 1 Tablet by mouth twice a day Depression
Seroquel - Quetiapine Fumarate eq 25 mg base 1 tablet by mouth once a day for depression
Synthroid - Levothyroxine Sodium 0.15 mg **see current annual edition, 1.8 description of special situations, levothyroxine sodium 1 tablet by mouth in the morning before meals on an empty stomach
Adderall Xr 5 - Amphetamine Aspartate: Amphetamine Sulfate: Dextroamphetamine Saccharate: Dextroamphetamine Sulfate 1 Tablet by mouth once a day Neurotransmitters - to treat his ADHD
Risperdal - Risperidone 1 mg 1 tablet by mouth twice a day for treatment of his bipolar
Neurontin - Gabapentin 300 mg 1 capsule by mouth at bedtime to treat his nerve pain
Myrbetriq - Mirabegron 25 mg, 1 tablet by mouth once a day for his overactive bladder
Rytary - Carbidopa: Levodopa 0 0 23.75-95 mg - 3 capsules by mouth four times a day for Parkinson's
Mirapex - Pramipexole Dihydrochloride 0.25 mg 1 tab by mouth in the morning
Senokot - Senna 1 tab; standardized center concentrate 8.6 mg DOCUSATE sodium 50 MG by mouth twice a day 2 tabs in AM, 2 tabs in PM
Tylenol - Acetaminophen 1 tab; 325mg by mouth as necessary Two tabs no more than four times a day, as needed for pain

14. DME and Supplies:
rolling walker, grab bars, cane

15. Safety Measures:
activity supervision

16. Nutrition:
Z. NO PHYSICIAN-ORDERED DIET

17. Allergies:
sertraline tamsulosin

18.A. Functional Limitations
None of the above

18.B. Activities Permitted
Exercises Prescribed, Up As Tolerated

19. Mental & Pyschosocial Status: COGNITION: 1. When reminded, assisted, or supervised by another person, able to get to and from the toilet and transfer, ANXIETY: , SOCIAL ISOLATION: , BEHAVIORAL ISSUES: 3+/5, HISTORY OF DEPRESSION:

20. Prognosis: fair

22. A Rehabilitation Potential:
SELF-CARE: , MOBILITY:

22.B.Discharge Plans
family/caregiver will be responsible for managing treatment

Homebound status: Due to diagnosis of Metabolic Encephalopathy, the patient is experiencing decreased endurance and mobility, increasing the likelihood of falls. To safely leave their home, the patient needs assistance from another person and an assistive mobility device.

Clinical Condition Requiring Homecare:

The patient is a 63-year-old White male with a recent hospitalization for altered mental status and anxiety, subsequently transferred to rehabilitation and now admitted to home health services with a primary diagnosis of Parkinson's disease. Past medical history is significant for hypothyroidism, gastroesophageal reflux disease (GERD), and hyperlipidemia. The patient resides in a multi-level single-family home with his wife and multiple pets. He currently has a private caregiver Monday through Friday from 8:00 a.m. to 1:00 p.m., which, per the patient's wife, is a temporary arrangement. The wife and private aide were present during the visit and actively involved in care. On <mh class="chrome-extension-FindManyStrings chrome-extension-FindManyStrings-style-8 CE-FMS-assessment">assessment</mh>, the patient was alert, awake, and oriented to person, place, time, and situation. He wears prescription glasses and is hard of hearing. Neurological <mh class="chrome-extension-FindManyStrings chrome-extension-FindManyStrings-style-8 CE-FMS-assessment">assessment</mh> revealed positive facial symmetry, pupils equal, round, and reactive to light, and bilateral upper extremity strength with equal hand grasps. The patient demonstrates uncontrolled shaking and muscle rigidity consistent with Parkinson's disease, contributing to unsteady and festinating gait patterns. He requires moderate assistance and supervision for safety due to impaired balance and gait instability and was encouraged to consistently use assistive devices. The patient ambulates independently indoors and outdoors with a rollator for balance and safety and is independent with all transfers; however, supervision remains necessary due to fall risk. Cardiopulmonary <mh class="chrome-extension-FindManyStrings chrome-extension-FindManyStrings-style-8 CE-FMS-assessment">assessment</mh> revealed posterior lung lobes clear to auscultation bilaterally without use of accessory muscles. No edema was noted in the bilateral lower extremities. Abdominal <mh class="chrome-extension-FindManyStrings chrome-extension-FindManyStrings-style-8 CE-FMS-assessment">assessment</mh> revealed a distended, soft, and non-tender abdomen with active bowel sounds in all four quadrants. The patient is continent of bowel and bladder. He reported intermittent abdominal pain, which is effectively relieved with prescribed medication. The patient is able to feed himself with setup assistance, and medications are prepared by his wife, though he manages oral medications independently once prepared. Functionally, the patient is independent in basic activities of daily living, including grooming, dressing, bathing, toileting, and meal management, though supervision is required for safety related to Parkinson's disease symptoms, including hypertonicity, muscle rigidity, stiffness, and gait disturbances. The wife has ordered orthotic rocker sole shoes to promote improved toe-off and foot clearance during ambulation. A physical therapy evaluation was completed during this visit. A home exercise program was initiated, focusing on seated and standing therapeutic exercises targeting core/abdominal strength and bilateral lower extremity strengthening. Education was provided to both the patient and his wife regarding proper performance and safety with exercises. Both verbalized understanding and demonstrated exercises appropriately. The patient would benefit from continued skilled physical therapy services to improve strength, functional mobility, standing and ambulation tolerance, gait efficiency, balance, and overall safety in order to maximize independence and facilitate return to prior level of function.
 Date of Order 03/12/2026 Orders Physician Face-to-Face Date: 01/07/2026 Clinical Condition Requiring Home Care per Certifying Physician: SN disease management, PR eval and treat, OT eval and

23. Signature and Date of Verbal SOC Where Applicable:
Electronically Signed by Messick, Charles RN on 03/12/2026

25. Date HHA Received Signed POT

24. Physician's Name and Address
Musaab Esmael
10701 Rosemary Dr
Manasas, VA 20109
PHONE: 7036899000 FAX: NPI: 1902251648

26. I certify/recertify that this patient is confined to his/her home and needs intermittent skilled nursing care, physical therapy and/or speech therapy or continues to need occupational therapy. The patient is under my care, and I have authorized the services on this plan of care and will periodically review the plan.
F2F date : 01/07/2026

27. Attending Physician's Signature and Date Signed : Date of physician last face-to-face

28. Anyone who misrepresents, falsifies, or conceals essential information required for payment of Federal funds may be subject to fine, imprisonment, or civil penalty under applicable Federal laws.

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treat HHA due to Metabolic Encephalopathy Homebound Status per Certifying Physician: patient requires another person or medical equipment such as crutches, a walker, or a wheelchair to leave home
 4 - Recertification Notes: The patient is being recertified due to the patient's diagnosis of Parkinson's disease, with continued need for skilled home health physical therapy to address ongoing impairments in balance, gait, and functional mobility, as well as to reduce fall risk and support safe performance of daily activities.
 Physician Esmael, Musaab

SN Careplans	SN Goals

PT Careplans	PT Goals
PT WK1: 2 (03/16/26-03/21/26) ,WK2: 2 (03/22/26-03/28/26) ,WK3: 2 (03/29/26-04/04/26) ,WK4: 1 (04/05/26-04/11/26) PARAMETERS FOR PHYSICIAN NOTIFICATION: temperature < 95 > 100.5, heart rate < 50 > 110, respiratory rate < 8 > 22, blood pressure systolic < 90 > 169, blood pressure diastolic < 60 > 90, O2 saturation < 88 > 100, pain < 0 > 5 CAREGIVER: 3+/5 HOSPITALIZATION RISKS: 1. History of falls (2 or more falls - or any fall with an injury - in the past 12 months), 7. Currently taking 5 or more medications, 8. Currently reports exhaustion STANDING ORDERS: infection control: hygiene, proper hand washing; advance directive: plan if patient is unable to make healthcare decisions ; fall precautions: wear sensible shoes, remove home hazards, living space adequately lit, assistive devices prn; emergency preparedness: plan for prn evacuation, resumption of home health visits; Skin Preservation: Measures to prevent skin breakdown; pressure relief, incontinence care, nutrition, hydration; Pain: Pain management measures; pain medication, rest, body alignment, ROM, meditation, massage; Medications: Medication actions, uses, frequency, dose, interactions of all new/change meds Advance Directive:No Advance Directive PROBLEMS IDENTIFIED ON ASSESSMENT: GG0170J1 - Walk 50 ft with 2 Turns, GG0170M1 - 1 - Step (curb), GG0170M1 - 1 - Step (curb), GG0170M1 - 1 - Step (curb), GG0170P1 - Picking Up Object, GG0170O1 - 12 Steps, GG0170N1 - 4 Steps, GG0170M1 - 1 - Step (curb), GG0170L1 - Walk 10 ft on Uneven Surface, GG0170K1 - Walk 150 Feet, GG0170I1 - Walk 10 Feet, GG0170G1 - Car Transfer, GG0170E1 - Chair to Bed to Chair, GG0170D1 - Sit to Stand, GG0170F1 - Toilet Transfer, M1033 - Exhaustion, muscle weakness, limited strength, limited range of motion, limited endurance PROCEDURES: home exercise program: Seated and/or standing therex 10-20 reps: marches, hip add pillow squeezes, HR/TR, clams, sit to stands, LAQ, SLR hip 4way, gait training on uneven surfaces, gait training/stair training, transfers training TEACH PATIENT/CAREGIVER: * strategies to minimize fatigue and exhaustion including work simplification energy conservation lifestyle changes diet, related medication(s) purpose, schedule, Sit to Stand - 06. Independent, Chair to Bed to Chair - 06. Independent, Car Transfer - 06. Independent, Walk 10 Feet - 04. Supervision or touching assistance, Walk 50 ft with 2 Turns - 04. Supervision or touching assistance, Walk 150 Feet - 04. Supervision or touching assistance, 4 Steps - 04. Supervision or touching assistance, 12 Steps - 04. Supervision or touching assistance	PATIENT-STATED GOAL: To walk between rooms and out in community for appointments and errands with better stability, balance and control; To walk between rooms of home and out in community for appointments and errands with better stability, balance and control GOALS Chair to Bed to Chair - 06. Independent patient/caregiver recalls * strategies to minimize fatigue and exhaustion including work simplification * energy conservation * lifestyle changes * diet * recalls related medication(s) purpose, schedule Sit to Stand - 06. Independent Car Transfer - 06. Independent Walk 10 Feet - 04. Supervision or touching assistance Walk 50 ft with 2 Turns - 04. Supervision or touching assistance Walk 150 Feet - 04. Supervision or touching assistance 4 Steps - 04. Supervision or touching assistance 12 Steps - 04. Supervision or touching assistance

OT Careplans	OT Goals
OT WK1: 1 (03/16/26-03/21/26) ,WK2: 1 (03/22/26-03/28/26) ,WK3: 1 (03/29/26-04/04/26) ,WK4: 1 (04/05/26-04/11/26) ,WK5: 1 (04/12/26-04/18/26) PROBLEMS IDENTIFIED ON ASSESSMENT: Pain Effect on Sleep, Pain Interference with Therapy activities, M1400 - Dyspnea, GG0130B1 - Oral Hygiene, GG0130F1 - Upper Body Dressing, GG0130G1 - Lower Body Dressing, GG0130H1 - Don/Doff Footwear, GG0130E1 - Shower/Bathe Self, GG0130C1 - Toileting Hygiene, GG0130A1 - Eating PROCEDURES: equipment training, work simplification/energy conservation TEACH PATIENT/CAREGIVER: * lifestyle modifications to manage respiratory condition including diet changes and regular exercise strategies to control shortness of breath home remedies to keep lungs healthy, related medicatio, * 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	PATIENT-STATED GOAL: I want to get stronger and get back to feeling like myself and improve the strength in my hands. GOALS Chair to Bed to Chair - 06. Independent Oral Hygiene - 06. Independent Shower/Bathe Self - 06. Independent Lower Body Dressing - 06. Independent Don/Doff Footwear - 06. Independent patient/caregiver recalls

Signature of Physician:	Date

Optional Name/Signature of Nurse/Therapist:	Date
Electronically Signed by Messick, Charles RN	03/12/2026

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relaxation skills and diversional activities, related medication(s) purpose, schedule, Sit to Stand - 06. Independent, Chair to Bed to Chair - 06. Independent, Oral Hygiene - 06. Independent, Toileting Hygiene - 06. Independent, Shower/Bathe Self - 06. Independent, Lower Body Dressing - 06. Independent, Don/Doff Footwear - 06. Independent, Eating - 06. Independent, Upper Body Dressing - 06. Independent

* 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 relaxation skills and diversional activities
* recalls related medication(s) purpose, schedule

Toileting Hygiene - 06. Independent

Eating - 06. Independent

Upper Body Dressing - 06. Independent

Sit to Stand - 06. Independent

patient/caregiver recalls
* lifestyle modifications to manage respiratory condition including
* diet changes and regular exercise
* strategies to control shortness of breath
* home remedies to keep lungs healthy
* recalls related medicatio

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	PAGE 3 of 3
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