Medical Update for Tu Tran DOB: 03/21/1971

Date Order Created: 04/03/2026

Order ID: 1150/17633

Agency Assigned Id: 23053

Certification Period: 02/27/2026 to 04/27/2026

HomeCentris Healthcare LLC MD217058
10 Crossroads Drive, Suite 102
Owings Mills, MD 21117-8284
PHONE 410-321-8448 FAX

Orders:
Physician Face-to-Face Date: 02/20/2026
Clinical Condition Requiring Home Care per Certifying Physician: SN disease management, PR eval and treat, OT eval and treat DX: Malignant neoplasm of prostate
Homebound Status per Certifying Physician: patient requires another person or medical equipment such as crutches, a walker, or a wheelchair to leave home
1 - SOC - SN Notes: soc
PT Eval Notes:
OT Eval Notes:
OT FU Eval Notes:
PT FU Eval Notes:
3 - ROC - PT Notes:
PT Eval Notes:
*3 - ROC - PT Notes: Orders for Care **

Christelle Nong Libend
1701 Twin Springs Road

1701 Twin Springs Road, MD 21227
Tele: FAX:

Physician Signature_____ Date _____

Staff Signature: Electronically Signed by Messick, Charles Date 04/06/2026