Medical Update for Gabriel Pangilinan DOB: 07/19/1985

Date Order Created: 04/07/2026

Order ID: 1184/484

Agency Assigned Id: 390

Certification Period: 04/07/2026 to 06/05/2026

Devotion Home Health Care, LLC MED8891
11201 N Tatum Blvd, Suite 300
Phoenix, AZ 85028-6039
PHONE 480-415-4423 FAX

Orders:
wound care supply order for wet to dry left bicep wound 3 times weekly and PRN:
ABD pads 12-15 monthly
ACE wrap 4 monthly
Lg bottle normal saline 1-2 bottles monthly
4x4 sterile gauze 4 pieces each dressing - 60 monthly
gauze loaf for cleaning
tape
Medium nitrile gloves - 1 box monthly
wound spray - 1 bottle monthly

Jolyon Schilling
5240 E Knight Dr

5240 E Knight Dr, AZ 85712
Tele:520-320-5665 FAX: 15203201377

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

Staff Signature: Electronically Signed by DELGADO, MELISSA Date 04/07/2026