

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

Date Order Created: 04/09/2026

Order ID: 1184/489

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 orders for left bicep wound with measurements of 14cmLx4cmWx3cmD
Cleanse area with wound cleanser and gauze. Pack wound with 4 pieces of 4x4 sterile gauze
moistened with NS. Cover with ABD pad or sheets of dry gauze. Wrap with elastic wrap. Change
dressing 3 times a week and as needed for soiling or dislodgement.*

*Jolyon Schilling
5240 E Knight Dr*

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

Physician Signature_____ Date _____

Staff Signature: Electronically Signed by DELGADO, MELISSA Date 04/09/2026