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Home Health Certification and Plan of Care				Order ID: 1150/18393		
1. Patient s HI claim No.		2. Start Of Care Date	3. Certification Period		4. Medical Record No.	5. Provider No.
221286018		04/29/2026	From: 04/29/2026 To: 06/27/2026		20835	217058
6. Patient's Name and Address			7. Provider's Name, Address and Telephone Number			
Rona Howe 27 Helicopter Dr, MIDDLE RIVER, MD 21220- 443-510-2178			HomeCentris Healthcare LLC 10 Crossroads Drive, Suite 102 Owings Mills, MD 21117-8284 410-321-8448 1487113239			
Clinical Condition Requiring Homecare: <p class="MsoNoSpacing">The patient is a 79-year-old female with a past medical history significant for hypertension, type 2 diabetes mellitus, COPD, chronic kidney disease, congestive heart failure, coronary artery disease, prior CVA, renal transplant, ataxia, GERD, obstructive sleep apnea, and skin cancer who was recently hospitalized following a mechanical fall with head strike. Although CT imaging was negative, she subsequently developed persistent vertigo, new-onset slurred speech, left facial droop, left-sided tinnitus, and involuntary extremity movements. She was treated for suspected benign paroxysmal positional vertigo with the Epley maneuver without significant improvement. The patient is currently alert and oriented x4, denies pain, nausea, vomiting, or headache, and remains on supplemental oxygen via nasal cannula at home. Assessment revealed clear lungs, intact skin, no lower extremity edema, and slow ambulation with furniture support indoors and cane use outdoors. Functional evaluations demonstrated impaired balance, ataxic gait, decreased endurance, reduced bilateral upper extremity strength, and impaired activity tolerance, with a Tinetti score of 13/28 and TUG score of 24.2 seconds; oxygen saturation decreased to 89% with ambulation. She currently requires assistance with IADLs and demonstrates decline from her prior level of function, though she previously performed self-care, transfers, and ambulation independently. Skilled nursing, physical therapy, and occupational therapy services are recommended to address gait training, balance, strengthening, endurance, transfer training, stair negotiation, oxygen safety, fall prevention, medication compliance, energy conservation, and caregiver education to improve safety and functional independence within the home.<o:p></o:p></p> <p class="MsoNoSpacing"><o:p> </o:p></p> <p class="MsoNoSpacing">Date of Order<o:p></o:p></p> <p class="MsoNoSpacing">04/29/2026 Order<o:p></o:p></p> <p class="MsoNoSpacing">Physician Face-to-Face Date: 04/24/2026 Clinical Condition Requiring Home Care per Certifying Physician: SN-disease management PT-eval & treat OT-eval & treat. dx: Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease Homebound Status per Certifying Physician: patient requires another person or medical equipment such as crutches, a walker, or a wheelchair to leave home<o:p></o:p></p> <p class="MsoNoSpacing"> 1 - SOC - SN Notes:<o:p></o:p></p> <p class="MsoNoSpacing">PT Eval Notes: OT Eval Notes:<o:p></o:p></p> <p class="MsoNoSpacing">Physician: Emmanuel-Allen, Laura</p>						
SN Careplans			SN Goals			
SN WK1: 1 (04/29/26-05/02/26) ,WK2: 1 (05/03/26-05/09/26) ,WK3: 1 (05/10/26-05/16/26) ,WK4: 1 (05/17/26-05/23/26) ,WK5: 1 (05/24/26-05/30/26)			PATIENT-STATED GOAL: To breathe with ease without supplemental oxygen			
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			GOALS			
CAREGIVER: 1. Non-agency caregiver(s) currently provide assistance			patient/caregiver recalls			
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			* lifestyle modifications to manage respiratory condition including			
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; Assess the patient's incision on post op day 7 and the nurse or physical therapist will remove aquacel dressing leaving OTA; if incision is draining educate pt/pcg on cleaning with normal saline and covering with dry gauze daily and as needed.			* diet changes and regular exercise			
Assess/Instruct Pt/Pcg: Ice to ____ x 20 minutes each hour while awake. If cold machine ordered apply 20 minutes on and 20 minutes off for 3-4 times a day.			* strategies to control shortness of breath			
Assess/Instruct all body systems/vital signs/complications, Blood Pressure; systolic is greater than 169 mm Hg or less than 90 mm Hg; diastolic is greater than 100 mm Hg or less than 55 mm Hg, Clinician to assess comorbidities and report changes in condition to the patient's physician, Pain Rating is greater than 6 on 0-10 scale, Pulse is greater than 110 or less than 50, Respirations are greater than 22 or less than 8, SPO2: is less than 90 % at rest /with exertion, Temperature is greater than 100.5 F or less than 95.0 F, Pain Rating is greater than 6 on 0-10 scale			* home remedies to keep lungs healthy			
Implement Fall Prevention Program, Instruct and educate the patient/PCG on wearing compression stockings for the next 4 weeks per discharge instructions.			* recalls related medication(s) purpose, schedule			
Instruct the pt/PCG on using the incentive spirometer 10 times every 2 hour while awake.			patient/caregiver recalls			
Provide education content at patient's level of health literacy.			* strategies to minimize fatigue and exhaustion including work simplification			
Assess/Instruct Pt/Pcg: Safety measures to prevent injury.			* energy conservation			
Assess: Musculoskeletal status.			* lifestyle changes			
Teach Pt/Pcg to maintain appropriate wt bearing status as ordered by MD, total joint replacement precautions as applicable, Safe stair climbing skills, Safe, effective use of adaptive/assist device			* diet			
Assess/Instruct Pt/Pcg: Pain management measures; assess pain level, pain medication, rest, body alignment, ROM, meditation, massage.			* recalls related medication(s) purpose, schedule			
Pt/Pcg educated in pain management techniques including positioning and relaxation techniques			patient self-administers medications as prescribed			
Instruct Pt/Pcg: Medication actions, uses, frequency, dose, side effects, interactions of all new/change meds, Provide medication education.,			* recalls related medication(s) purpose, schedule			
Assess/Instruct Pt/Pcg: Safety measures to prevent injury, Therapeutic Exercise, Transfer Training						
Monitor surgical wound for s/s of infection, educate on s/s of concern and infection prevention to promote wound healing.						
; 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:Durable power of attorney for health care/Medical power of attorney						
PROBLEMS IDENTIFIED ON ASSESSMENT: M2020 - Oral Med Management, abnormal blood pressure, M1033 - Exhaustion, M1400 - Dyspnea, abnormal BS < 70/140 > mg/dL, limited strength, balance deficit						
PROCEDURES: cough/deep breathing exercises, incentive spirometer, glucose testing via monitor						
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 medication(s) purpose, schedule, * strategies to minimize fatigue and exhaustion including work simplification energy conservation lifestyle changes diet, related medication(s) purpose, schedule, patient self-administers medications as prescribed, related medication(s) purpose, schedule						
Signature of Physician:			Date			
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Optional Name/Signature of Nurse/Therapist:			Date			
Electronically Signed by Messick, Charles RN			04/29/2026			

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PT Careplans PT WK1: 1 (04/29/26-05/02/26) ,WK2: 2 (05/03/26-05/09/26) ,WK3: 1 (05/10/26-05/16/26) ,WK4: 1 (05/17/26-05/23/26) ,WK5: 1 (05/24/26-05/30/26) ,WK6: 1 (05/31/26-06/06/26) ,WK7: 1 (06/07/26-06/13/26) ,WK8: 1 (06/14/26-06/20/26) PROBLEMS IDENTIFIED ON ASSESSMENT: Pain Effect on Sleep, Pain Interference with Therapy activities, Pain Interference with ADLs, M1400 - Dyspnea, GG0170D1 - Sit to Stand, GG0170F1 - Toilet Transfer, GG0170G1 - Car Transfer, GG0170I1 - Walk 10 Feet, GG0170J1 - Walk 50 ft with 2 Turns, GG0170K1 - Walk 150 Feet, GG0170L1 - Walk 10 ft on Uneven Surface, GG0170M1 - 1 - Step (curb), GG0170N1 - 4 Steps, GG0170O1 - 12 Steps, GG0170P1 - Picking Up Object, GG0170E1 - Chair to Bed to Chair PROCEDURES: Medication management : Review medications with patient, cough/deep breathing exercises, incentive spirometer, home exercise program: Hip abduction, hip flexion, heelraises toeraoses, hamstring curls, laq, reviewed per breathing techniques, equipment training, work simplification/energy conservation, gait training on uneven surfaces, gait training/stair training, transfers training 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 medication(s) purpose, schedule, * 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, related medication(s) purpose, schedule, Chair to Bed to Chair - 06. Independent, Sit to Stand - 06. Independent, Toilet Transfer - 06. Independent, Car Transfer - 06. Independent, Walk 10 Feet - 05. Setup or clean-up assistance, Walk 50 ft with 2 Turns - 05. Setup or clean-up assistance, Walk 150 Feet - 05. Setup or clean-up assistance, Walk 10 ft on Uneven Surface - 05. Setup or clean-up assistance, 1 - Step (curb) - 05. Setup or clean-up assistance, 4 Steps - 05. Setup or clean-up assistance, Picking Up Object - 05. Setup or clean-up assistance, Oral Hygiene - 06. Independent, Toileting Hygiene - 06. Independent, Shower/Bathe Self - 05. Setup or clean-up assistance, Lower Body Dressing - 06. Independent, Don/Doff Footwear - 06. Independent, Upper Body Dressing - 06. Independent		PT Goals PATIENT-STATED GOAL: To be studier, walk without losing balance and improve my strength.;To be steadier, walk without losing balance and improve my strength. GOALS Chair to Bed to Chair - 06. Independent Toilet Transfer - 06. Independent Walk 10 ft on Uneven Surface - 05. Setup or clean-up assistance 1 - Step (curb) - 05. Setup or clean-up assistance Shower/Bathe Self - 05. Setup or clean-up assistance 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 medication(s) purpose, schedule patient/caregiver recalls * 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 Sit to Stand - 06. Independent Car Transfer - 06. Independent Walk 10 Feet - 05. Setup or clean-up assistance Walk 50 ft with 2 Turns - 05. Setup or clean-up assistance Walk 150 Feet - 05. Setup or clean-up assistance 4 Steps - 05. Setup or clean-up assistance Picking Up Object - 05. Setup or clean-up assistance Oral Hygiene - 06. Independent Toileting Hygiene - 06. Independent Lower Body Dressing - 06. Independent Don/Doff Footwear - 06. Independent Upper Body Dressing - 06. Independent		
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		PAGE 3 of 3		
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