

Medical Update for Shirley Smithers DOB: 05/11/1943

Date Order Created: 06/04/2026

Order ID: 1150/19024

Agency Assigned Id: 25351

Certification Period: 05/15/2026 to 07/13/2026

*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: 04/30/2026

Clinical Condition Requiring Home Care per Certifying Physician: sn-disease management pt-eval & treat ot-eval & treat dx: Type 2 diabetes mellitus with diabetic 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

1 - SOC - SN Notes: soc

PT Eval Notes:

OT Eval Notes:

OT FU Eval Notes:

PT FU Eval Notes:

9 - Discharge from agency Notes:

*Mary Spencer
8061 Springfield Rd*

*8061 Springfield Rd, MD 20769
Tele:4343909561 FAX: 18339082239*

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

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