

Home Health Certification and Plan of Care				Order ID: 1150/17871	
1. Patient s HI claim No.		2. Start Of Care Date		3. Certification Period	
5JK1V75RA37		10/09/2025		From: 04/07/2026 To: 06/05/2026	
				5997	
				217058	
6. Patient's Name and Address			7. Provider's Name, Address and Telephone Number		
Donald Morton 9329 Lyonswood Dr, OWINGS MILLS, MD 21117- 410-363-0443			HomeCentris Healthcare LLC 10 Crossroads Drive, Suite 102 Owings Mills, MD 21117-8284 410-321-8448 1487113239		
8. DOB			12/04/1948		
9.Sex			Male		
11. ICD			Principal Diagnosis		
K26.9			Duodenal ulcer unsp as acute or chronic w/o hemor or perf		
			Date		
			10/09/25		
13. ICD			Other Pertinent Diagnoses		
D51.9			Vitamin B12 deficiency anemia unspecified		
K59.00			Constipation unspecified		
E11.65			Type 2 diabetes mellitus with hyperglycemia		
N40.1			Benign prostatic hyperplasia with lower urinary tract symp		
N13.8			Other obstructive and reflux uropathy		
F20.9			Schizophrenia unspecified		
I10.			Essential (primary) hypertension		
E78.5			Hyperlipidemia unspecified		
G47.30			Sleep apnea unspecified		
E55.9			Vitamin D deficiency unspecified		
R26.89			Other abnormalities of gait and mobility		
Z86.73			Prsnl hx of TIA (TIA) and cereb infrc w/o resid deficits		
Z87.440			Personal history of urinary (tract) infections		
Z87.891			Personal history of nicotine dependence		
Z79.82			Long term (current) use of aspirin		
Z79.84			Long term (current) use of oral hypoglycemic drugs		
			10. Medications: Dose/Frequency/Route (N)ew (C)hanged		
			Vit D - Alpha-Tocopherol Acetate: Ascorbic Acid: Biotin: Cholecalciferol: Cyanocobalamin: Dexpanthenol: Folic Acid: Niacinamide: Pyridox 25 MCG (1000 UT) 1 capsule by mouth once a day		
			Docusate Sodium - Docusate Sodium 100 MG 1 capsule by mouth once a day		
			Aquaphor Advanced Apply to B/L LEGS AND FEET topical once a day Apply to B/L LEGS AND FEET topically every day and evening shift for DRY SKIN WASH B/L LOWER EXTREMITES, PAT DRY AND APPLY AQUAPHOR		
			Olanzapine - Olanzapine 2.5 mg 1 tablet by mouth once a day For schizophrenia		
			Carvedilol - Carvedilol 25 mg 1 tablet by mouth twice a day For HTN		
			Benztropine Mesylate - Benztropine Mesylate 0.5 mg 1 tablet by mouth at bedtime For schizophrenia		
			Finasteride - Finasteride 5 mg 1 tablet by mouth once a day Prostate		
			Amlodipine Besylate - Amlodipine Besylate eq 10 mg base 1 tablet by mouth once a day HTN		
			Ketotifen Fumarate - Ketotifen Fumarate 1 drop drops twice a day Instill 1 drop in both eyes two times a day for dry eyes		
			Glipizide - Glipizide 5 mg 1 tablet by mouth twice a day DM		
			Metformin - Metformin Hydrochloride 1000mg by mouth twice a day DM		
			Cardura - Doxazosin Mesylate eq 4 mg base by mouth once a day For Prostate and HTN		
			Guaifenesin - Guaifenesin 600 MG 2 tablet by mouth twice a day For cough as needed		
			Albuterol Sulfate - Albuterol Sulfate 108 (90 Base) MCG/ACT 2 puff inhalant every 8 hours As needed for breathing		
			Tylenol - Acetaminophen 650 mg 325 MG 2 tablet by mouth every 4 hours As needed for pain		
			Cyclobenzaprine - Cyclobenzaprine Hydrochloride 010 mg tablet by mouth three times a day As needed for muscle spasms		
			Glycerin Suppository - Glycerin Suppository 1 suppository rectal once a day Prn as needed for constipation		
14. DME and Supplies:			15. Safety Measures:		
wound care supplies, wheelchair, walker, sliding board, rolling walker, hospital bed			activity supervision, diabetic precautions, supervision at all times, standard precautions, walker precautions, wheelchair precautions, , medical alert/lifeline, fall precautions, hand rails, bathroom safety, ambulates with device		
16. Nutrition:			17. Allergies:		
regular,			lisinopril		
18.A. Functional Limitations			18.B. Activities Permitted		
Ambulation, Endurance, , Contracture			Walker, Wheelchair, , Transfer bed/Chair		
19. Mental & Pyschosocial Status:			COGNITION: 3. Unable to get to and from the toilet or bedside commode but is able to use a bedpan/urinal independently, ANXIETY: 0. Never, SOCIAL ISOLATION: , BEHAVIORAL ISSUES: , HISTORY OF DEPRESSION:		
20. Prognosis:			fair		
22. A Rehabilitation Potential:			22.B.Discharge Plans		
SELF-CARE: , MOBILITY:			family/caregiver will be responsible for managing treatment		
Homebound status:			Due to diagnosis of Duodenal ulcer, unspecified as acute or chronic, without hemorrhage or perforation, the patient is experiencing decreased endurance and mobility, increasing the likelihood of falls. To safely leave their home, the patient needs assistance from another person and an assistive mobility device.		
Clinical Condition Requiring Homecare:			The patient was asleep upon arrival and is alert and oriented 3. Skin is intact except for the right knee and ankle. He uses a wheelchair for mobility and has a history of diabetes, knee contractures, and constipation. A physical therapy evaluation was completed. The patient previously received skilled PT services focused on improving range of motion and strengthening, with emphasis on hamstring stretching to promote knee extension in preparation for standing. He has been trained in the safe use of a sliding board and is now able to transfer from bed to wheelchair with supervision. He would benefit from continued skilled PT to further increase strength, improve balance, and enhance safety and independence with functional mobility to return to his prior level of function. The patient is a 77-year-old man who would also benefit from ongoing occupational therapy to address activities of daily living (ADLs), transfers, and bilateral upper extremity strength. He is limited by bilateral knee contractures, requires maximal assistance for squat-to-stand transfers, minimal assistance for sliding board transfers, is dependent for lower body dressing, and requires moderate to minimal assistance for upper body dressing. Date of Order 04/06/2026 Orders Physician Face-to-Face Date: 09/30/2025 Clinical Condition Requiring Home Care per Certifying Physician: SN disease management, PR eval and treat, OT eval and treat DX: Duodenal ulcer, unspecified as acute or chronic, without hemorrhage or perforation Homebound Status per Certifying Physician: patient requires another person or medical equipment such as crutches, a walker, or a wheelchair to leave home 4 - Recertification Notes: The reason for recert is to manage wound on right knee. (It is a slow healing wound) also monitoring bowel status. And ensuring continuity of bowel movements with the medication flexeril 3x day(it can be constipating) as well as monitoring glucose. Physician Weiner, Shoshana		
SN Careplans			SN Goals		
23. Signature and Date of Verbal SOC Where Applicable:			25. Date HHA Received Signed POT		
Electronically Signed by Messick, Charles RN on 04/06/2026					
24. Physician's Name and Address			26. I certify/recertify that this patient is confined to his/her home and needs intermittent skilled nursing care, physical therapy and/or speech therapy or continues to need occupational therapy. The patient is under my care, and I have authorized the services on this plan of care and will periodically review the plan.		
Shoshana Weiner 1447 York Rd Lutherville, MD 21093 PHONE: 4106057000 FAX: 14106057912 NPI: 1003133299			F2F date : 09/30/2025		
27. Attending Physician's Signature and Date Signed			28. Anyone who misrepresents, falsifies, or conceals essential information required for payment of Federal funds may be subject to fine, imprisonment, or civil penalty under applicable Federal laws.		
05/20/2026 Date of physician last face-to-face			PAGE 1 of 3		

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SN WK3: 1 (04/19/26-04/25/26) ,WK5: 1 (05/03/26-05/09/26) ,WK7: 1 (05/17/26-05/23/26) ,WK9: 1 (05/31/26-06/05/26) 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 CAREGIVER: 1. Non-agency caregiver(s) currently provide assistance HOSPITALIZATION RISKS: 7. Currently taking 5 or more medications, 9. Other risk(s) not listed in 1- 8 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; 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:POLST (Physician Orders for Life-Sustaining Treatment) PROBLEMS IDENTIFIED ON ASSESSMENT: abnormal blood pressure, abnormal BS < 70/140 > mg/dL, constipation, decreased urine output, muscle weakness, balance deficit, tooth pain/decay/sensitivity, discolored patches of skin, bruising/dyscoloration, #1 - Laceration - Anterior Right Below Knee - leave open to air id drainage cover with dry gauze PROCEDURES: physician-ordered wound care: #1 - Laceration - Anterior Right Below Knee - leave open to air id drainage cover with dry gauze, MEDICATION REVIEW: Medications reviews with patient and caregiver , Ensuregood and proper bowel movements: Ask about color and frequency , Leg contractures: Assess the amount patient can bend and straighten legs at the knee. Patient requires reminders to stretch the legs out and keep legs straight. It was a duplicate, Leg contractures: Assess the amount patient can bend and straighten legs at the knee. Patient requires reminders to stretch the legs out and keep legs straight. , physician-ordered wound care: Laceration below right knee leave open to air if drainage cover with dry gauze, physician-ordered wound care: To left ankle wound- cleanse with saline, apply Foam dressing. Change as needed. , glucose testing via monitor, monitor intake & output: Ensure frequency is leveling out, color and odor is within normal limits, teach/coordinate/arrange medication packaging and/or administration: Caregiver administers medications 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, * 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 medicatio, * lifestyle modifications to manage peripheral vascular condition including how to apply compression stockings physical exercise plan diet, related medication(s) purpose, schedule, * low cholesterol dietary guidelines, related medication(s) purpose, schedule, * management of mental health condition including joining a peer group maintaining regular contact with mental health professional avoiding known stressors controlling impulses, related medication(s) purpose, schedule, * how to incorporate lifestyle modifications to optimize renal condition including renal-specific diet exercise monitoring of blood pressure blood sugar home, related medication(s) purpose, schedule remedies, * how to achieve wound healing including cleaning and dressing wound position changes skin care diet modification record wound measurements, related medication(s) purpose, schedule, * how to manage complications of immobility including skin care strength, balance dexterity and range-of-motion therapeutic exercises promotion of peripheral circulation fluid and diet intake to promote healing and prevent constipation, * diabetic medication management blood sugar testing diabetic foot care exercise diabetic diet, related medication(s) purpose, schedule, * dietary guidelines lifestyle modifications to manage gastric condition, related medication(s) purpose, schedule, * lifestyle modifications low-residue dietary guidelines alternative medicine options for ulcerative colitis, related medication(s) purpose, schedule, * prevention including increase fluid intake increase Vitamin C intake to promote acidic bladder environment (cranberry juice) perineal hygiene, related medication(s) purpose, schedule, * how to incorporate lifestyle modifications to optimize genito-urinary condition including diet exercise home remedies, related medication(s) purpose, schedule, * how to keep home safe for patient with vision loss including eliminating hazards enhancing lighting using mechanical aids, patient self-administers medications as prescribed, related medication(s) purpose, schedule, patient is adequately supervised, caregiver administers and/or packages medications appropriately, caregiver performs medical/rehabilitation treatments with adequate competence, MEDICATION REVIEW	PATIENT-STATED GOAL: Bed to Wheelchair GOALS MEDICATION REVIEW 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 caregiver administers and/or packages medications appropriately patient/caregiver recalls * how to keep home safe for patient with vision loss including eliminating hazards * enhancing lighting * using mechanical aids patient/caregiver recalls * prevention including increase fluid intake * increase Vitamin C intake to promote acidic bladder environment (cranberry juice) * perineal hygiene * recalls related medication(s) purpose, schedule patient/caregiver recalls * how to manage complications of immobility including * skin care * strength, balance * dexterity and range-of-motion therapeutic exercises * promotion of peripheral circulation * fluid and diet intake to promote healing and prevent constipation patient/caregiver recalls * how to achieve wound healing including cleaning and dressing wound * position changes * skin care * diet modification * record wound measurements * recalls related medication(s) purpose, schedule patient/caregiver recalls * how to incorporate lifestyle modifications to optimize genito-urinary condition including diet * exercise * home remedies * recalls related medication(s) purpose, schedule patient/caregiver recalls * diabetic medication management * blood sugar testing * diabetic foot care * exercise * diabetic diet * recalls related medication(s) purpose, schedule patient/caregiver recalls * lifestyle modifications to manage peripheral vascular condition including how to apply compression stockings * physical exercise plan * diet * recalls related medication(s) purpose, schedule patient/caregiver recalls * management of mental health condition including joining a peer group * maintaining regular contact with mental health professional * avoiding known stressors * controlling impulses * recalls related medication(s) purpose, schedule patient/caregiver recalls * lifestyle modifications * low-residue dietary guidelines * alternative medicine options for ulcerative colitis * recalls related medication(s) purpose, schedule patient is adequately supervised patient self-administers medications as prescribed * recalls related medication(s) purpose, schedule
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Signature of Physician:	Date
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Optional Name/Signature of Nurse/Therapist:	Date
Electronically Signed by Messick, Charles RN	04/06/2026

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	patient/caregiver recalls * how to incorporate lifestyle modifications to optimize renal condition including renal-specific diet * exercise * monitoring of blood pressure * blood sugar * home * recalls related medication(s) purpose, schedule remedies patient/caregiver recalls * low cholesterol dietary guidelines * recalls related medication(s) purpose, schedule 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 patient/caregiver recalls * dietary guidelines * lifestyle modifications to manage gastric condition * recalls related medication(s) purpose, schedule caregiver performs medical/rehabilitation treatments with adequate competence
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OT Careplans OT WK1: 1 (04/07/26-04/11/26) PROCEDURES: Therapeutic exercise, cough/deep breathing exercises: Goal met , incentive spirometer: Does not use a spirometer , equipment training, work simplification/energy conservation, 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 relaxatio, Oral Hygiene - 06. Independent, Toileting Hygiene - 05. Setup or clean-up assistance, Eating - 06. Independent	OT Goals PATIENT-STATED GOAL: Sit up more and do activities GOALS Oral Hygiene - 06. Independent Eating - 06. Independent 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 Toileting Hygiene - 05. Setup or clean-up assistance 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 relaxatio
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Signature of Physician:	Date
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Optional Name/Signature of Nurse/Therapist:	Date
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