Medical Update for Tyrone Allen DOB: 01/05/1989

Date Order Created: 06/10/2026

Order ID: 1150/19274

Agency Assigned Id: 25465

Certification Period: 05/01/2026 to 06/29/2026

HomeCentris Healthcare LLC 217058
10 Crossroads Drive, Suite 102
Owings Mills, MD 21117-8284
PHONE 410-321-8448 FAX

Orders:
06/08/2026 Medications: Amoxicillin And Clavulanate Potassium - Amoxicillin: Clavulanate Potassium 875 mg;eq 125 mg base 875/125mg by mouth twice a day Infection x5 days

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Kenetra Hix
3510 Brenbrook Dr

3510 Brenbrook Dr, 0 21133
Tele:4107375000 FAX: 899290091

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

Staff Signature: Electronically Signed by Messick, Charles Date 06/10/2026