

Medical Update for Tracey Cooper DOB: 04/26/1975

Date Order Created: 06/19/2026

Order ID: 1150/19802

Agency Assigned Id: 20602

Certification Period: 06/01/2026 to 07/30/2026

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

Orders:

*06/18/2026 Medications: Abilify - Aripiprazole 2 mg 1 tablet by mouth once a day
Diazepam - Diazepam 10 mg 10 MG , Take 1 tablet by mouth as necessary PRN
Xarelto - Rivaroxaban 1 tablet by mouth in the morning 20 mg tablet
Pregabalin - Pregabalin 1 tablet by mouth twice a day 150 mg tablet*

*Iddrisu Tia
108 Marburth Ave*

*108 Marburth Ave, MD 21286
Tele:410-847-3000 FAX:*

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

Staff Signature: Electronically Signed by Messick, Charles Date 06/22/2026