

Medical Update for Bruce Moore DOB: 03/24/1944

Date Order Created: 06/30/2026

Order ID: 1150/20049

Agency Assigned Id: 26322

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:

*06/29/2026 Medications: Furosemide - Furosemide 20 mg / 1 Tablet by mouth once a day for CHF,
only on sun, Tues, Thurs and sat*

*Esther Cahn
515 Fairmount Ave*

*515 Fairmount Ave, MD 21286
Tele:410-296-5300 FAX: 14105842251*

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

Staff Signature: Electronically Signed by Messick, Charles Date 07/01/2026