

Medical Update for Jonathan Zacek DOB: 05/28/1973

Date Order Created: 07/27/2026

Order ID: 1184/641

Agency Assigned Id: 1371

Certification Period: 06/21/2026 to 08/19/2026

*Devotion Home Health Care, LLC MED8891
11201 N Tatum Blvd, Suite 300
Phoenix, AZ 85028-6039
PHONE 480-415-4423 FAX*

Orders:

Verbal order to send referral to wound specialist for evaluation and potential change in wound care orders.

Referral for evaluation of chronic wounds on bilateral lower legs/feet to Tender Wound Care Mobile Wound Care Specialists, Julie Peters, NP Fax: 818-538-3380, Office 877-205-5541

*SCOTT MALING
1520 S DOBSON RD SUITE 312*

*1520 S DOBSON RD SUITE 312, AZ 85202
Tele:(480) 844-8218 FAX: 14808449950*

Physician Signature_____ Date _____

Staff Signature: Electronically Signed by DELGADO, MELISSA Date 07/27/2026