Medical Update for PAUL KOSLAKIEWICZ DOB: 09/11/1960

Date Order Created: 07/31/2026

Order ID: 1195/376

Agency Assigned Id: 668

Certification Period: 07/20/2026 to 09/17/2026

Evergreen Home Health IQ00000001285673
403 W Main Street Suite A1
Gaylord, MI 49735-1887
PHONE 989-214-1114 FAX

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Orders:
PT to eval and treat
OT to eval and treat

_____

DAVID HUNTER
1910 EAST MILLER ROAD

1910 EAST MILLER ROAD , MI 48621
Tele:(989) 848-5644 FAX: 19893184606

Physician Signature_____ Date _____

Staff Signature: Electronically Signed by STRICKLER, SYDNEY Date 07/31/2026