

Medical Update for Virginia Miller DOB: 09/13/1932

Date Order Created: 08/04/2026

Order ID: 1195/456

Agency Assigned Id: 466-1

Certification Period: 07/25/2026 to 09/22/2026

Evergreen Home Health 239350
403 W Main Street Suite A1
Gaylord, MI 49735-1887
PHONE 989-214-1114 FAX

Orders:

Authorization changes of SN skill Total Visits: 10 and Visit Freq: CUSTOM

07/29/2026 procedure: cough/deep breathing exercises, Notes: , incentive spirometer, Notes: , bladder training, Notes: , coordinate/arrange long-term socialization activities, Notes: , physician-ordered wound care, Notes: Remove old dressing, clean wound, xeroform over wound bed, abd over xeroform, wrap with kerlix.,

07/29/2026 goal: patient/caregiver recalls

** how to maintain a diary to monitor effective and non-effective pain relief including documenting time of pain, rating, precipitating events, medications, treatments, and what works best to relieve pain*

** teach relaxation skills and diversional activities*

** recalls related medication(s) purpose, schedule, Target Date: 09/22/2026,*

NATHAN SAILOR
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Physician Signature _____ Date _____

Staff Signature: Electronically Signed by LUBELAN, SAMANTHA Date 08/04/2026