

## Medical Update for William Boyd DOB: 12/03/1947

**Date Order Created:** 07/24/2026

**Order ID:** 1195/243

**Agency Assigned Id:** 823

**Certification Period:** 07/16/2026 to 09/13/2026

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

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### Orders:

Authorization changes of OT skill Total Visits: 1 and Visit Freq: CUSTOM  
Authorization changes of PT skill Total Visits: 10 and Visit Freq: CUSTOM

07/24/2026 procedure: coordinate/arrange caregiver support to prevent caregiver physical, emotional and mental exhaustion, Notes: , home exercise program, Notes: , equipment training, Notes: , work simplification/energy conservation, Notes: , gait training/stair training, Notes: , transfers training, Notes: ,

07/24/2026 goal: patient self-administers medications as prescribed

\* recalls related medication(s) purpose, schedule, Target Date: 09/13/2026, Sit to Stand - 05. Setup or clean-up assistance, Target Date: 09/13/2026, Walk 10 Feet - 04. Supervision or touching assistance, Target Date: 09/13/2026, Walk 50 ft with 2 Turns - 04. Supervision or touching assistance, Target Date: 09/13/2026, Walk 150 Feet - 04. Supervision or touching assistance, Target Date: 09/13/2026, 4 Steps - 04. Supervision or touching assistance, Target Date: 09/13/2026, 12 Steps - 04. Supervision or touching assistance, Target Date: 09/13/2026, Picking Up Object - 04. Supervision or touching assistance, Target Date: 09/13/2026, Car Transfer - 05. Setup or clean-up assistance, Target Date: 09/13/2026, Lower Body Dressing - 05. Setup or clean-up assistance, Target Date: 09/13/2026, Don/Doff Footwear - 05. Setup or clean-up assistance, Target Date: 09/13/2026,

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ROBYN YATES  
1105 SIXTH ST

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Tele:(989) 497-2500 FAX: 19893214118

Physician Signature \_\_\_\_\_ Date \_\_\_\_\_

Staff Signature: Electronically Signed by HILL, KAITLIN Date 08/04/2026