Medical Update for Charles Smith DOB: 12/08/1946

Date Order Created: 08/04/2026

Order ID: 1195/412

Agency Assigned Id: 2697

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

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: 9 and Visit Freq: 1w1

08/04/2026 Medications: ELIQUIS 5 MG mg Oral BID
ASPIRIN 81 MG mg Oral Daily
ALPHAGAN 1 drop Both Eyes TID
COSOPT 6.8 MG drop Both Eyes BID
XALATAN 1 drop Both Eyes Nightly
SYNTHROID 50 mcg Oral QAM EMPTY
PROTONIX 20 MG mg Oral Daily
PRAVACHOL 40 MG mg Oral Nightly
RANEXA 500 MG mg Oral BID
Midodrine Hydrochloride - Midodrine Hydrochloride 5mg by mouth three times a day
Plavix - Clopidogrel Bisulfate 75mg by mouth in the morning
Ferrous Sulfate - Ferrous Sulfate: Folic Acid 325mg by mouth in the morning
Amiodarone Hcl - Amiodarone Hydrochloride 200mg by mouth in the morning

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ROBYN YATES
1105 SIXTH ST

1105 SIXTH ST , MI 49684-2345
Tele:(989) 497-2500 FAX: 19893214118

Physician Signature_____ Date _____

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