Home Health Certification and Plan of Care

Order ID: 1150/20984

1. Patient s HI claim No.	2. Start Of Care Date	3. Certification Period	4. Medical Record No.	5. Provider No.
100011007	07/31/2026	From: 07/31/2026 To: 09/28/2026	28366	217058

6. Patient's Name and Address

Evelyn Airey
7203 Bucher Road,
Sparrows Point, MD 21219-
443-571-9136

7. Provider's Name, Address and Telephone Number

HomeCentris Healthcare LLC
10 Crossroads Drive, Suite 102
Owings Mills, MD 21117-8284
410-321-8448
1487113239

8. DOB 11/11/1944 | **9.Sex** Female

11. ICD	Principal Diagnosis	Date
K90.829	Short bowel syndrome unspecified	07/31/26

13. ICD	Other Pertinent Diagnoses	Date
M80.022D	Age-rel osteopor w crnt path fx l humer 7thD	07/31/26
I10.	Essential (primary) hypertension	07/31/26
J43.2	Centrilobular emphysema	07/31/26
N82.0	Vesicovaginal fistula	07/31/26
M06.9	Rheumatoid arthritis unspecified	07/31/26
M79.7	Fibromyalgia	07/31/26
L90.0	Lichen sclerosus et atrophicus	07/31/26
N31.9	Neuromuscular dysfunction of bladder unspecified	07/31/26
D72.829	Elevated white blood cell count unspecified	07/31/26
M54.2	Cervicalgia (M54.2)	07/31/26
F41.9	Anxiety disorder unspecified	07/31/26
F32.A	Depression unspecified	07/31/26
Z79.01	Long term (current) use of anticoagulants	07/31/26
Z43.2	Encounter for attention to ileostomy	07/31/26
Z93.6	Other artificial openings of urinary tract status	07/31/26
Z45.2	Encounter for adjustment and management of VAD	07/31/26
Z79.899	Other long term (current) drug therapy	07/31/26
Z90.49	Acquired absence of other specified parts of digestive tract	07/31/26
Z90.710	Acquired absence of both cervix and uterus	07/31/26
Z86.0100	Personal history of colonic polyps	07/31/26
Z86.16	Personal history of COVID-19	07/31/26
Z96.1	Presence of intraocular lens	07/31/26
Z87.891	Personal history of nicotine dependence	07/31/26
Z91.81	History of falling	07/31/26

10. Medications: Dose/Frequency/Route (N)ew (C)hanged

Melatonin - Melatonin 6 MG tablet by mouth in the evening Administer 1 hour before bedtime.
Flexeril - Cyclobenzaprine Hydrochloride 10 mg take 1 tablet by mouth three times a day as needed for muscle spasms
Prevacid - Lansoprazole 30 mg take 1 capsule by mouth twice a day
Guaifenesin - Guaifenesin 600 mg, Take 1 tablet by mouth every 12 hours
Ferosul - Ferrous Sulfate: Folic Acid 325 Oral Tablet,Take 1 tablet by mouth once a day
Roxicodone - Oxycodone Hydrochloride Immediate Release 10 MG tablet by mouth as necessary every 6 hours. PRN Reason: Severe pain (7-10), Moderate pain (4-6). May also be administered by patient/Legally Authorized Health Care Decision-Maker (LAHD) preference for >6 pain score.
Ms Contin - Morphine Sulfate 0 Extended Release 15 MG tablet by mouth every 8 hours Admin Instructions: Do not crush or chew.
Infuvite Adult - Alpha-Tocopherol Acetate: Ascorbic Acid: Biotin: Cholecalciferol: Cyanocobalamin: Dexpanthenol: Folic Acid: Niacinamide: Pyridox 10ml intravenous once a day Withdraw 5mls each from the blue cap and one white cap vial into a single syringe. Add the total 10mls of multivitamins into the TPN bag every day just prior to use.
Heparin Flush - Heparin Sodium 10 unit/ml intravenous once a day
TYLENOL 650 MG tablet Oral every 4 hours CAUTION - Maximum acetaminophen dose not to exceed 4000 mg/24 hours from ALL sources
IMODIUM 2 MG capsule Oral 3 times daily
Vistaril - Hydroxyzine Hydrochloride 25 MG capsule Oral as necessary 2 times daily. PRN Reason: Itching
LOMOTIL 2.5-0.025 MG / 1 Tablet Oral 4 times daily
ZOLOFT 25 MG tablet Oral Daily
LYRICA 100 MG capsule Oral 3 times daily Admin Instructions: Do not crush or chew.
Voltaren - Diclofenac Sodium 2g topical every 4 hours as needed for right shoulder pain
MYCOSTATIN 100,000 unit/gram topical powder topical 2 times daily Admin Instructions: Apply to left hip.
white petrolatum (AQUAPHOR) topical ointment 0 Apply to itchy area topical as necessary 2 times daily. PRN Reason: Dry Skin

14. DME and Supplies:

hospital bed, wound care supplies, grab bars, sling, , ostomy supplies, , IV supplies, diabetic supplies, bath bench, wheelchair, cane

15. Safety Measures:

fall precautions, diabetic precautions, bleeding precautions, ambulates with device, medication safety, activity supervision, bathroom safety

16. Nutrition:

regular

17. Allergies:

codeine bactoshield chg

18.A. Functional Limitations

Ambulation

18.B. Activities Permitted

Wheelchair, Cane, ,

19. Mental & Pyschosocial Status: COGNITION: 0. Alert/ oriented, able to focus and shift attention, comprehends and recalls task directions independently., ANXIETY: 0. Never, SOCIAL ISOLATION: 0. Never, BEHAVIORAL ISSUES: 7. None of the above behaviors demonstrated, HISTORY OF DEPRESSION: Yes

20. Prognosis: fair

22. A Rehabilitation Potential:

SELF-CARE: 3. Independent - Patient completed all the activities by him/herself, with or without an assistive device, with no assistance from a helper., MOBILITY: 3. Independent - Patient completed all the activities by him/herself, with or without an assistive device, with no assistance from a helper.

22.B.Discharge Plans

patient will be responsible for managing treatment
family/caregiver will be responsible for managing treatment

Homebound status: Due to diagnosis of Short bowel syndrome unspecified, the patient is experiencing decreased endurance and mobility, increasing the likelihood of falls. To safely leave their home, the patient needs assistance from another person and an assistive mobility device.

Clinical Condition Requiring Homecare: The patient is an 81-year-old female admitted to home health services following a recent hospitalization with a primary diagnosis of short bowel syndrome and a complex medical history. Her past medical history is significant for essential hypertension, non-oxygen-dependent COPD/emphysema, vesicovaginal fistula secondary to vaginal mesh erosion into the bladder requiring total cystectomy with urostomy creation, neurogenic bladder, recurrent small bowel obstruction requiring lysis of adhesions and small bowel resection (07/14/2025), multiple abdominal re-explorations with subsequent end ileostomy creation and wound VAC closure (07/22/2025), abdominal wall abscess, intra-abdominal fluid collections requiring drainage, chronic high ostomy output, chronic total parenteral nutrition (TPN) via a right upper chest dual-lumen central line/PICC line, rheumatoid arthritis, fibromyalgia, anxiety, depression, prior cholecystectomy, appendectomy, and hysterectomy. The patient is alert and oriented 4 with vital signs within normal limits and no signs of respiratory distress observed during the assessment. The patient recently sustained a fall onto her left side and currently wears a left arm sling, removing it at night as instructed. A call was placed to orthopedic provider Dr. Ahmed Aziz requesting clarification regarding permitted left upper extremity activity, specifically shoulder range of motion. Follow-up communication from the orthopedic office indicated the patient is overdue for an appointment, and the office has contacted her to schedule follow-up. The patient has a right upper chest dual-lumen central line utilized for nightly TPN administration. She also has a left-sided ileostomy (documentation also references a jejunostomy) and a right-sided urostomy. A healed midline abdominal surgical incision is present with a small scabbed area noted over the mid-abdomen. The patient reports that when the wound reopens, she independently cleanses the area with Vashe solution, applies Aquacel alginate, and covers it with a dry gauze

23. Signature and Date of Verbal SOC Where Applicable:

Electronically Signed by Messick, Charles RN on 07/31/2026

25. Date HHA Received Signed POT

24. Physician's Name and Address

Laura Bond
5210 Eastern Ave Ste 127
Baltimore, MD 21224
PHONE: 4102886777 FAX: 14103672743 NPI: 1245902527

26. I certify/recertify that this patient is confined to his/her home and needs intermittent skilled nursing care, physical therapy and/or speech therapy or continues to need occupational therapy. The patient is under my care, and I have authorized the services on this plan of care and will periodically review the plan.

F2F date : 07/09/2026

27. Attending Physician's Signature and Date Signed : Date of physician last face-to-face

28. Anyone who misrepresents, falsifies, or conceals essential information required for payment of Federal funds may be subject to fine, imprisonment, or civil penalty under applicable Federal laws.

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dressing. She demonstrated appropriate knowledge of wound care techniques and proper emptying of the urostomy pouch. Medication reconciliation was completed, and no acute concerns were identified. The patient resides with her son and daughter-in-law in a single-story home with one step to enter. Her family provides significant assistance with nightly TPN administration as well as emptying and changing both the urostomy and ileostomy pouches. Prior to her recent hospitalization, the patient was modified independent with ambulation using a single-point cane and independent with transfers and basic activities of daily living but did not drive. Currently, she ambulates with a cane, including a wide-based quad cane, but frequently utilizes a wheelchair for mobility due to impaired endurance and balance. Physical therapy evaluation revealed significant functional deficits, including impaired balance with a Tinetti score of 11/28, Timed Up and Go (TUG) of 36.2 seconds, lower extremity weakness, impaired transfers, difficulty ambulating with a wide-based quad cane, and difficulty negotiating curbs, placing her at high risk for falls. Education was provided regarding proper gait sequencing with the wide-based quad cane, correct assistive device sizing, and therapeutic range-of-motion exercises for the left elbow, forearm, wrist, and hand, including supination, pronation, elbow flexion and extension, wrist movements in all planes, and finger flexion, extension, and opposition. The patient expressed a goal of improving her walking, balance, strength, and overall mobility to resume caring for her flowers outdoors. Occupational therapy evaluation demonstrated a decline from the patient's previous level of independence. The patient currently exhibits decreased standing balance, reduced standing tolerance, diminished bilateral upper extremity strength, decreased activity tolerance, and impaired functional mobility, resulting in reduced independence with self-care activities, functional transfers, and ambulation. Skilled nursing services remain medically necessary for comprehensive assessment, medication management, central line monitoring, TPN management, ostomy assessment and education, wound surveillance, fall prevention, and ongoing patient and caregiver education to prevent complications and rehospitalization. Skilled physical and occupational therapy services are warranted to address deficits in strength, balance, endurance, gait, transfers, upper extremity function, and activities of daily living, with the goal of maximizing safety, reducing fall risk, improving functional independence, and facilitating the patient's return to her highest attainable level of function within the home environment.
 Date of Order 07/31/2026 Orders Physician Face-to-Face Date: 07/09/2026 Clinical Condition Requiring Home Care per Certifying Physician: sn-disease management pt-eval & treat ot-eval & treat due to Short bowel syndrome unspecified Homebound Status per Certifying Physician: patient requires another person or medical equipment such as crutches, a walker, or a wheelchair to leave home
 1 - SOC - SN Notes: soc PT Eval Notes: OT Eval Notes:
 Physician Bond, Laura

SN Careplans

SN WK1: 1 (07/31/26-08/01/26) ,WK2: 1 (08/02/26-08/08/26) ,WK3: 1 (08/09/26-08/15/26) ,WK4: 1 (08/16/26-08/22/26) ,WK5: 1 (08/23/26-08/27/26)

PARAMETERS FOR PHYSICIAN NOTIFICATION: temperature < 95 > 100.5, heart rate < 50 > 110, respiratory rate < 8 > 22, blood pressure systolic < 90 > 169, blood pressure diastolic < 60 > 90, O2 saturation < 88 > 100, pain < 0 > 5

CAREGIVER: 1. Non-agency caregiver(s) currently provide assistance

HOSPITALIZATION RISKS: 1. History of falls (2 or more falls - or any fall with an injury - in the past 12 months), 3. Multiple hospitalizations (2 or more) in the past 6 months, 7. Currently taking 5 or more medications, 8. Currently reports exhaustion, 9. Other risk(s) not listed in 1- 8

STANDING ORDERS: infection control: hygiene, proper hand washing; advance directive: plan if patient is unable to make healthcare decisions ; fall precautions: wear sensible shoes, remove home hazards, living space adequately lit, assistive devices prn; emergency preparedness: plan for prn evacuation, resumption of home health visits; Assess the patient's incision on post op day 7 and the nurse or physical therapist will remove aquacel dressing leaving OTA; if incision is draining educate pt/pcg on cleaning with normal saline and covering with dry gauze daily and as needed.
Assess/Instruct Pt/Pcg: Ice to ____ x 20 minutes each hour while awake. If cold machine ordered apply 20 minutes on and 20 minutes off for 3-4 times a day.
Assess/Instruct all body systems/vital signs/complications, Blood Pressure; systolic is greater than 169 mm Hg or less than 90 mm Hg; diastolic is greater than 100 mm Hg or less than 55 mm Hg, Clinician to assess comorbidities and report changes in condition to the patient's physician, Pain Rating is greater than 6 on 0-10 scale, Pulse is greater than 110 or less than 50, Respirations are greater than 22 or less than 8, SPO2: is less than 90 % at rest /with exertion, Temperature is greater than 100.5 F or less than 95.0 F, Pain Rating is greater than 6 on 0-10 scale
Implement Fall Prevention Program, Instruct and educate the patient/PCG on wearing compression stockings for the next 4 weeks per discharge instructions.
Instruct the pt/PCG on using the incentive spirometer 10 times every 2 hour while awake.
Provide education content at patient's level of health literacy.
Assess/Instruct Pt/Pcg: Safety measures to prevent injury.
Assess: Musculoskeletal status.
Teach Pt/Pcg to maintain appropriate wt bearing status as ordered by MD, total joint replacement precautions as applicable, Safe stair climbing skills, Safe, effective use of adaptive/assist device
Assess/Instruct Pt/Pcg: Pain management measures; assess pain level, pain medication, rest, body alignment, ROM, meditation, massage.
Pt/Pcg educated in pain management techniques including positioning and relaxation techniques
Instruct Pt/Pcg: Medication actions, uses, frequency, dose, side effects, interactions of all new/change meds, Provide medication education,.
Assess/Instruct Pt/Pcg: Safety measures to prevent injury, Therapeutic Exercise, Transfer Training
Monitor surgical wound for s/s of infection, educate on s/s of concern and infection prevention to promote wound healing.

; Skin Preservation: Measures to prevent skin breakdown; pressure relief, incontinence care, nutrition, hydration ; Pain: Pain management measures; pain medication, rest, body alignment, ROM, meditation, massage ; Medications: Medication actions, uses, frequency, dose, interactions of all new/change meds
Advance Directive:Active Legally Authorized Healthcare Decision Maker

PROBLEMS IDENTIFIED ON ASSESSMENT: D0160 - Depression, M2020 - Oral Med Management, M1033 - Exhaustion, M1400 - Dyspnea, abnormal BS < 70/140 > mg/dL, limited strength, balance deficit, Pain Effect on Sleep, Pain Interference with ADLs, swell/redness surround. skin, #1 - Observable Surgical Wound - Anterior Midline - Mid abdominal surgical site, #2 - GI Ostomy - Anterior

SN Goals

PATIENT-STATED GOAL: To live independently as possible

GOALS
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

patient/caregiver recalls
* depression-prevention strategies including avoidance of isolation
* healthy eating
* sleeping habits
* identification of activities that bring pleasure
* preventive care
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* how to achieve wound healing including cleaning and dressing wound
* position changes
* skin care
* diet modification
* record wound measurements
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* ostomy management including how to clean stoma
* change drainage pouch
* diet restrictions
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* strategies to minimize fatigue and exhaustion including work simplification
* energy conservation
* lifestyle changes
* diet
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* ostomy management including how to clean stoma
* change ostomy pouch
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* lifestyle modifications to manage respiratory condition including
* diet changes and regular exercise
* strategies to control shortness of breath
* home remedies to keep lungs healthy
* recalls related medication(s) purpose, schedule

patient self-administers medications as prescribed
* recalls related medication(s) purpose, schedule

Signature of Physician:	Date
	PAGE 2 of 4
Optional Name/Signature of Nurse/Therapist:	Date
Electronically Signed by Messick, Charles RN	07/31/2026

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Observable Surgical Wound - Anterior Midline - Mid abdominal surgical site, #2 - GI Ostomy - Anterior Left Abdomen - Jejunostomy site, #3 - GU Ostomy - Anterior Right Abdomen - Urostomy site

PROCEDURES: physician-ordered wound care: #3 - GU Ostomy - Anterior Right Abdomen - Urostomy site: Urostomy: 1 piece soft convex Hollister 84138 CTF (1 box) with ring 8815 (1 box) Coloplast ostomy mio belt (4 prong) = 4237(2belts) Brava elastic barrier strips =120700(2 boxes) Marathon = Msc093001(2 boxes) pouch change every 2 to 3 days., physician-ordered wound care: #1 - Observable Surgical Wound - Anterior Midline - Mid abdominal surgical site: If wound reopens; cleanse with Vashe, apply calcium alginate and cover with a dry gauze dressing daily or PRN., physician-ordered wound care: #2 - GI Ostomy - Anterior Left Abdomen - Jejunostomy site: Jejunostomy: 1 piece Coloplast 18676 (1 box) with ring (1 box) , barrier, stoma powder 7906 (1 bottle), marathon , belt- supplies, physician-ordered wound care: #3 - GU Ostomy - Anterior Right Abdomen - Urostomy site: Urostomy: 1 piece soft convex Hollister 84138 CTF (1 box) with ring 8815 (1 box), physician-ordered wound care: #3 - GU Ostomy - Anterior Right Abdomen - Urostomy site: Urostomy: 1 piece soft convex Hollister 84138 CTF (1 box) with ring 8815 (1 box) Coloplast ostomy mio belt (4 prong) = 4237(2belts) Brava elastic barrier strips =120700(2 boxes) Marathon = Msc093001(2 boxes), physician-ordered wound care: #2 - GI Ostomy - Anterior Left Abdomen - Jejunostomy site: Jejunostomy: 1 piece Coloplast 18676 (1 box) with ring (1 box) , barrier, stoma powder 7906 (1 bottle), marathon , belt- supplies pouch changes every 2 to 3 days., physician-ordered wound care: #2 - GI Ostomy - Anterior Left Abdomen - Jejunostomy site: Jejunostomy: 1 piece Coloplast 18676 (1 box) with ring (1 box) , barrier, stoma powder 7906 (1 bottle), marathon , belt- supplies, physician-ordered wound care: #2 - GI Ostomy - Anterior Left Abdomen - Jejunostomy site: Jejunostomy: 1 piece Coloplast 18676 (1 box) with ring (1 box) , barrier, stoma powder 7906 (1 bottle), marathon , belt- supplies pouch changes every 2 to 3 days., physician-ordered wound care: #2 - GI Ostomy - Anterior Left Abdomen - Jejunostomy site: Jejunostomy: 1 piece Coloplast 18676 (1 box) with ring (1 box) , barrier, stoma powder 7906 (1 bottle), marathon , belt- supplies Pouch changes every 2 to 3 days. Please change the pouch immediately if any leakage occurs., physician-ordered wound care: #3 - GU Ostomy - Anterior Right Abdomen - Urostomy site: Urostomy: 1 piece soft convex Hollister 84138 CTF (1 box) with ring 8815 (1 box), physician-ordered wound care: #3 - GU Ostomy - Anterior Right Abdomen - Urostomy site: Urostomy: 1 piece soft convex Hollister 84138 CTF (1 box) with ring 8815 (1 box) Coloplast ostomy mio belt (4 prong) = 4237(2belts) Brava elastic barrier strips =120700(2 boxes) Marathon = Msc093001(2 boxes), physician-ordered wound care: #3 - GU Ostomy - Anterior Right Abdomen - Urostomy site: Urostomy: 1 piece soft convex Hollister 84138 CTF (1 box) with ring 8815 (1 box) Coloplast ostomy mio belt (4 prong) = 4237(2belts) Brava elastic barrier strips =120700(2 boxes) Marathon = Msc093001(2 boxes) pouch change every 2 to 3 days., physician-ordered wound care: #3 - GU Ostomy - Anterior Right Abdomen - Urostomy site: Urostomy: 1 piece soft convex Hollister 84138 CTF (1 box) with ring 8815 (1 box) Coloplast ostomy mio belt (4 prong) = 4237(2belts) Brava elastic barrier strips =120700(2 boxes) Marathon = Msc093001(2 boxes) Pouch change every 2 to 3 days. Please change the pouch immediately if any leakage occurs., cough/deep breathing exercises, incentive spirometer, apply collection/fistula pouch, ostomy care & irrigation

TEACH PATIENT/CAREGIVER: * lifestyle modifications to manage respiratory condition including diet changes and regular exercise strategies to control shortness of breath home remedies to keep lungs healthy, related medication(s) purpose, schedule, * 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, related medication(s) purpose, schedule, * depression-prevention strategies including avoidance of isolation healthy eating sleeping habits identification of activities that bring pleasure preventive care, related medication(s) purpose, schedule, * how to achieve wound healing including cleaning and dressing wound position changes skin care diet modification record wound measurements, related medication(s) purpose, schedule, * ostomy management including how to clean stoma change drainage pouch diet restrictions, related medication(s) purpose, schedule, * ostomy management including how to clean stoma change ostomy pouch, related medication(s) purpose, schedule, * strategies to minimize fatigue and exhaustion including work simplification energy conservation lifestyle changes diet, related medication(s) purpose, schedule, patient self-administers medications as prescribed, related medication(s) purpose, schedule

PT Careplans

PT WK2: 2 (08/02/26-08/08/26) ,WK3: 1 (08/09/26-08/15/26) ,WK4: 1 (08/16/26-08/22/26) ,WK5: 1 (08/23/26-08/27/26)

PROBLEMS IDENTIFIED ON ASSESSMENT: GG0170D1 - Sit to Stand, GG0170F1 - Toilet Transfer, GG0170G1 - Car Transfer, GG0170I1 - Walk 10 Feet, GG0170J1 - Walk 50 ft with 2 Turns, GG0170K1 - Walk 150 Feet, GG0170L1 - Walk 10 ft on Uneven Surface, GG0170M1 - 1 - Step (curb), GG0170N1 - 4 Steps, GG0170O1 - 12 Steps, GG0170P1 - Picking Up Object, GG0170E1 - Chair to Bed to Chair

PROCEDURES: Medication management : Review medication with pt and caregiver, home exercise program: Laq, hip flexion, hip abduction hamstring curls, with resistance as tolerated, standing tes including hip flexion, heelraises, hamstring curls toe raises as tolerated with si gle ue support at counter, equipment training: Ed safe mgmt WBQC amb, gait training on uneven surfaces, gait training/stair training, transfers training

TEACH PATIENT/CAREGIVER: Sit to Stand - 06. Independent, Chair to Bed to Chair - 06. Independent, Toilet Transfer - 06. Independent, Car Transfer - 06. Independent, Walk 10 Feet - 05. Setup or clean-up assistance, Walk 50 ft with 2 Turns - 05. Setup or clean-up assistance, Walk 150 Feet - 05. Setup or clean-up assistance, Walk 10 ft on Uneven Surface - 05. Setup or clean-up assistance, 1 - Step (curb) - 05. Setup or clean-up assistance, Picking Up Object - 05. Setup or clean-up assistance

PT Goals

PATIENT-STATED GOAL: To improve her strength and balance and get back to taking care of the flowers in the yard

GOALS
Chair to Bed to Chair - 06. Independent

Toilet Transfer - 06. Independent

Walk 10 ft on Uneven Surface - 05. Setup or clean-up assistance

1 - Step (curb) - 05. Setup or clean-up assistance

Sit to Stand - 06. Independent

Car Transfer - 06. Independent

Walk 10 Feet - 05. Setup or clean-up assistance

Walk 50 ft with 2 Turns - 05. Setup or clean-up assistance

Walk 150 Feet - 05. Setup or clean-up assistance

Picking Up Object - 05. Setup or clean-up assistance

Signature of Physician:	Date

Optional Name/Signature of Nurse/Therapist:	Date
Electronically Signed by Messick, Charles RN	07/31/2026

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OT Careplans

OT WK2: 1 (08/02/26-08/08/26) ,WK4: 1 (08/16/26-08/22/26) ,WK5: 1 (08/23/26-08/27/26)

PROBLEMS IDENTIFIED ON ASSESSMENT: M1400 - Dyspnea, GG0130B1 - Oral Hygiene, GG0130C1 - Toileting Hygiene, GG0130E1 - Shower/Bathe Self, GG0130G1 - Lower Body Dressing, GG0130H1 - Don/Doff Footwear, GG0130A1 - Eating, GG0130F1 - Upper Body Dressing

PROCEDURES: Medication Review : Medication reviewed with patient with all medications in the home, home exercise program: Left UE AAROM ADDRESSING SHOULDER FLEX, BICEPS FELX/EXT, TRICEPS EXTENSIONS, home exercise program: Left UE AAROM ADDRESSING SHOULDER FLEX, BICEPS FELX/EXT, TRICEPS EXTENSIONS, home exercise program: Left UE AAROM ADDRESSING SHOULDER FLEX, BICEPS FELX/EXT, TRICEPS EXTENSIONS, equipment training, work simplification/energy conservation, transfers training: Skilled OT, assist with bathing: Skilled OT, assist with lower body dressing: Skilled OT, assist with upper body dressing: Skilled OT

TEACH PATIENT/CAREGIVER: * lifestyle modifications to manage respiratory condition including diet changes and regular exercise strategies to control shortness of breath home remedies to keep lungs healthy, related medication(s) purpose, schedule, Oral Hygiene - 06. Independent, Toileting Hygiene - 05. Setup or clean-up assistance, Shower/Bathe Self - 05. Setup or clean-up assistance, Lower Body Dressing - 06. Independent, Don/Doff Footwear - 06. Independent, Eating - 05. Setup or clean-up assistance, Upper Body Dressing - 06. Independent

OT Goals

PATIENT-STATED GOAL: Get in the shower

GOALS
Shower/Bathe Self - 05. Setup or clean-up assistance

patient/caregiver recalls
* lifestyle modifications to manage respiratory condition including
* diet changes and regular exercise
* strategies to control shortness of breath
* home remedies to keep lungs healthy
* recalls related medication(s) purpose, schedule

Oral Hygiene - 06. Independent

Toileting Hygiene - 05. Setup or clean-up assistance

Lower Body Dressing - 06. Independent

Don/Doff Footwear - 06. Independent

Eating - 05. Setup or clean-up assistance

Upper Body Dressing - 06. Independent

Signature of Physician:	Date
	PAGE 4 of 4
Optional Name/Signature of Nurse/Therapist:	Date
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