Medical Update for Barbara Snider DOB: 02/04/1960

Date Order Created: 08/07/2026

Order ID: 1195/557

Agency Assigned Id: 863

Certification Period: 08/01/2026 to 09/29/2026

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

Orders:
Authorization changes of OT skill Total Visits: 4 and Visit Freq: CUSTOM
Authorization changes of SN skill Total Visits: 2 and Visit Freq: CUSTOM
Authorization changes of PT skill Total Visits: 8 and Visit Freq: CUSTOM

08/07/2026 patient_goal: Be able to walk again without pain, Target Date: 09/29/2026,

08/06/2026 procedure: home exercise program, Notes: , gait training/stair training, Notes: , transfers training, Notes: ,

08/07/2026 goal: Sit to Stand - 06. Independent, Target Date: 09/29/2026, Chair to Bed to Chair - 06. Independent, Target Date: 09/29/2026, Car Transfer - 06. Independent, Target Date: 09/29/2026, Walk 10 Feet - 04. Supervision or touching assistance, Target Date: 09/29/2026, Walk 50 ft with 2 Turns - 04. Supervision or touching assistance, Target Date: 09/29/2026, Walk 150 Feet - 04. Supervision or touching assistance, Target Date: 09/29/2026, 1 - Step (curb) - 04. Supervision or touching assistance, Target Date: 09/29/2026, 4 Steps - 04. Supervision or touching assistance, Target Date: 09/29/2026, Picking Up Object - 04. Supervision or touching assistance, Target Date: 09/29/2026, Walk 10 ft on Uneven Surface - 04. Supervision or touching assistance, Target Date: 09/29/2026,

08/07/2026 discharge_plan: patient will be responsible for managing treatment, Target Date: 09/29/2026,

Toilet Transfer - 06. Independent, Target Date: 09/29/2026 (unable to achieve)
12 Steps - 04. Supervision or touching assistance, Target Date: 09/29/2026 (unable to achieve)

DAVID DARGIS
109 S 13 HARRINGTON ST

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Tele:(989) 356-2400 FAX: 19893542606

Physician Signature____ Date __________

Staff Signature: Electronically Signed by HILL, KAITLIN Date 08/07/2026