

Medical Update for Joshua Perron DOB: 06/23/1976

Date Order Created: 08/13/2026

Order ID: 1184/672

Agency Assigned Id: 1438

Certification Period: 08/10/2026 to 10/08/2026

*Devotion Home Health Care, LLC MED8891
11201 N Tatum Blvd, Suite 300
Phoenix, AZ 85028-6039
PHONE 480-415-4423 FAX*

Orders:

Wound Care Orders and Supply List:

Right foot ulcer on underside of right foot 1.4cmL x 1.0cmW x 0.2cmD with small amount of serous to serosanguineous drainage

Clean wound with wound cleanser, pat dry with gauze, apply Veris dressing cut to size, moistened with saline, cover with 2x2 bordered foam dressing every 3 days and as needed for dislodgement or soiling.

Veris dressing (or comprable product fit to wound size) - 1 box monthly

2x2 bordered foam dressings - 10 monthly

Gauze loaf - 1 monthly

wound spray - 1 monthly

Normal saline - 2 50ml bottles monthly (or available bottle size)

Casey Lynn Myers

3501 N Scottsdale road suite 280

3501 N Scottsdale road suite 280, AZ 85251-5650

Tele:480-882-7300 FAX: 14808827310

Physician Signature_____ Date _____

Staff Signature: Electronically Signed by DELGADO, MELISSA Date 08/13/2026