

Medical Update for Kathleen Moore DOB: 01/27/1953

Date Order Created: 08/26/2026

Order ID: 1195/913

Agency Assigned Id: 867

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 SN skill Total Visits: 9 and Visit Freq: SN WK1: 1 (08/01/26-08/01/26),WK2: 2 (08/02/26-08/08/26),WK3: 2 (08/09/26-08/15/26),WK4: 2 (08/16/26-08/22/26),WK5: 2 (08/23/26-08/29/26)

Authorization changes of PT skill Total Visits: 5 and Visit Freq: PT 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 (08/23/26-08/29/26)

*08/25/2026 Medications: Cephalexin - Cephalexin eq 500 mg base by mouth four times a day
POTASSIUM 20 mEq by mouth every other day Take 1 tablet (20 mEq total) by mouth daily with
breakfast.*

FUROSEMIDE 20 mg by mouth every other day Take 1 tablet (20 mg total) by mouth daily.

*EVAN GRAVEDONI
1320 E M 32*

*1320 E M 32, MI 49735
Tele:(989) 731-5092 FAX: (989) 705-8323*

Physician Signature_____ Date _____

Staff Signature: Electronically Signed by LUBELAN, SAMANTHA Date 08/26/2026