Medical Update for CARL MANKOWSKI DOB: 01/04/1944

Date Order Created: 08/27/2026

Order ID: 1195/1010

Agency Assigned Id: 7950

Certification Period: 08/21/2026 to 10/19/2026

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

Orders:
08/26/2026 procedure: coordinate/arrange resources for vision-impaired, Notes: : DISCONTINUED, monitor intake & output, Notes: : DISCONTINUED, glucose testing via monitor, Notes: : DISCONTINUED, coordinate/arrange caregiver support to prevent caregiver physical, emotional and mental exhaustion, Notes: : DISCONTINUED, incentive spirometer, Notes: : DISCONTINUED, monitor dialysis schedule, Notes: : DISCONTINUED,

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ROBYN YATES
1105 SIXTH ST

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

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

Staff Signature: Electronically Signed by LUBELAN, SAMANTHA Date 08/27/2026