

Medical Update for Darrell T Harris DOB: 10/28/1950

Date Order Created: 08/27/2026

Order ID: 1150/21504

Agency Assigned Id: 27271

Certification Period: 06/28/2026 to 08/26/2026

*HomeCentris Healthcare LLC 217058
10 Crossroads Drive, Suite 102
Owings Mills, MD 21117-8284
PHONE 410-321-8448 FAX*

Orders:

08/27/2026 procedure: physician-ordered wound care, Notes: Cleanse wound with wound cleanser, pat dry, apply Santyl to the wound bed, cover with gauze, and wrap the foot with Kerlix daily and PRN for soiled or dislodged dressing.,

*Christelle Nong Libend
1701 Twin Springs Road*

*1701 Twin Springs Road, MD 21227
Tele: FAX:*

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

Staff Signature: Electronically Signed by Messick, Charles Date 08/28/2026