Home Health Certification and Plan of Care

Order ID: 1195/1362

1. Patient s HI claim No.	2. Start Of Care Date	3. Certification Period	4. Medical Record No.	5. Provider No.
6V03RE0YX87	07/02/2026	From: 08/31/2026 To: 10/29/2026	785	239350

6. Patient's Name and Address
Erica Tower
4205 Wartiella Rd,
Cheboygan, MI 49721-
(231) 333-6485

7. Provider's Name, Address and Telephone Number
Evergreen Home Health
403 W Main Street Suite A1
Gaylord, MI 49735-1887
989-214-1114
1184225021

8. DOB 03/13/1956 **9.Sex** Female

11. ICD	Principal Diagnosis	Date
M54.17	Radiculopathy lumbosacral region	07/02/26

13. ICD	Other Pertinent Diagnoses	Date
L03.116	Cellulitis of left lower limb	07/02/26
E66.01	Morbid (severe) obesity due to excess calories	07/02/26
E87.5	Hyperkalemia	07/02/26
I12.9	Hypertensive chronic kidney disease w stg 1-4/unsp chr kdny	07/02/26
N18.30	Chronic kidney disease stage 3 unspecified	07/02/26
M50.30	Other cervical disc degeneration unsp cervical region	07/02/26
R26.9	Unspecified abnormalities of gait and mobility	07/02/26
Z74.1	Need for assistance with personal care	07/02/26

10. Medications: Dose/Frequency/Route (N)ew (C)hanged

Acetaminophen - Acetaminophen 325 mg 2 tablets mouth as necessary every 6 HOURS as needed for Pain, DO NOT EXCEED 3 GM/24 HOURS
Amlodipine Besylate - Amlodipine Besylate 5 mg / 1 Tablet by mouth in the morning
Cyclobenzaprine Hydrochloride - Cyclobenzaprine Hydrochloride 5 mg - 1 tablet by mouth as necessary every 12 hours as needed for spasm
Gabapentin - Gabapentin 300 mg 1 tablet mouth three times a day
Losartan Potassium - Losartan Potassium 25 mg 100-25 mg - 1 tablet by mouth in the morning
Nystatin - Nystatin 100,000 units/gm 1 application transdermal twice a day
Celecoxib - Celecoxib 200 mg - 1 capsule by mouth twice a day
Bisacodyl Laxative Rectal Suppository 10 mg rectal as necessary every 24 hours as needed for constipation

14. DME and Supplies:
wound care supplies, grab bars, bath bench, walker

15. Safety Measures:
fall precautions, Proper use of assistive devices, Keep pathways clear

16. Nutrition:
low sodium

17. Allergies:
Bee venom

18.A. Functional Limitations
Endurance, Ambulation

18.B. Activities Permitted
Other

19. Mental & Pyschosocial Status: COGNITION: 0. Able to get to and from the toilet and transfer independently with or without a device., ANXIETY: 0. Never, SOCIAL ISOLATION: , BEHAVIORAL ISSUES: , HISTORY OF DEPRESSION:

20. Prognosis: fair

22. A Rehabilitation Potential:
SELF-CARE: , MOBILITY:

22.B.Discharge Plans
SN: patient will be responsible for managing treatment
PT: patient will be responsible for managing treatment

Homebound status: There exists a normal inability to leave the home. Leaving home requires a considerable and taxing effort.

Clinical Condition Requiring Homecare: Radiculopathy, lumbosacral region

SN Careplans

SN frequency Auth ID 723 WK1: 1 (08/31/26-09/05/26),Auth ID 723 WK2: 1 (09/06/26-09/12/26),Auth ID 723 WK3: 1 (09/13/26-09/19/26),Auth ID 723 WK4: 1 (09/20/26-09/26/26),Auth ID 723 WK5: 1 (09/27/26-10/03/26),Auth ID 723 WK6: 1 (10/04/26-10/10/26),Auth ID 723 WK7: 1 (10/11/26-10/17/26),Auth ID 723 WK8: 1 (10/18/26-10/24/26),Auth ID 723 WK9: 1 (10/25/26-10/29/26)

PARAMETERS FOR PHYSICIAN NOTIFICATION: temperature < 94 > 101.0, heart rate < 50 > 100, respiratory rate < 12 > 20, blood pressure systolic < 90 > 150, blood pressure diastolic < 60 > 100, O2 saturation < 90 > 100, pain < 0 > 7

CAREGIVER: 0. No assistance needed - patient is independent or does not have needs in this area

HOSPITALIZATION RISKS: 7. Currently taking 5 or more medications

STANDING ORDERS: Home Health Clinician to provide ongoing patient and caregiver education regarding prevention of skin breakdown and pressure injuries during the home health episode as clinically indicated.; Home Health Clinician to assess fall risk and provide ongoing patient and caregiver education regarding fall prevention and home safety measures throughout the home health episode as clinically indicated.; Home Health Clinician to assess, monitor, educate, and implement non-pharmacological pain management interventions as clinically indicated throughout the home health episode. Notify physician/authorized provider of uncontrolled pain, significant changes in pain status, or adverse medication effects.; Home Health Clinician to assess, monitor, and provide patient/caregiver education regarding mood status, signs and symptoms of depression, and coping strategies throughout the home health episode. Notify physician/authorized provider of significant mood changes, safety concerns, or worsening depressive symptoms.; Home Health Clinician to implement standard and transmission-based infection control precautions as indicated and provide ongoing patient/caregiver education regarding infection prevention throughout the home health episode. Notify physician/authorized provider of suspected or confirmed infection or clinical deterioration.; Home Health Clinician to assess, review, and reinforce patient/caregiver emergency preparedness plan throughout the home health episode, recertifications and resumptions of care.; Home Health Clinician to assess patient advance directive status and provide education regarding advance care planning throughout the home health episode. Assist with identification, completion, or updating of advance directive documents as appropriate and within scope of practice.
Advance Directive:Full Resuscitate

09/09/2026 Problems : #1 - Observable Stasis Ulcer - Other - Left calf - Edema present
M1830 - Bathing
M1830 - Bathing
M1850 - Transferring

SN Goals

PATIENT-STATED GOAL: Increase strength and move around better and make own meals

GOALS
patient/caregiver recalls
* lifestyle modifications to manage respiratory condition including
* diet changes and regular exercise
* strategies to control shortness of breath
* home remedies to keep lungs healthy
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* how to maintain a diary to monitor effective and non-effective pain relief including documenting time of pain, rating, precipitating events, medications, treatments, and what works best to relieve pain
* teach relaxation skills and diversional activities
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* how to achieve wound healing including cleaning and dressing wound
* position changes
* skin care
* diet modification
* record wound measurements
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* strategies to minimize fatigue and exhaustion including work simplification
* energy conservation
* lifestyle changes
* diet
* recalls related medication(s) purpose, schedule

patient self-administers medications as prescribed
* recalls related medication(s) purpose, schedule

meal preparation is available to patient for all meals

23. Signature and Date of Verbal SOC Where Applicable:
Electronically Signed by ABRAHAM, ALEXIS SN RN on 08/26/2026

25. Date HHA Received Signed POT

24. Physician's Name and Address
DAVID DARGIS
109 S 13 HARRINGTON ST
ALPENA, MI 49707-1609
PHONE: (989) 356-2400 FAX: 19893542606 NPI: 1457490609

26. I certify/recertify that this patient is confined to his/her home and needs intermittent skilled nursing care, physical therapy and/or speech therapy or continues to need occupational therapy. The patient is under my care, and I have authorized the services on this plan of care and will periodically review the plan.
F2F date : 06/25/2026

27. Attending Physician's Signature and Date Signed : Date of physician last face-to-face

28. Anyone who misrepresents, falsifies, or conceals essential information required for payment of Federal funds may be subject to fine, imprisonment, or civil penalty under applicable Federal laws.

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M1850 - Transferring
M1860 - Ambulation/Locomotion
M1860 - Ambulation/Locomotion
open sores/lesions
limited strength

PROCEDURES: physician-ordered wound care: #1 - Observable Stasis Ulcer - Other - Left calf - Edema present, cough/deep breathing exercises, incentive spirometer, physician-ordered wound care, wound vacuum, monitor intake & output, assist with bathing, assist with transferring, assist with mobility, assist with seizure precautions prn, assist with infection control, assist with fall prevention, assist with assistive devices prn, assist with O2 safety, coordinate/arrange preparation of missing meals, monitor dialysis schedule

TEACH PATIENT/CAREGIVER: * lifestyle modifications to manage respiratory condition including diet changes and regular exercise strategies to control shortness of breath home remedies to keep lungs healthy, related medication(s) purpose, schedule, * how to maintain a diary to monitor effective and non-effective pain relief including documenting time of pain, rating, precipitating events, medications, treatments, and what works best to relieve pain teach relaxation skills and diversional activities, related medication(s) purpose, schedule, * how to achieve wound healing including cleaning and dressing wound position changes skin care diet modification record wound measurements, related medication(s) purpose, schedule, * strategies to minimize fatigue and exhaustion including work simplification energy conservation lifestyle changes diet, related medication(s) purpose, schedule, patient self-administers medications as prescribed, related medication(s) purpose, schedule, meal preparation is available to patient for all meals

PT Careplans

PT frequency Auth ID 741 WK1: 1 (08/31/26-09/05/26),Auth ID 741 WK2: 1 (09/06/26-09/12/26),Auth ID 741 WK3: 1 (09/13/26-09/19/26)

09/02/2026 Problems : GG0170N1 - 4 Steps
GG0130F1 - Upper Body Dressing
GG0130H1 - Don/Doff Footwear
GG0130G1 - Lower Body Dressing
GG0130E1 - Shower/Bathe Self
GG0130C1 - Toileting Hygiene
GG0130B1 - Oral Hygiene
GG0170E1 - Chair to Bed to Chair
GG0170P1 - Picking Up Object
GG0170O1 - 12 Steps
GG0170D1 - Sit to Stand
GG0170M1 - 1 - Step (curb)
GG0170M1 - 1 - Step (curb)
GG0170L1 - Walk 10 ft on Uneven Surface
GG0170K1 - Walk 150 Feet
GG0170J1 - Walk 50 ft with 2 Turns
GG0170I1 - Walk 10 Feet
GG0170G1 - Car Transfer
GG0170F1 - Toilet Transfer

PROCEDURES: home exercise program: HEP: sitting ankle pumps, marching, LAQ, hip abduction, hip adduction with pillow, knee flexion; also standing marches, hamstring curls, BUE support at kitchen counter. Static standing with eyes closed, 5-10 seconds, 2-3 times, with 1-2 hands holding onto kitchen counter, and have someone with you, feet can be comfortable width (narrower is harder)., equipment training: Front-wheel walker. Least restrictive assistive device as indicated. Home safety/falls prevention as indicated., equipment training: Front-wheel walker. Least restrictive assistive device as indicated., work simplification/energy conservation: Pacing to prevent over-exertion and to reduce risk for falls., work simplification/energy conservation: Pacing to prevent over-exertion and to reduce risk for falls. Education proper mechanics as indicated., gait training on uneven surfaces: Navigating ramp to enter and surfaces as required to access vehicle and going out for appointments, gait training/stair training: Gait across even/uneven surfaces with assistive device to maximize safety and independence. Physical Therapy to utilize Therapeutic exercises; therapeutic activities; gait training neuromuscular reeducation; pain management to address Difficulty walking., gait training/stair training: Gait across even/uneven surfaces with assistive device to maximize safety and independence. Physical Therapy to utilize Therapeutic exercises; therapeutic activities; gait training neuromuscular reeducation; pain management to address Difficulty walking., gait training/stair training: Gait across even/uneven surfaces with assistive device to maximize safety and independence. Physical Therapy to utilize Therapeutic exercises; therapeutic activities; gait training , balance training, neuromuscular reeducation; pain management to address Difficulty walking., gait training/stair training: Gait across even/uneven surfaces with assistive device to maximize safety and independence., transfers training: Functional trasnfers as required in/out of home and vehicle transfer training

TEACH PATIENT/CAREGIVER: Car Transfer - 06. Independent, Walk 150 Feet - 05. Setup or clean-up assistance, Walk 10 ft on Uneven Surface - 05. Setup or clean-up assistance, Toileting Hygiene - 06. Independent

PT Goals

PATIENT-STATED GOAL: Improve balance

GOALS
Walk 10 ft on Uneven Surface - 05. Setup or clean-up assistance

Car Transfer - 06. Independent

Walk 150 Feet - 05. Setup or clean-up assistance

Toileting Hygiene - 06. Independent

Signature of Physician:	Date
	PAGE 2 of 2
Optional Name/Signature of Nurse/Therapist:	Date
Electronically Signed by ABRAHAM, ALEXIS SN RN	08/26/2026