

Medical Update for Klaus Testing DOB: 01/01/1980

Date Order Created: 09/14/2026

Order ID: 179/13609

Agency Assigned Id: 8692

Certification Period: 07/15/2026 to 09/12/2026

*Home Health Cares 368102
579# EAST MARKET@STREETS
HARRISONBURG, VA 22801-1234
PHONE 540-433-7146 FAX*

Orders:

Authorization changes of PT skill Total Visits: 3 and Visit Freq: WK1: 1 (07/15/26-07/18/26),WK7: 1 (08/23/26-08/29/26),WK8: 1 (08/30/26-09/05/26)

*Jane Doe
310, NATARAJAPURAM 4TH EAST STREET*

*310, NATARAJAPURAM 4TH EAST STREET, HI 628502
Tele:999-999-9999 FAX: 12077802774*

PHYSICIAN SIGNATURE VALID - Digitally Signed by Signed

Staff Signature: Electronically Signed by , Janice Date 09/14/2026