HOME HEALTH CERTIFICATION AND PLAN OF CARE

Order ID 11631251

Patient Details

Patient's HI Claim No.	Start of Care Date	Certification Period	Medical Record No.	Provider No.
92132160	09/01/2026	09/01/2026 - 10/30/2026	1859	497754

Patient's Name and Address	Gender	Date of Birth	Phone Number
David Blakeney 444 N Armstead Street Apt 204 ALEXANDRIA, VA 22312	Male	12/20/1975	571-309-6939
	Email		Primary Language: English

Clinical Profile

Provider's Name	Address	Phone Number
Grace Home Healthcare, LLC	9735 Main Street Suite 200 Fairfax, Fairfax, VA 22031	703-865-7370
NPI 1073904009		**Fax Number** 571-774-5551

Clinical Condition Requiring Homecare:

Patient is a 50-year-old male recently discharged from a rehabilitation facility and referred for home health PT and OT following hospitalization for severe sepsis/septic shock secondary to Fournier's gangrene with necrotizing soft tissue infection of the scrotum/perineum requiring surgical debridement. Hospitalization was complicated by acute kidney injury, metabolic encephalopathy/delirium, atrial fibrillation with rapid ventricular response, newly diagnosed poorly controlled diabetes mellitus, generalized deconditioning, and decreased activity tolerance. Past medical history also includes obesity and diabetes. Prior to hospitalization, patient was independent with functional mobility, ADLs, and was working. Patient resides with his wife and son in a second-floor apartment requiring approximately 8 exterior steps to enter the building and an additional 6 steps to reach the apartment. Upon arrival, patient was found lying in bed with his wife present. Patient was alert and oriented x4 and denied vision or hearing deficits. Vital signs were BP 138/79 mmHg, HR 68 bpm, SpO2 99%, and temperature 97.8F. Lung sounds were clear bilaterally, heart sounds were normal, and bowel sounds were active in all four quadrants. Patient reported regular bowel movements. Right lower-extremity edema was noted. Patient reported pain at 5/10 and uses Tylenol for pain relief. He currently uses a cane for ambulation; PT evaluation noted decreased bilateral lower-extremity strength, impaired balance, reduced endurance/activity tolerance, impaired safety awareness, and decreased functional mobility, requiring assistance with transfers and ambulation with a rolling walker. Patient demonstrates functional decline from prior level of function and is at increased risk for falls. OT evaluation assessed ADL performance, functional transfers, strength, and endurance. Patient is independent with eating and demonstrates no fine motor deficits but reports requiring his wife's assistance with bathing. Family assists with IADL tasks. Patient reports that his wife plans to purchase a shower chair, and a tub clamp was recommended to provide additional support

Physician Statement on Homebound Status:

Due to diagnosis of Fournier gangrene, the patient is experiencing decreased endurance and mobility, increasing the likelihood of falls. To safely leave their home, the patient needs assistance from another person and an assistive mobility device.

during tub transfers. Patient presents with decreased bilateral upper-extremity strength and endurance. Skilled OT is indicated for therapeutic exercise, ADL retraining, transfer safety, and endurance training to promote increased independence and return toward prior level of function. Wound care was performed according to the current wound-care order. The wound was cleansed with wound cleanser and gently patted dry, followed by application of Xeroform, coverage with an ABD pad, and securing with a clean brief. Patient tolerated wound care without difficulty. Patient remains homebound due to impaired mobility, right lower-extremity edema, decreased strength and endurance, cane/assistive device dependence, recent rehabilitation stay, increased fall risk, and the considerable and taxing effort required to safely negotiate multiple stairs when leaving the residence. Skilled home health PT and OT are medically necessary to address strength, balance, gait, transfers, endurance, ADL performance, safety awareness, and progression of functional mobility to maximize independence, reduce fall risk and caregiver burden, and facilitate return toward prior level of function.

Date of Order
09/01/2026
Orders
Physician Face-to-Face Date: 08/27/2026
Clinical Condition Requiring Home Care per Certifying Physician: sn-disease management, pt-eval & treat, ot-eval & treat , hha-adl's due to Fournier gangrene
Homebound Status per Certifying Physician: patient requires another person or medical equipment such as crutches, a walker, or a wheelchair to leave home

1 - SOC - SN Notes: soc
PT Eval Notes:
OT Eval Notes:

Physician
Hasan, Uzma

ICD-10 CM Principal Diagnosis: N49.3. Fournier gangrene

Other Pertinent Diagnoses

ICD-10 CM	Description	Medications
E11.9	Type 2 diabetes mellitus without complications	Metoprolol Tartrate - Metoprolol Tartrate 25 MG / 1 Tablet by mouth two times a day for HTN Amiodarone Hcl - Amiodarone Hydrochloride 200 MG / 1 Tablet by mouth one time a day for dysrhythmia ACETAMINOPHEN 500 MG Tablet / Give 2 tablet by mouth three times a day for pain. Lantus - Insulin Glargine Recombinant 100 UNIT/ML / Inject 5 unit subcutaneous at bedtime for DM Rivaroxaban Give 20 MG tablet by mouth in the evening for Afib
I48.0	Paroxysmal atrial fibrillation	
I42.9	Cardiomyopathy unspecified	
E66.9	Obesity unspecified	
Z68.34	Body mass index [BMI] 34.0-34.9 adult	
Z79.01	Long term (current) use of anticoagulants	
Z79.4	Long term (current) use of insulin	

Prognosis fair	**Mental and Psychosocial Status** COGNITION: 0. Alert/ oriented, able to focus and shift attention, comprehends and recalls task directions independently., ANXIETY: 1. In new or complex situations only, SOCIAL ISOLATION: 0. Never, BEHAVIORAL ISSUES: 7. None of the above behaviors demonstrated, HISTORY OF DEPRESSION: No
Functional Limitations Ambulation	**Activities Permitted** Cane, Transfer bed/Chair

DME & Supplies	Safety Measures
cane	infectious material management, fall precautions, diabetic precautions, supervision at all times, cardiac precautions, anticoagulant precautions, ambulates with assistance
Nutrition	**Allergies**
Z. NO PHYSICIAN-ORDERED DIET	no known allergies

Advance Directives
Full Cardiopulmonary Resuscitation (CPR)

Caregiver Status
2. Non-agency caregiver(s) need training/supportive services to provide assistance; 1. Non-agency caregiver(s) currently provide assistance

Rehabilitation Potential
SELF-CARE: 3. Independent - Patient completed all the activities by him/herself, with or without an assistive device, with no assistance from a helper., MOBILITY: 3. Independent - Patient completed all the activities by him/herself, with or without an assistive device, with no assistance from a helper.

DISCHARGE PLAN:
SN: family/caregiver will be responsible for managing treatment
PT: family/caregiver will be responsible for managing treatment
OT: patient will be responsible for managing treatment

Orders for Discipline and Treatment:
1 - SOC - SN

OT Eval

PT Eval

SN CAREPLAN

SN frequency WK1: 2 (09/01/26-09/05/26),WK2: 2 (09/06/26-09/12/26),WK3: 3 (09/13/26-09/19/26),WK4: 3 (09/20/26-09/26/26),WK5: 2 (09/27/26-10/03/26)

PARAMETERS FOR PHYSICIAN NOTIFICATION: temperature < 95 > 100.5, heart rate < 50 > 110, respiratory rate < 8 > 22, blood pressure systolic < 90 > 169, blood pressure diastolic < 60 > 90, O2 saturation < 88 > 100, pain < 0 > 5

CAREGIVER: 1. Non-agency caregiver(s) currently provide assistance

HOSPITALIZATION RISKS: 7. Currently taking 5 or more medications, 8. Currently reports exhaustion

STANDING ORDERS: infection control: hygiene, proper hand washing; advance directive: plan if patient is unable to make healthcare decisions ; fall precautions: wear sensible shoes, remove home hazards, living space adequately lit, assistive devices prn; emergency preparedness: plan for prn evacuation, resumption of home health visits; Skin Preservation: Measures to prevent skin breakdown; pressure relief, incontinence care, nutrition, hydration; Pain: Pain management measures; pain medication, rest, body alignment, ROM, meditation, massage; Medications: Medication actions, uses, frequency, dose, interactions of all new/change meds
Advance Directive:Full Cardiopulmonary Resuscitation (CPR)

09/15/2026 Problems : #1 - Observable Surgical Wound - Other - Perineal wound -
M1033 - Exhaustion
M1400 - Dyspnea
M2020 - Oral Med Management
swelling of affected area
limited strength
tooth pain/decay/sensitivity
obesity
open sores/lesions
M2102d - Caregiver Performs Treatment

PROCEDURES: cough/deep breathing exercises, train caregiver(s) to perform medical/rehabilitation treatments

TEACH PATIENT/CAREGIVER: * how to prevent infection including hygiene proper hand washing food-safety techniques travel precautions vaccinations animal-control cough etiquette, related medication(s) purpose, schedule, * lifestyle modifications to manage cardiac condition including symptom management diet changes regular exercise getting enough sleep, related medication(s) purpose, schedule, * how to take the patient's blood pressure record the reading, related medication(s) purpose, schedule, * 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, * lifestyle modifications to manage peripheral vascular condition including how to apply compression stockings physical exercise plan diet, related medication(s) purpose, schedule, * strict compliance with physician orders for anticoagulant administration avoiding activities that create unnecessary risk for injury monitoring for prolonged bleeding from cuts, blood in urine or stool, or unusual, * lifestyle modification to manage blood condition including dietary changes bleeding precautions, 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 incorporate lifestyle modifications to optimize renal condition including renal-specific diet exercise monitoring of blood pressure blood sugar home, related medication(s) purpose, schedule remedies, * how to achieve wound healing including cleaning and dressing wound position changes skin care diet modification record wound measurements, related medication(s) purpose, schedule, * how to achieve wound healing including cleaning and dressing

SN NARRATIVE

Patient resides in a second-floor apartment with his wife and son. There are approximately 8 exterior steps to enter the apartment building and an additional 6 steps leading to his apartment. Patient was recently discharged from a rehabilitation facility.

Upon arrival, patient was lying in bed in his bedroom with his wife at the bedside. Patient was alert and oriented 4. Vital signs were obtained: BP 138/79 mmHg, HR 68 bpm, SpO 99%, and temperature 97.8F. Lungs were clear bilaterally, heart sounds were normal, and bowel sounds were active in all four quadrants. Patient reported regular bowel movements. Right lower-extremity edema was noted. Patient uses a cane for ambulation.

Wound care was performed according to the current wound-care order. The wound was cleansed with wound cleanser and patted dry. Xeroform was applied, covered with an ABD pad, and secured with a clean brief. Patient tolerated the procedure without difficulty. Patient remains homebound due to impaired mobility, right-leg edema, recent rehabilitation stay, cane dependence, and the considerable effort required to safely negotiate multiple stairs when leaving the residence.

SN GOALS

PATIENT-STATED GOAL: able to control BG to promote wound healing

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
* 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

caregiver performs medical/rehabilitation treatments with adequate competence

patient/caregiver recalls
* how to achieve wound healing including cleaning and dressing wound
* position changes
* skin care
* diet modification
* preventing pressure ulcer recurrence
* record wound measurements
* 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
* how to manage skin condition including physician-prescribed treatment

wound position changes skin care diet modification preventing pressure ulcer recurrence record wound measurements, related medication(s) purpose, schedule, * how to manage complications of immobility including skin care strength, balance dexterity and range-of-motion therapeutic exercises promotion of peripheral circulation fluid and diet intake to promote healing and prevent constipation, * how to manage skin condition including physician-prescribed treatment skin care bathing sun protection diet exercise, related medication(s) purpose, schedule, * prescribed dietary modifications monitoring intake and output monitoring weight loss or weight gain monitor changes in neurological status, related medication(s) purpose, schedule, * diabetic medication management blood sugar testing diabetic foot care exercise diabetic diet, related medication(s) purpose, schedule, * basic oral hygiene regimen including basic toothbrushing and flossing, related medication(s) purpose, schedule, * how to manage the TPN pump including starting and stopping the infusion flushing the catheter catheter pump maintenance troubleshooting, related medication(s) purpose, schedule, * how to support the immune system including personal hygiene proper hand washing food-safety techniques travel precautions vaccinations animal-control cough etiquette diet fluid intake, related medication(s) purpose, schedule, * oral care strategies to achieve optimum nutrition control oral pain/discomfort range of motion exercises to optimize jaw mobility, * oral care strategies to achieve optimum nutrition control oral pain/discomfort range of motion exercises to optimize jaw mobility, related medication(s) purpose, schedule, * strategies to increase caloric intake, related medication(s) purpose, schedule, * ostomy management including how to clean stoma change drainage pouch diet restrictions, 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, caregiver performs medical/rehabilitation treatments with adequate competence	* skin care * bathing * sun protection * diet * exercise * recalls related medication(s) purpose, schedule patient/caregiver recalls * lifestyle modifications to manage cardiac condition including symptom management * diet changes * regular exercise * getting enough sleep * recalls related medication(s) purpose, schedule patient/caregiver recalls * how to take the patient's blood pressure * record the reading * recalls related medication(s) purpose, schedule patient/caregiver recalls * lifestyle modifications to manage peripheral vascular condition including how to apply compression stockings * physical exercise plan * diet * recalls related medication(s) purpose, schedule patient/caregiver recalls * strict compliance with physician orders for anticoagulant administration * avoiding activities that create unnecessary risk for injury * monitoring for prolonged bleeding from cuts, blood in urine or stool, or unusual patient/caregiver recalls * lifestyle modification to manage blood condition including dietary changes * bleeding precautions * recalls related medication(s) purpose, schedule patient/caregiver recalls * basic oral hygiene regimen including basic toothbrushing and flossing * recalls related medication(s) purpose, schedule patient/caregiver recalls * how to manage the TPN pump including starting and stopping the infusion * flushing the catheter * catheter pump maintenance * troubleshooting * recalls related medication(s) purpose, schedule patient/caregiver recalls * oral care * strategies to achieve optimum nutrition * control oral pain/discomfort * range of motion exercises to optimize jaw mobility * recalls related medication(s) purpose, schedule patient/caregiver recalls * oral care * strategies to achieve optimum nutrition * control oral pain/discomfort * range of motion exercises to optimize jaw mobility patient/caregiver recalls * strategies to increase caloric intake * recalls related medication(s) purpose, schedule patient/caregiver recalls * how to prevent infection including hygiene * proper hand washing * food-safety techniques * travel precautions * vaccinations * animal-control * cough etiquette * 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 support the immune system including personal hygiene * proper hand washing * food-safety techniques * travel precautions * vaccinations * animal-control * cough etiquette

* diet
* fluid intake
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* how to incorporate lifestyle modifications to optimize renal condition including renal-specific diet
* exercise
* monitoring of blood pressure
* blood sugar
* home
* recalls related medication(s) purpose, schedule remedies

patient/caregiver recalls
* how to manage complications of immobility including
* skin care
* strength, balance
* dexterity and range-of-motion therapeutic exercises
* promotion of peripheral circulation
* fluid and diet intake to promote healing and prevent constipation

patient/caregiver recalls
* prescribed dietary modifications
* monitoring intake and output
* monitoring weight loss or weight gain
* monitor changes in neurological status
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* diabetic medication management
* blood sugar testing
* diabetic foot care
* exercise
* diabetic diet
* recalls related medication(s) purpose, schedule

patient/caregiver recalls
* ostomy management including how to clean stoma
* change drainage pouch
* diet restrictions
* recalls related medication(s) purpose, schedule

OT CAREPLAN
OT frequency WK1: 1 (09/01/26-09/05/26),WK2: 1 (09/06/26-09/12/26),WK3: 1 (09/13/26-09/19/26),WK4: 1 (09/20/26-09/26/26)

09/02/2026 Problems : Pain Effect on Sleep
Pain Interference with Therapy activities
Pain Interference with ADLs
M1400 - Dyspnea
GG0130B1 - Oral Hygiene
GG0130C1 - Toileting Hygiene
GG0130E1 - Shower/Bathe Self
GG0130G1 - Lower Body Dressing
GG0130H1 - Don/Doff Footwear
GG0130A1 - Eating
GG0130F1 - Upper Body Dressing

PROCEDURES: equipment training, work simplification/energy conservation, transfers training

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, Sit to Stand - 06. Independent, Chair to Bed to Chair - 06. Independent, Toilet Transfer - 06. Independent, Oral Hygiene - 06. Independent, Toileting Hygiene - 06. Independent, Shower/Bathe Self - 06. Independent, Lower Body Dressing - 06. Independent, Don/Doff Footwear - 06. Independent, Eating - 06. Independent, Upper Body Dressing - 06. Independent

OT NARRATIVE
Alert and oriented x4, no vision or hearing loss. Pain level 5/10. Patient takes Tylenol for pain relief.

OT evaluation completed. Patient is a 50 year old male with dx of Fourniers Gangrene/septic shock. Patient was initially admitted to the hospital due to scrotal pain and swelling. PMH includes: obesity, and DM. Assessed patient for ADL functional tasks and transfers. Patient reports he has previously Ind with ADL functional tasks and transfers and was also still working. Patient resides in an apartment with his wife. Patient reports his wife will purchase a shower chair for him, recommended a tub clamp for support with tub transfer. Patient is Ind with eating. No fine motor deficits present. Family provides assistance with IADL tasks. Patient reports his wife assists him with bathing task. At this time patient presents with decreased BUE strength and endurance and Ind with ADL functional tasks. Plan to see patient for instruction with therapeutic ex, ADL retraining, and endurance training to return to PLOF.

OT GOALS
PATIENT-STATED GOAL: I want to get stronger and get back to feeling like myself

GOALS
Chair to Bed to Chair - 06. Independent

Toilet Transfer - 06. Independent

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

Sit to Stand - 06. Independent

	Oral Hygiene - 06. Independent Toileting Hygiene - 06. Independent Shower/Bathe Self - 06. Independent Lower Body Dressing - 06. Independent Don/Doff Footwear - 06. Independent Upper Body Dressing - 06. Independent Eating - 06. Independent

PT CAREPLAN

PT frequency WK1: 1 (09/01/26-09/05/26),WK2: 1 (09/06/26-09/12/26),WK3: 1 (09/13/26-09/19/26),WK4: 1 (09/20/26-09/26/26),WK5: 1 (09/27/26-10/03/26)

09/04/2026 Problems : GG0170D1 - Sit to Stand
GG0170F1 - Toilet Transfer
GG0170G1 - Car Transfer
GG0170I1 - Walk 10 Feet
GG0170J1 - Walk 50 ft with 2 Turns
GG0170K1 - Walk 150 Feet
GG0170M1 - 1 - Step (curb)
GG0170N1 - 4 Steps
GG0170O1 - 12 Steps
GG0170P1 - Picking Up Object
GG0170L1 - Walk 10 ft on Uneven Surface
GG0170E1 - Chair to Bed to Chair

PROCEDURES: home exercise program: Ankle pumps, quad sets, glute sets, heel slides, supine hip abduction, SLR, seated marching, LAQ, seated heel raises, seated toe raises, seated hip abduction, sit-to-stands, standing marching, standing hip abduction, standing hip extension, standing hamstring curls, heel raises, mini squats, weight shifting,, gait training/stair training, transfers training

TEACH PATIENT/CAREGIVER: Sit to Stand - 06. Independent, Chair to Bed to Chair - 06. Independent, Toilet Transfer - 06. Independent, Car Transfer - 06. Independent, Walk 10 Feet - 04. Supervision or touching assistance, Walk 50 ft with 2 Turns - 04. Supervision or touching assistance, Walk 150 Feet - 04. Supervision or touching assistance, 1 - Step (curb) - 04. Supervision or touching assistance, 4 Steps - 04. Supervision or touching assistance, 12 Steps - 04. Supervision or touching assistance, Picking Up Object - 04. Supervision or touching assistance, Walk 10 ft on Uneven Surface - 04. Supervision or touching assistance

PT NARRATIVE

Pt is a 50-year-old male referred for home health PT following hospitalization for severe sepsis/septic shock secondary to Fournier's gangrene with necrotizing soft tissue infection of the scrotum/perineum, requiring surgical debridement. Hospital course was further complicated by acute kidney injury, metabolic encephalopathy/delirium, atrial fibrillation with RVR, newly diagnosed poorly controlled diabetes, generalized deconditioning, and impaired activity tolerance. Prior to hospitalization, Pt reports being independent with functional mobility and ADLs. At evaluation, Pt demonstrates decreased BLE strength, impaired balance, reduced endurance/activity tolerance, impaired safety awareness, and decreased functional mobility, requiring assistance for transfers and ambulation with RW. Pt is at increased risk for falls and demonstrates functional decline from prior level of function. Skilled home health PT is medically necessary to address strength, balance, gait, transfers, endurance, safety, and progression of functional mobility in order to maximize independence, reduce fall risk, decrease caregiver burden, and facilitate return toward PLOF.

Pt is a 50-year-old male referred for home health PT following hospitalization for severe sepsis/septic shock secondary to Fourniers gangrene with necrotizing soft tissue infection of the scrotum/perineum, requiring surgical debridement. Hospital course was further complicated by acute kidney injury, metabolic encephalopathy/delirium, atrial fibrillation with RVR, newly diagnosed poorly controlled diabetes, generalized deconditioning, and impaired activity tolerance. Prior to hospitalization, Pt reports being independent with functional mobility and ADLs. At evaluation, Pt demonstrates decreased BLE strength, impaired balance, reduced endurance/activity tolerance, impaired safety awareness, and decreased functional mobility, requiring assistance for transfers and ambulation with RW. Pt is at increased risk for falls and demonstrates functional decline from prior level of function. Skilled home health PT is medically necessary to address strength, balance, gait, transfers, endurance, safety, and progression of functional mobility in order to maximize independence, reduce fall risk, decrease caregiver burden, and facilitate return toward PLOF.

PT GOALS

PATIENT-STATED GOAL: To improve stair negotiation with modified RPE < 5/10

GOALS
Chair to Bed to Chair - 06. Independent

Toilet Transfer - 06. Independent

Sit to Stand - 06. Independent

Car Transfer - 06. Independent

Walk 10 Feet - 04. Supervision or touching assistance

Walk 50 ft with 2 Turns - 04. Supervision or touching assistance

Walk 150 Feet - 04. Supervision or touching assistance

1 - Step (curb) - 04. Supervision or touching assistance

4 Steps - 04. Supervision or touching assistance

12 Steps - 04. Supervision or touching assistance

Picking Up Object - 04. Supervision or touching assistance

Walk 10 ft on Uneven Surface - 04. Supervision or touching assistance

Signature and Date of Verbal SOC Where Applicable:
Electronically signed by: Charles Messick RN on 09/01/2026

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. This patient is under my care, and I have authorized the services on this plan of care and I or another physician will periodically review this plan. I attest that a valid face-to-face encounter occurred (or will occur) within timeframe requirements and it is related to the primary reason the patient requires home health services.
F2F date: 08/27/2026

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.

Certifying Physician or Allowed Practitioner Name and Address **Uzma Hasan**
6551 Loisdale Ct
Springfield, VA 22150
NPI 1770527814

Phone Number 5716222000

Fax Number

Physician's Signature and Date Signed

X

Uzma Hasan, MD

08/27/2026: Date of physician last face-to-face