HomeCentris Healthcare LLC 217058
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PHYSICIAN VERBAL ORDER (487)

DATE ORDER CREATED: 09/16/2026	**PATIENT INFORMATION**	
ORDER ID: 1150/22034	**PATIENT NAME:** Anthony Payton	**DOB:** 03/03/1944
AGENCY ASSIGNED ID: 29723	**ADDRESS:** 1919 Hillcrest Road, Baltimore, MD 21207-	
CERTIFICATION PERIOD: 08/28/2026 to 10/26/2026	**PHONE:** 410-298-7369	
PHYSICIAN FACE-TO-FACE DATE: 08/25/2026		

ORDERS

CLINICAL CONDITION REQUIRING HOME CARE PER CERTIFYING PHYSICIAN: The patient is an 82-year-old male referred to home health services by his PCP secondary to chronic pain, balance difficulties, and difficulty managing activities of daily living (ADLs) related to pain. Past medical history is significant for type 2 diabetes mellitus with polyneuropathy, gout, chronic kidney disease (CKD) stage 3, dysphagia, and lumbar vertebral osteoporotic fracture. The patient also has chronic bilateral lower extremity edema and utilizes compression stockings. He resides with his wife in a multilevel home and reports that his wife provides some assistance with his care, although not consistently; his grandson also provides assistance as needed. The patient is oriented x3 and is able to serve as his own teachable caregiver. He is ambulatory with a cane but demonstrates balance difficulties and is considered a fall risk, reporting two falls within the past year. The patient is hard of hearing and has impaired vision secondary to glaucoma, which may further affect safety and functional performance. He reports difficulty with upper and lower body dressing due to chronic pain and difficulty bending. He bathes in the shower using a tub chair and has grab bars available, but they have not yet been installed, contributing to difficulty and increased safety risk during tub/shower transfers. The patient requires standby assistance for sit-to-stand and toilet transfers. Bilateral upper extremity weakness is noted, with manual muscle testing demonstrating strength of 4-/5. The home environment is cluttered, and the patient was instructed regarding home safety measures, including clearing clutter and ensuring rugs are securely fastened to the floor to reduce fall risk. Skilled home health services are indicated to address the patient's pain-related functional limitations, weakness, impaired balance, transfer difficulties, ADL

deficits, and fall risk, with emphasis on improving safety and maximizing functional independence within the home. Date of Order 08/28/2026 Orders Physician Face-to-Face Date: 08/25/2026 Clinical Condition Requiring Home Care per Certifying Physician: PT-eval & treat OT-eval & treat due to Type 2 diabetes mellitus with diabetic polyneuropathy 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 - OT Notes: PT Eval Notes: Physician Khai, Gin

HOMEBOUND STATUS PER CERTIFYING PHYSICIAN: Due to diagnosis of Type 2 diabetes mellitus with diabetic polyneuropathy, 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.

ORDER DETAILS

#	ORDER / INSTRUCTIONS
1	09/16/2026 Medications: insulin aspart-xjhz (KIRSTY PEN) SubQ Insulin Pen 100 unit/mL (3 mL) / Inject 7 units subcutaneous in the morning Inject 10 units with breakfast and dinner if sugar is over 150. Max unit per day
2	insulin glargine-yfgn (SEMGLEE PEN) SubQ Insulin Pen 100 unit/mL (3 mL) / Inject 48 units subcutaneous once a day

PHYSICIAN INFORMATION

PHYSICIAN NAME: Gin Khai

ADDRESS: 7670 Quarterfield Rd, Glen Burnie, MD 21061

PHONE: 410-508-7650	**FAX:**

VERBAL ORDER AUTHORIZATION

By signing below, I acknowledge the verbal order(s) above and agree to follow this plan of care.

PHYSICIAN SIGNATURE	STAFF SIGNATURE (RECEIVED BY)
Signature: _____	Signature: *Electronically Signed by Messick, RN, Charles*
Date: _____	Date: *09/16/2026*

IMPORTANT: This verbal order must be authenticated by the physician and maintained in the patient's medical record.