

FAX COVER PAGE



Date: 11/03/2025

To:

Amir Alemzadeh , MD

From:

Grace Home Healthcare, LLC

9735 Main Street Suite 200 Fairfax,

Fairfax, VA 22031-3736

Phone: 703-865-7370

Fax: 571-774-5551

Subject:

Form Submission

Memo:

Please review the attached document.

URGENT: Please review and respond to this fax transmission promptly.

Grace Home Healthcare, LLC memo...

Patient: Hector Lopez
DOB: 08/27/1957

Subject: Med Reconciliation

Submitted By: MHCB Team

Date: 11/03/2025

Agency Rep: MHCB Team **Rep Phone:** 703-865-7370

Memo: **The following medications do not have a related diagnosis:**
Atropine Sulfate - Atropine Sulfate
Lokelma Oral Packet 10 GM (Sodium Zirconium Cyclosilicate)
Ondansetron Hydrochloride - Ondansetron Hydrochloride

Follow-up Action: Please fax to the physician.

Follow-up Memo:

This memo is for your records.