

FAX COVER PAGE



Date: 09/04/2026

To:

Khaing Win , MD

From:

HomeCentris Healthcare LLC
10 Crossroads Drive, Suite 102
Owings Mills, MD 21117-8284

Phone: 410-321-8448

Fax: 410-559-3002

Subject:

Form Submission

Memo:

Please review the attached document.

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

HomeCentris Healthcare LLC memo...

Patient: Thomas Szymanski
DOB: 07/09/1954

Subject: Report of Unstable Symptoms to Certifying Physician

Submitted By: William Shelton

Date: 09/03/2026

Agency Rep: William Shelton **Rep Phone:** 410-321-8448

Memo: Pain Interference with Therapy activities Notes: Due to recent L arm skin graft
Pain Interference with ADLs Notes: Due to recent L arm skin graft
M1400 - Dyspnea Notes: labored breathing with walking amd steps

**Follow-up
Action:**

**Follow-up
Memo:**

This memo is for your records.