

Frequency Order: 07/01/2025 Patient: Brooks, Dale (MA240318025203) Order # 1301971147 Date Received:		Nightingale Visiting Nurses 125 County ST. Taunton, MA, 02780 Phone: (508) 967-0761 Fax: (508) 967-0767	
Address: 276 Cottage St, Apt 205 New Bedford MA 02740		HIC#: Phone: (774) 520 -7048 Date of Birth: 02/24/1952	
Allergies: <input checked="" type="checkbox"/> Allergic to: Ciprofloxacin - uk Codeine - uk fentaNYL - uk Penicillins - uk Ketorolac - uk Lisinopril - uk Propoxyphene - uk Toradol - uk Morphine and Related - uk			
Episode: 06/14/2025 - 08/12/2025 Diagnosis: I69.351 Hemiplgia following cerebral infrc aff right dominant side S32.019 D Unsp fx first lum vertebra, subs for fx w routn heal J45.998 Other asthma			
Physician: KARINE MAALOUF-KALESHEAN MD 531 FAUNCE CORNER RD NORTH DARTMOUTH MA 02747		NPI: 1114903663 Phone: (508) 996-3991 Fax: (508) 961-0949	
Orders: Occupational Therapy: 6/22/2025 (Sunday) - 7/19/2025 (Saturday) 2 visits per week for 4 weeks * Narrative Statement/Order Details: OT tx 2 x weekly x 4 weeks 7/20/2025 (Sunday) - 8/12/2025 (Tuesday) 1 visit per week for 4 weeks * Narrative Statement/Order Details: OT tx 1 x weekly x 4 weeks * Order date: 7/1/2025 * Ordering provider: KARINE MAALOUF-KALESHEAN * Verbal order was obtained			
Clinician Signature: Digitally Signed by: DANIELLEM TREMBLAY , OT		Date 07/01/2025	
Clinician Co-Signature:		Date	
Physician Signature:		Date	

Signature:

Date: 7/9/2025