



HW4850118FoMGVY8TX7E

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INTERIM ORDERS

**Send To**

Karina Bautista, MD  
531 Faunce Corner Rd  
Dartmouth, MA 02747  
(508) 996-3991 Fax (508) 961-2513

**Primary Physician**

Karina Bautista, MD  
531 Faunce Corner Rd  
Dartmouth, MA 02747  
(508) 996-3991 Fax (508) 961-2513

**Medical Record No.**

3934020

**Insurance**

Medicaid/MA

**Start of Care**

01/18/2023

**Certification Period**

05/07/2025 Through 07/05/2025

**Patient**

Maker, Robert  
12 Ruth Street  
Apt 403  
New Bedford, MA 02744

**DOB**

03/26/1951

**Sex**

M

**Goals/Rehabilitation  
Potential/Discharge Plans**

SN Goals: Patient's blood pressure will be within physician established parameters. within cert period. Patient's heart rate will be within physician established parameters. within cert period. Patient's blood sugars will be within physician established parameters. within cert period. Patient will be compliant with medication regimen with the assistance of skilled nursing for medication administration. within cert period

**Clinician's Signature and Date**

Diane Daley RN \*E-Signature\* 07/02/2025 @ 07:59 PM VO Date 07/02/2025 07:59 PM

Physician's Signature **X**

Date **X**

Karina Bautista, MD

Date HHA Received Signed POT

(Sent 7/3/2025 08:15 AM)