Provider: Jordan C. Gularek, DO; Patient: Alves,Lois M; MRN: 2182563

Alves, Lois M MRN: **2182563** 

Date of Birth: 5/13/1951 74 year old Female

Page 1 of 1

Agency Information

Southcoast Visiting Nurse Association Inc.

200 Mill Road

Fairhaven, MA 02719-5252

Ph: 508-973-3200 Fx: 508-973-3417

isit Sets						
E	Entered by Carol Wood	, PT [18875]				
	Entered	Order Date	Order ID	Discipline	Authorizing Provider	
	7/9/2025 03:29 PM	7/9/2025 03:28 PM	1108852	Physical Therapy	Jordan C. Gularek, DO	
	Visit Set Details					
	Added Visit Sets					
1 visit every week for 1 week from 7/20/2025 to 7/24/2025						
	Changed Visit Sets					
1 visit every 46 days for 46 days from 6/9/2025 to 7/24/2025 (discontinued as of 7/9/2025) 16 (A6, B6, C2, D2) order date 6/9/25					)25)	
	Unchanged Visit Sets					
1 visit every 60 days for 60 days from 5/26/2025 to 7/24/2025 (discontinued as of 6/4/2025) (A4, B6, C2, D2) order date 5/26/25. Preferred SNF. s/p MVA.					25)	
	2 visits every 9 days for	9 days for 9 days from 5/30/2025 to 6/7/2025 (discontinued as of 6/4/2025)				
	2 visits every week for	2 weeks from 6/8/2025	to 6/21/2025 (d	scontinued as of 6/8/2025	)	
1 visit every week for 1 week from 6/22/2025 to 6/28/2025 (discontinued as of 6/22/2025 2 visits every week for 4 weeks from 6/22/2025 to 7/19/2025					)	
Order ID for Alves,Lois M						
1108852						
Provider Comments						
Flovider Comments						
Provider Signature for Jordan C. Gularek, DO						
Signature: Date:						
	- <b>J</b>					