

Community Nurse Inc 62 Center Street Fairhaven, MA 02719 (508) 992-6278 Fax (508) 997-3091

INTERIM ORDERS

Send To			Primary Physician
Joan T Harrison, MD Prima Care 546 Main Road Tiverton, RI 02878 (401) 624-8200 Fax (401) 624-8345			Joan T Harrison, MD Prima Care 546 Main Road Tiverton, RI 02878 (401) 624-8200 Fax (401) 624-8345
Medical Record No.	Insurance	Start of Care	Certification Period
1161001	Medicare	05/29/2023	05/18/2025 Through 07/16/2025
Patient		DOB	Sex
Valley, Linda M		03/20/1950	F

1475 President Avenue Fall River, MA 02720

Medications (Dose/Frequency/Route) Goals/Rehabilitation Potential/Discharge Plans Clinician's Signature and Date lamoTRIgine 150 mg tablet 1- 1.5 tablets oral 2 times a day (1tab in AM 1.5 tab in PM)

Jill Antonsen LPN *E-Signature* 05/27/2025 @ 05:55 PM / Christine O'Donnell RN *E-Signature* 05/30/2025 @ 09:43 AM VO Date 05/27/2025 05:55 PM

Physician's Signature**X**

 $\mathsf{Date} \mathbf{X}$

Joan T Harrison, MD

Date HHA Received Signed POT (Sent 5/30/2025 10:42 AM)

Physician: Dr. Harrison, Joan T.

Signature: Jan. Monagan. m.O.
Date: 6/10/2025

2 4.00. 0, 10, 2020

Electronically signed by Dr. Harrison, Joan T. on 6/10/2025