Eastern Time Zone

## **NURSE ON CALL - LINCOLN** 640 GEORGE WASHINGTON HWY, BUILDING C LINCOLN, RI 02865-4244

Phone: (401) 726-7744 Fax: (401) 726-7774

PHYSICIAN:

CHRISTOPHER JONCAS, MD 191 BEDFORD STREET FALL RIVER, MA 02720

Phone: (508)672-4590

Fax: 2nd Physician:

Send to Physician:

Verbal Order: Υ

Verbal Date:

5/27/2025 Time: 3:55 PM 1215 MAIN ROAD TIVERTON, RI 02878

BENEDICT, RUTH

SSN: XXX-XX-

CLIENT:

DOB: 8/25/1931 CERT:

5/24/2025 to 7/22/2025

MR#:

RLN00426609301

Υ

Order Read Back to Physician/Agent of Physician?: ABN Delivered to Patient?:

5/27/2025 3:03 PM ADD ON DISCIPLINE Order Type:

### Order Description:

**Order Date:** 

OCCUPATIONAL THERAPIST TO EVALUATE/ASSESS AND DEVELOP OCCUPATIONAL THERAPY PLAN OF CARE TO BE SIGNED BY THE PHYSICIAN. MAY USE TELEHEALTH AND TELECOMMUNICATIONS TO PROVIDE SERVICES AS NECESSARY AND APPROPRIATE ACCORDING TO THE PATIENT'S CONDITION AND IN ACCORDANCE WITH THE PLAN OF CARE.

OCCUPATIONAL THERAPY TO PROVIDE INSTRUCTION REGARDING SAFE USE OF ADAPTIVE EQUIPMENT.

OCCUPATIONAL THERAPY TO PROVIDE HOME SAFETY RECOMMENDATIONS.

OCCUPATIONAL THERAPY TO PROVIDE PATIENT / CAREGIVER WITH ADL TRAINING FOR DRESSING

OCCUPATIONAL THERAPY TO PROVIDE PATIENT/CAREGIVER WITH ADL TRAINING FOR SELF FEEDING

OCCUPATIONAL THERAPY TO PROVIDE INSTRUCTION IN PRINCIPLES AND APPLICATION OF ENERGY

CONSERVATION DESIGNED TO MAXIMIZE PATIENT'S TOLERANCE DURING ADL/IADL'S

OCCUPATIONAL THERAPY TO INSTRUCT/EDUCATE IN THE USE OF ADAPTIVE TECHNIQUES AND/OR ADAPTIVE **EQUIPMENT TO COMPENSATE FOR VISION LOSS** 

OCCUPATIONAL THERAPY TO PROVIDE PATIENT / CAREGIVER WITH IADL TRAINING FOR MEDICATION MANAGEMENT STRATEGIES

OCCUPATIONAL THERAPY TO PROVIDE PATIENT / CAREGIVER WITH IADL TRAINING FOR MEAL PREPARATION.

#### Goals:

PATIENT/CAREGIVER WILL INCREASE INDEPENDENCE/LEVEL OF PARTICIPATION IN ACTIVITIES OF DAILY LIVING WITH SAFE USE OF LEAST RESTRICTIVE (ADAPTIVE EQUIPMENT) BY 06/27/25.

PATIENT/CAREGIVER WILL DEMONSTRATE IMPROVED HOME SAFETY THROUGH UNDERSTANDING OF RECOMMENDATIONS FOR IDENTIFIED SAFETY NEEDS BY 06/27/25

PATIENT WILL ACHIEVE HIGHEST FUNCTIONAL LEVEL, AS OUTLINED IN THERAPY POC OBJECTIVE GOALS, WITH **DRESSING** 

PATIENT WILL ACHIEVE HIGHEST FUNCTIONAL LEVEL, AS OUTLINED IN THERAPY POC OBJECTIVE GOALS, WITH **SELF FEEDING** 

PATIENT WILL DEMONSTRATE ABILITY TO INCORPORATE ENERGY CONSERVATION PRINCIPLES INTO DAILY TASKS IN ORDER TO MAXIMIZE INDEPENDENCE AND SAFETY WITH ADLS AND FUNCTIONAL MOBILITY TASKS WITH NO CUES BY 06/27/25.

ENTERED / TAKEN BY (ELECTRONICALLY SIGNED):	CHRISTINA PATTERSON, OT	DATE:	05/27/2025
APPROVED / PROCESSED BY (ELECTRONICALLY SIGNED):	PAULA DUGDALE, RN	DATE:	05/30/2025
PHYSICIAN SIGNATURE:		DATE:	

Page 1 of 3

Physician: Dr. Joncas, Christopher Clinician: Agency, Clinician

S.

Date: 6/12/2025

Signature:

Signature:

Date: 5/30/2025

Electronically signed by Dr. Joncas, Christopher S. on 6/12/2025

Order Number: Printed: 5/30/2025 7:11 AM Eastern Time Zone

# **NURSE ON CALL - LINCOLN** 640 GEORGE WASHINGTON HWY, BUILDING C LINCOLN, RI 02865-4244

Phone: (401) 726-7744 Fax: (401) 726-7774

PHYSICIAN: CHRISTOPHER JONCAS, MD **CLIENT: BENEDICT, RUTH** 

### Goals:

PATIENT WILL DEMONSTRATE ABILITY TO USE COMPENSATORY STRATEGIES AIMED AT UTILIZING REMAINING VISION THROUGH ADAPTIVE TECHNIQUES AND EQUIPMENT TO IMPROVE LEVEL OF INDEPENDENCE WITH FUNCTIONAL ACTIVITIES, AS OUTLINED IN THERAPY POC OBJECTIVE GOALS

PATIENT WILL ACHIEVE HIGHEST FUNCTIONAL LEVEL, AS OUTLINED IN THERAPY POC OBJECTIVE GOALS, WITH ABILITY TO SAFELY MANAGE MEDICATIONS

PATIENT WILL ACHIEVE HIGHEST FUNCTIONAL LEVEL, AS OUTLINED IN THERAPY POC OBJECTIVE GOALS, WITH ABILITY TO SAFELY PREPARE MEALS

## Therapy Short Term/Long Term Goals:

TOILET STG: INDEPENDENT	1	LTG:		
TARGET DATE: 5/27/2025	ı	TARGET DATE:		
BALANCE (OT)  DYNAMIC STANDING				
STG: GOOD-MAINTAINS BALANCE W/O SUPPORT, ACCEPTS MOD. CHALLENGE; SHIFTS WT W/SOME EVIDENCE OF LIMITATIONS		LTG:		
TARGET DATE: 5/27/2025		TARGET DATE:		
SELF CARE (OT)	'			
MEAL PREPARATION				
STG: INDEPENDENT	- 1	LTG:		
TARGET DATE: 6/27/2025		TARGET DATE:		
MEDICATION MANAGEMENT STG: MINIMAL ASSIST	i I	LTG: INDEPENDENT		
TARGET DATE: 6/13/2025		TARGET DATE: 6/27/2025		
TELEPHONE COMMUNICATION				
STG: MINIMAL ASSIST	- 1	LTG: INDEPENDENT		
TARGET DATE: 6/13/2025		TARGET DATE: 6/27/2025		
BARTHEL INDEX OF ADL'S	1			
STG: 95	1	LTG:		
TARGET DATE: 6/27/2025		TARGET DATE:		
TARGET DATE: 0/27/2025	I	TANGET DATE.		
ENTERED / TAKEN BY (ELECTRONICALLY SIGNED):	CHRI	STINA PATTERSON, OT	DATE:	05/27/2025
APPROVED / PROCESSED BY (ELECTRONICALLY SIGNED):	PAUL	A DUGDALE, RN	DATE:	05/30/2025

Page 2 of 3

DATE:

Physician: Dr. Joncas, Christopher Clinician: Agency, Clinician

S.

PHYSICIAN SIGNATURE:

Date: 6/12/2025

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Phone: (401) 726-7744 Fax: (401) 726-7774

PHYSICIAN: CHRISTOPHER JONCAS, MD

**CLIENT: BENEDICT, RUTH** 

Therapy Short Term/Long Term Goals:

Discipline: OT

**FUNCTIONAL MOBILITY (OT)** LEVEL SURFACE ASSISTANCE

STG: INDEPENDENT

LTG: TARGET DATE: 6/13/2025 TARGET DATE:

STRENGTH (OT)

RIGHT UPPER BODY EXTREMITY

STG: 3+/FAIR+ LTG:

TARGET DATE: 5/27/2025 TARGET DATE:

LEFT UPPER BODY EXTREMITY

STG: 3+/FAIR+ LTG:

TARGET DATE: 5/27/2025 TARGET DATE:

Diagnoses:

Order Code Onset or Exacerbation O/E Date Туре Description PRIMARY OPEN-ANGLE GLAUCOMA, BILATERAL, H40.1134 **EXACERBATION** 5/22/2025 D

INDETERMINATE STAGE

Service Changes:

Calendar Frequency:

SN EFFECTIVE 06/01/2025 1WK2

OT EFFECTIVE 05/25/2025 1WK1,2WK2,1WK2

PHYSICIAN SIGNATURE:		DATE:	
APPROVED / PROCESSED BY (ELECTRONICALLY SIGNED):	PAULA DUGDALE, RN	DATE:	05/30/2025
ENTERED / TAKEN BY (ELECTRONICALLY SIGNED):	CHRISTINA PATTERSON, OT	DATE:	05/27/2025

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