

Order Number: 328600

Printed: 5/30/2025 9:45 AM
Eastern Time Zone

VISITING NURSE HOME AND HOSPICE
438 EAST MAIN ROAD SUITE 100
MIDDLETOWN, RI 02842-7273
Phone: (401) 682-2100
Fax: (401) 293-0739

PHYSICIAN:

CHARLES CUMMINGS, MD
821 MAIN ROAD
TIVERTON, RI 02878

Phone: (401)625-1001

Fax: (401)625-1584

2nd Physician:

Send to Physician: Y

Verbal Order: Y

Verbal Date: 5/12/2025 Time: 1:00 PM

CLIENT:

MUZACA, LOUISE
140 NORTH COURT
TIVERTON, RI 02878-

SSN: XXX-XX-

DOB: 7/31/1935 MR#: HH100005311201

CERT: 4/10/2025 to 6/8/2025

Order Read Back to Physician/Agent of Physician?: Y

ABN Delivered to Patient?: NA

Hospital MR No	Inpatient Facility	Admit Date	Discharge Date	Reason For Admission
	DAWN HILL HOME FOR REHAB & HEALTHCARE	3/9/2025	4/9/2025	SYNCOPE, HEART BLOCK

Order Date: 5/12/2025 12:27 PM Order Type: PHYSICIAN ORDER

Order Description:

SKILLED HOME P.T. 1 WK 3 FOR THER EX., GAIT TRAINING ,STAIR TRAINING

Service Changes:

Calendar Frequency:

PT Effective 05/25/2025 1WK2

ENTERED / TAKEN BY (ELECTRONICALLY SIGNED):	KAREN ALEXANDER, PT R01949	DATE:	05/12/2025
APPROVED / PROCESSED BY (ELECTRONICALLY SIGNED):	KAREN ALEXANDER, PT R01949	DATE:	05/13/2025
PHYSICIAN SIGNATURE:		DATE:	